An Investigation into Parents’ Views of Questionnaires on Child Maltreatment

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Abstract
Child maltreatment is of serious concern worldwide and needs to be addressed. Good studies require sound measuring tools. This study investigated parents’ views about child maltreatment measurement tools, specifically looking at the ICAST-P. A qualitative study was conducted in which twenty participants completed the ICAST-P questionnaire and were asked about their experience of the instrument. The study collected data from ten IsiXhosa-speaking and ten English-speaking mothers. The IsiXhosa-speaking women consisted of five research-naïve participants and five research-accustomed participants, who had participated in a previous study of a parenting programme, involving the ICAST-P. The English-speaking participants were all research-naïve. The first questions dealt with parents’ view of participating in a study using the ICAST-P. The themes that emerged included shock that a parent might maltreat a child in the ways suggested by the questionnaire and reflection on one’s own parenting. Parents’ also expressed positive skepticism, in which they stated the ICAST-P was a good questionnaire to have, but doubted that those who commit such actions would truthfully admit they had done so. Lastly, some parents found some of the questions to be uncomfortable. The study then looked at the ICAST-P as a measuring tool and dealt with reasons why parents might not answer the questions truthfully. The various themes identified included social desirability bias, guilt and shame, fear of judgment and repercussions, disclosure difficulty and the topic being culturally taboo. Furthermore, the findings suggested that parents thought the ICAST-P was a good measuring tool, although they specified certain topic questions to be sensitive such as the sexual abuse ones. None of the parents found the questionnaire to be sensitive personally and neither were they offended by having been asked the questions. In general, parents thought the questionnaire was good, but had concerns about whether or not people would answer honestly.

Child maltreatment; Child maltreatment questionnaires; Views and feelings; Parents
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Child maltreatment is a problem worldwide and of serious concern medically and socially (Rao & Lux, 2012; Runyan, Dunne, & Zolotor, 2009; Theodore et al., 2005). Child maltreatment damages children’s physical, mental, social and behavioural health and puts them at risk of developing health problems such as obesity, as well as mental disorders including anxiety and depression (Taylor, Guterman, Lee, & Rothouz, 2009). According to the World Health Organization (WHO) over forty million children under the age of fourteen are victims of abuse and neglect a year globally (WHO, 2006). Child sexual abuse prevalence has been estimated to be 11.8% and prevalence of physical abuse to be 23-30%, but the exact prevalence of maltreatment is unknown (Rodriguez, 2010; Stoltenborgh, van IJzendoorn, Euser, & Bakermans-Kranenburg, 2011). A review of evidence gathered from the African region indicated that some studies report prevalence rates of child abuse as high as 64% of children have been physically abused, and report that 56% of males and 53% of females have been sexually abused (Meinck, Cluver, Boyes & Mhlongo, 2014). However, due to a lack of empirical research on parenting disciplinary behaviours, little explanation is provided for high rates of child maltreatment in South Africa (Meinck et al., 2014). Various studies suggest that high rates of child maltreatment in Africa are due to poverty, urbanization, and the disruption of structures and social norms (Meinck et al., 2014, p.1).

Child maltreatment is often not reported and the prevalence rate of cases is underestimated, as studies indicate that about 68% of child maltreatment cases in the form of abuse and neglect are not reported (Alvarez, Kenny, Donohue, & Carpin, 2004; Theodore et al., 2005). In studies conducted in Africa, it was discovered that certain post-abuse services re-victimize survivors and children, making them hesitant to report incidences (Meinck et al., 2014). Other possible reasons for the under-reporting of child maltreatment are a lack of awareness of the signs and symptoms of child maltreatment, an inability to recall incidents, and some cultures having a high tolerance for sexual coercion and severe physical punishment of children (Alvarez et al., 2004; Meinck et al., 2014). Official administrative data, therefore does not accurately affect the rate, which points to the need for epidemiological studies (Alvarez et al., 2004).

However, other reasons involved in not reporting child maltreatment may also affect epidemiological studies (Alvarez et al., 2004). These include fear of being reported to authorities and a negative view of child maltreatment investigators, as it is believed delays in the investigation process can bring more harm to the children (Alvarez et al., 2004). Evidence suggests that disclosure and discussion of child maltreatment is potentially culturally affected, because in certain societies and cultures, sexuality and sexual matters are considered taboo and are not discussed (Meinck et al., 2014). Thus, data patterns can be confounded due to measurement limitations and difficulty in disclosing incidences, as well as actual differences (Dunne et al., 2003).

Several tools have been developed to investigate parental disciplinary behaviours and to assess
child maltreatment, the most prominent ones being The ISPCAN (International Society for the Prevention of Child Abuse and Neglect), Child Abuse Screening Tool-Parent Version (ICAST-P) (Runyan et al., 2009) and the Parent-Child Conflict Tactics Scale (PCCTS; Straus et al., 1998). One of the first child maltreatment measurement tools to be developed was PCCTS (Straus et al., 1998). It was created with the intention of focusing on parent disciplinary behaviours (Straus et al., 1998). The PCCTS measures harsh disciplinary acts (some of which would be construed as child maltreatment), such as physical and psychological abuse and neglect, as well as nonviolent types of discipline (Straus et al., 1998). The questions were created to be specific and direct such as, “Have you hit your child on any other part of their body besides their bottom?” Other items dealt with more serious disciplinary behaviours such as the shaking of an infant (Straus et al., 1998, p. 260). The PCCTS was developed to determine the extent to which parental disciplinary behaviours are carried out and achieve content validity and item clarity (Straus et al., 1998).

In 1996 there was a call by the UN Secretary-General to develop a child maltreatment-measuring tool that would gather comparable data cross-culturally and across different countries and take into account measurement complications such as different definitions and meanings across countries (Runyan et al., 2009). It was only in 2004 that the International Child Abuse Screening Tool-Parent version (ICAST-P) measurement tool was developed for parents (Runyan et al., 2009). Parents are asked about their parenting behaviours, disciplinary acts and acts of violence (Runyan et al., 2009). Below is a list of the disciplinary categories covered by the ICAST-P (Runyan et al., 2009):

- Positive discipline (e.g. Explaining why something the child did is wrong)
- Non-violent discipline (e.g. Shouting at the child)
- Physical discipline (e.g. Smacking the child on the buttocks for being naughty)
- Severe physical discipline (e.g. Beating of a child with objects)
- Psychological discipline (e.g. verbal abuse)
- Neglect (e.g. paying the child no attention)
- Sexual abuse (e.g. Rape or forced sexual acts)

Several studies have used the ICAST-P and PCCTS, but have found high rates of missing data. One study, conducted by Theodore et al. (2005), was aimed at investigating rates of harsh physical discipline and types of maltreatment children experienced in the States of North and South Carolinas in the USA. This survey showed that three hundred and seventy nine participants were considered eligible to participate and were interviewed. However, not all those considered eligible completed the survey, due to different reasons such as unavailability, refusal and medical reasons (Theodore et al., 2005). A second study conducted by Jackson et al. (1999) investigated how risk factors can be used to predict various parental disciplinary behaviours, such as hitting or threatening to physically harm a
child. The results indicated that questions dealing with abusive forms of discipline were endorsed at low rates, in particular items such as those exploring whether the parent had grabbed child around the neck, choked, or knocked the child down (Jackson et al., 1999). The low endorsement rates may be considered a reflection of actual incidence, or individual’s not disclosing information (Jackson et al., 1999). Furthermore, there was a 19% refusal rate from parents to engage in the study (Jackson et al., 1999). In both these studies, the reasons that parents refused to answer questions, or items that had low rates of endorsement, were not explored. In the original validation study for the ICAST-P, six hundred and ninety seven participants from different countries responded (Runyan et al., 2009). The questionnaire appeared to be received well, as indicated by the fact that missing data rates were between 0.9%-5.2% and most items had less than 3% missing data. However, questions entailing harsh physical acts like the shaking of a child less than two years had rates of missing data of 7.4% (Runyan et al., 2009).

Both the PCCTS and the ICAST-P have commonalities, in asking sensitive questions about unacceptable parental disciplinary behaviours, and finding that these items have low rates of endorsement. One reason for this may be biases (recall bias and social desirability bias) and fear of repercussions (Al-Eissa et al., 2013; Zolotor et al., 2009). Recall bias can be described as measurement error that occurs when participants cannot remember child maltreatment that has occurred (Jacques & Infante-Rivard, 2000). This often leads to the underreporting of information and can distort measurement results (Jacques & Infante-Rivard, 2000). Social desirability bias can be described as the “tendency for participants to present a favourable image of themselves,” to gain social approval, conform to societal values and avoid criticism (Van de Mortel, 2008, p.40). Certain measures may not always produce accurate results, as parents’ self-reports regarding their disciplinary practices can be biased due to wanting to appear socially desirable, leading to the covering up of negative disciplinary behaviours or underplaying of their problems (Bennett, Sullivan, & Lewis, 2006).

One study conducted in the Western Cape in a rural agricultural village indicated that about a fifth of parents had dysfunctional interactions with their children; it also explored parents’ feelings regarding child maltreatment questions posed (Ward, Gould, Kelly, & Mauff, 2015). Parents discussed how certain questions they were asked created a level of discomfort, especially personal questions regarding incidents of abuse (Ward et al., 2015). Furthermore, potential bias was discovered, as parents from the community who participated in focus group discussions after the survey, spoke about their fears, including their concern that the information they divulged about their parenting behaviours or approaches would be used against them (Ward et al., 2015). As mentioned cultural differences play a role in the disclosure of information, especially when it comes to sensitive questions such as dealing with child maltreatment, as individuals view the questions as threatening and fear the consequences of truthful disclosure (Lalwani, Shrum, & Chui, 2009; Tourangeau, 2007).

In a study assessing child sexual abuse focusing on parents, data collected on openness and
comfort during the interview experience indicated that 34.5% felt offended by the experience, and 74.3% felt upset or anxious during and after, but the majority indicated they were open and truthful (Dunne et al., 2003). Consequently, social factors play a role in self-reporting (Dunne et al., 2003). One study examining class differences in openness indicated that people of high social standing are less truthful and open because of social desirability and fear of the consequences of disclosure, as well as how the information might impact on their lives (Theodore et al., 2005). Furthermore, some individuals could potentially feel they do not have the right to refuse participation in research, which may differ across cultures and ethnicities. For instance in a study assessing voluntariness of participation, it was discovered that there is a difference in racial perception of voluntariness, possibly due to need and vulnerability, especially in developing countries like South Africa (Barsdorf & Wassenaar, 2005). The results indicated that the black African people were less likely to refuse to participate, than white or Indian people who might have has a stronger sense that they had a right to choose not to participate (Barsdorf & Wassenaar, 2005).

Barsdorf and Wassenaar (2005) propose that black people are more vulnerable than other population groups because of the damage apartheid caused, leaving the majority of black people uneducated, living in poverty and needing proper health care and nutrition (Barsdorf & Wassenaar, 2005). Similarly, these reasons could affect participants’ willingness to take part in studies dealing with child maltreatment and not feeling that they have a right to keep their disciplinary behaviours private. Other problems that may affect parents’ willingness to respond accurately are concerns about how certain questions would affect the child, which may negatively impact on parents willingness to give consent due to fear of emotionally disturbing the child or of what they might say (Zolotor et al., 2009). A study conducted in Saudi Arabia to determine child maltreatment incidences found that low response rates may have been due to parents feeling certain questions were alarming, threatening and sensitive (Al-Eissa et al., 2014; Zolotor et al., 2009).

The accurate measurement of child maltreatment is key for prevention and therefore, good measuring instruments are necessary, especially with problems such as child maltreatment. However, there have been very few or no investigations into how bias and other consequences can affect reporting especially with the ICAST-P. There is a need to investigate parents’ feelings towards the ICAST-P measurement tool, as there currently is a gap in the literature. The aim of this study is to investigate parents’ views and experiences of the ICAST-P in South Africa across different cultures and to understand reasons for possible non-response to certain questions. This study will explore individuals’ differences in perspective and gather information to help improve child maltreatment measurement tools globally, but especially in South Africa where other factors such as lack of education and socioeconomic factors play a contributory role in parent disciplinary behaviours and the measuring of such behaviours.
Method

Design

A qualitative research design was used and a semi-structured interview was conducted to gather data. A qualitative approach can be described as a “naturalistic, interpretative approach” and takes into account research participants’ perspectives and accounts (Ritchie et al., 2013, p. 3). Qualitative research aims to understand social realities in more depth and places emphasis on processes, meanings and structural features (Noor, 2008). This approach is interested in exploring topics in depth, gaining insight and understanding perspectives, rather than the testing and proving of a hypothesis (Meinck et al., 2014; Noor, 2008).

In summary, the use of a qualitative approach for this study was useful as it investigated parents’ perspectives and experiences of the ICAST-P measurement tool to help in the understanding of question refusal, and the possible barriers and reasons for refusal, both personal and culturally.

Participants & Sampling Strategy

In line with a qualitative approach, a purposive sampling strategy was employed to recruit the first ten participants. Purposive sampling is described as a deliberate form of recruiting participants because they have specific features or characteristics required to conduct the study (Ritchie et al., 2003). All ten black African participants lived in Khayelitsha and five were part of the Sinovuyo Caring Families Project, an evaluation of a parenting support programme aimed at preventing child maltreatment. In terms of selection, five IsiXhosa-speaking, research-accustomed participants, some of whom had received the parenting support programme and some who were in the control group were chosen. The other five IsiXhosa-speaking, research naïve-participants were selected from a local Non-profit Government Organization (NGO). The importance of having the research-accustomed participants is that they have had experience in answering the ICAST-P and so are included because they may have had time to reflect on the experience and be able to offer insights. It was believed that the five participants who had not received the programme would reflect the perceptions of those who had never encountered the questions previously. A trained research assistant translated and transcribed the questionnaire and interview questions.

Lastly, through snowball sampling using the researchers own social network, ten English-speaking participants were recruited to take part in this study. Snowball sampling can be described as the recruiting of individuals with desired characteristics, and from them acquires referrals to recruit similar participants (Sadler, Lee, & Fullerton, 2010). These participants were also research-naïve.

Inclusion Criteria. Parents had to have children between the ages of two to nine years in all three groups and had to be living with the children in the same house for a minimum of four nights a week and classify themselves as the primary caregiver. The same criteria as required by the Sinovuyo Caring Families Project, was applied to both the IsiXhosa-speaking, research-naïve and research-
accustomed participants, as well as the English-speaking, research-naïve participants. This enabled us to keep the conditions the same across the different groups.

**Measures.**
The ISPCAN Child Abuse Screening Tool - Parent version (ICAST-P) (see Appendix A) and a semi-structured interview (see Appendix B) was used. These measures were used to record parent behaviours, items endorsed and items not endorsed.

*The ISPCAN Child Abuse Screening Tool- Parent version (ICAST-P).* The ICAST-P consists of forty-five questions, with answers recorded on Likert-like scales that measure parents’ frequency of disciplinary behaviours in the past year. However, for this study we adapted it to the past month and used response codes accordingly (more than 10 times; 6-10 times; 3-5 times; 1-2 times; Not in the past month but has happened before; Never in my life; No answer). The measurement tool has been administered in various countries successfully (Runyan et al., 2009). Furthermore, the interview conducted after the questions had been asked, helped in identifying responses and assisted in the exploring of parents’ thoughts, attitudes and feelings about the measurement.

**Procedure**
Each participant was given a copy of the informed consent form to refer back to at any time. It is acknowledged that some of the participants from the townships may be illiterate and struggle to understand some of the information presented. A trained IsiXhosa-speaking research assistant approached the IsiXhosa-speaking participants and I interviewed the ten English-speaking, research naïve participants. The consent form was presented to each participant and they were given an opportunity to read it and ask questions. The questionnaire and interview was conducted in the participants’ homes.

The two groups were first administered the ICAST-P questionnaire. The questions in the questionnaire were read out, and then the participants were interviewed to help gain information about the parents’ experiences and feelings towards the ICAST-P questionnaire (Ritchie et al., 2013). The interview was recorded using a voice recorder, as not everything the participant said could be written down, which would have resulted in lost information. Once the interview was conducted a thank-you gift was given, to the value of thirty rand. The research assistant was transported to the homes of the participant’s and back to the university. The data was analysed and then transcribed onto a computer and the results of the findings were drawn up.

**Data Analysis**
The data was analysed using a thematic analysis inductive approach. Thematic analysis is a widely used approach and is considered a foundational method that is important for analysing data, especially in qualitative research (Braun & Clarke, 2006). Thematic analysis can be described as a “method for identifying, analysing and reporting patterns within data” (Braun & Clarke, 2006, p. 79). The aim of the study was not to investigate child maltreatment, but rather to explore parents’
experiences of, feelings about and perspectives on the ICAST-P measurement tool and the differences across cultures. Thematic analysis is a useful approach as it is a systematic process, which allows for the identification of a variety of themes and patterns (Olds & Hawkins, 2014). It is a flexible approach that is able to organize and describe data in rich detail, as well as determines the strength of the evidence (Braun & Clarke, 2006; Olds & Hawkins, 2014). Furthermore, thematic analysis allows for the examining of different experiences, meanings and events, which assisted in the addressing of the research aims. It also helped in the understanding of people’s feelings and perspectives towards child maltreatment measurement tools in South Africa (Braun & Clarke, 2006).

Braun & Clarke’s six phases were followed: 1. **Familiarizing oneself with the data** – this involved the transcribing of the data, such as the replaying and re-reading of the interviews that were conducted. 2. **Generating initial codes** – this entailed the ordering of data in a systematic fashion to identify potential themes and marking of common statements. 3. **Searching for themes** – this phase involved the generating of themes and gathering the data that fits each theme: the researcher looked for commonalities from each interview and grouped them accordingly. 4. **Reviewing themes** – this involved ensuring the data gathered relates to the themes and mapping out one’s analysis of themes and patterns identified. 5. **Defining and naming themes** – This involved further analysis of the data and the refining of themes to ensure information is specific and concise and lastly, 6. **Producing the report** – this entailed the final analysis of the data and reporting of results, as well as ensuring the information analysed relates to the research. The information gathered will be drawn up and placed in the results section, for further discussion.

**Ethical considerations**

The purpose of providing of a consent form was to ensure that participants were informed about the risks involved when participating, as well as to give them an understanding about what the study was about (Flory & Emanuel, 2004). It also informed the participants that their information given would be kept confidential at all times (Flory & Emanuel, 2004).

**Harm to subjects.** This study involved a moderate to high risk to subjects because participants were asked about whether or not they had victimized others, which could have led to the triggering of guilty feelings and reliving moments of regret. The study was conducted in the privacy of the participant’s own home or a private setting in which only the researcher and the participant was present. Participants were provided with contact details of support organizations in case the study caused them to become emotional and participants were given the contact details of a help line service.

**Informed consent.** Before commencing with data collection, participants were given an informed consent form (See Appendix C). The informed consent form was read through in their preferred language. It explained the process and length of the interview and what the purpose of the study was. The researcher ensured participants understood that they were not obligated to participate in the study.
and if they did not wish to be part of the study or wanted to stop participating during the study, they were more than welcome to refuse to answer and or withdraw from the study.

Participants were made aware that if participants were found to be abusive towards their children, the researcher would have to report the instance to her supervisor and that the risks involved included that the child might have to be removed from the home. The participants had to print their full name and give their signature on the informed consent form and if they had any questions before during or after, they were more than welcome to ask the researcher and they were provided with the numbers of the researcher, her supervisor and the research assistants. Participants were also given a copy of the informed consent form.

**Violation of privacy and confidentiality.** Participants were guaranteed that their identity remained anonymous and any information shared was kept anonymous. The conducting of a semi-structured interview allowed participants to have control over the content and degree of the information they shared. Furthermore, the voice recorded interviews and written information, were logged and stored on a computer with a password that only the research team had access to. Once the transcribing of the recorded interviews was completed the recording was destroyed, and the transcribed information was stored on a password-required computer that only the research team has access to, with frequent backups to a password-protected hard drive.

**Reflexivity**

Reflexivity is considered an on-going process, in which the researcher does not only report the facts collected, but are involved in the construction of data interpretation (Guillemin & Gillam, 2004). It is a process of critical reflection by the researcher on the knowledge produced and how the knowledge is generated for research purposes (Guillemin & Gillam, 2004). It is vital that the researcher acknowledges his/her role in the study, so as to improve the quality and validity of the data, and explore the limitations of the study being conducted (Guillemin & Gillam, 2004).

Furthermore, due to language barriers, with regards to the isiXhosa-speaking participants, it was not possible for the researcher to conduct all the interviews personally. The isiXhosa-speaking participants were interviewed by a research assistant who spoke isiXhosa, which was believed to help minimize any discomfort and vice versa for the English-speaking, research naive participants.
Results and Discussion

The aim of this study was to explore parent’s feelings about and responses to the ICAST-P, which deals with parent disciplinary behaviours. Disciplinary behaviours range from positive disciplinary actions, such as explaining why the child did something wrong, mild physical disciplinary actions such as smacking the child on the bottom with a bare hand, to harsh disciplinary behaviours involving physical abuse such as beating a child or neglecting a child by not feeding them. We expected parents to be hesitant to take part in the study and find the questions not only to be sensitive, but also offensive. However, we found that parents were very willing to take part and took no offense. We also explored reasons why parents might not answer the questions truthfully. We assumed the main reasons would be due to social desirability bias and response bias, however we discovered that guilt and shame, as well as fear of judgment and repercussions, were major themes. This is discussed in more detail below.

1. Participants’ view of participating in a study using the ICAST-P

1.1 Consent form

A consent form forms a critical part of any research study, especially with regards to the ethical necessity of keeping participants information confidential (Beahrs & Gutheil, 2001). However, having a consent form does come with problems such as an inability to prevent or guarantee no negative outcomes (Beahrs & Gutheil, 2001). The reason for this is that both the interviewer and participant cannot pre-empt what will emerge during an interview session (Beahrs & Gutheil, 2001). The formalities behind a consent form can hamper rapport and cause participants to be more cautious in their word choices (Beahrs & Gutheil, 2001). Participants in this study understood the purpose of the consent form and the ethical reasons for having it and needing to sign it. However, some participants stated that:

*English-speaking, research naïve participant #6:* “To be honest when I have to sign things it makes me more nervous, like do I really know what I am signing? If anything I am like, I don’t like it as much. But to be honest I am not concerned with you using this anywhere, I don’t know. Maybe I am too relaxed, but I’m not too private.”

*English-speaking, research naïve participant #8:* “No, a consent form feels like a process. It does not comfort me at all. Like what is a piece of paper for? I want to know, no one is going to judge me for how I punish my child and I am not going to be sent to jail.”

The IsiXhosa-speaking participants did not have much to say about the consent form. According to Wassenaar and Barsdorf (2005) many black South Africans, especially from previously disadvantaged backgrounds, have a lower perception of volunteerism. Black participants’ participation may therefore be based on a passive compliance, rather than an active desire to participate (Wassenaar & Barsdorf, 2005). Consequently, this passivity could be result of their lack of interest in the consent form. Furthermore, the IsiXhosa-speaking participants had no concerns about the consent form and understood that its purpose was to explain the purpose of the study and the participants’ commitment.
The English-speaking participants, on the other hand, were more questioning about the consent form, why it was needed and the reason they had to sign it.

1.2 Thoughts about the study

The English-speaking parents felt there was a purpose for the questionnaire and that they were the right questions to be asking. However, the majority of them were concerned that parents would not answer the questionnaire truthfully, especially those guilty of committing some of the more serious forms of disciplinary actions.

*English-speaking, research-naïve participant #8:* “I have a hard time believing that people will be honest. So they are valid questions, but I cannot imagine that people are going to be so bluntly honest, because they are blunt questions.”

Some parents felt asking the children would be better, as children are more forthcoming and willing to answer questions and felt that by having the child present when the parents were being asked the questions, would elicit more truthful answers because children are more likely to call their parents out if they are lying.

*English-speaking, research-naïve participant #7:* “It is good, but I don’t know if people will tell the truth. The best would be having your child sit with you while answering these questions, bearing in mind that my child is not frightened of me. If you had to ask have you shouted at him? And I said no, he would say, excuse me mommy, but that’s not true. So it’s good, but I don’t think you will get real answers.”

The IsiXhosa-speaking participants did not really have an opinion about the study. However, they felt comfortable answering the questions, despite the lack of detail.

2. ICAST-P as a measuring tool

2.1 Feelings evoked by the questionnaire

2.1.1 Shock.

The English-speaking mothers found some of the questions to be shocking, in comparison to the IsiXhosa-speaking, research-accustomed mothers and the IsiXhosa-speaking research-naïve mothers who all said that the questionnaire was fine and they felt free answering:

*English-speaking, research-naïve participant #2:* “No, are these the questions? It is scary! It is actually scary, because you think about what is going on out there…”

*IsiXhosa-speaking, research-accustomed participant #1:* “They were fine, I felt free.”

The theme of shock and alarm was very prominent in parents’ experiences of the questionnaire and some did not expect to be asked about such harsh disciplinary forms. Parents were not shocked by the fact that they were being asked such questions. They were more shocked by the fact that people use these forms of harsh disciplinary actions on their children, as the use of such actions or thought of invoking such actions upon their children had reportedly never crossed their minds.
English-speaking, research-naïve participant #5: “Yes, because for me it is shocking because some of those behaviours, in fact the majority of them would not enter my mind or my thought system. I wouldn’t even do that to my dog.”

English-speaking, research-naïve participant #6: “I think the thing that stood out to me was you said it was all the degrees of discipline. So I was picturing a smack being the most extreme, but this was like very extreme. There is things in here that I have never thought about.”

2.1.2 Reflection on others and self.

For most parents, especially the English-speaking, research-naïve mothers, the questionnaire made them reflect on other children’s situations and the reality that child maltreatment is real, which did invoke some sadness.

English-speaking, research-naïve participant #4: “I didn’t feel offended by them, it was just obviously sad to realize that this is the reality for so many children.”

English-speaking, research-naïve participant #1: “I just thought there are a lot of kids who this happens to everyday and yes shame. I would say sensitive on the hand that it makes you sad that this kind of stuff happens to some children.”

The questionnaire also made parents reflect on themselves and their ways of disciplining their own children. It was clear that the questions caused parents to assess themselves and think about their ways of disciplining their children and if those ways were acceptable or not.

English-speaking, research-naïve participant #4: “You know I had to think – When you asked how many times have I not talked to her? I did feel a bit guilty. Questions like these posed to people, do let them stop and think before they react towards their child thoughtlessly.”

IsiXhosa-speaking, research-naïve participant #4: “This shows us ways to discipline our children.”

However, some parents stated that if a parent carried out these harsh disciplinary actions, the questionnaire made them reflect on their own behaviours. As well as the behaviours of others they have witnessed and the situations children find themselves in.

The accuracy of data collected is dependent on the accuracy of response given by participants (Roediger & Karpicke, 2006). In a study looking at test-enhanced learning it showed that taking a test or being exposed to a question paper does allow for long-term exposure (Roediger & Karpicke, 2006). Consequently, prior exposure to a test or questionnaire does have the ability to lead to possible test sensitization and complacency (Roediger & Karpicke, 2006).

2.1.3 Uncomfortable.

Parents found some of the questions to be uncomfortable and difficult because they are so direct and at times intrusive because they knew that some of the disciplinary actions were not acceptable and did not foster good child behaviour. As a result they felt that if a parent was guilty of these disciplinary actions, they might have felt embarrassed or judged.
English-speaking, research-naïve participant #9: “If they do it [abuse their child], it will be very sensitive because it is almost like you are saying: “you see me inside my soul” like oh why I have actually done it and now I don’t think I feel comfortable answering that, you know that sort of thing.”

English-speaking, research-naïve participant #8: “Very personal questions! Very personal questions! I find that I am a very open person, so I don’t have issues with answering these things.”

English-speaking, research-naïve participants #3: “Okay to answer it, I think it does ask awkward questions.”

Some parents admitted that the questions were difficult, but did not find them offensive and were comfortable answering these questions because they were not guilty of committing harsh disciplinary action. For example:

English-speaking, research-naïve participant #1: “I wouldn’t say offensive, but I think if you were guilty of abusing your child, you wouldn’t like the questions. You feel like you have been a bad parent or a bad mother and you have done something bad that you shouldn’t have done.”

However, parents stated that these questions made them think and worry about their own parenting and how others might view them.

2.1.4 Positive scepticism.

Some of the participants had been exposed to the ICAST-P, prior to this study. As a result the testing effect emerged in this study, which according to Carpenter & DeLosh (2006) involves the retrieval of previous encounters or material. As a result the effect the encounter or material had the first time, does not always have the same effect the second time because of awareness from participants of what is to be expected (Carpenter and DeLosh, 2006). In this study five participants had completed the ICAST-P questionnaire twice before, and as a result the questions did not come as a shock. The majority of the research-accustomed participants reflected back to their first time and said it really made them think. This raises the possibility that if the instrument is used in a trial, the possibility of the testing effect may become a threat to internal validity.

IsiXhosa-speaking, research-naïve participants #5: “They were fine, I felt free because this is not the first time someone comes to me and asks me these questions.”

The majority of parents said that the questions being asked would be appropriate for exploring child maltreatment, but were sceptical of whether or not honest feedback would be given.

English-speaking, research-naïve participant #3: “I think they are the right questions to ask. I just don’t know how many parents will answer truthfully, but I do think they are the right questions to ask.”

English-speaking, research-naïve participant #8: “I have a hard time believing that people will be honest. So they are valid questions, but I cannot imagine that people are going to be so
bluntly honest, because they are blunt questions. I think it is a good measurement to have, but I really have my doubts as to how effective it would be.”

Parents being interviewed expressed being willing and comfortable to take part in this study.

2.1.5 Understandability.

The majority of participants understood the questions asked and stated they were straightforward. Many of the participants demonstrated their understanding of the harsh disciplinary actions, specifically the shaking questions. Although the participants did not commit this action, they have witnessed it happen: For example

*Interviewer:* “How many times in the past month have you shaken him aggressively?” What did you understand by the question, when I asked you that?”

*English-speaking, research-naïve participant #8:* “Grabbing him and shaking him” (performs action).

2.1.6 The ICAST-P suggested Time Frame.

The ICAST-P generally asks parents to look back over a year and give feedback on their disciplinary actions used in the last year. However, we decided to look over a period of a month and gather feedback on whether or not a month was a better time frame than a year. The general feeling was that one-month was better than a year. Most of the mothers considered a year to be a long time when trying to remember their disciplinary actions. The majority of English-speaking, research-naïve participants said that children have good months and they have bad months. They also stated that because of their consistency in their discipline, it made it easier to remember how many times they performed an action.

*English-speaking, research-naïve participant #3:* “Easier to recall in the last month, probably easier to recall the last week. Certainly anything longer than that is more difficult.”

However, the IsiXhosa-speaking, research naïve and research experienced participants had mixed views: some felt it was easier to remember, either a month or a year and others felt it was not.

*IsiXhosa-speaking, research-naïve participant #9:* “It is not easy to remember because I do forget when certain actions are used.

*IsiXhosa-speaking, research-naïve participant #2:* “It is something that is on my mind I know the kind of behavioural problems I will experience with him, so it is easy to remember. So I know what he does almost for the whole year, because he is a child that does not listen.”

2.2. Reasons for not answering truthfully

2.2.1. Social desirability bias.

Parents were asked why they thought parents or caretakers would not answer the questions truthfully, although some parents actually had no idea why, social desirability played a big role:

*English-speaking, research-naïve participant #2:* “Truthfully because it will reflect whom they are. Some people have this reputation, this image to uphold and to keep up with the image they portray. Some have difficulty raising their kids and they are not going to openly admit it.”
English-speaking, research-naïve participant #5: “But I also don’t know who would say yes to those questions. They are not going to tell you. So no I do not think so, I actually do not see the purpose of you asking these questions. Because the people who do this are not going to tell you, “oh yes, I did, I actually burnt him yesterday.” Nobody is going to tell you that and even if you speak to the wife and she knows the husband does it, she is not going to tell you because she is afraid.”

Social desirability bias affects the validity of studies because of information given not being truthful (Krumpel, 2011). Improving validity by reducing social desirability bias has proven difficult (Krumpel, 2011). Possible ways to deal with such bias include tailoring the questionnaire by increasing the anonymity of the questionnaire process through self-administered interviews and ensuring response techniques are randomised. Furthermore, decreasing the participants’ concerns by ensuring confidentiality and framing sensitive items to avoid the fear of accusation or judgment (Krumpel, 2011). Lastly, creating a private interview situation and ensuring that participants feel comfortable could also help (Krumpel, 2011).

2.2.2 Lack of Knowledge of children’s experiences.

It was explained to parents that certain life events happen, which are out of their control such as unemployment or spouse abandonment. Specific to the last eight questions of the questionnaire, which included the following:

- “Your child was not taken care of when he or she was sick or injured?”
- “Your child was not given something to eat or drink?”
- “Your child was made to wear clothes that were dirty, torn or inappropriate for the season?”
- “Your child was hurt or injured because of no adult supervising him or her?”
- “Your child was not always provided with a safe place to live?”
- “Your child touched in a sexual way by an adult?”
- “Your child was forced to have sexual intercourse with an adult?”

It was found that most parents were not aware of what was going on with their children or what those who they regard as close or trustworthy were doing with their children.

2.2.3 Guilt and Shame.

Guilt and shame was another significant theme. Most parents felt that even when parents do their best they sometimes lose control. Consequently, this could lead them to taking their anger out on their children, and disappointing themselves in the process.

IsiXhosa-speaking, research-naïve participant #2: “I think it would be an evil parent someone who abuses their child, and they too scared to answer.”

English-speaking, research naïve participant #6: “So, I think one…if they are ashamed or guilty of something they are doing and would not want to admit to that.”
2.2.4 Fear of judgment.

Parents often strive to be the best they can be and all parents in this study appeared to do their utmost. However, they did acknowledge that they allowed their frustrations to get the better of them. The fear of judgment is another reason why parents would not answer truthfully. For example:

*Interviewer: “Is there a fear of being judged?”*

*English-speaking, research-naïve participant #8: “Yes of course, I think with parenting there is always a fear of being judged because parents are often the harshest judges of themselves.”*

*English-speaking, research-naïve participant #7: “So I think the only reason you would not want to answer is if it is something personal to you and maybe they way you do it is different and in the norm it may not be perceived as acceptable.”*

Parenting is a challenging role and is often influenced by many factors and conditions, such as parents’ own childhood experiences, social circumstances and the type of child they have (Ateah, 2003). Previous studies conducted indicated that some parents are often unaware of the expected child behaviours at certain developmental stages (Ateah, 2003). As a result they mistake their child’s behaviour for disobedience and that leads them to physically punishing their child by smacking them (Ateah, 2003). Parents stated that they want what is best for their children, but sometimes they lose control of their emotions and at other times it is because they lack the knowledge and resources about parenting children (Ateah, 2003).

*English-speaking, research-naïve participant #1: “As I said, I think it’s because you have either let your child down, or you could have handled the situation better, nine times out of ten you realize you could have dealt with things better and think I should not have done that and it’s a bad reflection of you as a parent and I think as a person.”*

2.2.5 Fear of repercussions.

Awareness of child maltreatment or suspicion of it deters people from answering truthfully. According to Lalwani et al., (2009) the fear of negative consequences and facing of repercussions, such as having your child removed or going to jail if guilty, does hamper truthful disclosure. For example:

*English-speaking, research-naïve participant #2: “Okay, but parents might be afraid of answering truthfully in case their children are taken away. No one wants their kid taken away from them.”*

*English-speaking, research-naïve participant #5: “No (laughs) because people like me who would tell the truth, you should not be asking and then the people who do uses such harsh forms of discipline are not going to tell you. I mean why would they tell you? For you to send the police?”*

2.2.6 Privacy (Disclosure difficulty).

The theme of privacy was a recurring theme with respect to disclosure difficulty. According to Gershoff (2010) parenting beliefs with regard to discipline and raising their children are culturally
influenced and that determines the norm for them. Many parents stated that people do not often talk about their different forms of discipline.

*English-speaking, research-naïve participant #8:* “If I had somebody coming to my door, even if it was a community worker. I would not have the same sense of confidentiality, as I would if I had to see my doctor. It does not feel like such a safe place to answer such sensitive questions. I think a lot of parenting happens behind closed doors, so if I had people asking me these questions, I don’t think I would say that is what I did because it is very private and personal.”

*English-speaking, research-naïve participant #1:* “I still don’t think people would answer it honestly; yes it is not something people talk about easily.”

Many of the participants mentioned that they viewed discipline differently to their partners. They indicated that their husbands were more likely to give smacks then they were, because their husbands grew up with getting smacks. Furthermore, some parents felt that their way of disciplining was their business because it was their child.

*IsiXhosa-speaking, research-naïve participant #5:* “We not all the same as parents and some parents do not see how you guys fit in with disciplining their child, because their child belongs to them and not you, so that’s how other parents think.”

### 2.2.7 Culturally Taboo.

The disclosures about sensitive topics such as child maltreatment and specifically sexual abuse matters or sexuality are culturally dependent and often not discussed, not only in African countries, but Asian countries too (Meinck et al., 2004). Parents, especially the IsiXhosa-speaking participants, suggested that speaking about child maltreatment, especially sexual abuse, is culturally taboo.

*IsiXhosa-speaking, research-accustomed participant #10:* “With us Xhosa people we do not tell our children about abuse and rape and things like that. I went to a session and they spoke about rape with my grandson. I did not think it was right; subjects like these should not be discussed with kids. I am scared of these subjects and I tell him not to tell other children because you can’t say things like that to other children. But I tell him if it ever happens to him, he must come tell me or tell his teacher, not the other children because he will get arrested.”

*English-speaking, research-naïve participant #7:* “It might be what you are not used to talking about. It might be the conversations you have with your kids, maybe those are not conversations you have with your kids, about what to do and what not to do.”

Child sexual abuse disclosure is considered complicated and often “uniformly shrouded in secrecy and silence” (Fontes & Plummer, 2010, p. 674). These cultural beliefs, such as about sexuality and sexual abuse, are often viewed as forbidden topics of conversation (Fontes & Plummer, 2010). Studies reveal that the discussing and disclosure of such topics leads to shame and the fear of being negatively perceived or rejected by family and friends (Fontes & Plummer, 2010).
3. Reasons for using harsh disciplinary actions

The majority of parents, both English-speaking and IsiXhosa-speaking, said that actions committed towards their children are generally committed out of frustration or anger.

*IsiXhosa-speaking, research-naïve participants* #3: “When you angry and you shake him.”

*English-speaking, research-naïve participant* #6: “Something I need to be aware of, in frustration or exhaustion or whatever it is so easy to want to raise your voice to get something out of them and it just comes out, without you even realizing. So it is literally raising my voice, like “SAM COME HERE NOW”!!”

Other reasons provided by the participants included that most parents perform disciplinary actions that they consider the norm because it was done to them when they were children and circumstances played a role too. For example:

*English-speaking, research-naïve participant* #1: “I think everyone wants to be a better parent and you do a lot of things you don’t want to do, but it’s the best thing that you have at the time and the situation.”

*English-speaking, research-naïve participant* #7: “Yes, I also think some people are raised differently. Consequently, how they are raised may not be what society deems as acceptable, but we realize if our norm is different to somebody else’s, maybe it is best left unsaid.”

There was the realisation that circumstances, be they social, economic or personal, did affect parenting and how they disciplined or treated their children. Studies conducted indicated that individuals who have lower socio-economic status and come from impoverished backgrounds are more likely to maltreat their children (Zielinski, 2009). Furthermore, it was found that parents who were maltreated growing up are more likely to maltreat their children (Zielinski, 2009). For example, a study conducted indicated that 25% -35% of parents, who experienced maltreatment from their parents, maltreated their children (Zielinski, 2009, p. 674).

*English-speaking, research-naïve participant* #2: “But then also you don’t know about what other peoples’ circumstances are, if they are on drugs, or drinking or if there is no money and there is a child nagging and what such circumstances can drive you to do.”

### 3.1 Sensitivity of questions

The majority of parents may have found some of the questions shocking, but did not take them personally. However, some of the questions were considered sensitive because they could not believe some parents actually use some of the harsh forms of discipline on their children. Parents also said that guilt played a significant role in terms of sensitivity. For example:

*English-speaking, research-naïve participant* #2: “I don’t find them sensitive – But others might because of guilt or it being a sensitive subject.”
English-speaking, research-naïve participant #4: “Well, mostly the sexual abuse questions are very sensitive. You try so hard to make sure you have your children under your surveillance all the time. Something like that would kill me, I don’t think I could live with myself.”

IsiXhosa-speaking, research-naïve participant #2: “Yes, the one that says have you threatened your child. But I did not feel bad about it, or being asked it, I was open and could answer it.”

Parents also found that extreme forms of physical discipline such as repetitive hitting, especially with an object or not giving a child food as punishment, was unacceptable.

English-speaking, research-naïve participant #5: “For me the burning question, that has nothing to do with parenting that is torture. No parent should do that and if they do, they should be in prison that is not a question you ask a normal parent. You can go up to smacking, but as soon as it goes to klapping the head that is not right anymore because you can physically harm a child and no parent should do that. I thought this was way too far-fetched…”

3.2 Reasons why questions might be considered offensive

Limited information was gathered on whether or not the IsiXhosa-speaking parents found the questionnaire to be offensive, but the majority of them felt fine about the questionnaire and the answering of the questions. None of the participants left any of the questions blank or refused to answer. Every question was answered willingly and by choice. Although none of the parents found the questionnaire to be sensitive, reasons why offense might be taken were mentioned and specifically included guilt:

English-speaking, research-naïve participant #9: “Nothing that offended me, because I couldn’t do those things or maybe if I had done one of those things some of the questions might have been offensive but certainly not.”

IsiXhosa-speaking, research-accustomed participant #7: “It could be because you as a parent maybe hit your child with a cane like you are hitting an adult. You can’t answer the question because you have a guilty conscience.”

3.3 Preferred use of disciplinary behaviours

There was a clear contrast between English-speaking mothers and IsiXhosa-speaking mothers. The English-speaking mothers preferred using positive reinforcement, time-out and the taking away of privileges:

English-speaking, research-naïve participant #9: “So explanations are not always easy, because they do not listen when they go through meltdowns and that is why time-out works.”

English-speaking, research-naïve participant #5: “So that is why I can believe that some people would engage in such acts of discipline. But I also don’t think children benefit from such discipline, fear has never worked, positive reinforcement and explaining is what should be done.”
English-speaking, research-naïve participant #7: “I think in the way that our kids are brought up, the only way is to remove something they love – it might be the iPad, it might be sport.”

Whereas the IsiXhosa-speaking participants preferred the use of explaining, smacking and thought threatening was viewed as bad, some still used it because it worked.

IsiXhosa-speaking, research-naïve participant #2: “Even at home when he does something and you try stop him, he does not care he just carries on doing it he does not care about us, but we do not like hitting him because he does not have a mother and we do not know who his father is and it really hurts, but sometimes you are forced to hit him because you tell him something then the next day he does the same thing.”

Overall, participants were happy and willing to take part and were very interested in the study. The majority of participants wanted to know about other participants’ views of the questionnaire and hoped the study would be used to not only bring about change, but to also educate others.

**Conclusion**

In summary, this was the first study the researcher could identify to investigate parents’ views and feelings towards child maltreatment measurement instruments, in particular the ICAST-P. The study looked at parents’ views of participating in this study using the ICAST-P. It was discovered that participants understood the purpose of the study and the need for the consent form. Although some of the IsiXhosa-speaking participants thought that the purpose was to teach them ways to discipline their children, however, it did not appear to affect the quality of the data collected.

Secondly, the study looked at parents’ views of the questionnaire, which dealt with feelings evoked by the questionnaire. The themes that arose included: shock, reflection on others and the self, the questions being uncomfortable at times, as well as positive scepticism. The shock experienced by participants was the shock that parents could actually use such harsh forms of discipline on their children, such as repetitively hitting their child over and over again with their hand or an object. Parents were also shocked by the fact that such forms of “discipline” actually existed, as many of the actions mentioned had not even crossed their minds.

The questionnaire also caused parents to reflect upon themselves, in the sense that it made them think about how they discipline their children and how they have lashed out at their child or children in terms of shouting at them or ignoring them out of frustration. It also caused parents to think about the situations of other children and made them sad because they know child maltreatment happens. Furthermore, parents did mention that the questions asked were difficult, not because they had committed any of the harsh (and what they considered unacceptable) disciplinary actions, but because they dealt with sensitive topics like sexual abuse.

Lastly, the questionnaire evoked positive scepticism, as parents did believe the ICAST-P was a good measurement tool, but they were sceptical as to whether or not parents who do commit such actions would answer truthfully or not. Consequently, they doubted whether or not the data collected
would be beneficial in terms of bringing about change or putting an end to child maltreatment. Overall, parents were not offended by the questionnaire and neither did they find any of the questions sensitive, as they were not guilty of committing any of the unacceptable forms of discipline mentioned, like physical or sexual abuse.

Thirdly, the study looked at the ICAST-P as a measuring tool. Participants’ understanding of the questions and the time frame proposed for reflection, were explored. The data indicated that parents understood the questions and found them to be straightforward. Some parents thought the time frame for questions in the ICAST-P should be shortened to one month, instead of a year, while others did not. The parents who viewed a year as being too long, stated it was harder to remember the amount of times certain disciplinary actions were used, such as shouting at a child or explaining why they had done something wrong. Fourthly, possible reasons for not answering the questionnaire truthfully were investigated. Common themes found included: social desirability bias, lack of knowledge of children’s experiences, guilt and shame, fear of judgment and fear of repercussions which was a major theme as parents were concerned about the consequences and possibility of being seen as a bad parent, as well as privacy (disclosure difficulty) and lastly, some of the questions were considered culturally taboo, such as the ones dealing with sexual abuse.

Moreover, social desirability bias was one of the major reasons for parents not telling the truth, as parents stated that if parents were guilty of committing such actions, confessing to them would place them in a bad light and bring judgment upon them. The study revealed that guilt and shame played a big role in being untruthful because of the reality that what they have done or are doing is wrong. Furthermore, fear was the biggest reason for not answering truthfully, the fear of judgment with regards to others viewing them in a bad light. Similarly, the fear of repercussions was indicated, the fear that if they confessed they would be reported and have to deal with severe consequences, such as having their child taken away.

The topic of child maltreatment is not a topic that is easily spoken about and gave rise to the theme of privacy. Parents stated that they believed parents would have a difficult time disclosing their way of disciplining their children, especially if they believed in hitting their child and that how they disciplined their children was their business. Lastly, child sexual maltreatment was said to be a topic that is not often spoken about and was considered culturally taboo.

Furthermore, the study explored reasons why the questions might be considered offensive. None of the participants found the questions to be offensive. However, they were concerned that parents who were guilty of harsh disciplinary actions, like not giving their child food as punishment or burning them, may find them shameful or try to hide the truth, in comparison to those who do not commit the actions, as well as the fear of being seen as a bad parent.
Lastly, parents’ preferred use of discipline was investigated and most preferred the less harsh forms. The English-speaking parents preferred using time-out, explaining and positive reinforcement and the IsiXhosa-speaking parents preferred smacking, explaining and threatening.

This study is not without limitations. Despite the sample including English-speaking women and IsiXhosa-speaking women as well as black and white participants, the findings may not be generalizable beyond this gender group. Another limitation includes the fact that a small sample size was used, thus for future studies the interviewing of a larger sample size, with the inclusion of not only mothers but fathers too, may help to lead to greater generalizability. Lastly, the translation from English to IsiXhosa posed as a limitation in that IsiXhosa has many different dialects and cannot be translated word for word, as the IsiXhosa language does not always have a specific IsiXhosa word corresponding with the English. Consequently, participants were less likely to share their personal thoughts and feelings with the interviewer. In reflecting upon the interviews I conducted as a researcher, I found all my participants to be open to discussion and the answering of the questions. Despite some participants being apprehensive and startled by some of the questions, the researcher’s presence did not interfere with them answering the question or continuing with the study.

Despite these limitations, this study provides helpful insight in gaining an understanding of parents’ views of child maltreatment measurements and the necessity of them. Parents found the questionnaire to encourage insight, with the hope of bringing about change and education to stop child maltreatment. Furthermore, for future research it is recommended that potential concerns of parents be placed in the consent form, for example making sure the survey is private so that parents can report on their disciplinary behaviours themselves rather than in an interview. There is the suggestion that future research looks to compare a sample of known perpetrators, to those who do not engage in such actions. The reason for this is to investigate whether the measurement is viewed equally and get a different perspective. As well as, to investigate whether or not there is a testing effect before it is used in trials again.

Overall parents were happy with partaking in the study and answering the ICAST-P questionnaire, but were concerned that accurate data may not be obtained, indicating a few more studies should be conducted to test its reliability and validity. Types of studies to be conducted could involve a larger sample size, dealing with a wider and more diverse population group. Thus, including people from all different race, class and cultural groups, as well as ensuring that an equal number of males and females are interviewed.
Reference


PARENT QUESTIONNAIRE  
PARENTING AND DISCIPLINE IN THE HOME

We will begin by asking you about the background of <name of index child>.

**B1. Child's Gender**

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**B8. What is the relationship that YOU have to <index child>? (Please, check ONLY one)**

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<td>Others (Please specify)</td>
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These questions refer to how you have raised <Name of index child>.

All adults use certain methods to teach children the right behavior or to address a behavior problem. I will read various methods that might be used and I want you to tell me how often you (or if applicable, your partner or any other person who takes care of the child) have used this with <index child’s name> in the last month. If you have not done this in the past year but have done this previously, please indicate this.

Some questions may seem inappropriate for a very young or older child. Please answer best you can, as this is a standard questionnaire used all over the world.

How many times in the past month have you…

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<th>≥ 10 times</th>
<th>6-10 times</th>
<th>3-5 times</th>
<th>1-2 times</th>
<th>Not in the past month, but it has happened before</th>
<th>Never in my life</th>
<th>No answer</th>
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<td>D1. Explained to him/her why something she/he did was wrong?</td>
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<td>D2. Gave him/her a reward for behaving well?</td>
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<td>D3. Told him/her to start or stop doing something</td>
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<td>D4. Shook him/her aggressively?</td>
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<td>D5. Hit him or her on the buttocks with an object (such as a stick, broom cane, or belt)?</td>
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<td>D6. Hit elsewhere “not buttocks” with an object (such as a stick, broom cane, or belt)?</td>
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<td>D7. Gave him/her something else to do (in order to stop or change behavior)?</td>
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<td>D8. Twisted her/his ear?</td>
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<td>D9. Hit him/her on head with knuckles?</td>
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<td>D10. Pulled her/his hair?</td>
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<td>D11. Threatened to leave or abandon him/her?</td>
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<td>D12. Shouted, yelled, or screamed at him/ her?</td>
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<td>D13. Threatened to invoke harmful people, ghosts, or evil spirits against him/her?</td>
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<td>D14. Kicked her/him?</td>
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<td>D15. Put hot pepper, soap, or spicy food in his/her mouth (to cause pain)?</td>
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<td>D16. Forced him or her to stand, sit or kneel in a position that caused pain?</td>
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<td>D17. Cursed him/her?</td>
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<td>D18. Spanked him/ her on the bottom with bare hand?</td>
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<td>Question</td>
<td>≥ 10 times</td>
<td>6-10 times</td>
<td>3-5 times</td>
<td>1-2 times</td>
<td>Not in the past month, but it has happened before</td>
<td>Never in my life</td>
<td>No answer</td>
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<td>D19. Choked him/her to prevent breathing?</td>
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<td>D20. Put child in time-out?</td>
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<td>D21. Locked out of home?</td>
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<td>D22. Took away privileges or money?</td>
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<td>D23. Forbade him or her from going out?</td>
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<td>D24. Pinched him/her to cause pain?</td>
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<td>D25. Insulted him/her by calling him/her dumb, lazy or other names like that?</td>
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<td>D26. Slapped on face or back of head?</td>
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<td>D27. Refused to speak to him/her?</td>
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<td>D28. Blamed him/her for my misfortune?</td>
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<td>D29. Threatened to hurt or kill him/her?</td>
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<td>D30. Burned or scalded or branded him/her?</td>
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<td>D31. Hit him or her over and over again with object or fist (“beat-up”)</td>
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<td>D32. Locked him or her up or tied him/her to restrict movement?</td>
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<td>D33. Withhold a meal as a punishment?</td>
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<td>D34. Use public humiliating to discipline him or her?</td>
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<td>D35. Give drugs or alcohol?</td>
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<td>D36. Told him/her you wished s/he were dead or had never been born?</td>
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</table>

Sometimes things happen to our kids and we feel powerless to protect them. Could you tell us about any of these things in the past year in relation to your child?

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<thead>
<tr>
<th>Question</th>
<th>≥ 10 times</th>
<th>6-10 times</th>
<th>3-5 times</th>
<th>1-2 times</th>
<th>Not in the past year, but it has happened before</th>
<th>Never in my life</th>
<th>No answer</th>
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<tbody>
<tr>
<td>O1. Your child was not taken care of when s/he was sick or injured.</td>
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<td>O2. Your child was not given to eat and/or drink.</td>
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<td>O3. Your child was made to wear clothes that were dirty, torn, or inappropriate for the season.</td>
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<td>O4. Your child was hurt or injured because no adult was supervising him or her.</td>
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<td>O5. Your child was not always provided a safe place to live.</td>
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<td>O7. Your child was touched in a sexual way by an adult.</td>
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<td>O8. Your child was forced to have sexual intercourse with an adult.</td>
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Thank you very much for helping with this research by sharing your parenting experience.
Appendix B
Qualitative Interview

Hello, my name is _______ and I am from the University of Cape Town. We are conducting a survey about parents’ understanding and experience of answering a questionnaire about how children are disciplined and kept safe.

Now that you have filled out the questionnaire, we will move onto the interview. This interview is private and so the answers to the questions will be kept confidential. They will not be shared with anyone unless someone’s life is in danger. Also you are free to skip any questions you don’t want to answer or to stop the interview at any time.

1. How did you feel about answering the questionnaire? What were your experiences and thoughts? Tell me about that?
2. How much could you actually remember in terms of parenting behaviours in the last month?
3. Were you able to pick the amount of times accurately? How did you arrive at your answer?
4. If we had asked: “how many times have you shouted at your child in the past year (instead of “in the last month”), would you have remembered accurately?
5. What do you think are acceptable parenting disciplinary behaviours and why?
6. Are there any forms of discipline you would not use that are mentioned in the questionnaire? Why?
7. Are there any questions you would use that are not mentioned in the questionnaire? Why?
8. Did any of the questions worry or upset you, tell me more?
9. Did you find any of the questions offensive? If so, tell me more as to why you felt that way?
10. Did you think any of the questions would make other people not answer accurately and the reason for that?
11. If so, how do you think we can rephrase the questions?
12. You skipped the question… Please could you tell me why?
13. What did you think of the question: “How many times did you shake your child in the past month”?
14. Did you honestly feel that you could stop the interview at any point in time?
15. Is there anything else you would like to say or ask about the study or the measurement tool?

Your participation is greatly valued and the information you have given us well help to make our measurement tools more effective and aid in our understanding of parents’ experiences and perspectives. Please accept this gift as a small token of our appreciation. If you have any more questions please do not hesitate to contact myself on 082 602 6191 or my supervisor Catherine Ward on 021 650 3422.
Appendix C

Consent Form to join a Research Study
University of Cape Town

Dear Participant

Invitation and Purpose
You are invited to take part in a research study about measurement of how parents discipline their children and keep them safe. Before you decide whether or not to be part of the study, it is important for you to understand why the research is being done and what it will involve. The purpose of the study is to explore parents’ experiences and perspectives of a questionnaire about discipline and child safety. We are interested in understanding how parents feel about the questionnaire, which will help us to understand better how to ask these questions.

Who can participate?
In order to participate, you need to have a child who is between the ages of 2 and 9. You need to be the caregiver that spends the most time with the child. If you have more than one child between the ages of 2 and 9, we would like you to select the one with the most challenging behaviour. This child needs to live in the same household as you for at least 4 nights a week. Lastly, in order to participate you will have to provide consent to confirm you are willing to participate.

Voluntary Participation
Participation in this study is completely voluntary. You are free to refuse to answer any question. If you decide to participate, you are free to change your mind and discontinue participation at any time during the interview.
You may chose not to participate in this study and this decision will not result in any penalties. No reason is required if you do not wish to take part.

Procedures
Firstly, you will be provided with information about the study and will be allowed to ask questions about the study. Once you have understood everything about the study and wish to participate, you will be required to sign a consent form and will be given a copy. You will then be asked some questions about how you discipline your child and try to keep him/her safe. Afterwards you will be interviewed about your experience of answering those questions. This should not take longer than an hour. The interview will
be recorded; however, all information obtained from you will be kept strictly confidential. Once the information from the recording has been written down, the recording will be destroyed. Your real name will not be used when we write things down from the tape.

**Risks, Discomforts & Inconveniences**

You may find some of the questions uncomfortable and sensitive. Please remember that we keep this information confidential: your name will not be put on the questionnaire, and this consent form will be stored separately from the questionnaire. As a result of the questions we will ask, there may be some concern about the relationship between you and your child. In the event that such concerns arise we will refer you to the appropriate organization. We will assist you through this process.

**Privacy and Confidentiality**

We will take strict precautions to safeguard your personal information throughout the study. Your information will be kept without your name or other personal identifiers, in a locked file cabinet. Study data will be kept on a password-protected, secure computer. Only the researchers will be able to access your personal information.

We will conduct the interviews in a private room at your home. Any reports or publications about the study will not identify you.

**Benefits**

There are no direct benefits to you in participating in this study. The knowledge we will gain from it, however, will be used to help improve child maltreatment measurement tools in the hopes of gathering accurate and truthful responses.

**Please Tick Yes or No to the following questions:**

1. Have you read or been read this information and understood the information given here?
   Yes ___  No___

2. Have you had a chance to ask any questions, received answers, and been able to ask for additional information from the researcher?
   Yes ___  No___

3. Do you understand that you can withdraw from the study without penalty at any time by telling the researcher?
   Yes ___  No___
4. Do you understand who will be able to see to your information, how this information is stored, and what happens to the information at the end of the study?
   Yes ___  No ___

5. Do you understand that the interview will be recorded, and that the recording will be destroyed once the information you give us has been written down?
   Yes ___  No___

Questions
If you have questions, concerns, or complaints about the study or questions about a research-related query, please contact
   Cleo Albertus  082 602 6191
   Prof. Cathy Ward  021 650 3422
If you have any other questions or concerns about this study or are worried about someone you might know that requires help, please feel free to contact the Department of Psychology on 021 650 3417.

Please sign your name if you understand what is involved and agree to participate:

{Subject’s name}________________ has been informed of the nature and purpose of the procedures described above including any risks involved in its performance. The participant has been given time to ask any questions and these questions have been answered to the best of the investigator's ability. A signed copy of this consent form will be made available to the subject if requested.

________________________________  ______________________________
Investigator's Signature  Date

I have been informed about this research study and understand its purpose, possible benefits, risks, and discomforts. I agree to take part in this research as a subject. I know that I am free to withdraw this consent and stop participating in this project at any time, and that doing so will not cause me any penalty or loss of benefits that I would otherwise be entitled to enjoy.
_________________________    ____________________________________

Subject's Signature                                      Date

Thank you!