

Developing an early parenting intervention in South Africa

THE NEED FOR EFFECTIVE PARENTING INTERVENTIONS

Maltreatment has short- and long-term negative consequences for a child's physical and mental health. When coupled with harsh parenting practices as a result of poverty and adversity, the child's risk of later becoming a perpetrator or victim of violence is increased.

Identifying effective and scalable primary prevention interventions is critical. Focused short-term interventions that promote responsive parenting can be effective in reducing child maltreatment; however, evidence for effective interventions in low- and middle-income countries is limited.

ADDRESSING THIS NEED

This project designed an early parenting intervention to promote responsive parenting and maternal coping skills while recognising the contextual and daily challenges caregivers face. The intervention forms one component of a broader violence prevention research agenda that recognises the various influences on children's well-being and the multiple risk factors for child maltreatment and intimate partner violence.

CHILD MALTREATMENT
Child maltreatment includes a range of behaviours, including harsh parenting, neglect and abuse. Parents and primary caregivers are the main perpetrators.

DESIGN PROCESS

The project team developed the intervention in KwaZulu-Natal, South Africa. The team consulted with practitioners and experts involved in early child development and mothers of infants younger than 12 months at each stage of the design process to inform the intervention's content: the curriculum and five short films.

Consultations included interviews and focus group discussions with 45 mothers with infants younger than one year on parenting values, beliefs and practices, support networks, and potential spaces for implementing the intervention. These discussions informed the intervention's approach.

The development of the prototype materials and media was an iterative process. First, the team developed the curriculum framework and the film's key messages and approaches. These informed the creation of a draft curriculum and film storyboards.

The draft products underwent revision following several rounds of feedback from experts and mothers who participated in

focus groups.

Next, prototypes of the curriculum were developed and filming and animation for the digital media conducted. The

team tested the prototype curriculum in a focus group with new mothers; the curriculum was subsequently finalised and the penultimate version of the five short films produced.

The project team then recruited a new group of 16 mothers with infants younger than 12 months, together with a support person, for the final phase of field-testing the films. After each film was viewed, a short focus group discussion was held (four groups each viewing five films).

GRANT DETAILS

PROJECT: Development of an early parenting intervention to promote and support effective parenting practices in South Africa

ORGANISATION: Health Economics and HIV and AIDS Research Division, University of KwaZulu-Natal

PROJECT LOCATION: KwaZulu-Natal, South Africa



SESSION CONTENTS

During the discussions, women indicated that the films were applicable to the broader community, particularly teenage mothers. Women confirmed that they had gained new knowledge from the films and that the films validated practices they had already been employing. The discussions also confirmed that participants' understanding of the films matched the intended messages.

In addition, the team assessed whether watching the five short films increased people's basic knowledge of parenting. Participants completed a questionnaire before and after watching the films. The 17 questions were related to parent-child interactions. Before watching the films, the mean knowledge score of mothers was 71 percent; this increased to 93 percent after they had watched the films.

The intervention materials were finalised based on feedback from the discussions and engagements.

END RESULT: THE INTERVENTION

The intervention, "Sikhula Ndawonye" ("Growing Together"), involves five three-hour facilitator-led sessions with mothers of children younger than 12 months. Each session is divided into three modules and uses a participatory, problem-solving approach, building on the group's existing knowledge.

These sessions may be delivered to groups or individuals. Two of the sessions are delivered when the mother is pregnant; the remainder are delivered after the baby is born.

SESSION 1

My child's future starts now: How do I feel about having a baby, what happens to me happens to my child, and anticipating the arrival of my baby.

SESSION 2

A brighter future for me and my child: The journey of my life, our future, and who can support me?

SESSION 3

Babies learn fast from the moment they are born: What we have learnt so far, the newborn baby is aware and responsive, and interacting with my baby.

SESSION 4

Babies learn through play and communication: Babies learn through play and exploration, calming a baby, and calming myself.

SESSION 5

Protecting my child's future: Protecting my child from harm, positive parenting, and planning for the future.

The intervention pack consists of a facilitator intervention manual and five short films, each conveying a key intervention message.

Each session focuses on a particular topic and uses a film to create an environment for participatory learning. Participants are encouraged to practise what they see and learn from the films with their infants in the group session and at home. At the beginning of each new group session, they are invited to provide feedback on their experiences at home.

Participants are asked to bring someone with them for the third and subsequent sessions. This strengthens the mother's support network and extends the intervention's reach.

STUDY CONTRIBUTION

Parenting interventions have the potential to increase responsive and sensitive parenting, and thus help prevent violence. Sikhula Ndawonye offers a participatory curriculum, supplemented by short films embedded with key messages. Results of the pilot test of the films suggest that they are applicable within the broader community and have strong potential to increase knowledge. The next step will be to pilot and evaluate the intervention to determine its effectiveness in increasing sensitive and responsive parenting and reducing harsh parenting. ■

THE STUDY'S VALUE

Sikhula Ndawonye is one of the few early parenting programmes designed in a developing country.

Mothers were engaged to help design the intervention.

The intervention was designed to allow for adaptation to other contexts.

The team has presented the intervention at different forums and in different country contexts.

The team intends developing a funding proposal to pilot the intervention.

¹ Crankshaw, T., Gibbs, A., Butler, L., Tomlinson, M. & Inglis, R. 2016. *Research report: Development of a parenting intervention to promote effective parenting practices in South Africa*. Durban: Health Economics and HIV and AIDS Research Division, University of KwaZulu-Natal. Available: http://www.svri.org/sites/default/files/attachments/2016-08-12/Report_Development%20of%20a%20parenting%20intervention_final.pdf [2017, May 30].

² Crankshaw, T. & Dartnall, E. 2016. *Sikhula Ndawonye – developing an early parenting intervention for women with infants <12 months of age*. Available: <http://www.svri.org/blog/sikhula-ndawonye-%E2%80%93-developing-early-parenting-intervention-women-infants> [2017, May 19].