



Indicators of intentional child neglect by parents and caregivers: A social work perspective

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Dissertation accepted in fulfilment of the requirements for the degree *Master in Social Work* at the North-West University

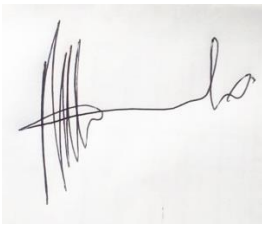
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Graduation: May 2025

DECLARATION BY AUTHOR

I, Enicca Phillipine Mkhondo, hereby declare that this dissertation entitled “Indicators of Intentional Child Neglect by Parents and Caregivers: A Social Work Perspective” contains my own work. It is submitted as a fulfilment of the requirements for the degree, Master of Social Work, at the North-West University, Faculty of Health Sciences, Vaal Campus. All academic sources quoted and used in this dissertation have been acknowledged through citing and in the reference list. This research has not been previously submitted for any other degree in this faculty/entity/university.

A handwritten signature in black ink, appearing to read 'Enicca Mkhondo', is written on a light-colored background.

Name: Enicca Phillipine Mkhondo

Date: November 2024

DECLARATION AND PERMISSION TO SUBMIT BY SUPERVISORS

We, Tiisetso Tshehle and Tasleem Sayed, hereby declare that this dissertation, submitted by Phillipine Mkhondo, meets the requirements for the degree of Master of Social Work at the North-West University, Potchefstroom Campus. We also grant permission for the manuscripts written as part of this thesis to be published.



Ms. Tiisetso Tshehle



Dr. Tasleem Sayed

DEDICATION

To my dear children, **Zicqelo, Chuene, Ditebogo, and Pheto**, whose love, patience, and steadfast support have been my constant source of strength. You have sacrificed so much for my academic pursuits. I frequently discovered reflections on my failings as a parent when I dug more into the realm of intentional child neglect. I appreciate that even when I was unable to support you, you were always there for me. This work honors the sacrifices you have made for my academic career. You have my undying affection, and I promise to make it up to you.

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The inspiration behind my work comes from my late mother, **Ms. Lethabo Matloshe Baloyi's** passion for children. She founded a daycare centre "**Makgobole Creche**" as she has always envisioned a world where children are loved, safe, and adored. She constantly urged me to have a lot of children "soccer team" as she likes to refer to them. Even though I did not follow her advice on family size, I made sure to live up to your teachings regarding child care and protection. Knowing that I am trying to safeguard the children through this work will make her proud, and I hope this work honors your love for children and the legacy of child advocacy.

To **every child**, especially to those who experienced intentional child neglect. May you find healing, hope, and your strengths. A better future is possible. Even if it might not happen today, tomorrow, or next week, we will undoubtedly succeed. May this work be a step towards a society in which all children, regardless of their circumstances, are valued and loved.

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The journey was not simple, balancing my roles as a wife, mother, employee, sibling, and student was so taxing that I felt like I was not striking a balance between my studies and social life. All of these difficulties, however, were less burdensome because I had “**YOU**” on my side. Many people offered their love, care, and support to help make this study possible. I would like to thank each of you individually, but as it takes time to write up and complete this study, please allow me this opportunity to say “**Thank you**” even if your name is not mentioned in this section.

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To our helper, **Ms. Betty Makgoba**, I have found a sister and a friend in you. You improve and provide significance to our lives. I find it easier to handle each day as it comes when I know that you are on my side. Your care, support, and love for my children remain incalculable. I may not express it frequently, but I value and cherish having you in my life.

SUMMARY

Intentional child neglect is a profound violation of children's rights with significant consequences. This phenomenon is a global concern and presents complex issues affecting everyone. Historically, children were viewed as property of their parents often subjected to different types of maltreatment, including neglect. Most of these incidents occurred within the family setting making it difficult to detect. This often resulted in deaths or physical disabilities and demonstrated that child neglect has a long history, yet, the concept of child protection is recent. The states saw it fit to have rights and interventions specifically tailored for children. Social workers are among the professionals who are mandated by the state to protect children while considering the children's best interests. Yet, they find themselves in complex situations that hinder and interfere with the pace of their service delivery.

Taking into consideration the aforementioned, this study aimed to explore from literature and practice, indicators of intentional child neglect by parents and caregivers. This aim was achieved through two manuscripts. The first manuscript employed a scoping review approach, which aimed to systematically map the existing literature on intentional child neglect, identifying key predictors, trends, and gaps in current research. This initial phase provided a comprehensive overview of the factors contributing to intentional child neglect and highlighted areas that required further exploration. Since the literature on intentional child neglect is limited most studies and laws refer to it in a broad sense, with many definitions treating intentional and unintentional neglect as part of a broad spectrum. For this study, "child neglect" will primarily refer to situations in which there is some intentionality on the part of parents or caregivers. By concentrating on intentional neglect, this study is expanding and improving upon the existing discussion rather than challenging it. Therefore, the words child neglect and intentional child neglect are used interchangeably.

The review applied the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) checklist and Arksey and O'Malley's (2005) framework to offer an inclusive synopsis of the present state of information. A total of 24 peer-reviewed articles published across the globe between January 2014 and January 2024 formed part of this review. These articles consist of observational studies, systematic reviews, meta-syntheses, qualitative and quantitative studies. These studies were conducted in various parts of the world; United Kingdom, the United States of America, Zimbabwe, Canada, Ghana, New York, Israel, China, and Europe, out of which only three studies were conducted in South Africa. The scoping review revealed various predictors

of intentional child neglect, including cultural predictors, social predictors, health predictors, economic predictors, biological predictors, environmental predictors, and educational predictors. It also shared an insight into challenges experienced by children, their families, social workers, and communities, and this is a fundamental aspect of understanding the dynamics of intentional child neglect. These difficulties are most noticeable in the context of this study when parents and caregivers unwittingly continue to engage in negligent conduct while thinking they are doing what is best for their children. This is frequently the result of cultural ideas and societal beliefs.

The second manuscript adopted a qualitative explorative approach. A total of 16 social workers in the Capricorn District under Limpopo Province were interviewed using a semi-structured interview guide to gather their experiences and perspectives related to intentional child neglect by parents and caregivers in the area. These interviews were aimed at corroborating the findings of the scoping review and exploring additional dimensions of the issue from the participants' viewpoint. These interviews provided a valuable understanding of challenges experienced by professionals working with families and children affected by neglect, the impact of neglect on children's lives, factors contributing to intentional child neglect, the most eminent types of neglect in the district, as well as the most vulnerable groups to neglect.

By combining the findings from the scoping review with the insights gathered from social workers, the study sought to develop a richer understanding of intentional child neglect, as well as the specific signs and factors that contribute to it. This approach allowed for a more holistic perspective, blending academic research with field-based knowledge.

Overall, this study provides valuable knowledge into the complex nature of intentional child neglect contributing to an improved understanding of the understudied problem. It points to the need for a multifaceted approach to deal with the problem, involving preventative measures that involve parents, communities, and stakeholders; and interventions that improve access to resources and services, support parents, and promote the well-being of the children; and increased support for social workers as their institutional and intrapersonal challenges may hamper service delivery to the affected children and their families. Furthermore, findings from both manuscripts contributed to developing effective preventative and intervention strategies.

Keywords: Intentional child neglect, children's rights, maltreatment, social workers, intrapersonal challenges

NOTE TO EXAMINERS

This dissertation was prepared with the greatest care and consideration, however, there are several exceptions to be aware of:

Structure of the dissertation: This dissertation consists of two manuscripts written in article format. Even though both manuscripts form part of the dissertation, they can be read independently. Firstly, a scoping review was conducted, and the findings were summarised (see [addendum 5](#)). This summary was provided to the participants, to explore probable comparisons between their experiences and findings of the scoping review. Hence, the two manuscripts are interconnected.

Data collection tool for manuscript 2: A semi-structured interview guide (see [addendum 16](#)) was included, it incorporates questions about the findings of the scoping review and the practice experiences of the participants.

Interviews: during the interviews, probing questions and paraphrasing techniques were used whenever the participants were providing ambiguous answers, this was not done to manipulate the answers but to gain clarity on the information provided. The interviews were audio recorded, and the participants consented to the use of audio recording. The audio recordings were used for transcription purposes only. 18 interviews were conducted. However, the first two interviews were used for pilot testing purposes hence they were not included in the main study, and their responses were not audio recorded but field notes were taken.

References: Other scholars' work has been acknowledged throughout this dissertation through in-text referencing. All references were included in the reference lists, and are in alphabetical order. The references for Section A (both part 1 & 2) are combined and written under part 2.

Article length: The length of both manuscripts meets the specified requirements of the journal. Upon completion of the study and successful examination, each manuscript will be submitted to academic journals for publication. Each article is written to meet the requirements of specific guidelines of the respective journals. Therefore, technical matters might differ throughout.

Authors' details: Both manuscripts' front pages do not have authors' names and other identifying information required by the guidelines; however, these will be added before the articles are submitted for publication.

Data duplication: The manuscripts followed different research methodologies and addressed different objectives. These objectives guided their answers to the research questions; therefore, these manuscripts can be read separately. However, some replication and overlapping may arise and should be expected.

Ethical number: Ethical numbers have been included in this dissertation. However, they will be removed after examination for publication.

Page numbering: Pages are numbered to ensure smooth reading and are uninterrupted throughout the dissertation.

LIST OF ACRONYMS

The acronyms below are used throughout the dissertation.

ART	Anti-Retroviral Therapy
CASP	Critical Appraisal Skills Programme
CPR	Child Protection Register
CSG	Child Support Grant
CYCC	Child and Youth Care Centre
DoE	Department of Education
DoH	Department of Health
DoJ	Department of Justice
DSD	Department of Social Development
HIV	Human Immunodeficiency Virus
HREC	Human Research Ethics Committee
ICN	Intentional Child Neglect
LPREC	Limpopo Provincial Research Ethics Committee
MDT	Multi-Disciplinary Team
NGO	Non-Government Organisation
NSPCC	National Society for the Protection of Cruelty to Children
NWU	North-West University
PRISMA	Preferred Reporting Items for Systematic Reviews and Meta-Analyses
SA	South Africa
SACSSP	South African Council for Social Services Professions
SW	Social worker
WHO	World Health Organisation

CONCEPTUAL DEFINITIONS

The definitions of key terms used in this dissertation are provided below.

Child: Section 28(3) of the Constitution of the Republic of South Africa Act 108 of 1996 defined a child as any person under the age of 18.

Child neglect: Chapter 1 of the Children's Act 38 of 2005 described neglect as “a failure in the exercise of parental responsibilities to provide for the child's basic physical, intellectual, emotional or social needs”.

Intentional child neglect: Intentional child neglect is the omission in which parents or/and caregivers fail to provide for the development and well-being of their children irrespective of being able to provide the children with basic needs, such as shelter, nutrition, health, education, and emotional support (World Health Organisation [WHO], 2020).

Parent: Persson (2019) described a parent as someone who is a progenitor of the child, such as a mother or/and a father. It also includes a woman or man who takes on parental responsibilities towards a child, e.g., stepparents, adoptive parents, etc.

Caregiver: Chapter 1 of the Children's Act 38 of 2005 defined a caregiver as any person other than the parent or guardian, who cares for the child.

Family environment: Family environments refer to non-institutional and fundamental units within which children's upbringing and care take place, and through the caregivers' guidance their behaviour is learned, encouraged, manifested or suppressed (Mqadi, 2019; Mamaleka, 2019).

Social worker: According to the Children's Act 38 of 2005 a social worker is a professional who is registered or deemed to be registered as a social worker in terms of the Social Services Professions Act 110 of 1978.

RESEARCH OUTLINE

This dissertation is submitted in partial fulfilment of the requirements for completion of the degree, Master of Social Work and is submitted in the form of a manuscript as outlined in the 2020 version of the General Academic Rules (A4.3.3 and A4.10.5) of the North-West University. Below is a brief outline of the sections contained in this dissertation.

Section A: This section consists of two parts. Part 1 begins with an introduction to the study, describing the study's background, with a focus on contextualization and the problem statement, the rationale for the study, the theoretical framework that guided the study, the research aim, questions, and objectives. It also includes a detailed discussion of the methodology, ethical considerations, and the study's trustworthiness. Part 2 of Section A follows with a comprehensive literature review.

Section B: This section consists of two manuscripts written in article format. Firstly, manuscript 1 titled "Exploring predictors of intentional child neglect by parents and caregivers: A scoping review". This manuscript followed Arksey and O'Malley's Scoping Review methodical process. This manuscript is written to meet the requirements of the Child Abuse Research in South Africa (CARSA) journal. Author guidelines can be accessed by following the link: <https://journal.co.za/journal/carsa/submit> or alternatively see [addendum 7](#).

Secondly, manuscript 2 titled "Qualitative exploration on indicators of Intentional Child Neglect by parents and caregivers in Capricorn District: A social work perspective" was compiled. The manuscript followed qualitative approach, and 16 participants were interviewed using semi-structured interview guide. These interviews provided in-depth information about the participants' experiences of intentional child neglect. This manuscript was prepared in accordance with the Journal of Social Work, and author guidelines can be accessed by following the link: <https://journals.sagepub.com/home/jsw> or alternatively see [addendum 17](#).

These manuscripts can be read independently, as each includes its own introduction, follows a distinct methodology, addresses separate objectives, and presents unique findings, discussions, recommendations, and conclusions.

Section C: This section presents the conclusions, limitations, and recommendations of the entire study. It starts with a brief introduction highlighting the aim of the study as well as how the study's objectives were achieved. Thereafter, followed by conclusions emanating from the study

findings, contributions of the study, limitations of the study, recommendations drawn from the study findings, personal reflections, and a combined reference list.

Section D: This section consists of various addendums that form part of this study.

TABLE OF CONTENTS

DECLARATION BY AUTHOR	i
DECLARATION AND PERMISSION TO SUBMIT BY SUPERVISORS	ii
DEDICATION	iii
ACKNOWLEDGEMENTS.....	iv
SUMMARY	vii
NOTE TO EXAMINERS.....	ix
LIST OF ACRONYMS.....	xi
CONCEPTUAL DEFINITIONS	xii
RESEARCH OUTLINE	xiii
SECTION A BACKGROUND TO THE STUDY	1
PART 1 CONTEXTUALISATION AND PROBLEM STATEMENT	1
1.1 RATIONALE FOR THE PRESENT STUDY	1
1.2 THEORETICAL FRAMEWORK	2
1.2.1 Research question.....	3
1.2.2 Research aim	3
1.2.3 Objectives of the study	3
1.3 RESEARCH METHODOLOGY.....	4
1.3.1 Research approach and design	5
1.3.2 Research approach and design used for the scoping review	5
1.3.3 Research approach and design used for the interviews	8
1.3.4 Empirical data collection during semi-structured interviews.....	8
1.3.5 Population and location	9

1.4	Recruitment of participants	11
1.5	Semi-structured individual interviews	12
1.6	Data analysis	12
1.6.1	Data analysis during scoping review and semi-structured interviews.....	13
1.7	ETHICAL CONSIDERATIONS	14
1.7.1	Legal authorization.....	14
1.7.2	Ethical aspects during the interviews	14
1.8	TRUSTWORTHINESS OF THE STUDY	17
1.9	CONCLUSION	18
PART 2	LITERATURE REVIEW	19
2.1	INTRODUCTION	19
2.2	DEFINING CHILD NEGLECT	20
2.3	TYPES OF CHILD NEGLECT.....	20
2.4	INDICATORS OF CHILD NEGLECT	21
2.4.1	Economic factors.....	21
2.4.2	Social factor.....	21
2.4.3	Health factor	22
2.4.4	Cultural factor.....	22
2.5	THE EFFECTS OF CHILD NEGLECT ON CHILDREN.....	23
2.6	LEGISLATIONS THAT ARE GOVERNING CHILD NEGLECT	23
2.7	INTERVENTION STRATEGIES OF INTENTIONAL CHILD NEGLECT	24

2.8	CONCLUSION.....	25
	REFERENCE LIST	27
SECTION B:	MANUSCRIPTS	34
MANUSCRIPT 1:	EXPLORING PREDICTORS OF INTENTIONAL CHILD NEGLECT BY PARENTS AND CAREGIVERS: A SCOPING REVIEW	35
	ABSTRACT	36
	INTRODUCTION AND BACKGROUND TO THE STUDY.....	37
	THEORETICAL FRAMEWORK	40
	METHODOLOGY	41
	Stage 1: Identifying the research question.....	42
	Stage 2: Identifying relevant studies	42
	Stage 3: Study selection	43
	Stage 4: Charting of the data	46
	Stage 5: Collating, Summarizing, and reporting	46
	Stage 6: Consultation	47
	TRUSTWORTHINESS	47
	Quality appraisal for the scoping review	48
	FINDINGS AND DISCUSSIONS OF THE STUDY.....	48
	Theme 1: Predictors of intentional child neglect by parents and caregivers.....	49
	Subtheme 1.1 Health predictors	49
	Subtheme 1.2 Cultural predictors.....	50
	Subtheme 1.3 Social predictors.....	50

Subtheme 1.4 Economic predictors	51
Subtheme 1.5 Biological predictors	51
Subtheme 1.6 Environmental predictors	51
Subtheme 1.7 Educational predictors.....	52
Theme 2: The most noteworthy issues for social workers responding to children affected by intentional child neglect	52
Subtheme 2.1 Issues inherent in understanding intentional child neglect	52
Subtheme 2.2 Family related issues	53
Subtheme 2.3 Social work related issues	53
Subtheme 2.4 Research related issues.....	54
Theme 3: The imperative social work practices for the affected children and their families	54
Subtheme 3.1 Fostering a better understanding of intentional child neglect	54
Subtheme 3.2 Critical support and services for the affected children and their families	55
Subtheme 3.3 Social work methods of intervention to the affected children and their families	55
Subtheme 3.4 Supporting social workers across a continuum of empowerment services.....	56
Subtheme 3.5 Shifting towards the state's responsibility of protecting children.....	56
RECOMMENDATIONS	57
Recommendations for future research.....	57
Recommendations for social work practice.....	57
Recommendations for social work clientele.....	57
LIMITATIONS	58
CONCLUSION	58

REFERENCE LIST.....	59
MANUSCRIPT 2: QUALITATIVE EXPLORATION ON INDICATORS OF INTENTIONAL CHILD NEGLECT BY PARENTS AND CAREGIVERS IN CAPRICORN DISTRICT: A SOCIAL WORK PERSPECTIVE.....	66
ABSTRACT	67
INTRODUCTION	68
PROBLEM STATEMENT	70
THEORETICAL FRAMEWORK	72
RESEARCH METHODOLOGY	73
Research approach and design	73
Study population and location	73
Sampling technique.....	73
Criteria of inclusion	73
Criteria for exclusion	74
Sampling size	74
Recruitment and research process	75
Data collection	76
Data analysis	76
Theme 1: Indicators of Intentional child neglect.....	77
Physical indicator	77
Emotional indicator.....	78
Health indicator.....	78
Financial indicator.....	78

Educational indicator	78
Theme 2: Characteristics of Intentional child neglect	79
The type of intentional child neglect that is eminent in the district.....	79
The most affected group and victims of intentional child neglect.....	80
Crucial role-players in reporting intentional child neglect	80
Factors associated with intentional child neglect within the municipalities of Capricorn	
District.....	81
Theme 3: Impacts of intentional child neglect	82
Impact of intentional child neglect on the child.....	82
Impact of intentional child neglect on the family	82
Impact of intentional child neglect on parent-child relations	82
Theme 4: Commonalities between the reviewed existing literature and social workers’ experiences of intentional child neglect	83
Theme 5: Approaches to alleviate intentional child neglect	83
Suggestions for Children.....	83
Suggestions for parents and caregivers.....	83
Suggestions for social work practice	83
Suggestions for other authorities.....	84
Suggestions for communities	84
CONCLUDING DISCUSSIONS	84
RECOMMENDATIONS	87
Recommendation to social work practice	87
Recommendation to communities.....	88

Recommendation to other authorities	88
Recommendation for future research	88
STRENGTHS AND LIMITATIONS OF THE STUDY	88
Strengths of this study	88
Limitations of this study	88
CONCLUSION	89
REFERENCES LIST	89
PART 3 CONCLUSIONS AND RECOMMENDATIONS.....	96
3.1 INTRODUCTION	96
3.2 RESEARCH AIM AND OBJECTIVES OF THE STUDY	96
3.3 CONCLUSIONS EMANATING FROM THE FINDINGS OF THE STUDY	97
3.3.1 Conclusions of the scoping review as presented in manuscript 1	97
3.3.2 Conclusions of the semi-structured interviews as presented in manuscript 2	98
3.4 CONTRIBUTIONS OF THE STUDY	100
3.5 PERSONAL REFLECTIONS.....	101
3.6 LIMITATIONS OF THE STUDY	102
3.6.1 Limitations of the scoping review (Manuscript 1)	102
3.6.2 Limitation of the semi-structured interviews (Manuscript 2)	103
3.7 RECOMMENDATIONS	104
3.7.1 Recommendations for future research.....	104
3.7.2 Recommendations for social work practice	104

3.7.3 Recommendations for clientele.....100

3.8 POLICY BRIEF 105

3.9 CONCLUDING STATEMENT 106

COMBINED REFERENCE LIST..... 109

SECTION C: ADDENDUMS..... 120

LIST OF TABLES

Table 1-1:	Keywords for literature search.....	6
Table 1-2:	Pre-defined inclusion and exclusion criteria for manuscript 1 (Scoping Review)	6
Table 1-3:	Pre-defined inclusion and exclusion criteria for manuscript 2 (Interviews).....	10
Table 1-4:	Precautionary measures to reduce the risks	17
Table 1-5:	Trustworthiness of the qualitative study	18

LIST OF FIGURES

Figure 1-1: Research design and methods map 4

Figure 1-2: Scoping review methodological framework..... 5

Figure 1-3: Map of the study location 10

Figure 1-4: Reflexive thematic analysis framework..... 13

SECTION A BACKGROUND TO THE STUDY

This section is divided into two parts. Part one begins with the contextualization and problem statement to help the reader comprehend the components and determine the purpose of the study. The rationale of the study is also highlighted. The research question that guided the study is stated, followed by secondary research questions, the aim, and objectives. The methodology followed to carry out the research, trustworthiness, and ethical considerations are also discussed. Part two focuses on the literature review relevant to the phenomenon being studied, in this context intentional child neglect.

PART 1 CONTEXTUALISATION AND PROBLEM STATEMENT

Intentional child neglect is a profound violation of the children's rights, and a societal problem (Kim & Drake, 2023). In 2022, the World Health Organisation (WHO) estimated that approximately 1 billion children worldwide are victims of child maltreatment. Christodoulou et al. (2019); Collings (2015) and Safehorizon (2016) indicate that the majority of these children were reported to be abused by their parents and other caregivers. Studies indicate a rapid increase in child neglect in South Africa (Artz et al., 2016; Burton et al., 2015; Shung-King et al., 2019). In 2015, the Optimus study estimated that 7.9% of children suffered neglect while 21.3% experienced several types of neglect (Burton et al., 2015). These estimates show a notable increase in Intentional Child Neglect (ICN) when compared to the estimations made in 2016 where child neglect ranged from 12.2% to 15.1%.

Limpopo reported the highest incidence of 11.6%, and they were linked to the province's high fertility and poverty levels (Statistics South Africa, 2020). In response to this critical societal issue, many investigations and intervention measures have been developed and implemented (Christodoulou et al., 2019; Rochat et al., 2016). However, these efforts appear to have limited impact. This challenge prompted the researcher to conduct this study. This study focused on intentional child neglect, which according to Wang et al. (2019) is a subtype that receives less attention despite its significant impact on the well-being and development of affected children.

1.1 RATIONALE FOR THE PRESENT STUDY

The literature review revealed a significant gap in research on intentional child neglect, particularly in the Limpopo Province, and more specifically within the Capricorn district. To

address this gap, the study aimed to provide a deeper understanding of this issue. The researcher recognized the need for a comprehensive scoping review of existing literature on the predictors of ICN, as well as the importance of gathering insights from social workers regarding their experiences and the current state of ICN in their respective areas.

Even though social workers have a statutory responsibility to protect children, Mqadi (2019) noted with great concern that social work interventions are misunderstood by caregivers, and to be understood, social workers should consider socioeconomic, cultural, health and other factors, as it will help to rule out whether the neglect is intentional or unintentional and that will enable them to intervene accordingly. For this reason, this research is crucial as it contributed to the development of assessment tools and prevention and intervention strategies relevant to social work practice. The findings from both the scoping review and interviews were contextualised to inform future practice and knowledge.

1.2 THEORETICAL FRAMEWORK

Bronfenbrenner's (1979) Ecological theory of human development and Von Bertalanffy's (1951) systems theory served as the guiding lens of this study. These theories complement each other, probing the interconnectedness between individuals and their environments (Ettetal & Mahoney, 2017; Walker, 2019). The Ecological theory addresses the notion that humans do not exist in isolation but are part of a social system and network that influence each other (Warria, 2018), while systems theory emphasises that humans operate not as isolated individuals but as part of a larger network (Masoga & Shokane, 2018). The child is placed at the centre of these multi-level systems to understand how they interact with and influence the environments they find themselves in. By applying these theories, the researcher was able to conduct a scoping review which was followed by interviews with social workers to gather their experiences and perspectives on intentional child neglect by parents and caregivers in the Capricorn District.

The following systems are proposed by Bronfenbrenner (1979):

Microsystem focuses on the relationship between individuals and their immediate environment. This involves the parents, caregivers, siblings, relatives, etc.

Mesosystem is a system of microsystems, that pay attention to the links that arise between two or more settings. It focuses on how entities can work together to support and protect children. For example, schools, social services, churches, friends, etc.

The exosystem focuses on connections that occur between two or more environments that do not have direct contact with the child, but it has a way of affecting them.

Macrosystem includes social norms, lifestyles, and opportunity structures. For instance, if a society is culturally rooted and believes in mutual aid, they may not see intentional child neglect as a problem because they believe in the collective responsibility of raising children.

The chronosystem focuses on characteristics such as socioeconomic status, family composition, place of residence, genetics, age, gender, and occupation. It focuses on impact of caregiver's socioeconomic status on children. Example: parents leave their children in search of greener pastures.

1.2.1 Research question

The primary research question that guided the study was:

What can be learned from available literature and practice on indicators of intentional child neglect by parents and caregivers?

The secondary research questions of the study are as follows:

- What can be learned from available literature on what predicts intentional child neglect by parents and caregivers?
- What are the perspectives of social workers on the indicators of intentional child neglect by parents and caregivers in Capricorn District?
- What conclusions can be deduced from the findings of the scoping review and semi-structured interviews to inform future practice?

1.2.2 Research aim

The aim of the study was to explore from literature and practice, indicators of intentional child neglect by parents and caregivers.

1.2.3 Objectives of the study

The objectives of the study were as follows:

- To conduct a scoping review of the available research on what predicts intentional child neglect by parents and caregivers.
- To explore and describe indicators of intentional child neglect by parents and caregivers from the perspective of the social worker in Capricorn District.
- To contextualize findings from the scoping review and semi-structured interviews to draw conclusions and make recommendations.

1.3 RESEARCH METHODOLOGY

This section presents the methods that were adopted to carry out this study. It gives an overview of the research design, sampling procedures, data collection strategies and data analysis methods used in this study. The illustrated figure outlines methodologies for both manuscripts.

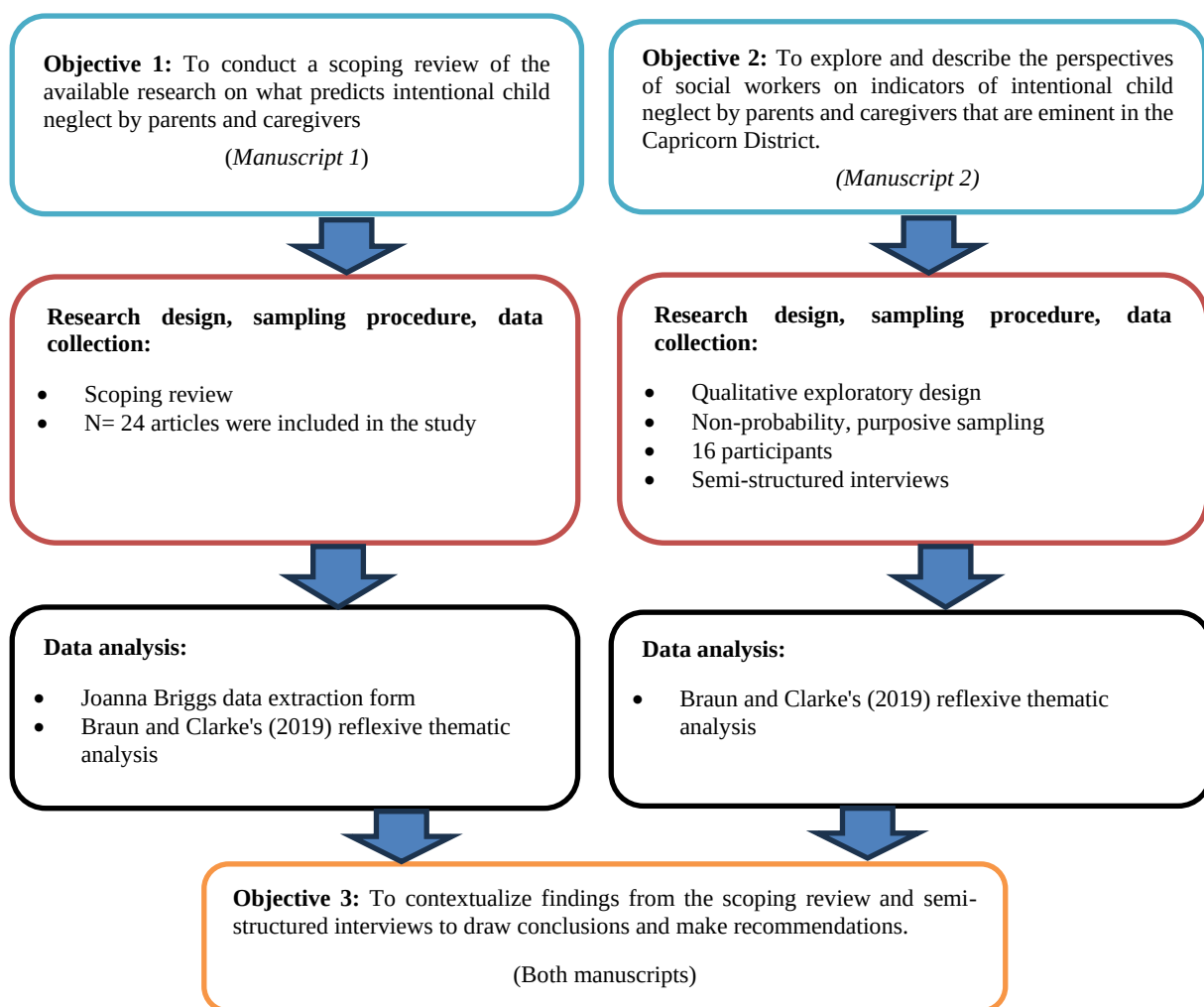


Figure 1-1: Research design and methods map

1.3.1 Research approach and design

Creswell and Creswell (2018) described a research design as a plan of how to go about addressing research questions. Adding to this definition, Yin (2016) outlined that designing a study helps the researcher plan and implement the study in a way that will be beneficial in obtaining the intended results, thus increasing the chances of obtaining information that could be associated with the real problem.

To answer the primary research question, the study is comprised of two manuscripts. Firstly, a scoping review (*Manuscript 1*) was conducted to summarise and identify gaps in studies related to predictors of intentional child neglect by parents and caregivers. Thereafter, semi-structured interviews (*Manuscript 2*) were used to carry out stage six of the scoping review whereby social workers were asked questions based on the findings of the scoping review as well as their experiences on indicators of intentional neglect in their field of practice.

1.3.2 Research approach and design used for the scoping review

A scoping review aims to synthesise the existing literature and identify the gaps of what have not yet been done (Arksey & O'Malley, 2005; Khalil et al., 2016). The scoping review was deemed suitable for the study as it allowed the researcher to synthesise the current literature on intentional child neglect. The researcher opted for a scoping review in order to identify the existing gaps that will allow the formulation of possible recommendations for future research. The researcher followed Arksey and O'Malley's (2005) framework as a guiding lens of the process.

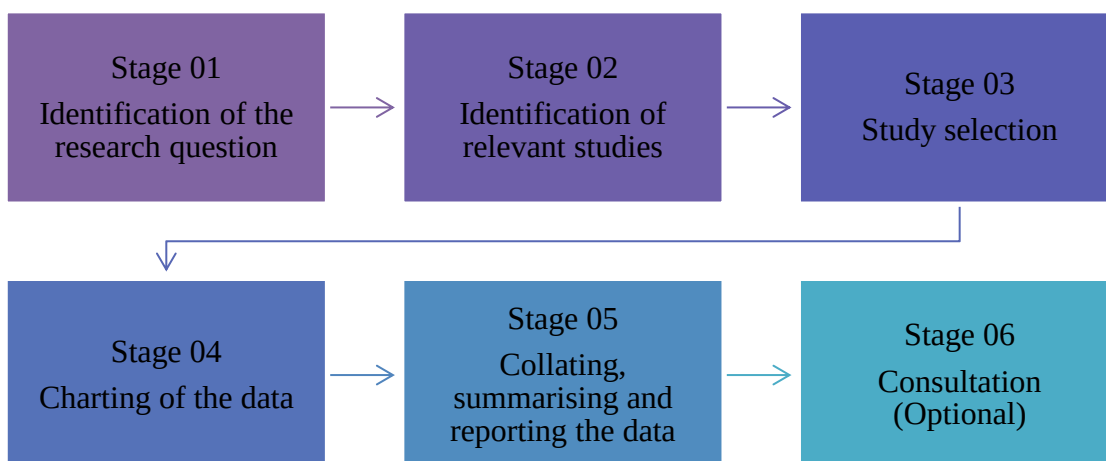


Figure 1-2: Scoping review methodological framework Arksey and O'Malley (2005)

Stage 1: Identification of the research question

Arksey and O'Malley (2005) and The Joanna Briggs Institute (2015) posit that identification of the research question is the first phase that assists in the development of the protocol, facilitates the effectiveness of the literature search, and it gives a clear structure for the preparation of the scoping review. The research question that needs to be answered by the study was identified as the first step of the scoping review, and it is as follows: *What can be learnt from available literature on what predicts intentional child neglect by parents and caregivers?*

Stage 2: Identification of relevant studies

As stated by Arksey and O'Malley (2005), for the research question to be answered, the researcher needs to identify methods that will be used to conduct a literature search comprehensively. To ensure that the research question is addressed, the researcher made use of the following databases to search studies associated with the phenomenon under study: EBSCOhost, APA PsycINFO, APA PsycArticles, Academic Search Complete, SocINDEX, and Sabinet. The following are the keywords used in data search.

Table 1-1: Keywords for literature search

“Intentional child neglect” OR “indicators of intentional child neglect” OR “child neglect”
AND
Parent+ OR caregiver+
AND
“Social workers” OR “social workers perspectives”

Stage 3: Study selection

Khalil et al. (2016) and Arksey and O'Malley (2005) point out that the researcher needs to analyse the information gathered from the literature search in order to keep the review focused as the literature search may produce many irrelevant sources. They further stated that the researcher should highlight both inclusion and exclusion criteria. To ensure that the selection of the studies remain focused, the following inclusion and exclusion criteria were used:

Table 1-2: Pre-defined inclusion and exclusion criteria for manuscript 1 (Scoping Review)

Inclusion criteria	Exclusion criteria
Studies that focus on child neglect	Non-English studies were excluded because of factors such as costs, time, use of translators, as well as keeping

Inclusion criteria	Exclusion criteria
	literature search focused. Non-English will only be included once the translated copies are made available.
Literature from the year 2014-2023, this is to ensure that extensive literature review was undertaken and the information is up to date.	Grey literature
Policies and legislations governing child neglect	Non-peer reviewed studies
Published research articles	Information from social media platforms
Masters and PhD dissertations	Conference proceedings, they were not included because they are not peer reviewed

Stage 4: Charting of the data

According to Arksey and O'Malley (2005), focusing on the purpose of the scoping review will enable the researcher to decide and select important information. For this study, the researcher utilised data charting table which recorded important information from the reviewed literature and compiled the findings. The table was used to populate the following information: Author, year, title, country, research approach, methods, indicators of intentional child neglect, interventions, outcomes or challenges. Articles that meet the inclusion and exclusion criteria were searched from the identified databases. To ensure neutrality in the analysis process, a co-coder was used in this study. The co-coder was an independent person who also helped get participants' informed consent, but she did not actively participate in the study.

Stage 5: Collating, summarising and reporting the results

Reflexive thematic analysis process was used to analyze the findings, it looked deeper into the patterns and themes from the collected data, and it involves the following steps: the researcher's familiarization with the collected data; generating initial codes; searching for themes; reviewing themes; defining and naming themes; and producing the report (Braun and Clarke, 2019). The researcher and independent co-coder followed the same procedure during which codes and themes were discussed and agreed upon. The results of the scoping review are presented in manuscript 1.

Stage 6: Consultation (Optional)

According to Khalil et al. (2016) and Arksey and O'Malley (2005), this phase involves consulting other stakeholders to gather additional information, meaning, and applicability. Although this stage is optional (Khalil et al., 2016), it was carried out. Semi-structured interviews were used to obtain the social workers' perspectives on intentional child neglect, what has been

observed and done in their districts in terms of intentional child neglect, and how the findings of the scoping review can add to and improve social work practice.

1.3.3 Research approach and design used for the interviews

The study adopted a qualitative research approach. Creswell and Creswell (2018) describe qualitative research as a type of research in which data is collected in the form of words, pictures, descriptions, and narratives, and it allows participants to share their views and experiences. Studies found that information about child neglect is and remains insufficient (Friedman & Billick, 2015; Wang et al., 2019). Therefore, qualitative exploratory research was deemed suitable as it gave the researcher an opportunity to be closer to the participants and gather information which resulted in a better understanding of the phenomenon. However, the findings of this study will not be generalized as this study only focused on a small number of social workers in one district. The paradigm was deemed suitable for the research because the study was aimed at exploring views, notions and involvements of social workers pertaining to intentional child neglect. Moreover, Denzin and Lincoln (2018) add that researchers utilize qualitative research paradigm to conduct exploratory studies.

The study adopted an interpretive phenomenological design as it seeks to understand the world from the participant's point of view (Qutoshi, 2018). Furthermore, the interpretivism paradigm recognizes that reality is socially constructed and context-dependent, emphasizing the subjective meanings that people ascribe to their experiences (Butts & Rich, 2018).

The researcher used this design to explore the viewpoints and insights of social workers, and it resulted in better understanding of their experiences regarding intentional child neglect in the social work field. This design was deemed suitable as the study seeks to explore social workers' perspectives on indicators of intentional child neglect by parents and caregivers, and only social workers who are dealing with child neglect cases within Capricorn District were considered as they serve as key informants and first respondents of child neglect cases. Given the high rate of child abuse and neglect in this province (Statistics South Africa [Stats SA], 2020) and the scarcity of research findings in the Capricorn District, it seemed appropriate to examine social workers who work in the district.

1.3.4 Empirical data collection during semi-structured interviews

This section focuses more on population, sampling procedures including criteria for

inclusion and exclusion as well as data collection method. Pope and Mays (2020) described data collection as a way of gathering data, which is done by asking the participants to express their views directly; it could be in the form of interviews, questionnaires or focus groups.

1.3.5 Population and location

A population refers to a group of individuals or entities that the researcher will be gathering data from (Pope & Mays, 2020). Stages one up to five of the scoping review did not need human participants as the researcher focused more on available scientific literature; then stage six was carried out using semi-structured interviews and it used human participants. Population for this stage was social workers employed by the Department of Social Development and Non-Government Organisations (NGO) in the Capricorn District, such as Ngwana House, ChildLine, St Joseph's Children of Charisma, and Save the children. Since the researcher was interested in exploring indicators of intentional child neglect from social workers' perspectives, only social workers who are or have handled cases of child neglect in the Capricorn District were considered for the study. Social workers are experts in the child protection field. According to Stats SA (2020), Limpopo Province is overwhelmed by various social issues such as poverty, unemployment, substance abuse, socio-cultural beliefs and practices, and high fertility rates, hence the researcher was prompted to conduct the study within the area.

Intentional child neglect is common across the globe, but the reviewed literature showed that few research examined this phenomenon. Despite the high prevalence of intentional child neglect in Limpopo Province (Artz et al., 2016), none of the reviewed studies was conducted in the province, especially the Capricorn District. The goal of this study was to close the gap. Capricorn District is situated in Limpopo Province, and during the engagements with DSD the researcher discovered that due to its vastness, the district was segregated into six local municipalities, namely Polokwane-Seshego municipality, Polokwane-Ceres municipality, Polokwane-Mankweng municipality, Lepelle-Nkumpi municipality, Molemole municipality, and Blouberg municipality. The researcher wanted to include DSD and the NGO sector in the study. Unfortunately, only DSD and two NGOs responded positively to the request; other NGOs did not show interest in forming part of the study.

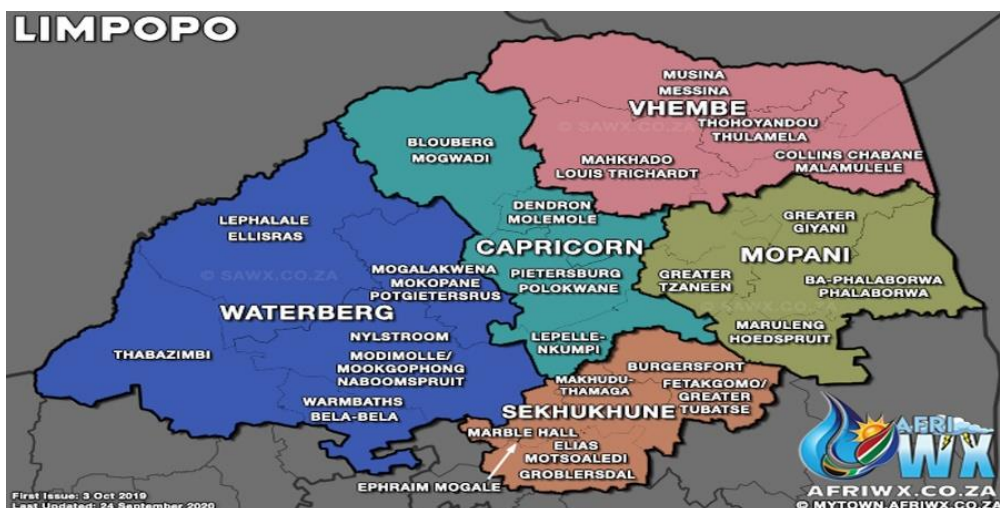


Figure 1-3: Map of the study location

Retrieved from <https://mytown.afriwx.co.za>

Sampling

Sampling is conducted according to the type of study, and it can be done in different ways (Haenssger, 2019). The researcher adopted a non-probability sampling method with purposive sampling as a subtype to select participants. Babbie (2016) described purposive sampling as a process of selecting units based on the researcher's judgment in association with answering the study's research questions. Haenssger (2019) further highlighted that the majority of qualitative research follows non-probabilistic sampling methods as they allow researchers to easily generate enormous amounts of data from a small scale of interviews. The researcher selected participants based on the purpose of the study, and their ability to provide rich and in-depth information about the subject under study (Tolley et al., 2016). This task was carried out in collaboration with mediators.

Table 1-3: Pre-defined inclusion and exclusion criteria for manuscript 2 (Interviews)

Inclusion criteria	Exclusion criteria
Social workers employed by DSD and other NGOs such as Ngwana House and St Joseph's Children of Charisma in the Capricorn District.	Social workers who are not working with children.
Social workers currently registered with the South African Council for Social Services Professions (SACSSP).	Student social workers
The researcher considered both male and female social workers.	Social work supervisors were excluded due to the following reasons: (1) despite being knowledgeable, they do not/have less direct contact with the clients, (2) their roles are more administrative and are not in a position to observe family dynamics and interactions

within the home environment, (3) they rely on information provided by social workers, therefore excluding them minimises potential information loss as they do not possess the firsthand knowledge of the nuanced indicators of intentional child neglect.

Social workers with at least 3 years work experience with child neglect cases, as this ensured enough information was contributed to the study (Van Westrhenen et al. (2017) highlighted that social workers with more years of service are likely to provide rich information.

Sampling size

Mocanasu (2020) state that there are no hard rules that govern the researchers on sample size. However, the sample size's appropriateness should be the matter of judgement by the researcher. Mocanasu (2020) further explained that the sample size can be 10 units if the purpose of the study is to explore the most relevant ideas or more units if the study aims at exploring a broader range of ideas. Creswell and Poth (2018) suggested five to twenty-five participants as an adequate sample size for phenomenological studies. Creswell further stated that even though it is common for phenomenological studies to have a small sample size, the researcher may keep adding participants until saturation to fulfil the study goal. Sixteen (16) participants were recruited to form part of the study. Participants from all local municipalities and NGOs within Capricorn District were recruited to ensure district coverage. But only few NGOs and four local municipalities responded and participated in the study. The researcher reached data saturation because when interviewing the fifteenth participant, no new data was emerging. However, the researcher stopped the interviews on the sixteenth participant.

1.4 Recruitment of participants

Neuman (2017) stated that every site has gatekeepers, and it is of paramount importance for the researcher to identify and negotiate access with them. Permission was obtained from both the provincial office of DSD and the NGOs. The gatekeepers were heads of department at DSD and managers from the NGOs, and they were requested to provide the researcher with permission to conduct the study in their organizations. The requests for permission were done via emails, and follow-up calls were also made.

The gatekeepers were also requested to nominate a mediator who worked collaboratively with the researcher on the recruitment process. The mediators were responsible for sharing information about the study such as the researchers intend to conduct the study, purpose of the

study, what participation entails, as well as linking the potential participants with the researcher and independent person. Social workers who showed interest in knowing more about the study were advised to contact the researcher. The researcher was responsible for furnishing the participants with information which includes the aim, objectives, and the importance of the participants' participation, the risks, and advantages of participating as well as the procedures to be followed during the research. This enabled the participants to know exactly what they were getting themselves into by forming part of the study as participation was voluntary. Those who were interested in forming part of the study informed the independent person who was responsible for facilitating the signing of the informed consent forms. The participants were allowed to contact the researcher whenever they needed clarity or had questions about the study.

1.5 Semi-structured individual interviews

A semi-structured interview schedule was used to obtain the participants' perspectives and inputs on what have been observed and done in terms of intentional child neglect, and how the findings of the scoping review can be used to add and improve their practice. The interviews were conducted in English as all participants were professional and able to communicate in English, therefore interpreters and translators were not needed. The participants were asked the same series of questions based on the findings of the scoping review, and their experience about indicators of intentional child neglect perpetrated by parents and caregivers.

The participants were given an opportunity to respond based on their experiences while the researcher was writing the responses down. During the interviews, the researcher used audio recording as well as taking field notes to record the participants' responses, which were used for data analysis purposes. The participants consented in writing to the use of audio recording, and they were allowed to withdraw from the study at any stage. The audio recordings were sent to the researcher's laptop immediately after the interviews and they were saved in a password protected folder. The duration of the interviews ranged between 45 minutes to 1 hour, they were conducted at the convenience of the participants' places and time. The interviews were guided by 7 questions (see [addendum 16](#)).

1.6 Data analysis

Both manuscripts followed Braun and Clarke's (2019) reflexive thematic analysis to analyse the collected data.

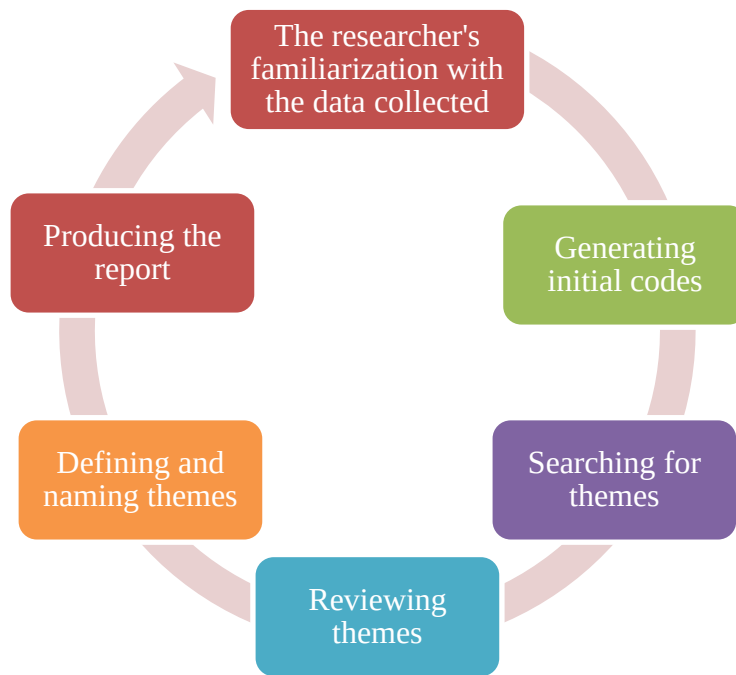


Figure 1-4: Reflexive thematic analysis framework

Braun and Clarke (2019)

1.6.1 Data analysis during scoping review and semi-structured interviews

Data was extracted using the Joanna Briggs data extraction form for the scoping review. The extracted data was then analysed using Braun and Clarke's (2019) reflexive thematic analysis, which allowed for a systematic identification and interpretation of key themes within the literature. Since interviews were also used to carry out stage 6 of the scoping review, reflexive thematic analysis was adopted for its accessibility and flexibility when analysing qualitative data. Braun and Clarke (2019) described reflexive thematic analysis as a method that highlights the researcher's active role in knowledge production, was used to reflect reality and to unpick or unravel the surface of the reality. This method is also considered to be the most useful research tool that can provide rich and detailed data, which is something that the researcher was interested in.

An independent co-coder was used for objectivity purposes. She followed the same process which was then followed by a discussion of categories, preliminary themes and sub-themes as well as finalization and compilation of a report. The findings of the study were presented as follows: scoping review in manuscript one; and semi-structured interviews in manuscript two.

1.7 ETHICAL CONSIDERATIONS

1.7.1 Legal authorization

Legal authorization to conduct the study was obtained from the Health Research Ethics Committee (HREC) of North-West University with ethics number: **NWU-00150-23-A1**, and the Limpopo Provincial Research Ethics Committee with ethics number: **LPREC/150/2023: PG**. Permission letters were also obtained from the participating organizations, which are Ngwana House, and St Joseph's Children of Charisma.

1.7.2 Ethical aspects during the interviews

Obtaining informed consent

Informed consent is an integral part of ethics as it provides the participants with comprehensive information about the study (Dobrick et al., 2018). The participants were required to sign an informed consent form prior to data collection. A Master of social work graduate was asked to act as an independent person to facilitate the signing of the informed consent. She was deemed suitable for this task as she has completed her ethics training. Since she was working with all the municipalities, she shared the form with the participants by email, and the participants were also expected to return the signed forms to her via email. This was done to allow the participants privacy.

The participants were provided with the informed consent (see [addendum 13](#)) forms a week prior the signing of the forms. They were allowed to familiarise themselves with contents of the form so that a well-informed decision can be made. After the signing of the informed consent, the independent person forwarded the signed forms to the researcher by email. Upon receiving the signed informed consent forms, the researcher contacted the participants to schedule appointments for data collection and share the summary of the findings of the review, and interview guide. This was done one week prior the commencement of the interviews. These appointments were done telephonically and through email communication.

Confidentiality, privacy, and anonymity

To ensure *privacy*, interviews were conducted in the participants' offices and those who did not feel comfortable being interviewed in their offices were allowed to choose a location that was convenient and conducive for the interviews. These chosen locations were close to the

participants' workplaces, eliminating the need for travel and thereby reducing any potential financial burden. The interview locations were private and non-threatening.

Since using participants' names may put them at risk, the researcher observed the principle of anonymity at all costs. To ensure *anonymity*, the participants' names and workplaces were not used in the notes and recordings. Pseudonyms such as Participant A were used to label the participants and reference their responses.

Confidentiality involves making sure that the data collected from the participants is not published in a way that can be linked with them (Monette et al., 2014). The participants were assured of *confidentiality* prior the commencement of the interviews, they were made aware that their responses will remain confidential, will not be shared with anyone, and only the researcher and research supervisors will have access to the data.

Recording interviews

The participants consented to the use of audio recording in writing. The recordings were removed from the recorder immediately after the interviews, they were stored in a password-protected folder on the researcher's laptop, and only the researcher, co-coder, and the supervisors were able to access and look into the findings.

Voluntary participation

Participation was voluntary and the participants were not forced to participate in the study. The researcher also informed them that they can withdraw from the study at any stage. This was also stipulated in the informed consent form that the participants signed before taking part in the study.

Dissemination of results

Upon completion of the study, a summarized report of the findings was shared via email with all participants, i.e., the District Director of the Department of Social Development and managers of all NGOs that formed part of the study. Published articles were made available to all the participants. Virtual meetings were held with mediators, independent people and the counsellor involved to provide individual feedback on the results of the study.

Conflict of interest

There was no conflicting interest between the researcher and the participants, mediators and the independent person. The researcher works as a social worker at The Aurum Institute (NGO) in Ehlanzeni District, Mpumalanga Province. The independent person is working as a social worker at South African Police Services (SAPS) in Sekhukhune District, Limpopo Province. Therefore, there was no bias or coercion of participants as they did not know each other.

Incentives/ reimbursement

The participants did not incur any economic harm because the interviews were conducted in the comfort of their workspace. They did not have to travel, instead, the researcher travelled to the interview locations, therefore there was no transport reimbursement for the participants. However, the researcher provided the participants with snacks and water after the interviews as a courtesy for their participation and time spent. They were provided with 1 Gigabyte of data for the internet as they were receiving and sending informed consent forms to the independent person as well as receiving an interview guide from the researcher.

Storage and archiving of data

Data collected from the participants was kept in a safe place. No files, interview transcripts, and recordings were left lying around the office. They were kept in a lockable cabinet and password-protected computer files. After completion of the study, the recorded data (scripts) will be stored for a period of five years in a lockable safe at the Centre of Child, Youth and Family Studies at NWU, and it will be destroyed by the center manager following the policies and guidelines of the university.

Risk level of the study

The risk level of the study is minimal, as data was not obtained directly from the children and caregivers affected by neglect. Human participants participated during data collection, and were protected through adherence to research ethics. The participants were professionals, and the questions were based on expertise and experience in their field when dealing with child neglect cases. The following risks were observed:

Table 1-4: Precautionary measures to reduce the risks

Type of risk	Precaution
Economic harm E.g., financial distress due to travelling expenses, airtime and data purchases for the purpose of the study.	The researcher made sure that the participants do not spend their money to participate in the study by travelling to the areas where the interviews were conducted. Therefore, they had no expenses.
Physical discomfort E.g., Fatigue due to sitting for the duration of the interview	The interview guide consisted of few questions, the duration of the interview was between 45 minutes and 01 hour. The participants were allowed 05 minutes of leg stretching break whenever they felt tired of sitting.
Psychological harm E.g., Emotional discomfort or distress as participants recall negative events they have experienced when handling child neglect cases.	The participants were provided with the interview guide prior the commencement of the interviews and the researcher made sure that she only asks the questions that are on the guide to avoid inconveniencing them. A registered counsellor/ social worker was on standby to provide counselling to the participants whenever needed, but none of them needed this service.

1.8 TRUSTWORTHINESS OF THE STUDY

Nowell et al. (2017) described trustworthiness as “pragmatic choices for researchers concerned about the acceptability and usefulness of their research for a variety of stakeholders”.

Scoping review (*manuscript 1*)

The quality appraisal of the scoping review was done using the Critical Appraisals Skills Programme (CASP) tool, and two Joanna Briggs Institute (JBI) appraisal tools (1) for systematic reviews (Aromataris et al., 2015), (2) for qualitative studies (Lockwood et al., 2015). The review was conducted by the researcher and verified by the supervisors. These tools were deemed suitable because they are used for systematic reviews, cohort studies, Randomised Controlled Trials, diagnostic studies, qualitative studies etc. The researcher utilised the tools with differing number of questions, then the supervisors verified the review to ensure good quality of the review and alleviate biasness, this was followed by a discussion that helped both the researcher and supervisor to reach a consensus. Each study was scored separately. The first two questions of the tool were screening questions, they were answered instantly, and the answers determined whether to proceed with the remaining questions. When both answers were yes, the researcher proceeded to the next questions.

Semi-structured interviews (*manuscript 2*)

Trustworthiness enabled the researcher to meet the credibility, transferability, dependability and confirmability of the study. Lincoln and Guba's (1985) framework was adopted. The following table illustrates standards, strategies, and how these strategies were applied to ensure trustworthiness:

Table 1-5: Trustworthiness of the qualitative study

Epistemological standards	Strategies	Application
Trust value	Credibility	The researcher addressed the credibility of the study through prolonged engagements, peer debriefing, member checking, and persistent observation. Since the researcher aimed at conducting one interview per participant, prolonged engagement was ensured by allocating enough time per session. The participants consented to the use of a writing pad and voice recorder to record their responses during the interviews with the researcher. Member checking was done by sending the findings and interpretations for refinement to the participants prior the compilation of the final report. To ensure the researcher's objectivity, a co-coder was used when analysing data to check if collected data and the researcher's interpretations are sound and confirmed.
Consistency	Dependability	To ensure dependability, the researcher provided a thorough blueprint of how the study was carried out. This includes selection and recruitment of participants, field notes, voice recordings, and data analysis. The process followed was well developed, clear, documented and revised by both supervisor and co-supervisor.
Applicability	Transferability	Transferability was ensured by providing a thick description of the process followed, participants involved as well as the background of the study. Participants were purposefully selected to ensure that rich data was collected, and produce thick description of the findings that can be transferred to other studies.
Neutrality	Confirmability	The researcher was objective and acted in good faith, the researcher's personal values and beliefs did not interfere with the findings of the study and this was achieved by having a co-coder, avoiding emotive language, and focusing on facts and data. This was clearly stipulated. The researcher declared that she has no conflict of interest with the participants, gatekeepers, mediators, and the independent person. The processes followed were well documented, and all transcripts and audio recordings gathered during the course of the study are kept in a safe place and can be made available when needed for audit purposes.

1.9 CONCLUSION

Part 1 provided an outline of the study. It highlighted the background, relevance and justification of the study, research aim, research questions and objectives. It also elucidated the

contextual elements and the problem statement. It also provided clarity on why the study was conducted using two methods, scoping review and semi-structured interviews. Furthermore, it highlighted methodology that was followed to carry out this study, and ethical principles observed to ensure protection of everyone involved in the research. Following this, part 2 presents the reviewed literature for the study.

PART 2 LITERATURE REVIEW

This section serves as an introduction to the literature review, providing a comprehensive examination of existing research related to the study. It aims to contextualize the topic within the broader field of study, identifying key themes, trends, and gaps in the literature. The review focuses on relevant theoretical frameworks, empirical studies, and critical debates that inform the understanding of intentional child neglect by parents and caregivers.

2.1 INTRODUCTION

Intentional child neglect is a serious human rights violation and a worldwide social issue affecting people of all socio-economic backgrounds (Svard, 2017). Schmidt and Azzi-Lessing (2020) argue that there has been a recent increase in awareness of child abuse, but most efforts have focused on publicizing and raising awareness of child sexual and physical abuse while disregarding intentional child neglect. Burton et al. (2015) asserts that information about the extent of intentional child neglect is inadequate. For this reason, child neglect and intentional child neglect will be used interchangeably. There is no distinction between the negative effects of intentional and unintentional child neglect on children. Child neglect is not a discrete category of harm; rather, it is a spectrum that includes both intentional and unintentional acts without a clear distinction between the two. However, by focusing on situations in which caregivers intentionally and consciously fail to provide for a child's basic requirements, the idea of intentional child neglect helps to expand and improve conversations about neglect. Additionally, estimates of child abuse vary greatly, and its rates differ among countries due to socioeconomic status, differing methods, and definitions used in studies (Svard, 2017).

2.2 DEFINING CHILD NEGLECT

The World Health Organisation (WHO) (2020) defines child neglect as the omission in which parents or caregivers fail to provide for the development and well-being of their children. It further stipulates that those parents and caregivers are intentionally neglectful towards their children when they fail to provide for their educational, nutritional, shelter, health, and emotional needs regardless of having the means and being able to do so. For instance, failing to accompany a sick child to the clinic to seek medical assistance, to enroll a child in school, and leaving children playing unattended in places that can put their lives in danger. Adding to this definition, Chapter 1 of the Children's Act 38 of 2005 described child neglect as a failure in the exercise of parental responsibilities to provide for the child's basic physical, intellectual, emotional or social needs.

2.3 TYPES OF INTENTIONAL CHILD NEGLECT

Intentional child neglect is a broad term, and within this broad term the following types were distinguished: emotional neglect, physical neglect, medical neglect, educational neglect, supervisory neglect, and selective neglect.

- **Emotional neglect** refers to the caregiver's failure to provide warmth, support, and encouragement to the child (Berube et al., 2017).
- **Physical neglect** involves the caregiver's failure to provide the child with basic needs, such needs include clothing, food and healthy living conditions (Zeanah & Humphreys, 2018).
- **Medical neglect** refers to the caregiver's failure to pay attention to the child's medical needs, such needs include accompanying the child to the health facility whenever the child is sick or require medical attention for disorder or disability (Wang et al., 2019).
- **Educational neglect** is characterised by the caregiver's failure to send the child to school or provide supportive educational opportunities for the child (Van Wert et al., 2018).
- Mqadi (2019) adds **supervisory neglect**, which involves the caregivers' inability to provide the child with adequate supervision or failure to ensure safety from dangerous situations.
- Furthermore, Schmidt and Azzi-Lessing (2020) added **selective neglect** which is characterized by a caregiver's inability to meet a child's requirements due to the child's gender or health issues, such as children with disabilities or HIV.

2.4 INDICATORS OF INTENTIONAL CHILD NEGLECT

Research has shown that intentional child neglect stems from a variety of contributing factors (Damian et al., 2019; Friedman & Billick, 2015; Moalosi, 2019; Schmidt & Azzi-Lessing, 2020). The following indicators were found to be associated with intentional child neglect: economic factors, health factors, social factors, and cultural factors.

2.4.1 Economic factors

The majority of South Africans live in poverty, primarily due to increasing levels of unemployment and significant wage disparities. Children are particularly vulnerable in this context, as many parents are forced to move to cities in search of better job opportunities and improved living conditions for themselves and their families. This migration often leads to disruptions in family structures and support systems, leaving children without the necessary care and protection. As a result, children become the most affected group, facing increased risks of neglect and inadequate access to basic needs (Schmidt & Azzi-Lessing, 2020). According to Moalosi (2019), poverty-stricken families experience many challenges that limit their ability to foster positive developmental outcomes in their children, such challenges include material deprivation, poor educational skills, physical and mental ill health, and poor access to basic services. Inversely (WHO, 2020) outlined that intentional child neglect is when parents and caregivers are able and have the means to provide for their children but choose not to do so. Hall and Sambu (2018) add that in some cases parental absence cannot be seen as neglect because some parents provide support to their children even when they are not living together. Hence, it was crucial to explore the indicators associated with intentional child neglect to rule out whether it is intentional or unintentional.

2.4.2 Social factor

Apart from poverty, Shung-King et al. (2019) found that parental absence in South Africa is related to various factors, including lack of housing and educational opportunities, labour migration, customary care arrangements, low marriage, and cohabitation rates. Friedman and Billick (2015) added parental stress, drug and alcohol abuse by parents as some of the factors associated with ICN. Hesselink and Booyens (2016) alluded that interpersonal relationships have a strong influence on the upbringing and well-being of the children, such relationships include parent-child relationships, relationship between both parents, relationship between parents and other relatives. They further outlined that children raised in families with strong bonds are less

likely to experience neglect as compared to the ones in dysfunctional families. Family structure, number of children in the family, and other social problems unable parents to be emotionally fit to meet the needs of their children (Songca, 2016).

2.4.3 Health factor

Sciarrino et al. (2018) identified physical injury, poor hygiene, inappropriate height or weight, inappropriate clothing, and failure to attend school as indicators of intentional child neglect requiring urgent attention. HIV had significant contrition to the neglect, Damian et al. (2019) add that another reason why relatives are raising children is the high burden of HIV/AIDS, especially when a parent dies. Stats SA (2020) confirms this articulation by estimating 7.8 million as the rapid increase in the number of South Africans living with HIV as compared to 3.8 million in 2002.

2.4.4 Cultural factor

In South Africa, child-rearing experience and knowledge are shaped by culture and socialisation (Moalosi, 2019). As such, beliefs, cultural norms, and family values must be considered when dealing with or explaining intentional child neglect. Friedman and Billick (2015) note that parents tend to believe that they are acting in the children's best interest based on their cultural beliefs. In South Africa, it is uncommon for fathers to be denied access to their children due to reasons such as marital status or the failure to pay damages (Mabetha et al., 2021). To address this issue, the Children's Act 38 of 2005 made a provision for the best interests of the child and recognizes the equal rights and responsibilities of both parents, regardless of marital status. Regulation 35 of the Children's Act emphasizes the value of the child's right to continue having relationships with both parents, regardless of cultural or personal conflicts. It also requires that any limitations on a father's access to the child, particularly those based on marital status or the payment of customary damages, be carefully examined by the court to make sure the child's best interests are maintained. However, Ringson (2019) and Rochat et al. (2016) found that people attach great value to their cultural beliefs and practices, therefore, they tend to overlook human rights and follow their cultural values. Also, Damian et al. (2019), Mabetha et al. (2021), and Mamaleka (2019) indicate that South Africans are guided by *Ubuntu's* humanist principles that encourage society to take collective responsibility in raising children.

Hall and Sambu (2018) highlight that in the South African context, the obligations of parenting and socialization are not limited to a child's biological parents but also extend to other

relatives. Schmidt and Azzi-Lessing (2020) theorize that the high level of Africans' mutual assistance weakens the applicability of the intentional child neglect concept. Thus, intentional child neglect that occurs within a family becomes difficult to detect and report, and in most cases, identification and reporting of child abuse rely heavily on settings outside the family, such as educators, neighbours, and health professionals (Christodoulou et al., 2019).

2.5 THE EFFECTS OF INTENTIONAL CHILD NEGLECT ON CHILDREN

Intentional child neglect has negative impacts with lasting repercussions more so than any other form of maltreatment (Friedman & Billick, 2015; Van Westrhenen et al., 2017; Wang et al., 2019). Unlike other types of abuse, the effects of neglect often remain hidden but can significantly impair a child's physical, emotional, and cognitive development. Research has found the effects of intentional child neglect to be less visible than those caused by physical abuse, and that neglected children may experience impaired social skills, delayed cognitive development, poor school performance, and impaired emotional nurturing (Schmidt & Azzi-Lessing, 2020; Sciarrino et al., 2018; Wang et al., 2019; Westrhenen et al., 2017).

Furthermore, Kaawa-Mafigiri and Walakiri (2017) outline that the effects of intentional child neglect are likely to persist into adulthood, such as relationship difficulties, attachment disorders, and cognitive deficits that may lead to the inability to make moral decisions. Songca (2016) speculates that the neglect of a child may have a lasting impact, increasing the likelihood that the child could perhaps turn into an abuser. Supporting Songca, studies found that majority of abusive parents were raised in dysfunctional households, whereby they were subjected to neglect, incest, physical abuse, and a general lack of affection (Finzi-Dottan & Harel, 2014; Hesselink & Booyens, 2016; Voorthuis et al., 2014). This conclusion is congruent with the findings of Artz et al. (2016), who discovered that intentional child neglect in one generation frequently leads to intergenerational abuse. Their research suggests that children who experience neglect are at a higher risk of replicating similar patterns of neglect or other forms of abuse in their parenting, perpetuating a cycle that affects multiple generations.

2.6 LEGISLATIONS THAT ARE GOVERNING INTENTIONAL CHILD NEGLECT

Statistics South Africa (2020) estimated a total population of 59.6 million with 5.9 million people living in Limpopo. Of this population in Limpopo, the highest proportion 39.21% consists of children below the age of 15. Shung-King et al. (2019) noted that 20% of South African children do not live with their biological parents, and Mabetha et al. (2021) add that these children

have a greater likelihood of not being raised in a nuclear family when compared to other countries. It was noted that 65% of the children who did not live with their biological parents majority live with grandparents, mostly grandmothers, 17% with aunts, 6% with other relatives, and 1% with a non-relative. This supports the provision that was made by Section 28 (1) of the Constitution of the Republic of South Africa 108 of 1996 endorsed by Section 7 of the Children's Act 38 of 2005 that recognizes the family as the first and best institution for socializing and nurturing children through parental guidance.

South Africa has laws promoting the protection of children, such as and Children's Act 38 of 2005, Maintenance Act 99 of 1998, Domestic Violence Act 116 of 1998 and Children Amendment Act 41 of 2007. Apart from the rights that are afforded every South African citizen, children have their rights specifically tailored for them. The children's rights are enshrined in Section 28, subsection 1(d) of the Constitution of the Republic of South Africa 108 of 1996, which amongst others states that every child has the right to protection from maltreatment, neglect, abuse, and degradation.

2.7 INTERVENTION STRATEGIES OF INTENTIONAL CHILD NEGLECT

In addressing the intentional child neglect dilemma, the Children's Act compelled the Department of Social Development [DSD] to shift from tertiary interventions to primary interventions. Both the Children's Act and DSD Framework for Social Welfare Services (2011) promote the comprehensive provision of services to marginalised populations, including children. They emphasize the need to shift from secondary interventions that are conducted after harm has occurred toward primary interventions which are proactive and preventive measures. This shift is crucial in dealing with intentional child neglect. Supporting this effort, the Revised White Paper on Families (2021) made a call for South African parents and caregivers to be granted access to programs and services that will enable them to excel in caregiving. To ensure effective implementation of the white paper, a developmental approach was adopted, thus introducing the Integrated Service Delivery Model [ISDM]. This model emphasized that services should focus on four levels of intervention, with prevention and early interventions as priorities. These levels include:

- **Prevention** includes providing services that strengthen, build capacity and self-reliance of clients, such as awareness campaigns.

- **Early intervention** involves therapeutic services for those identified as at risk, aimed at preventing them from entering into statutory care, e.g., parenting programs, counselling, etc.
- **Statutory** is considered a measure of last resort. It includes removing the neglected children from their homes and placing them in alternative care while working with families to ensure that children are returned to a safer environment.
- **Reunification** involves reuniting children with their families and monitoring their progress as well as monitoring progress.

In light of the aforementioned, social workers have a statutory responsibility of protecting children from abuse, and empower parents and caregivers to fulfil their expected roles in society (Davies, 2014; Makhubele et al., 2018; Van Westrhenen et al, 2017). However, they often find themselves in challenging situations shaped by cultural, religious and socioeconomic dynamics (Van Westrhenen, 2017). Additionally, Strydom et al. (2020) stipulate that social workers are experiencing challenges such as extremely high caseloads and lack of resources to enable them to focus on prevention, therefore shifting their intervention more on statutory services and aftercare services.

2.8 CONCLUSION

The reviewed literature highlights the complexities surrounding the definition of child neglect, revealing a significant lack of consistency across studies, legal frameworks, and social work practices. While various forms of child neglect are widely recognized, intentional child neglect remains underexplored. The distinction between intentional and unintentional neglect is critical, as unintentional neglect often results from parental incapacity, ignorance, or lack of resources, whereas intentional neglect involves a conscious decision to deprive a child of essential care.

The literature further emphasizes the indicators and long-term impact of intentional child neglect, demonstrating that neglected children face severe developmental, psychological, and social challenges. Intentional neglect, in particular, may have more profound consequences due to the deliberate nature of the caregiver's actions, potentially leading to heightened emotional trauma, attachment difficulties, and social instability. Despite existing legislation governing intentional child neglect, there is a gap in policies explicitly addressing intentional neglect, reinforcing the need for more research in this area.

Social work interventions currently focus on addressing neglect through prevention, support, and rehabilitation. However, the lack of scholarly attention to intentional child neglect limits the development of specialized intervention strategies. Given its lasting implications not only for children but also for families, social work practice, and society as a whole, further research is essential to better understand its causes, consequences, and appropriate responses. Recognizing and addressing intentional child neglect with the urgency it requires is imperative for ensuring the well-being and protection of children.

REFERENCE LIST

- Arksey, H., & O'Malley, L. (2005). Scoping Studies: Towards a mythological framework. *International journal of Social Research Methodology*, 8(1): 19-32. <https://doi.org/10.1080/1364557032000119616>.
- Aromataris, E., Fernandez, R., Godfrey, C., Holly, C., Kahlil, H., & Tungpunkom, P. (2015). Summarizing systematic reviews: Methodological development, conduct and reporting of an umbrella review approach. *Int J Evid Healthc*, 13 (3): 132-140.
- Artz, L., Burton, P., Ward, C.L., Leoschut, L., Phyfer, J., Loyd, S., Kassanje, R. & Le Mottee, C. (2016). *Optimus study South Africa: Technical report. Sexual victimisation of children in South Africa. Final report of the Optimus Foundation Study: South Africa*. Centre for Justice and Crime Prevention. South Africa.
- Babbie, E. (2016). *The Practice of Social Research*. 4th Ed. Cengage Learning.
- Braun, V & Clarke, V. (2019). Reflecting on reflexive thematic analysis. *Qualitative research in Sport, Exercise and health*, 11(4) 589-597. <https://doi.org/10.1080/2159676X2019.1628806>.
- Bronfenbrenner, U. (1979). *The ecology of human development: Experiments by nature and design*. Harvard University Press.
- Burton, P., Ward, C.L., Artz, L., & Leoschut, L. (2015). *The Optimus Study on Child Abuse, Violence and Neglect in South Africa*. Cape Town. Centre for Justice and Crime Prevention.
- Butts, J.B., & Rich, K.L. (2018). *Philosophies and Theories for Advanced Nursing Practice*. (3rd ed.). Burlington. Jones & Bartlett Learning.
- Christodoulou, A., Abakoumkin, G. & Tseliou, E. (2019). Teacher's Intention to Report Child Maltreatment: Testing Theoretically Derived Predictions. *Child and Youth Forum*, 48: 513-527. <https://doi.org/10.1007/s10566-019-09492-x>.
- Collings, S.J. (2015). The focus of prevention in child abuse research: The Journal of Child abuse research in review. *Child Abuse Research: A South African Journal*, 16(1): 15-22.

- Creswell, J.W. & Poth, N.C. (2018). *Qualitative enquiry and research design: Choosing among five approaches*. (4th ed). SAGE Publications.
- Creswell, J.W., & Creswell, J.D. (2018). *Research design: Qualitative, quantitative, and mixed methods approach*. (5th ed.). Sage Publications.
- Damian, J.U., Mashau, N.S. & Tugli, A.K. (2019). Experiences of grandmothers raising their grandchildren in Vhembe District, South Africa. *Journal of Gender, Information and Development in Africa*, 137-151.
- Davies, L. (2014). Working positively with media to protect children. *Journal of Social Welfare and Family Law*, 36 (1): 47-58.
- Denzin, N.K., & Lincoln, Y.S. (2018). *The SAGE Handbook of Qualitative Research*. (5th ed.). SAGE Publications.
- Department of Social Development [DSD]. (2021). *Revised White paper on families in South Africa*. Pretoria. Government Printer.
- Department of Social Development. (2011). *Framework for Social Welfare Services*. Pretoria. Government printers
- Dobrick, F.M., Fischer, J. & Hagen, L. M. (2018). *Research ethics in the Digital Age: Ethics for the social research and humanities in times of mediatization and digitization*. Germany. Springer.
- Ettekal, A.V. & Mahoney, J.L. (2017). "Ecological Systems Theory". In K. Peppler. (ed) *The SAGE Encyclopedia of out-of-school learning*, pp. 239-241. SAGE publications. The Oaks. <https://doi.org/10.4135/9781483385198.n94>.
- Finzi-Dottan, R. & Harel, G. (2014). Parents' potential for child abuse: an intergenerational perspective. *J Fam Viol*, 29: 397-408. <https://doi.org/10.1007/s10896-014-9592-7>.
- Friedman, E., & Billick, S.B., (2015). Unintentional Child Neglect: Literature review and observational study. *Psychiatry*, 86: 253-259.
- Hall, K. & Sambu, W. (2018). *South African Child Gauge. Demography of South Africa's Children*. University of Cape Town. Children's institute.

- Hesselink, A., & Booyens, K. (2016). When parents interchange love with abuse: An analysis of parent-child abuse for correctional intervention. *A South African Journal*, 17(2): 103-114.
- Kaawa-Mafigiri, D. & Walakiri, E.J. (2017). *Child abuse and neglect in Uganda*. Kampala. Springer International Publishing. <https://doi.org/10.1007/978-319-48535-5>.
- Khalil, H., Peters, M., Godfrey, C. M, McInerney, P., Soares, C. B., & Parker, D. (2016). An evidence based-based approach to scoping reviews. *Worldviews on Evidence-Based Nursing*, 13(2): 119-123. <https://doi.org/10.1111/wvn.12144>.
- Kim, H. & Drake, B. (2023). Has the relationship between community poverty and child maltreatment report rates become stronger or weaker over time? *Child Abuse and Neglect*, 143: 1-14. <https://doi.org/10.1016/j.chiabu.2023.106333>.
- Lincoln, Y. S. & Guba, E.G. (1985). *Naturalistic Inquiry*. USA: Sage Publications.
- Lockwood, C., Munn, Z., & Porrit, K. (2015). Qualitative research synthesis: Methodological guidance for systematic reviewers utilizing meta-aggregation. *Int j Evid Based Healthc*, 13 (3): 179-187.
- Mabetha, K., Wet-Billings, N.C. & Odimegwu, O. (2021). Healthcare beliefs and practices of kin caregivers in South Africa: Implications for child survival. *BMC Health Services Research*, 21: 486. <https://doi.org/10.1186/s12913-021-06357-9>.
- Makhubele, J., Mogorosi, L., & Mabasa, A. (2018). Interfacing of Folklore as Societal Cultural Capital and Social Welfare: Implications for Practice Initiatives. *Southern African Journal for Folklore Studies*, 28(1): 1-16.
- Mamaleka, M.M. (2019). *Developing guidelines for indigenous parenting practices: A case study of Makhuduthamaga Municipality at Sekhukhune District, Limpopo Province, South Africa*. Doctoral Thesis, University of the Western Cape.
- Masoga, M.A., & Shokane, A.L. (2018). *Epistemology and theory framing for this volume*. In A.L. Shokane, J.C. Makhubele. & L.V. Blitz (eds.). *Issues Around Aligning Theory, Research and Practice in Social Work Education (Knowledge pathing: Multi-, Inter- and Trans- Disciplining in Social Sciences Series Volume 1)*, pp. 1-9, AOSIS, Cape Town. <https://doi.org/10.4102/aosis.2018.BK76.00i>.

- Moalosi, L.C. (2019). *Focusing on caregivers: The experiences of women caregivers caring for orphans and vulnerable children at Crossroads Child and Youth Care Center, Matatiele*. Masters' thesis. University of KwaZulu-Natal.
- Mocanasu, D.R. (2020). Determining the sample size in qualitative research. *International Multidisciplinary Scientific conference on the Dialogue between Sciences & Arts, Religion & Education*, 4: 181-187. <https://doi.org/10.26520/mcdsare.2020.4.181-187>.
- Monette, D.R, Sullivan, J.T, De Jong C.R., & Hilton, T.P. (2014). *Applied social research: A tool for the human services*. Thomson Brooks/Cole.
- Mqadi, Z.T., (2019). *Experiencing social work interventions: understanding the perspectives of caregivers labelled neglectful in a selected local community, KwaZulu-Natal*. Masters Thesis. University of KwaZulu-Natal.
- Neuman, W.L. (2017). *Understanding Research*. 2nd Ed. Pearson Education Inc.
- Nowell, L.S., Norris, J.M., White, D.E. & Moules, N.J. (2017). Thematic Analysis: Striving to meet the trustworthiness criteria. *International journal of Qualitative methods*, 16: 1-13.
- Persson, K. (2019). *What defines a parent? A corpus study of the shift in the meaning of the word parent. In American English during the 19th and 20th centuries*. Stockholms. Spring.
- Pope, C. & Mays, N. (2020). *Qualitative Research in Healthcare*. (4th ed.). Wileys & sons Ltd.
- Qutoshi, S.B. (2018). Phenomenology: A Philosophy and Method of Inquiry. *Journal of Education and Educational Development*, 5(1): 215-222.
- Republic of South Africa (RSA). (1996). The Constitution of the Republic of South Africa 108 of 1996. Pretoria. Government printers.
- Republic of South Africa (RSA). (1998). Domestic Violence Act 116 of 1998. Pretoria. Government printers.
- Republic of South Africa (RSA). (1998). Maintenance Act 99 of 1998. Pretoria. Government printers.

- Republic of South Africa (RSA). (2005). Children's Act 38 of 2005. Pretoria. Government printers.
- Republic of South Africa (RSA). (2007). Children Amendment Act 41 of 2007. Pretoria. Government printers.
- Ringson. J. (2019). The impact of child rights cultural contestation in orphans and vulnerable children (OVC) support in Zimbabwe. *Child Abuse Research: A South African Journal*, 20(1): 51-61.
- Rochat, T.J., Mokomane, Z. & Mitchelle, J. (2016). Public perceptions, beliefs and experiences of fostering and adoption: A national qualitative study in South Africa. *Children and Society*, 30: 120-131. <https://doi.org/10.1111/chso.12122>.
- Safehorizon. (2016). *Moving victims of violence from crisis to confidence*. Child Abuse facts. Available at: <http://www.safehorizon.org/page/child-abuse-facts-56.html> (accessed on: 23 January 2022).
- Schmidt, K. & Azzi-Lessing, L. (2020). Neglect of young children in South Africa: Implications for Prevention, identification and Intervention. *Child Welfare*, 6 (98): 29-52.
- Sciarrino, N.A., Hernandez, T.E & Davidtz, J. (2018). *Understanding child neglect: Biopsychosocial perspectives*. USA. Springer.
- Shung-King, M., Lake, L., Sanders, D. & Hendricks, M. (2019). *South African Child Gauge. Child and adolescent health: Leave no one behind*. University of Cape Town. Children's institute.
- Songca, R. (2016). *Vulnerable children in South Africa: Legal, social development and criminological aspects*. Claremont. Juta.
- Statistics South Africa. (2020). Statistical release: Mid-year population estimates. Pretoria. Government printers.
- Strydom, M., Schiller, U. & Orme, J. (2020). The current landscape of child protection services in South Africa: A systematic review. *Social work/Maatskaplike Werk*, 56 (4): 382-402. <https://dx.doi.org/10.15270/52-2-881>.

- Svard, V. (2017). "Why don't they report?" Hospital personnel working with children at risk. *Child Care in Practice* 23 (4): 342-355. <https://doi.org/10.1080/13575279.2016.1188765>.
- The Joanna Briggs Institute. (2015). *Reviewers' manual: Methodology for JBI Scoping Reviews*. Australia. Joanna Briggs Institute.
- Yin, R.K. (2016). *Qualitative Research from Start to Finish*. (2nd ed.). The Guilford Press.
- Van Westrhenen, N., Fritz, E., Vermeer, A., & Kleber, R. (2017). Reflections of Social Workers on Working with Abused children in South Africa. *Child Abuse Research: A south African Journal*, 18(1): 1-10.
- Von Bertalanffy, L. (1951). General Systems Theory: A new approach to unity of science, Problems of general system theory. *Human Biology*, 23(4): 302-312.
- Voorthuis, A., Bhandari, R., Out, D., Van der Veen, R., Bajermans-Kranenburg, M.J. & Van IJzendoorn, M.H. (2014). Childhood Maltreatment experiences and child abuse potential: Temperamental sensitivity as moderator? *J Fam Viol*, 29: 749-756. <https://doi.org/10.1007/s10896-014-9624-3>.
- Walker, S. (2019). *Systems theory and social work*. In effective social work with children young people and families. Putting Systems theory into practice, pp. 1-15. SAGE Publishers.
- Wang, L., Qu, G., Tang, X, Wu, W, Zhang, J., & Sun, Y. (2019). Child neglect and its association with social living ability: Does resilience attenuate the association? *Psychology, Health & Medicine*, 24 (5): 519-529.
- Warria, A. (2018). *Social work with transnational migrant children in South Africa*. In A.L. Shokane, J.C. Makhubele. & L.V. Blitz (eds.). *Issues Around Aligning Theory, Research and Practice in Social Work Education (Knowledge pathing: Multi-, Inter- and Trans-Disciplining in Social Sciences Series Volume 1)*, pp. 261-299, AOSIS, Cape Town. <https://doi.org/10.4102/aosis.2018.BK76.12>.
- World Health Organisation (2020, 08 June). *Child Maltreatment*. Retrieved 27 May 2021, from <http://www.who.int/news-room/fact-sheets/detail/child-maltreatment>.

World Health Organisation. (2022, 29 November). Violence against children. Retrieved 07 February 2024, from <https://www.who.int/news-room/fact-sheets/detail/violence-against-children>.

SECTION B: MANUSCRIPTS

This section comprises two articles in manuscript format. Each manuscript follows a different research methodology, addresses separate objectives, and presents unique findings, discussions, recommendations, and conclusions. Prior to reviewing this manuscript, kindly consult [addendum 7](#) and [17](#) for author guidelines and the note addressed to examiners, as well as the list of acronyms that have been provided.

MANUSCRIPT 1

EXPLORING PREDICTORS OF INTENTIONAL CHILD NEGLECT BY PARENTS AND CAREGIVERS: A SCOPING REVIEW

Prepared for submission to journal:

Child Abuse Research: A South African Journal (CARSA)

<https://journal.co.za/journal/carsa/submit>

(Please refer to [addendum 7](#) for author guidelines)

ABSTRACT

Intentional child neglect is a serious public health concern with far-reaching long-term ramifications. It affects every individual irrespective of gender, socioeconomic class, age, ethnicity, etc. It is a complex issue with multifaceted causes and predictors, often intertwined with factors such as culture, poverty, substance abuse, parental mental health issues, lack of family support, etc.

To better understand this phenomenon, a scoping review was conducted to explore the available literature on predictors of intentional child neglect by parents and caregivers. Despite the significance of the phenomenon under study, existing literature on the subject was scarce. Most literature and legal frameworks refer to "child neglect" without specifying intent. Hence, the review included other studies addressing child neglect in general. Therefore, intentional child neglect and child neglect were used interchangeably. However, for this study, child neglect will primarily refer to cases where there is an element of intentionality.

A total of 24 articles published between 2014 and 2023 were identified and included in the review, 3 of which originate from South Africa. Three themes emerged, namely: (a) predictors of intentional child neglect, (b) the most noteworthy issues for social workers responding to children affected by intentional child neglect, and (c) the imperative social work practices for the affected children and their families. Due to the limitedness of the literature, the review points to the need for further research on intentional child neglect in diverse contexts.

KEYWORDS:

Caregivers, child neglect, intentional child neglect, neglect, parents, social workers

INTRODUCTION AND BACKGROUND TO THE STUDY

Intentional child neglect is a broad and complex term (Avdibegovic & Brkic, 2020; Friedman & Billick, 2015; Daniel, 2015; Hicks & Stein, 2015). Its complexity emanates from several interconnected factors such as poverty, difficulty in defining and detection, diverse forms of neglect, its impact on child development, the overlapping with other forms of abuse, substance abuse, and mental health issues (Berube et al., 2017; Bland et al., 2018; Logan-Greene & Jones, 2017; Nadan et al., 2018). It is a gross violation of children's fundamental human rights, with far-reaching consequences for individuals, families, and communities. In response to this, the Constitution of the Republic of South Africa Act 108 of 1996 guarantees essential rights to all citizens; it provides specific protections for children under Section 28 of Chapter 2. These safeguards encompass a child's right to health, education, nutrition, shelter, and access to social services, as well as protection from abuse, maltreatment, and exploitation (Boonzaaier, 2019).

Despite the existence of children's rights, children are still experiencing abuse, including neglect. It affects more than 1 billion children between the ages of 2 and 17 years globally (World Health Organisation [WHO], 2022). According to Avdibegovic and Brkic (2020), intentional child neglect is the most common type of child maltreatment that can be associated with other types of child maltreatment, such maltreatment includes sexual abuse, physical abuse, and emotional abuse. Studies found that the majority of intentional child neglect cases are perpetrated by parents or caregivers, or someone closer to the children (Avdibegovic & Brkic, 2020; Dickerson et al., 2017; Finzi-Dottan & Harel, 2014; Friedman & Billick, 2015). Substantiating this statement, Katz et al. (2019) highlighted the complicatedness of perpetrated by parents and caregivers in terms of identification, reporting and intervention.

From birth onwards, intentional child neglect remains the type of child abuse that is not well understood, largely due to its lack of consistency in a universally accepted definition (Berube et al., 2017; Nadan et al., 2018; Schmidt & Azzi-Lessing, 2021). The reviewed literature reveals a wide range of definitions for child neglect. Daniel (2015) notes that these definitions differed from state to state, and are often applied differently depending on the context and purpose. Deb (2018) adds that it varies across societal and cultural beliefs and depends on the discipline considered, such as legal, medical, psychological, social work or other professional fields. However, the majority of the definitions (Avdibegovic & Brkic, 2020; Awortwe et al., 2020; Christodoulou et al., 2019; Kim & Drake, 2023; Logan-Greene & Jones, 2017) focused on the development and well-being of the child, while Daniel (2015) took a closer look into the impact

of the unmet needs of the child which are often indicated by inadequate clothing, nutrition, education, medical, mental health care, shelter, unsafe environments, unmet psychological and emotional needs, lack of supervision, and abandonment by parents or caregivers or family (Deb, 2018).

For this study, the researcher adopted the WHO's (2020) legal definition, which describes intentional child neglect as an omission in which caregivers or parents fail to provide for the developmental needs and well-being of their children irrespective of having the means or being able to do so. Although the definition of intentional child neglect is considered to be unclear, several types of intentional child neglect emerged from different studies (Berube et al., 2017; Mqadi, 2019; Schmidt & Azzi-Lessing, 2020; Van Wert et al., 2018; Wang et al., 2019; Zeanah & Humphreys, 2018).

- **Physical neglect:** Zeanah and Humphreys (2018) categorized it into two groups which include (1) failure to provide the child with basic needs such as food, clothing, shelter, hygiene, and (2) failure to supervise and ensure children's safety in and out of the home, Mqadi (2019) refers to it as **supervisory neglect**.
- **Emotional neglect:** This is characterized by the parents or caregivers' failure to provide the children with emotional needs, these include the parent's acts that are harmful and insensitive to the developmental level of the child (Berube et al., 2017; Zeanah & Humphreys, 2018).
- **Educational neglect:** Van Wert et al. (2018) refer to it as the parents' failure to attend to the child's academic needs even though it is important for their development.
- **Medical neglect:** Wang et al. (2019) refer to this as the caregiver's failure to attend to the child's medical needs, such as accompanying the child to health facilities when the child is ill, or due for immunization.
- **Selective neglect:** this is characterised by the parent's failure to display attentiveness and responsiveness to the child due to the child's biological features or health issues, such as gender, health status, etc. (Schmidt & Azzi-Lessing, 2020).

United States of America (USA) estimated 4 million cases of child maltreatment in 2022, about 415 445 of these cases were of child neglect (American Society for the Positive Care of Children [ASPPCC], 2022). In 2021/2022 the United Kingdom reported 22 505 cases of child maltreatment, including 8389 of child neglect (National Society for the Protection of Cruelty to Children [NSPCC], 2024). In South Africa, the Optimus study conducted by Artz et al. (2016)

showed a rapid increase in child neglect as compared to the Optimus study conducted in 2015 (Burton et al., 2015). The 2016 increase ranged from 12.2% to 15.1% as compared to 7.9% that was reported in 2015. Limpopo was reported to have the highest number of intentional child neglect cases amounting to 11.6%, and this incidence was linked to the highest fertility rates and poverty levels within the province (Statistics South Africa [Stats SA], 2020).

Despite its high prevalence, intentional child neglect still remains the most neglected type of child abuse (Berube et al., 2017; Bland et al., 2018), and it is still understudied (Haslam & Taylor, 2022; Logan-Greene & Jones, 2017). Notwithstanding this, it can have equally, if not more, profound negative long-term effects on children (Daniel, 2015; Dickerson et al., 2017). Dickerson et al. (2017) further noted that intentional child neglect is often difficult to detect and substantiate due to its less visible nature. As a result, neglect may persist for longer periods before interventions are implemented. It affects the children's emotional well-being, behaviour, educational achievements, physical and cognitive development (Bland et al., 2018; Haslam & Taylor, 2022; Kim & Drake, 2023; Mathews et al., 2020). The damage caused by the neglect is often overlooked, while it is damaging not only in the early stages, it proceeds into adulthood (Daniel, 2015; Hesselink & Booyens, 2016).

To address and alleviate this predicament, the law mandates many countries to report suspected cases of abuse, including neglect as the well-being of children is of paramount importance (Christodoulou et al., 2019). Substantiating those mentioned above, the public, social services, and other professionals in Sweden (Svard, 2017), the Republic of Estonia (Toros & Tiirik, 2016), and the Republic of South Africa are obliged to protect children in need of care and protection while taking into consideration their best interests (Children's Act 38 of 2005; Christodoulou et al., 2019; Davies, 2014; Forsner et al., 2021; Makhubele et al., 2018; Van Westrhenen et al., 2017).

Despite this important role, Van Westrhenen et al. (2017) outlined that social workers often operate under adverse conditions, impacting how they efficiently handle their cases. The following challenges are noted: (1) social work interventions rely heavily on reports from concerned neighbours, friends, and other community members (Dickerson et al., 2017); (2) difficulties in obtaining accurate information about the incidence of intentional child neglect due to inconsistent definitions (Berube et al., 2017; Schmidt & Azzi-Lessing, 2021); (3) social work interventions are based more on western conceptions without taking into account the realms of culture, ethnicity, and community life (Nadan et al., 2018; Schmidt & Azzi-Lessing, 2021), and (4) a lack of

universal assessment tool to assess the intentional child neglect risk (Daniel, 2015; Mathews et al., 2020). Hence, social workers in the Capricorn District were consulted to gather their perceptions about intentional child neglect by parents and caregivers, and the findings of these consultations will be presented in the following manuscript (Manuscript 2).

Few studies reported the following challenges: cultural barriers (Nadan et al., 2018; Van Westrhenen et al., 2017); lack of support, development and resources, compassion fatigue, high caseloads (Damman et al., 2020; Van Westrhenen et al., 2017); and dealing with intimidating and aggressive clients from affluent families (Bernard & Greenwood, 2019). Some studies underlined the discrepancies between incidences of intentional child neglect and the number of reported cases (Christodoulou et al., 2019; Forsner et al., 2021; WHO; 2020).

The reviewed literature reveals a lack of studies specifically aiming to identify the indicators of intentional child neglect by parents and caregivers. Therefore, this study aims to conduct a scoping review to identify more gaps in the existing literature (Arksey & O'Malley, 2005; Khalil et al., 2016). The purpose of this scoping review was to identify predictors of intentional child neglect by parents and caregivers, and the findings aim to inform and provide recommendations for social work practice, and future research.

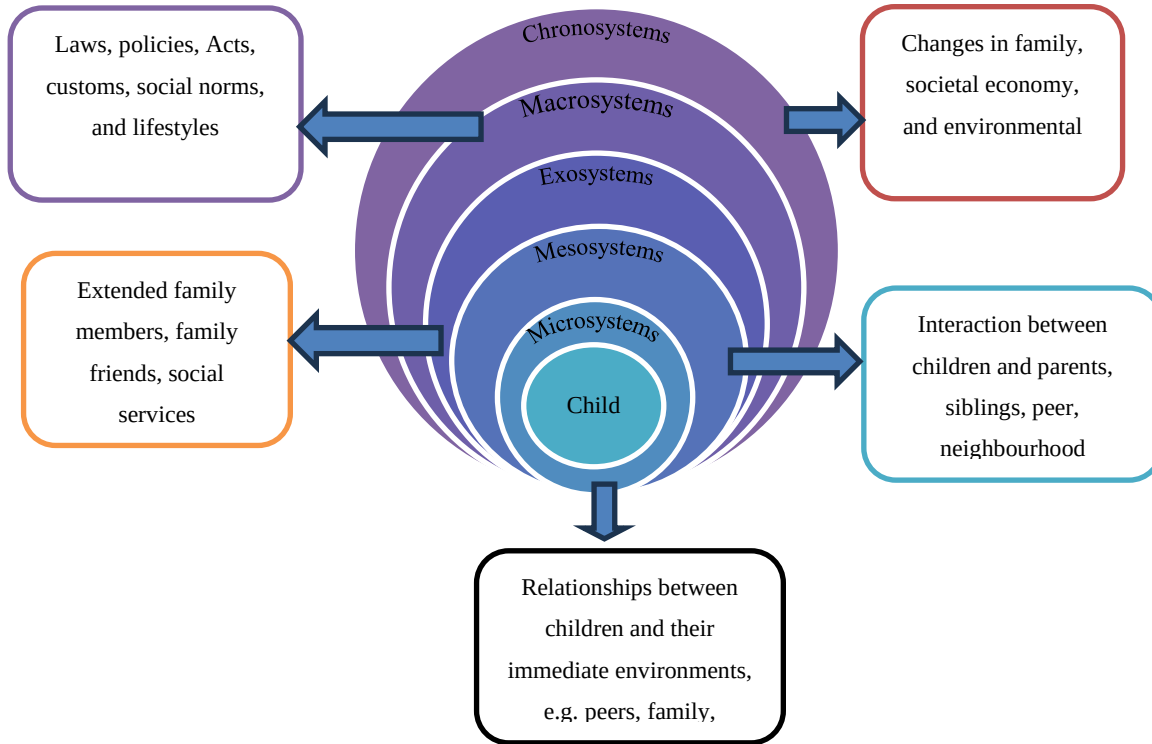
THEORETICAL FRAMEWORK

Bronfenbrenner's Ecological theory of human development (Ettetal & Mahoney, 2017) and Bertalanffy's systems theory (Walker, 2019) served as a guiding lens for this scoping review. These two theories complement each other, as they take a closer look into the interconnectedness between individuals and their environment.

The theories view individuals as part of a larger network and not as isolated beings (Ettetal & Mahoney, 2017; Walker, 2019). Ettetal and Mahoney (2017) further outlined that the Ecological theory takes into consideration the levels that influence people's behaviour and they include the "microsystem (relationship between individuals and immediate environments,), mesosystem (interaction between children and parents, siblings, peers, neighbourhood, etc.), the exosystem (extended family members, family friends, social services, etc.), macrosystem (policies, Acts, laws, customs, social norms, lifestyles, etc.), and chronosystem (changes in family, environmental changes, societal economic changes)". This study places the child at the centre of the systems and it takes a closer look at how their upbringing is impacted by their surroundings. These theories were utilized to foster a deeper understanding of the predictors of intentional child

neglect, and their implications for individuals and social work practice. Bronfenbrenner's multi-systems are illustrated in Figure 1 below.

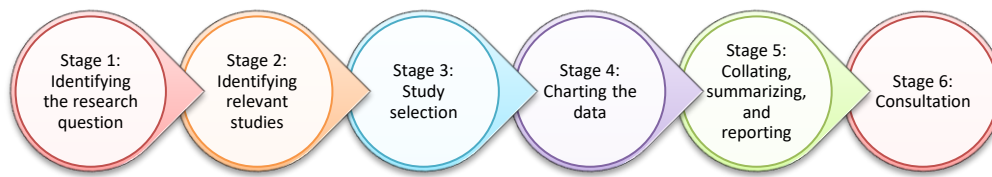
Figure 1: Bronfenbrenner's ecological systems



METHODOLOGY

This study adopted a scoping review approach with the aim of synthesizing the existing literature on indicators of intentional child neglect, and to identify existing gaps in literature (Arksey & O'Malley, 2005; Khalil et al., 2016). According to Munn et al. (2018), a scoping review is a relatively new approach, with no clear definition, and is used to synthesise, map out and identify gaps in the existing literature while addressing the research question. The researcher followed Arksey and O'Malley's (2005) framework to conduct the scoping reviews. The framework consists of six stages as illustrated in figure 2.

Figure 2: Stages of Arksey and O'Malley's (2005) framework



Below is the detailed explanation of the stages and how they were utilized:

Stage 1: Identifying the research question

The review question that was used to guide this study was: “*What can be learned from existing literature regarding predictors of intentional child neglect by parents and caregivers?*”. This research question was linked to the first objective. To guide the steps that follows, the researcher designed a research protocol (see [addendum 2](#)) based on Arksey and O'Malley's (2005) framework. Identifying the research question is the first phase of the scoping review that helps with the development of the research protocol, improves the effectiveness of the literature search, and gives the reviewer a clear structure when preparing for the scoping review (Arksey & O'Malley, 2005; The Joanna Briggs Institute, 2015).

Stage 2: Identifying relevant studies

Arksey and O'Malley (2005) explain that identifying methods that will be used for a comprehensive literature search is crucial in this phase as it allows the reviewer to work in a time-efficient manner to answer the formulated research question. The databases that were used for literature search include Sabinet, EBSCOhost, Academic Search Complete, APA PsycINFO, APA PsycArticles, and SocINDEX. The following keywords were used to search relevant studies that yielded the results. The keywords used for the literature search are listed in Table 1 below.

Table 1: Keywords used for search literature for the scoping review

“Intentional child neglect” OR “child neglect” OR “indicators of intentional child neglect”
AND
Parents+ OR caregiver+
AND
“Social worker+” OR “social workers perspectives”

The researcher adhered to the developed research protocol Arksey and O’Malley’s (2005) framework to identify relevant studies. The librarian at North-West University’s Potchefstroom campus was consulted to assist with training and sourcing of literature. She also conducted the literature search using the same keywords.

Stage 3: Study selection

Arksey and O’Malley (2005) and Khalil et al. (2016) advised that to keep the review focused, information gathered from the literature search needs to be scrutinized to allow the reviewer to eliminate the irrelevant publications that might have emerged from the search. To achieve this, the researcher developed and used selection criteria, both inclusion and exclusion criteria. Table 2 below illustrates the inclusion and exclusion criteria that were used to choose relevant literature to address the research question.

Table 2: Criteria of study selection for the Scoping Review

<i>Inclusion criteria</i>	<i>Exclusion criteria</i>
• Although the study aimed at exploring intentional child neglect, literature that focused specifically on intentional child neglect was limited, therefore the researcher opted for child neglect. • Only literature that focused on child neglect was included in the study.	• Non-English studies were excluded as the researcher did not understand other languages such as Afrikaans, Spanish, French, etc. Factors such as costs, time, and use of translators were also taken into consideration.

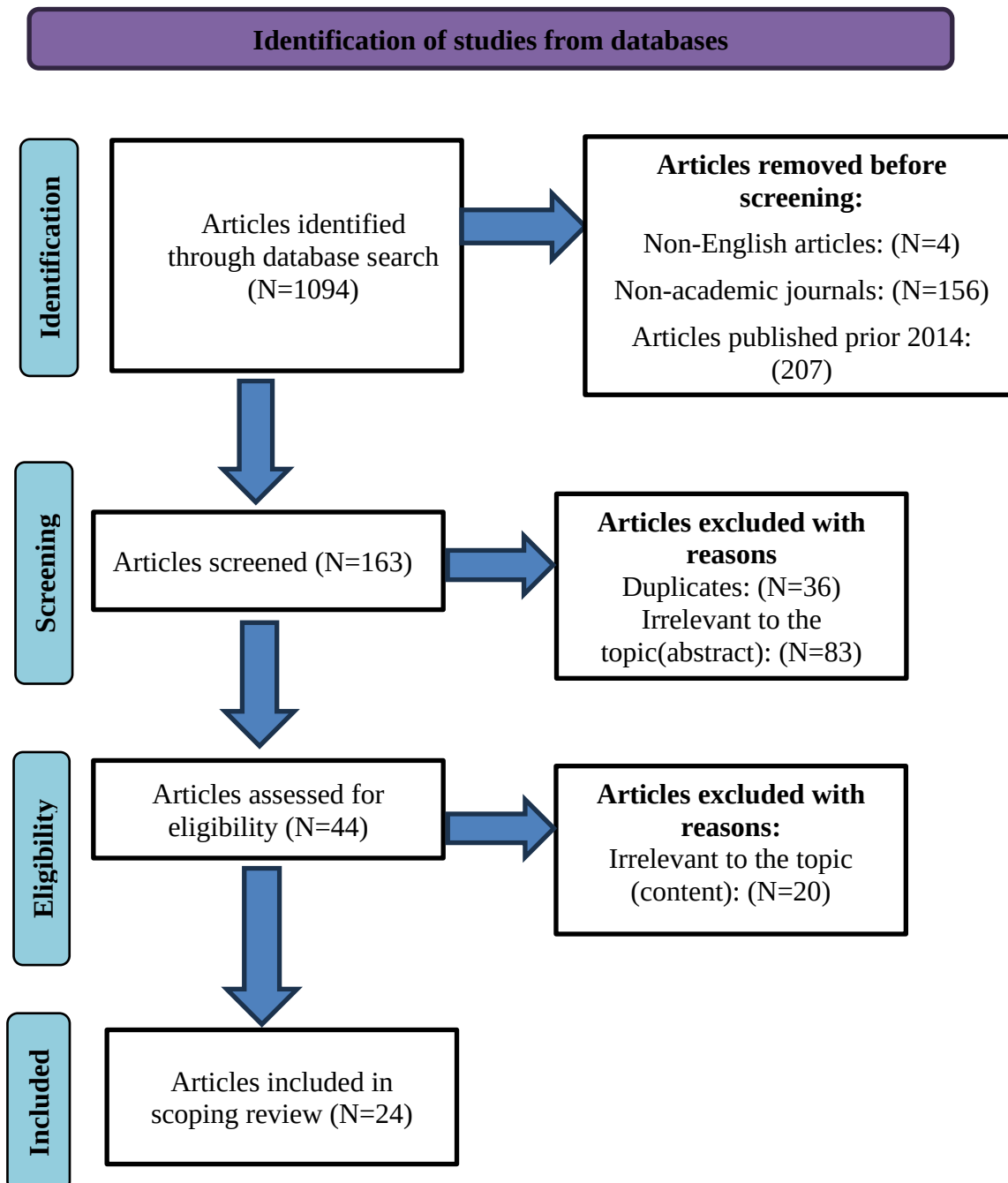
<i>Inclusion criteria</i>	<i>Exclusion criteria</i>
Furthermore, full-text peer-reviewed studies from the years 2014 to 2023 were included, this was to ensure that the information is up to date and not misleading. • The included literature was retrieved from systematic reviews, meta-syntheses, scoping reviews, qualitative studies, quantitative studies, and mixed-method studies. • Published research articles, Policies and legislation governing child neglect, government gazettes, Masters and PhD dissertations were also included. • Literature search was stopped in January 2024 as the researcher was experiencing time constraints that are associated with the completion of a Master's dissertation, this decision is supported by Levac et al., (2010).	• Information from conference proceedings, grey literature, and social media platforms were excluded as they were not peer-reviewed.

The aforementioned databases and keywords were used to search articles, and each keyword produced several articles. A total of (N=1094) articles were found, the search was limited to academic journals, and a total of (N=938) articles were found. From the (N=938) articles the search was further limited to full text, then the number was reduced to (N=374) articles. The search excluded non-English articles and a total of (N=370) articles were obtained. 2014-2023 articles' timeframe was also used to limit the search, and (N=163) articles were found. Titles, abstracts, and keywords of the remaining articles were screened for relevancy.

After screening all articles, (N=44) appeared to match the criteria of inclusion, while (N=36) articles were duplicates, and (N=83) were found to be irrelevant after reading the abstracts, and these articles were excluded. The researcher downloaded all full publications that appeared to

be answering the scoping review question and matching the criteria of inclusion for double-checking and further scrutinization. The researcher read the downloaded publications and then decided whether the articles are answering the research question or not, and after careful consideration a further (N=17) articles were excluded as they were deemed irrelevant. (N=3) articles were also excluded during the data extraction process as they were found to be irrelevant as they focused more on challenges and possible interventions while the focus of the study was predictors of intentional child neglect. Only (N=24) studies were found to be relevant to the objective of the study. Figure 3 presents the PRISMA flowchart of this scoping review.

Figure 3: PRISMA flowchart of literature in the scoping review (Page et al., 2021)



Stage 4: Charting of the data

Arksey and O'Malley (2005) outlined that the reviewer must decide and select information that is important and relevant to the purpose of the scoping review. The researcher used a data charting table (see [addendum 18](#)) to sort and compile the data retrieved from the publications. The data charting table recorded information such as database searched, author, year of publication, title, country, target population, research approach, design, indicator/s of intentional child neglect, who reported, activities and techniques utilized, how the interventions were implemented, outcomes, and challenges. The data charting table assisted the researcher in identifying duplications, and the duplicates were not included in the final number of articles. A total of 24 publications were recorded in the data charting table excluding the duplications. The charted data was then analysed using Braun and Clarke's (2019) reflexive thematic analysis, which is discussed in the next stage: collating, summarizing, and reporting the findings.

Stage 5: Collating, Summarizing, and reporting

The researcher followed Braun and Clarke's (2019) reflexive thematic analysis process to analyze the findings of the scoping review. The framework was carried out using the following six steps:

Step 1: The researcher read through the 24 retrieved articles to familiarize herself with the collected information while using a charting table to chart the data. After this step was completed, the researcher moved to the next step.

Step 2: A color-coding system was used in the process, where identical codes were assigned the same colour. After completing this step, the reviewer sent the data charting table to the co-coder. Both the reviewer and the co-coder followed the same process, and the identified codes were discussed. From the charted data, initial codes were identified.

Step 3: After completion of step 2, the researcher searched for themes from the identified and agreed-upon codes. Codes of the same colour were grouped together to form categories and develop themes and subthemes.

Step 4: The researcher engaged the co-coder to review and discuss the developed themes and subthemes. This was done telephonically as the co-coder and the researcher are not residing in the same province.

Step 5: The researcher conducted the last round of reviewing the identified themes to check if there are themes that needed to be merged or removed, and none of the themes were removed or merged. Then the identified themes were defined and named, and the following themes emerged: (1) predictors of intentional child neglect by parents and caregivers; (2) the most noteworthy issues for social workers responding to children affected by intentional child neglect; (3) the imperative social work practices for the affected children and their families.

Step 6: The report was produced and presented in a manuscript 1. An article format was used to present the findings of this scoping review, it is presented in the current manuscript, and is part of the researcher's Master's Dissertation.

Stage 6: Consultation

Although this stage is optional, it was executed, and its findings are reported in manuscript 2. Individual semi-structured interviews with social workers in the Capricorn District were conducted to obtain their inputs on the findings of the scoping review as well as their observations regarding intentional child neglect. This stage involves consulting relevant stakeholders to gather meaning, applicability and additional information about the phenomenon under study (Arksey & O'Malley, 2005).

TRUSTWORTHINESS

For this study, trustworthiness of the research process was applied using Lincoln and Guba's (1985) framework. It assisted the researcher to meet the criteria of confirmability, transferability, dependability and credibility.

The credibility of the study was ensured by having a co-coder to assist with data analysis, to verify if the data collected and the researcher's interpretations are sound and confirmed. The process followed was well-developed, clear, well-documented, and revised by both the supervisor and co-supervisor to ensure dependability. The researcher provided a thick description of the process followed, the background of the study, and the studies included to ensure transferability to other studies (Nowell et al., 2017). Confirmability was ensured by having the audit trail of the entire research; the process followed was well documented, and all transcripts gathered during the study are kept safe for audit purposes.

Quality appraisal for the scoping review

This scoping review was quality appraised using the Critical Appraisal Skills Programme (CASP) tool (see [addendum 3](#)), and the Joanna Briggs Institute appraisal tools for qualitative studies (see [addendum 6](#)), and systematic reviews (see [addendum 04](#)). Systematic reviews were appraised using JBI appraisal tool for systematic reviews (Aromataris et al., 2015); JBI appraisal tools for qualitative studies was used in qualitative studies (Lockwood et al., 2015); and the CASP tool was used in quantitative, and observational studies as well as meta-syntheses. The studies were scored separately by the researcher and verified by the supervisor to alleviate bias. Both the researcher and supervisor discussed the scores to reach a consensus.

FINDINGS AND DISCUSSIONS OF THE STUDY

This scoping review explored the available literature on what predicts intentional child neglect by parents and caregivers with the aim of expanding knowledge and identifying the existing gaps. Arksey and O'Malley's (2005) framework and PRISMA checklist (Page et al., 2021) were applied in order to achieve the aim of this study.

The scoping review includes 24 studies that met the inclusion criteria and were found to be relevant after using the CASP and JBI appraisal tools. The articles included in this scoping review consist of one observational study (Friedman & Billick, 2015); two meta-syntheses (Avdibegovic & Brkic, 2020; Kim & Drake, 2023); one systematic review (Daniel, 2015); five quantitative studies (Cui et al., 2016; Dickerson et al., 2017; Finzi-Dottan & Harel, 2014; Logan-Green & Jones, 2017; Toros & Tiirik, 2016); fifteen qualitative studies (Abdullah et al., 2021; Awortwe et al., 2020; Bernard & Greenwood, 2019; Berube et al., 2017; Casey & Hackett, 2021; Hesselink & Booyens, 2016; Hicks & Stein, 2015; Innes-Turnill, 2023; Katz et al., 2019; Nadan et al., 2018; Ringson, 2019; Schmidt & Azzi-Lessing, 2021; Shadik & O'Connor, 2016; Tiwari et al., 2018; Van Westrhenen et al., 2017).

From the (N=24), publications (N=5) were from the United Kingdom, (N=5) United States of America, (N=3) South Africa, (N=1) Zimbabwe, (N=1) Canada, (N=2) Ghana, (N=3) New York, (N=2) Israel, (N=1) China, (N=1) Europe. From the reviewed studies, USA and the UK were found to have an equal number of five studies. Zimbabwe, Canada, Europe, China were found to be countries with the least studies as one was reported per continent. Since South Africa is the country under study, only three studies (Hesselink & Booyens, 2016; Schmidt & Azzi-

Lessing, 2021; Van Westrhenen et al., 2017) were found and included, which shows that intentional child neglect is less recorded and researched in the country.

Three themes emerged from the aforementioned studies: (1) predictors of intentional child neglect by parents and caregivers; (2) the most noteworthy issues for social workers responding to children affected by intentional child neglect; (3) the imperative social work practices for the affected children and their families.

Theme 1: Predictors of intentional child neglect by parents and caregivers

The findings of this scoping review highlight seven predictors of intentional child neglect reported by different researchers from different countries, such predictors include health predictors, economic predictors, social predictors, cultural predictors, environmental predictors, biological predictors and educational predictors.

Health predictors and economic predictors were the most dominant as they were reported in 17 studies, while educational predictors were the least reported in five studies. Social predictors were also reported in 15 studies, cultural predictors in 13 studies, environmental predictors in 11 studies, and biological predictors in eight studies. These findings show that intentional child neglect is a multidimensional reality, influenced by various risk factors, and in urgent need of attention.

Subtheme 1.1 Health predictors

Health predictors were reported by 17 studies. Parental mental health problems which include stress, depression, low self-esteem, difficulties in affective regulation, poor emotional regulation were reported as factors associated with health predictor of intentional child neglect (Avdibegovic & Brkic, 2020; Awortwe et al., 2020; Berube et al., 2017; Innes-Turnill, 2023; Katz et al., 2019; Logan-Greene & Jones, 2017; Shadik & O'Connor, 2016; Tiwari et al., 2018).

Based on the review findings, parental mental health problems are dominating factors that contribute to parents to neglect their children. Additionally, other authors pointed to parents' alcohol and substance misuse problems (Cui et al., 2016; Daniel, 2015; Hicks & Stein, 2015; Schmidt & Azzi-Lessing, 2021), and parents' past traumas (Casey & Hackett, 2012; Finzi-Dottan & Harrel, 2014; Friedman & Billick, 2015; Hesselink & Booyens, 2016) to have an influence on how parents carry out their parental responsibilities. These factors are associated with an amplified risk of intentional child neglect as they affect parents' ability to understand the

children's needs as well as establishing steady and secure attachments and parent-child relationships.

Subtheme 1.2 Cultural predictors

From the included studies, 13 studies reported culture as one of the predictors of intentional child neglect (Abdullah et al., 2021; Avdibegovic & Brkic, 2020; Awortwe et al., 2020; Casey & Hackett, 2021; Finzi-Dottan & Harel, 2014; Hicks & Stein, 2015; Ringson, 2019; Van Westrhenen et al., 2017). Traditional gender roles, child-rearing practices, cultural differences, and family values were reported to have a greater influence on the upbringing of children (Cui et al., 2016; Nadan et al., 2018; Van Westrhenen et al., 2017). Other authors outlined that some of the neglectful behaviour occur because parents, based on their cultural beliefs and social norms, tend to believe that they are acting in the best interest of their children (Dickerson et al., 2017; Friedman & Billick, 2015; Schmidt & Azzi-Lessing, 2021). For instance, certain societies may hold the view that denying a father access to his child, especially if he is not married to the mother or paid customary damages is in the child's best interests. They believe that it protects children from societal stigma or disgrace, and this results in children missing out on a meaningful relationship with their fathers, which is harmful to their emotional and psychological development. Substantiating this statement, Ringson (2019) notes that communities and families embrace their traditional approaches to child-rearing in contravention of some critical children's rights.

Subtheme 1.3 Social predictors

Social predictor was reported in 15 studies. Studies noted interpersonal relationships which include relationships between parents (Avdibegovic & Brkic, 2020; Finzi-Dottan & Harel, 2014; Innes-Turnill, 2023; Shadik & O'Connor, 2016; Toros & Tiirik, 2016), poor parent-child relationships, parents prioritizing siblings or new partner over their children (Hesselink & Booyens, 2016; Hicks & Stein, 2015) as having a greater influence on how children are raised and cared for. Authors also highlighted that lack of support from both family and community networks negatively impact children's daily lives (Abdullah et al., 2021; Avdibegovic & Brkic, 2020; Berube et al., 2017; Casey & Hackett, 2021; Hicks & Stein, 2015; Logan-Greene & Jones, 2017; Tiwari et al., 2018). Parental separation, domestic violence, divorce and children's involvement in parental disputes were also noted as factors, which result in children staying with one parent while placing them at risk of being neglected by the other parent (Awortwe et al., 2020; Daniel, 2015; Katz et al., 2019; Toros & Tiirik, 2016).

Subtheme 1.4 Economic predictors

Economic predictor was reported in 17 studies, pointed poverty of both family and neighborhood as the main factor that affects how children are nurtured (Abdullah et al., 2021; Avdibegovic & Brkic, 2020; Berube et al., 2017; Casey & Hackett, 2021; Friedman and Billick, 2015; Innes-Turnill, 2023; Kim & Drake, 2023; Nadan et al., 2018; Schmidt & Azzi-Lessing, 2021; Toros & Tiirik, 2016; Van Westrhenen et al., 2017). It was noted that poverty has a potential of co-occurring with other factors such as high rates of unemployment, low and inequality in wages, and lack of financial resources (Avdibegovic & Brkic, 2020; Awortwe et al., 2020; Berube et al., 2017; Friedman and Billick, 2015; Logan-Greene & Jones, 2017; Nadan et al., 2018; Schmidt & Azzi-Lessing, 2021), especially for young first-time mothers (Finzi-Dottan & Harel, 2014). Furthermore, socioeconomic deprivation was also reported as it is associated with the parents' unresponsiveness to their children's needs (Avdibegovic & Brkic, 2020; Friedman & Billick, 2015; Hesselink & Booyens, 2016; Tiwari et al., 2018; Van Westrhenen et al., 2017).

Subtheme 1.5 Biological predictors

Biological factors as one of the predictors of intentional child neglect were also reported in 8 studies. Studies point out how the age and gender of both the child and parent influence their parenting and relationship. Avdibegovic and Brkic (2020), Dickerson et al. (2017), and Hicks and Stein (2015) pointed to the age as a major contributor with young children being more vulnerable as they are generally perceived to be more demanding than the older ones. Substantiating these findings, Berube et al. (2017), Finzi-Dottan and Harel (2014), and Logan-Greene and Jones (2017) add that the age of both child and parent or caregiver has an effect on how children are raised as young parents are perceived to be more neglectful. Gender of both the child and parent or caregiver was reported to be playing a significant role in the occurrence of intentional child neglect (Cui et al., 2016; Hesselink & Booyens, 2016). Dickerson et al. (2017) reported mothers to be the worst perpetrators as compared to the absent fathers, and girls were perceived to be more vulnerable than boys.

Subtheme 1.6 Environmental predictors

Eleven studies from different authors showed environments that interact with children as another predictor of intentional child neglect. The studies reported the following issues: family composition, structure and functioning (Friedman & Billick, 2015; Hicks & Stein, 2015); lack of safe home environment (Avdibegovic & Brkic, 2020; Bernard & Greenwood, 2019); single-parent

headed family (Awortwe et al., 2020; Berube et al., 2017; Innes-Turnill, 2023; Logan-Greene & Jones, 2017); number of children in the family (Nadan et al., 2018); poor neighborhood (Avdibegovic & Brkic, 2020; Finzi-Dottan & Harel, 2014); criminal activities that lead to parents' incarceration (Avdibegovic & Brkic, 2020; Shadik & O'Connor, 2016); children's exposure to substances and dangerous environments as well as easy access to alcohol and substances for parents (Avdibegovic & Brkic, 2020). Berube et al. (2017) noted with great concern that children growing up in neglectful environments are at elevated risk of being neglected. In addition, Bronfenbrenner's (1979) ecological theory highlights that children's upbringing are influenced by people and the environments they find themselves in.

Subtheme 1.7 Educational predictors

Three studies found limited education and poor parenting skills as some of the predictors of intentional child neglect (Bernard & Greenwood, 2019; Friedman & Billick, 2015; Hesselink & Booyens, 2016); younger parents with limited life skills and experience were considered to be at greater risk of neglecting their children (Avdibegovic & Brkic, 2020). Parents' level of education, parenting skills, and parenting capacity were noted as they play a significant role in determining how parents and caregivers raise their children.

Theme 2: The most noteworthy issues for social workers responding to children affected by intentional child neglect

Subtheme 2.1 Issues inherent in understanding intentional child neglect

Differing methods of defining intentional child neglect is amongst the aspects that make it to be unclear (Logan-Greene & Jones, 2017). Studies reported that the lack of consistency in defining intentional child neglect has implications on social work practice (Abdullah et al., 2021; Avdibegovic & Brkic, 2020; Berube et al., 2017; Casey & Hackett, 2021; Daniel, 2015; Friedman & Billick, 2015; Schmidt & Azzi-Lessing, 2021). According to Dickerson et al. (2017), the definition largely excludes intent to harm, even though intent may be relevant to whether the parent's behaviour is perceived as neglect or not. Other studies also reported cultural practices as barriers to understanding intentional child neglect (Hicks & Stein, 2015; Nadan et al., 2018; Van Westrhenen et al., 2017). The collective responsibility of child rearing has replaced individual parental responsibilities, which makes it difficult to understand and identify neglectful parents (Avdibegovic & Brkic, 2020; Awortwe et al., 2020).

Subtheme 2.2 Family-related issues

Children and their families also experience issues that impact on social work interventions. Hesselink and Booyens (2016) reported that little effort has been made to unpack the details of the parent as a perpetrator. Likewise, Finzi-Dottan and Harel (2014) and Hesselink and Booyens (2016) outlined that social work interventions pay more attention to victims while neglecting the perpetrators. Studies found social work assessments and interventions of intentional child neglect to be focusing more on families' lifestyles or parents' behaviors rather than the predictors of intentional child neglect (Berube et al., 2017; Dickerson et al., 2017; Innes-Turnill, 2023). As a result, parents are mistaken and labelled as neglectful without taking into consideration factors that influence their parenting, their strengths and means to cater for the development of their children (Abdullah et al., 2020; Awortwe et al., 2020; Shadik and O'Connor, 2016; Kim & Drake, 2023). Daniel (2015) noted with great concern the lack of specialized services for parents facing difficulties in meeting their children's basic needs. From the reviewed studies, it is evident that no child is immune to neglect, it can occur to any child across the globe irrespective of social status, gender, ethnicity, age, race, and culture.

Subtheme 2.3 Social work related issues

Apart from social workers experiencing issues in understanding intentional child neglect, they also experience intrapersonal and institutional issues. Studies reported compassion fatigue, trauma, high caseloads and plenty of paperwork that is frustrating, lack of support and supervision as intrapersonal challenges faced by social workers in the Child Protection Unit (Casey & Hackett, 2021; Van Westrhenen et al., 2017), and all these place social workers under pressure to complete and terminate their cases within the set timeframes compromising the quality of their work (Logan-Greene & Jones, 2017).

Different institutional challenges experienced by social workers were also reported. Studies reported high rates of intentional child neglect cases with limited resources for social workers to intervene (Logan-Greene & Jones, 2017; Schmidt & Azzi-Lessing, 2021). Apart from the lack of resources, the utilization of universal theories, lack of practical guidelines for identification and interventions of intentional child neglect, and lack of support, monitoring and evaluation of social work interventions (Awortwe et al., 2020; Casey & Hackett, 2021; Katz et al., 2019; Tiwari et al., 2018), make it difficult for social workers to define the risk, abuse and neglect (Bernard & Greenwood, 2019; Nadan et al., 2018). Casey and Hackett (2021) also reported lack

of training on communicating the children's experience of neglect within the assessments as one of the challenges experienced by social workers within the Child Protection Unit. From these findings, it is clear that social work methods of intervention are still embedded in the western culture which contradicts the indigenous knowledge and beliefs practiced by the communities that they serve.

Subtheme 2.4 Research related issues

Information on intentional child neglect is too little (Dickerson et al., 2017; Logan-Greene & Jones, 2017). Supporting this statement, Nadan et al. (2018) pointed out that literature still lacks perspectives of parents, professionals, and the community itself. To address this predicament, Dickerson et al. (2017) highlighted the need to put in place efforts that consider parents, caregivers and community's perceptions on intentional child neglect. Cui et al. (2016) noted that socioeconomic status of the families is unmeasured, which results in difficulties in differentiating between lack of means and neglect. All these make it difficult to obtain accurate information on incidences of intentional child neglect (Schmidt & Azzi-Lessing, 2021).

While studies indicate that intentional child neglect stems from various factors and remains a global issue with long-term consequences, it is considered to be the least researched form of child abuse, hindering the collection of comprehensive and accurate data on its prevalence. To bridge this gap, more research that will be more specific to intentional child neglect needs to be conducted, and it needs to include parents and caregivers as their voices remain unheard.

Theme 3: The imperative social work practices for the affected children and their families

Subtheme 3.1 Fostering a better understanding of intentional child neglect

Bernard and Greenwood (2019) alluded that child development needs to be understood to comprehend the impact of intentional child neglect. Two studies reported the need for improvement in defining intentional child neglect (Daniel, 2015; Schmidt & Azzi-Lessing, 2021) as well as age-related interpretation of it (Hicks & Stein, 2015). According to Dickerson et al. (2017), social services professionals investigate to determine whether the parent's behaviour meets the legal definition of neglect. However, decisions of whether the case is neglect or not are made based on the social workers' own discretion. This is due to a lack of consistency in definition and strict regulations in place (Awortwe et al., 2020), which may be a stumbling block in addressing intentional child neglect cases. Hence, Friedman and Billick (2015) vouched for a

clearer understanding of intentional child neglect and the issues surrounding it in order to render both preventative and treatment services. Awortwe et al. (2020) add that cultural values and their implications on the well-being of the children needs to be considered when dealing with intentional child neglect cases.

Subtheme 3.2 Critical support and services for the affected children and their families

The reviewed studies found that children in Child Protection Unit (CPU) need to be placed at the center of the intervention (Bernard & Greenwood, 2019; Daniel, 2015). Supporting this statement, studies suggest the use of a developmental approach which allows children to be involved in the matters that affect them, and the combination of developmental and contextual understanding of neglect with children's rights perspective (Casey & Hackett, 2021; Nadan et al., 2018; Innes-Turnill, 2023).

Three studies suggested the need to utilize comprehensive theories and gender-sensitive interventions as both parents and children are capable of bringing about a change in their lives (Cui et al., 2016; Hesselink & Booyens, 2016). Abdullah et al. (2021) alluded that service users need to be aware of the services, processes, child welfare legislations as well as their obligations to parents and caregivers of providing for the children. In light of this, parenting education needs to be an ongoing process to ensure that parents are able to care for and supervise their children (Berube et al., 2017; Friedman & Billick, 2015; Tiwari et al., 2018). In addition, Finzi-Dottan and Harel (2014), Innes-Turnill (2023), Kim and Drake (2023), Shadik and O'Connor (2016) add that parents need better and equal opportunities, interventions that consider their strengths, and resources that enable them to provide for their children. Studies also identified the need for parent-child relationship strengthening, and utilization of holistic approaches as they play a crucial role in the upbringing of the children (Awortwe et al., 2020; Casey & Hackett, 2021; Daniel, 2015; Hesselink & Booyens, 2016).

Subtheme 3.3 Social work methods of intervention for the affected children and their families

Shadik and O'Connor (2016) reported that social workers utilize comprehensive theories and effective interventions to deal with intentional child neglect cases. Adding to this statement, Hicks and Stein (2015) listed primary, secondary and tertiary as methods used by social workers to intervene with affected children and their families. These interventions are rendered whether in individual or family, or group, or community settings (Finzi-Dottan, 2014). Tiwari et al. (2018) indicated that interventions provided to parents that are considered to be neglectful need to be

monitored and evaluated. These findings demonstrate a dire need for rigorous and standardized assessment tools do not pay attention to the family's social class but focus on intentional child neglect itself.

Nadan et al. (2018) found that parental practices rely on cultural values, norms, values, economic and social constraints. Therefore, social workers in the Child Protection Unit (CPU) need to be culturally competent, and consider the influence of culture as it may have negative impact on the well-being of children (Awortwe et al., 2020; Nadan et al., 2018; Ringson, 2019). Corroborating this statement, Ringson (2019) and Van Westrhenen et al. (2017) suggested the need to incorporate children's rights approaches, the social work's western methods of intervention, and the indigenous knowledge to better fit the cultural context that children and social workers find themselves in.

Subtheme 3.4 Supporting social workers across a continuum of empowerment services

To address challenges experienced by social workers in CPU, six studies reported that social workers need to be provided with adequate support ranging from improved training, guidance, resources, supervision, monitoring, reduction of caseloads, and sufficient time allocation for cases (Casey & Hackett, 2015; Daniel, 2015; Katz et al., 2019; Schmidt & Azzi-Lessing, 2021; Toros & Tiirik, 2016; Van Westrhenen et al., 2017). Additionally, social workers need to be imparted with skills and knowledge to enable them to effectively intervene with children in need of care, and tailor interventions appropriately (Hicks & Stein, 2015; Nadan et al., 2018).

Subtheme 3.5 Shifting towards the state's responsibility of protecting children

The state has a responsibility of protecting children and to ensure that stability is maintained for them (Awortwe et al., 2020). To achieve this, studies reported the need for the state to collaborate with communities, other institutions and stakeholders in providing a safe environment for the victims, while appropriately rehabilitating the perpetrators (Avdibegovic & Brkic, 2020; Finzi-Dottan & Harrel, 2014; Toros and Tiirik, 2016; Van Westrhenen et al., 2017); Finzi-Dottan and Harel (2014). Since child welfare policies and legislations are used to address issues of children and families in contact with social services, studies demonstrated the need for the state to place strict regulation on policy makers and implementers of child welfare policies, legislations, and assessments of children in need and their families (Berube et al., 2017; Daniel, 2015; Katz et al., 2019).

RECOMMENDATIONS

Recommendations for future research

- More research on child neglect, especially intentional child neglect needs to be conducted, particularly in South Africa as only few studies were found to be addressing this phenomenon.
- Studies found that Africans have long been researched using Western standpoints and methodologies which some of them do not recognize beliefs, practices, traditions, norms and taboos that form an integral part of the African life, therefore, more research that will incorporate the Western methods and indigenous knowledge is needed.
- From the reviewed studies, the voices of parents, caregivers and children are silent in research, parents are blamed for neglect of their children without taking into account their strengths and means. Therefore, it is recommended that future research include them.

Recommendations for social work practice

- Social work interventions were found to be deeply rooted in the Western values which do not take into account the African context of child-rearing beliefs which are aligned with the concept of Ubuntu. It is recommended that social workers utilize comprehensive theories and interventions when dealing with child neglect cases. These methods need to better fit the cultural context by incorporating the indigenous systems and knowledge.
- Policy makers to develop and promote the enhancement of the existing guidelines to enable social workers perform their duties effectively.

Recommendations for social work clientele

- Studies found that parenting methods applied by parents are rooted largely in their cultural beliefs and behavioral patterns that are practiced within their communities such as collective child-rearing practice. More research about how these factors can be addressed needs to be conducted to develop appropriate intervention strategies.

During the scoping review, it was found that only few studies addressed perspectives of the social workers about intentional child neglect. In light of the above findings, perspectives of social workers in the child protection unit about intentional child neglect perpetrated by parents and caregivers were rarely explored and reported. Therefore, social workers in the Capricorn District were consulted to further explore intentional child neglect. This was done to bridge the

gap that was identified during the scoping review. The findings will be reported in the next manuscript.

LIMITATIONS

The limitations of the scoping review include: (1) only English studies were included, and literature in other languages was not included, therefore there is a greater likelihood that important information was not included, hence the researcher suggests that a meta-synthesis be conducted which will include other languages; (2) there was limited literature on intentional child neglect, from the literature search, only three studies (Friedman & Billick, 2015; Bland et al., 2018; Mqadi, 2019) were found to be directly addressing intentional child neglect. However, Mqadi (2019) could not be included as it was grey literature and did not meet the researcher's criteria of inclusion. Due to the limited literature on intentional child neglect, the researcher opted for the keyword child neglect. Hence intentional child neglect and child neglect were used interchangeably. (3) There was a limited time to conduct the scoping review as the researcher had a deadline to complete her Master's degree.

CONCLUSION

The primary goal of this manuscript was to explore from literature the predictors of intentional child neglect by parents and caregivers. The goal was reached as the study findings highlight the predictors of intentional child neglect, challenges experienced by social workers responding to child neglect, and social work intervention methods to child neglect. Recommendations were also drawn from the findings of this study. The manuscript also gives detailed information on child neglect, research methodology, theoretical framework that guided the study, and the study limitations.

LIST OF REFERENCES

- Abdullah, A., Manful, E., Cudjoe, E. & Boateng, L.K. 2021. How did I know when to report physical neglect? Ghanaian mothers' views on Delinquent child maintenance. *Practice: Social work in action*, 33(3): 233-249.
- American Society for the Positive Care of Children. 2022. Child Maltreatment & Neglect Statistics. Available at: <https://americanspcc.org/child-maltreatment-statistics/> (accessed on 08 April 2024).
- Arksey, H., & O'Malley, L. 2005. Scoping Studies: Towards a mythological framework. *International journal of Social Research Methodology*, 8(1): 19-32. <https://doi.org/10.1080/1364557032000119616>.
- Aromataris, E., Fernandez, R., Godfrey, C., Holly, C., Kahlil, H., & Tungpunkom, P. 2015. Summarizing systematic reviews: Methodological development, conduct and reporting of an umbrella review approach. *Int J Evid Healthc*, 13 (3): 132-140.
- Artz, L., Burton, P., Ward, C.L., Leoschut, L., Phyfer, J., Loyd, S., Kassanje, R. & Le Mottee, C. (2016). *Optimus study South Africa: Technical report. Sexual victimisation of children in South Africa. Final report of the Optimus Foundation Study: South Africa*. Centre for Justice and Crime Prevention. South Africa.
- Avdibegovic, E. & Brkic, M. 2020. Child neglect- causes and consequences. *Psychiatria Danubina*, 32(3): 337-342.
- Awortwe, V., Bentum, H., Cudjoe, E. & Abdullah, A. 2020. A reason for the unmet needs of children in contact with social services? Non-resident fathers' perspective on delinquent child maintenance claims. *Child and Youth Services Review*, 117: 1-8. <https://doi.org/10.1016/j.chilyouth.2020.105298>.
- Bernard, C. & Greenwood, T. 2019. 'We're giving you the sack'- Social workers perspectives of intervening in affluent families when there are concerns about child neglect. *British Journal of Social work*, 49: 2266-2282. Doi:10.1093/bjsw/bcz003.
- Berube, A., Lafantaisie, V., Clement, M., Coutu, S., Dubeau, D., Caron, J. & Lacharite, C. 2017. Caseworkers' perspectives on risk factors in the family environment influencing mothers'

- difficulties in meeting children's needs. *Children and Youth Services Review*, 82: 365-372. <https://dx.doi.org/10.1016/j.childyouth.2017.09.038>.
- Bland, V.J., Lambie, I. & Best, C. 2018. Does childhood neglect contribute to violent behaviour in adulthood? A review of possible links. *Clinical Psychology Review*, 60: 126-135.
- Boonzaaier, E. 2019. Exploring risk and resilience as experienced by designated social workers in the Western Cape. Masters Thesis. North West University.
- Braun, V & Clarke, V. 2019. Reflecting on reflexive thematic analysis. *Qualitative research in Sport, Exercise and health*, 11(4): 589-597. <https://doi.org/10.1080/2159676X2019.1628806>.
- Bronfenbrenner, U. 1979. *The ecology of human development: Experiments by nature and design*. Havard University Press.
- Burton, P., Ward, C.L., Artz, L., & Leoschut, L. (2015). *The Optimus Study on Child Abuse, Violence and Neglect in South Africa*. Cape Town. Centre for Justice and Crime Prevention.
- Casey, B. & Hackett, S. 2021. Deconstructing discourse in assessments of child neglect. *British Journal of Social Work*, 51: 2097-2115. Doi:10.1093/bjsw/bcab044.
- Children's Act 38 of 2005. South Africa, 2005. *Government Gazette*, 492(28944). 19 June. Pretoria. Government printers.
- Christodoulou, A., Abakoumkin, G. & Tseliou, E. 2019. Teacher's Intention to Report Child Maltreatment: Testing Theoretically Derived Predictions. *Child and Youth Forum*, 48: 513-527. <https://doi.org/10.1007/s10566-019-09492-x>.
- Cui, N., Xue, J., Connolly, C.A. & Liu, J. 2016. Does the gender of parent or child matter in child maltreatment in China. *Child Abuse and Neglect*, 54:1-9. <http://dx.doi.org/10.1016/j.chiabu.2016.01.003>.
- Damman, J.L., Johnson-Motoyama, M., Wells, S.J. & Harrington, K. 2020. Factors associated with the decision to investigate child protective services referrals: A systematic review. *Child and family Social Work*, 25: 785-804. Doi:10.1111/cfs.12755.

- Daniel, B. 2015. Why have we made neglect so complicated? Taking a fresh look at noticing and helping the neglected child. *Child abuse review*, 24: 82-94. DOI: 10.1002/car.2296.
- Davies, L. 2014. Working positively with media to protect children. *Journal of Social Welfare and Family Law*, 36 (1): 47-58.
- Deb, S. 2018. *An Empirical Investigation into Child Abuse and Neglect in India: Burden, Impact, and Protective*. India. Springer.
- Dickerson, K., Lindner, S., Scurich, N., & Quas, J.A. 2017. When is neglect? It depends on who you ask. *Child maltreatment*, 22(3): 256-264. Doi:10.1177/1077559517709558.
- Ettekal, A.V. & Mahoney, J.L. 2017. "Ecological Systems Theory". In K. Peppler. (ed) The SAGE Encyclopedia of out-of-school learning, pp. 239-241. SAGE publications. The Oaks. <https://doi.org/10.4135/9781483385198.n94>.
- Finzi-Dottan, R. & Harel, G. 2014. Parents potential for child abuse: An intergenerational perspective. *J Fam Viol*, 29:397-408.
- Forsner, M., Elvhage, G., Ewalds-Kvist, B.M. & Lutzen, K. 2021. Moral challenges when suspecting abuse and neglect in school children: A mixed method study. *Child Adolescent Social Work Journal*, 38: 599-610. <https://doi.org/10.1007/510560-020-00680-6>.
- Friedman, E. & Billick, S.B. 2015. Unintentional child neglect: Literature review and observational study. *Psychiatr Q*, 86: 253-259.
- Haslam, Z. & Taylor, E.P. 2022. The relationship between child neglect and adolescent interpersonal functioning: A systematic review. *Child Abuse and Neglect*, 125: 1-13. <https://doi.org/10.1016/j.chiabu.2022.105510>.
- Hesselink, A. & Booyens, K. 2016. When parents interchange love with abuse: An analysis of parental-child abuse for correctional intervention. *Child Abuse Research: A South African Journal*, 17(27):103-114.
- Hicks, L. & Stein, M. 2015. Understanding and working with adolescent neglect: Perspectives from research, young people and professionals. *Child and Family Social Work*, 22: 223-233. DOI: 10.1111/cfs.12072.

- Innes-Turnill, D. 2023. Child abuse, the narrative of parents living in poverty: a critical analysis of parental and professional explanations of why child was harmed. *Journal of Social Work Practice*, 37(2): 183-197. <https://doi.org/10.1080/02650533.2023.2199195>.
- Katz, C., Clucklich, T., Piller, S. & Matty, D.E. (2019). Between chaos and danger: Spotlighting social workers' views in cases of child maltreatment associations in the context of high intensity parental disputes. *Children and Youth Services Review*, 107: 1-7.
- Khalil, H., Peters, M., Godfrey, C. M, McInerney, P., Soares, C. B., & Parker, D. 2016. An evidence based-based approach to scoping reviews. *Worldviews on Evidence-Based Nursing*, 13(2): 119-123. <https://doi.org/10.1111/wvn.12144>.
- Kim, H. & Drake, B. 2023. Has the relationship between community poverty and child maltreatment report rates become stronger or weaker over time? *Child Abuse and Neglect*, 143: 1-14. <https://doi.org/10.1016/j.chiabu.2023.106333>.
- Levac, D., Colquhoun, H., & O'Brien, K.K. 2010. Scoping studies: advancing the methodology. *Implementation Science*, 5(69): 1-9. Doi:10.1186/1748-5908-5-69.
- Lincoln, Y. S. & Guba, E.G. 1985. *Naturalistic Inquiry*. USA: Sage Publications.
- Lockwood, C., Munn, Z., & Porrit, K. 2015. Qualitative research synthesis: Methodological guidance for systematic reviewers utilizing meta-aggregation. *Int j Evid Based Healthc*, 13 (3): 179-187.
- Logan-Greene, P. & Jones, A.S. 2017. Predicting chronic neglect: Understanding risk and protective factors for CPS-involved families. *Child and Family Social Work*, 23: 264-272. DOI:10.1111/cfs.12414.
- Makhubele, J., Mogorosi, L., & Mabasa, A. 2018. Interfacing of Folklore as Societal Cultural Capital and Social Welfare: Implications for Practice Initiatives. *Southern African Journal for Folklore Studies*, 28(1): 1-16.
- Mathews, B., Pacella, R., Dunne, M.P., Simunovic, M. & Marston, C. 2020. Improving measurements of child abuse and neglect: A systematic review and analysis of national prevalence studies. *PLoS ONE*, 15(1): 1-22. <https://doi.org/10.1371/journal.pone.0227884>.

- Mqadi, Z.T., 2019. *Experiencing social work interventions: understanding the perspectives of caregivers labelled neglectful in a selected local community, KwaZulu-Natal*. Masters Thesis. University of KwaZulu-Natal.
- Munn, Z., Peters, M.D.J., Stern, C., Tufanaru, C., McArthur, A. & Aromataris, E. 2018. Systematic review or scoping review? Guidance for authors when choosing between a systematic or scoping review approach. *BMC Medical Research Methodology*, 18(143): 1-7. <https://doi.org/10.1186/s12874-018-0611-x>.
- Nadan, Y., Roer-Strier, D., Gemara, N., Engdau-vanda, S. & Tener, D. 2018. In the eyes of the beholder: parental and professional value mismatch in child risk and protection in two communities in Israel. *International Journal of Psychology*, 53(2): 23-33. DOI: 10.1002/ijop.12513.
- National Society for the Protection of Cruelty to Children. 2024. *Statistics briefing: Neglect*. Available at: <https://learning.nspcc.org.uk/research-resources/statistics-briefings/child-neglect>. (accessed on: 08 April 2024).
- Nowell, L.S., Norris, J.M., White, D.E. & Moules, N.J. 2017. Thematic Analysis: Striving to meet the trustworthiness criteria. *International journal of Qualitative methods*, 16: 1-13.
- Page, M.J., McKenzie, J.E., Bossuyt, P.M., Boutron, I., Hoffmann, T.C. & Mulrow, C.D. 2021. The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. *BMJ*, 372: 71. doi: 10.1136/bmj.n71.
- Ringson, J. 2019. The impact of child rights cultural contestation in orphans and vulnerable children (OVC) support in Zimbabwe. *Child Abuse Research: A South African Journal*, 20(1):51-61.
- Schmidt, K. & Azzi-Lessing, L. 2021. Neglect of young children in South Africa: Implications for prevention, identification and intervention. *Child welfare*, 98(06): 29-52
- Shadik, J.A. & O'Connor, M.K. 2016. Fathering and child maltreatment: Building theory to enhance treatment interventions. *National Association of Social Workers*, 40 (4): 213-224. Doi:10.1093/swr/svw016.

- Statistics South Africa (Stats SA). 2020. *Statistical release: Mid-year population estimates*. Pretoria. Government printers.
- Svard, V. 2017. "Why don't they report?" Hospital personnel working with children at risk. *Child Care in Practice*, 23(4): 342-355. <https://doi.org/10.1080/13575279.2016.1188765>.
- The Constitution of the Republic of South Africa 108 of 1996. South Africa, 1996. 04 February. Pretoria. Government printers.
- The Joanna Briggs Institute. 2015. *Reviewers' manual: Methodology for JBI Scoping Reviews*. Australia. Joanna Briggs Institute.
- Tiwari, A., Self-Brown, S., Lai, B.S., McCarty, C. & Carruth. L. 2018. Effects of an evidence-based parenting program on biobehavioral stress among at-risk mothers for child maltreatment: A pilot study. *Social Work in Health Care*, 57(3):137-163. DOI:10.1080/00981389.2017.1371096.
- Toros, K., & Tiirik, R. 2016. Preschool teachers' perception about and experience of child abuse and neglect. *Early Childhood Educ j*, 44:21-30. DOI:10.1007/510643-014-0675-0.
- Van Wert, M., Fallon, B., Trocme, N., & Collin-Vezina, D. 2018. Educational neglect: Understanding 20 years of child welfare trends. *Child Abuse & Neglect*, 75: 50-60. <https://doi.org/10.1016/j.chiabu.2017.04.034>.
- Van Westrhenen, N., Fritz, E., Vermeer, A. & Kleber, R. 2017. Reflections of social workers on working with abused children in South Africa. *Child Abuse Research: A South African Journal*, 18(1): 1-10.
- Walker, S. 2019. *Systems theory and social work*. In effective social work with children young people and families. Putting Systems theory into practice, pp. 1-15. SAGE Publishers.
- Wang, L., Qu, G., Tang, X, Wu, W, Zhang, J., & Sun, Y. 2019. Child neglect and its association with social living ability: Does resilience attenuate the association? *Psychology, Health & Medicine*, 24 (5): 519-529.

World Health Organisation (WHO). 2020. *Child Maltreatment*, 08 June. Available at: <http://www.who.int/news-room/fact-sheets/detail/child-maltreatment>. (accessed on: 27 May 2021).

World Health Organisation (WHO). 2022. *Violence against children*, 29 November. Available at: <https://www.who.int/news-room/fact-sheets/detail/violence-against-children>. (accessed on: 07 February 2024).

Zeanah, C.H. & Humphreys, K.L. 2018. Child Abuse and Neglect. *Journal of the American Academy of Child and Adolescent Psychiatry*, 57(9): 637-644.

**MANUSCRIPT 2: Qualitative exploration on indicators of Intentional
Child Neglect by parents and caregivers in Capricorn
District: A social work perspective**

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(Please refer to [addendum 17](#) for author guidelines)

ABSTRACT

Despite being labelled “Precious gifts” from God, children are the most vulnerable members of society. No child is immune to intentional neglect, and they tend to experience various forms of abuse, including intentional child neglect which affects people from all walks of life. When this kind of abuse happens, they need someone to step up and advocate for them. Social workers have the statutory responsibility of protecting children from any form of harm, abuse or maltreatment, making them the front-runners in this delicate process. Despite this important role, they often find themselves in adverse situations that compromise their responsibilities. Studies found that social workers are facing intrapersonal and institutional challenges when dealing with child neglect, this prompted the researcher to engage them for their valuable insights.

A sample of sixteen social workers from four municipalities in the Capricorn District self-reported their experiences and perspectives regarding indicators of intentional child neglect. A wide range of indicators including physical, emotional, educational, and medical were found. Amongst others, poverty, unemployment, parental substance abuse, and mental health issues seem to have the potential to dictate how children are raised, cared for, and nurtured.

Emphasis was also placed on improved stakeholder relations and engagement, strengthening the family system to ensure family preservation, and how research can assist in bridging the existing gap in the literature. Conclusions and recommendations were drawn on how improved training and support for social workers can increase their awareness of child protection.

KEYWORDS

Caregivers; child; child neglect; intentional child neglect; parents; social worker

INTRODUCTION

Children are the most vulnerable members of society, and their vulnerability places them at a greater risk of being abused (Rapholo & Makhubela, 2019). The World Health Organisation (WHO, 2022) found that over one billion children are abused globally. The term child abuse is broad. Within this broad term, Voorthuis et al. (2014) distinguished four subtypes which include sexual abuse, emotional abuse, physical abuse, and neglect. For this study, the researcher focused on child neglect, especially intentional neglect as it is considered to be the type that is given less attention (Wang et al., 2019). Even so, the negative impacts of unintentional and intentional neglect on children are identical. Intentional and unintentional acts are both included in the spectrum of child neglect, which does not clearly distinguish between the two types of harm. Intentional child neglect and child neglect will therefore be used interchangeably. Nonetheless, the concept of intentional child neglect broadens and enhances discussions about neglect by emphasizing instances in which caregivers purposefully and consciously ignore to meet the child's basic needs. Child abuse and neglect is not something new, it can be traced back to the early 1970s (Toros and Tiirik, 2016). Despite its long-term existence, it remains the neglected type of child abuse, and it has been on the rise globally (Bland et al., 2018; Christodoulou et al. 2019). No child is immune to neglect, it can occur to any child across all races, cultures, ethnicities, and socio-economic groups (Hesselink & Booyens, 2016).

Zeanah and Humphreys (2018) indicate that child maltreatment and neglect compromise the development of children across all domains, namely physical development, cognitive development, emotional development, and social development. Intentional child neglect has adverse effects with long-term ramifications on children (Friedman & Billick, 2015; Wang et al., 2019; Van Westrhenen et al., 2017). Stoddart et al. (2018) add that intentional child neglect has physical and psychological implications on the well-being of children and their families. According to Haslam and Taylor (2022), neglect has unique effects on the cognitive development of the child as compared to other forms of abuse. It has a negative impact on their behaviours, and on how they learn and grow (Toros & Tiirik, 2016). Zeanah and Humphreys (2018) added other possible impacts such as anti-social behaviours, being socially withdrawn, and anxious-avoidant attachment patterns.

Friedman and Billick (2015) argue that the impacts of intentional child neglect are more profound than other forms of abuse because neglect affects nearly every aspect of a child's development, often in ways that are not immediately visible. Unlike physical abuse, which may leave obvious bruises or injuries, neglect can be a silent and insidious form of harm that disrupts cognitive, emotional, and

social development over time. Because neglect is often less visible than other forms of abuse, it may go unnoticed or unreported, allowing its effects to compound over time (Sciarrino et al., 2018). This makes it particularly dangerous, as the long-term consequences can be severe, affecting the individual's overall well-being.

Despite the difficulty in defining intentional child neglect, The Children's Act describes child neglect as a failure in the exercise of parental responsibilities to provide for the child's basic physical, intellectual, emotional or social needs. Different authors distinguished several subtypes of ICN which include educational neglect (Van Wert et al., 2018), emotional neglect (Berube et al., 2017), medical neglect (Wang et al., 2019), supervisory neglect (Mqadi, 2019), and physical neglect (Zeanah & Humphreys, 2018). Schmidt and Azzi-Lessing (2020) added selective neglect. It is predictable that ICN is more likely to co-occur with other forms of abuse (Brown et al., 2019; Zeanah & Humphreys, 2018).

Historically, the isolated effects of ICN were more difficult to identify because sexual and physical abuse towards children were the ones that were of greater concern (Collings, 2015; Haslam & Taylor, 2022). In the South African context, child abuse and neglect rates remain alarmingly high (Van Westrhenen et al., 2017). In 2022, South Africa was reported to have a total of 21 million children, roughly 20% of these children were not staying with their parents due to labour migration, cohabitation, and poverty (Slemming et al., 2024). Additionally, Blackie (2014) pointed out that parental absence is moderately due to high level of neglect. According to Mabetha et al. (2021), neglect cannot be excluded because South African children are more likely than those in other nations to be reared by family members, and majority of these children are staying with their grandparents, then their aunts, and other family members.

In light of this, the neglect was found to be perpetrated by parents and caregivers, with mothers as the worst perpetrators (Collings, 2015; Christodoulou et al., 2019; Hesselink & Booyens, 2016; Safehorizon, 2016; WHO, 2020). Nnadede (2013) described mothers as the children's first love. Even so, Christodoulou et al. (2019) outlined the difficulties in detecting and reporting child maltreatment that occurs within a family, such difficulties include a lack of consistency and consensus in the definition, and failure to differentiate between lack of means, poverty, and intentional child neglect. Additionally, Friedman and Billick (2015) note that it is difficult to understand and deal with intentional child neglect that happens within families due to cultural differences wherein parents believe that they are acting in the best interest of the children based on their beliefs. Cultural norms,

beliefs and practices were also considered to have an impact on the nurturing and upbringing of the children (Awortwe et al. 2020; Cui et al. 2016; Hicks & Steins, 2015). Supporting this statement, Friedman and Billick (2015) state that cultural relativism has unintended consequences where parents' good intentions based on their cultural beliefs may have an unintended negative impact on their children.

Mabetha et al. (2021) stipulated, it is typical for the South African children to be raised by their grandparents when the parents are unable to do so (Shung-King et al., 2019). Conversely, Damian et al. (2019) argue that grandmothers step in and assume responsibility for providing security and emotional warmth to their grandchildren to avoid the adverse effects of ICN. Furthermore, Damian et al. (2019) listed financial constraints, emotional stress, and changes in social activities as some of the challenges experienced by grandparents who assume parental roles to their neglected grandchildren. Notably, intentional child neglect is on the rise, and rural areas are considered to have a rapid increase of ICN, orphaning, and more social ills due to the scarcity of services and resources (Rochat et al., 2016).

Studies found poverty, labour migration, parental unemployment, parental drug and alcohol abuse, lack of housing, and parental mental health issues as social ills associated with ICN (Awortwe et al., 2020; Berube et al., 2017; Friedman & Billick, 2015; Mabetha et al., 2021). Additionally, Hesselink and Booyens (2016), Voorthuis et al. (2014) and Finzi-Dottan and Harel (2014) posit that in most cases abusive parents are victims of their own negative upbringing such as neglect, incest, physical abuse and lack of love. Factors such as lack of social support from family and other networks, lack of housing, number of children in the family, gender and age of both the child and parent were also found to be associated with ICN (Innes-Turnill, 2023; Tiwari et al., 2018).

PROBLEM STATEMENT

Child maltreatment, including various forms of abuse and neglect, poses a serious threat to children's well-being and development worldwide. While research exists on child neglect as a broad category that includes both intentional and unintentional acts without differentiating between the two, a critical gap remains in understanding intentional child neglect. Children's Act 38 of 2005 describes intentional child neglect as the deliberate failure of parents or caregivers to meet a child's basic physical, emotional, or developmental needs despite having the resources and capacity to do so. Unlike unintentional neglect resulting from poverty, mental health issues, or lack of knowledge, intentional child neglect is a distinct phenomenon with unique contributing factors and consequences.

This form of neglect has severe consequences, often resulting in long-term developmental, emotional, and psychological harm. Children subjected to intentional neglect frequently experience attachment difficulties, behavioural challenges, and heightened vulnerability to future victimization. Moreover, intentional neglect can disrupt family functioning and perpetuate intergenerational cycles of trauma. Despite these significant consequences, research on the specific dynamics of intentional child neglect remains scarce, limiting the ability of social workers to identify and intervene effectively in such cases.

Observations in social work practice reveal a concerning rise in cases where children are left without appropriate adult supervision, and not provided with basic needs such as food, clothing, medical attention, and education, even when caregivers possess the means to provide adequate care. Family members frequently report instances of child abandonment, highlighting a growing awareness of the issue within communities. Some cases suggest that intentional neglect is used as a disciplinary measure within family dynamics, further complicating intervention efforts. For instance, a caregiver refuses to provide meals or proper clothing to a child as a way to discipline them for perceived misbehaviour. The absence of clear definitions, standardized assessment tools, and comprehensive research makes it difficult for social workers to distinguish between intentional neglect and neglect resulting from external hardships. Cultural norms and varying perceptions of parental responsibility further complicate the identification process, often delaying crucial interventions, and leaving affected children and families without the necessary support.

Given the profound and lasting effects of intentional child neglect, further exploration of this issue is essential to enhance social work practice. A deeper understanding of the phenomenon will support the development of more effective assessment frameworks, intervention strategies, and prevention measures. This manuscript is addressing the second objective of the study “***to explore and describe indicators of intentional child neglect by parents and caregivers from the perspective of social workers in the Capricorn District***”. Hence, social workers in the Capricorn District were consulted for their perspectives and experiences on ICN. It seeks to explore intentional child neglect from a social work perspective, focusing on the indicators of intentional neglect, its impact on children and families, and the implications for social work practice. By addressing this gap, the study will contribute to the development of informed policies and interventions that better support vulnerable children and prevent future occurrences of intentional neglect.

THEORETICAL FRAMEWORK

Von Bertalanffy's systems theory (1951) and Bronfenbrenner's ecological theory (1979) served as guiding lenses for this study, and provide a strong foundation for understanding intentional child neglect from a social work perspective. These theories emphasize the interconnectedness between people and the environments in which they find themselves (Ettekal & Mahoney, 2017; Poole, 2014; Sadownik, 2023), highlighting how neglect is not an individual issue but a systematic one that is influenced by multiple factors. By placing the child at the center, this study acknowledges that social structures, parents, caregivers, and broader societal systems play a role in shaping the children's welfare.

Bronfenbrenner systematised his ecological theory as follows:

- **Microsystems:** it involves people that have direct contact with the child and have potential to influence the child's life (Sadownik, 2023), such people include siblings, parents, grandparents, etc. The ecological theory acknowledges the involvement of more than two parents in the upbringing of the children.
- **Mesosystems:** it focuses on the links and partnerships between different microsystems of the child (Sadownik, 2023), it is referring directly to the collaboration between parents as the microsystems of the child and other institutions such as schools, clinics, and social services.
- **Exosystem:** it involves the informal and formal social structures that have an impact on the child's life, development and well-being even when he/she is not directly participating in them such as parents' relationships, friendships, work schedules, easy access to substances and alcohol, etc. (Sadownik, 2023).
- **Macrosystems:** it involves the general contexts that include cultural values, principles, legal frameworks, policies, customs (Sadownik, 2023). It also involves the kind of social and economic support for parents in different circumstances.
- **Chronosystems:** it focuses on the historical changes, timing, ageing of the life of family and the child (Sadownik, 2023), such changes include changes in the structure of family, changes in child rearing roles, changes in sociocultural environments, etc.

RESEARCH METHODOLOGY

Research approach and design

This manuscript followed a qualitative research approach and adopted an interpretive phenomenological design. This design is a suitable methodological approach for this study as it allows a thorough exploration of social workers' experiences and perceptions of intentional child neglect by parents and caregivers (Qutoshi, 2018). Additionally, it allows an in-depth understanding of the meanings that social workers assign to their experiences, producing rich, and contextually grounded insights into the phenomenon (Watson, 2024). The manuscript presents findings obtained through consultations with social workers.

Study population and location

The population for this study consisted of social workers in the Child Protection Unit within the Department of Social Development, Ngwana House, and St Joseph's Children of Charisma in the Capricorn District, Limpopo Province. To ensure district coverage, social workers from the six local municipalities in the Capricorn District were recruited, namely Polokwane-Seshego, Polokwane-Mankweng, Polokwane-Ceres, Molemole, Lepelle-Nkumpi, and Blouberg. However, only four municipalities participated, and the remaining two did not show interest in participating.

Sampling technique

The researcher adopted non-probability with purposive sampling as a subtype to select participants, as it was crucial to select participants to whom a phenomenon relates from the broader population to gain a better understanding of the problem under study (Haenssger, 2019). The researcher selected participants based on the purpose of the study, and their ability to provide rich and in-depth information about the phenomenon under study (Tolley et al., 2016). Since the recruitment was done in collaboration with the mediators, the ambiguousness of purposive sampling was explicitly specified (Gentles et al., 2015). Hence, criteria for inclusion and exclusion were set, and highlighted below:

Criteria of inclusion

- The researcher considered both male and female social workers working with children under DSD and NGO sectors within the Capricorn District.
- The social workers were required to have at least three years' experience.

- They were willing to give consent.
- They were willing to be interviewed and be audio-recorded.

Criteria for exclusion

- Student social workers.
- Social work supervisors.
- Social workers who are not working with children were excluded in this study.

Sampling size

Sixteen social workers in the Capricorn district participated in this study. In support of the sample size, Creswell and Poth (2018) outlined that it is common for phenomenological studies to have a small sample size. Data saturation was reached with Participant O, as no new data emerged during the interview. However, the researcher continued and interviewed the final participant, P, since the appointments had already been scheduled. Hennink et al. (2017) and DiStefano and Yang (2024) advised that the researcher may stop or keep adding participants until the collected data fulfils the study goal and no new information or issues are identified.

Table 5 Identifying particulars of participants

Participants	Age	Gender	Highest qualification	Municipality	Employment	Years of experience
Participant A	37 years	Female	BASW	Polokwane Seshego	DSD supporting NGOs	14 years
Participant B	36 years	Female	Masters	Polokwane Ceres	DSD	11 years
Participant C	30 years	Female	BSW	Polokwane	NGO	08 years
Participant D	36 years	Female	BSW	Polokwane Seshego	DSD	10 years
Participant E	40 years	Female	BASW	Molemole	DSD	12 years
Participant F	45 years	Female	BASW	Molemole	DSD	16 years
Participant G	38 Years	Male	Honors Degree	Molemole	DSD	07 years

Participants	Age	Gender	Highest qualification	Municipality	Employment	Years of experience
Participant H	35 years	Female	BSW	Blouberg	DSD	06 years
Participant I	34 years	Male	Masters	Blouberg	DSD	09 years
Participant J	38 years	Female	Honors Degree	Blouberg	DSD	15 years
Participant K	37 years	Female	BSW	Molemole	DSD	12 years
Participant L	46 years	Female	BSW	Molemole	DSD	14 years
Participant M	37 years	Female	BSW	Polokwane Ceres	DSD	10 years
Participant N	39 years	Female	BSW	Polokwane Ceres	DSD	11 years
Participant O	34 years	Female	BSW	Polokwane Seshego	DSD	11 years
Participant P	33 years	Female	BSW	Polokwane Seshego	DSD	10 years

Recruitment and research process

Ethical permission was obtained from the North-West University (see [addendum 1](#)) and Limpopo Office of the Premier (see [addendum 8](#)). Permission letters to conduct the study were also received from the Limpopo Department of Social Development (see [addendum 9](#)) and the non-Governmental organisations (see [addendum 10](#) and [11](#)). Recruitment was done in collaboration with mediators, and the independent person facilitated the signing of the informed consent form (see [addendum 13](#)). The signing of the informed consent forms was done a week before the commencement of the interviews. Since participation was voluntary, data was collected from the participants who consented and showed interest in being part of the study. All participants consented to the use of audio recording as stipulated in the informed consent.

Data collection

A semi-structured interview schedule (see [addendum 16](#)) was used to collect data because of its flexibility to adapt the interview spontaneously to responses and topics that arise during the conversations as well as its ability to outline the issues that the researcher plans to cover (Haenssger, 2019). A total of 16 social workers participated in individual face-to-face interviews. They provided answers based on their observations and experiences of ICN perpetrated by parents and caregivers, while the researcher made field notes as notetaking and transcription are basic methods of interviewing in qualitative research (Tolley et al., 2016). This ensured that the research question is answered. Apart from the 16 participants in this study, 2 social workers participated in the testing of the interview schedule as Tolley et al. (2016) outlined that the informed consent and interview guide needs to be tested to find out if participants will understand the questions. The 2 participants' responses were not included in this study.

Data analysis

Data was analysed using the six steps of Braun and Clarke's (2019) reflexive thematic analysis. The steps include familiarization with the collected data, generating initial codes, searching for themes, reviewing the themes, defining and naming the themes, and compilation of the report. The researcher became familiar with the collected data by going through all the transcripts and audio recordings. The researcher gained a complete understanding of the data, and the responses were recorded in a table which was provided to the co-coder. Having a co-coder was deemed fit because sometimes qualitative analysis tends to be a subjective exercise and deeply personal (Tolley et al., 2016).

In the second step, the researcher began with the coding process using open and axial coding methods. Both the researcher and co-coder discussed and agreed on the open codes. Thereafter, the researcher developed themes by categorizing the open coded data. The open codes with similarities were connected to generate axial codes. Both the researcher and co-coder had discussed the themes and subthemes, and irrelevant themes were discarded. After discarding irrelevant themes, the researcher checked the grouped themes again, and gave them names. Lastly, the researcher wrote up the findings of this study and presented them in this manuscript.

ETHICAL CONSIDERATIONS

The study was thoroughly reviewed by North-West University's Human Research Ethics Committee (HREC) and The Limpopo Provincial Research Ethics Committee (LPREC). The main aim is to ensure that the participants' rights to privacy, confidentiality, and no exposure to any form of harm (Badampudi et al., 2022; Tolley et al., 2016). The following ethical clearances were issued: North-West University: **NWU-00150-23-A1**, and The Limpopo Provincial Research Ethics Committee: **LPREC/150/2023: PG**. The following ethics were also adhered to:

Confidentiality, privacy, and anonymity- the participants chose the location for the interviews, and majority of them were interviewed in their workspace. Their names were not included in this manuscript, instead pseudonyms were used to label the participants. and only the researcher and study leaders have access to the collected data.

Storage and archiving of data- data collected from the participants was kept in a safe place. No files, interview transcripts, and recordings were left lying around the office. They were kept in a lockable cabinet and password-protected computer files.

STUDY FINDINGS

Five themes emerged from the coded data: (1) indicators of ICN, (2) characteristics of ICN, (3) impacts of ICN, (4) commonalities between the reviewed existing literature and social workers' experiences of ICN, (5) approaches to alleviate ICN.

Theme 1: Indicators of Intentional child neglect

Five indicators emerged under this theme, and they are listed as follows:

Physical indicator

The study found physical indicators to be the most visible among the other indicators. Participants identified indicators of physical neglect in children, including poor hygiene, inadequate clothing, lack of access to basic necessities, persistent hunger, absence of adult supervision, and children wandering the streets to fend for themselves. Corroborating these findings, Sciarrino et al. (2018) note that physical neglect has a greater potential of being detected and identified earlier than any other form of neglect. Participants also highlighted that physical neglect is more visible in cases where a parent or family member wilfully denies a child access to the other parent, particularly fathers due to the inability to pay cultural damages. These findings do not align with Regulation 35 of the

Children's Act, which emphasizes the child's best interests and does not condition parental access on financial obligations

Emotional indicator

The study found emotional indicators to be less visible as compared to the other indicators. Participants outlined that only a few indicators signify emotional neglect in children, including feelings of loneliness, low self-esteem, social withdrawal or clinginess, limited social interaction, and observable developmental delays. These findings are supported by Kaawa-Mafigiri and Walakiri (2017) that the effects of intentional child neglect are likely to persist into adulthood, such as relationship difficulties, attachment disorders, and cognitive deficits that may lead to the inability to make moral decisions.

Health indicator

The study found health indicators to be the most disturbing amongst them all. Participants noted with great concern that children are not accompanied to the clinics for immunization while others present signs of malnourishment. Regarding HIV, the following issues were raised: children not accompanied to the clinics for their Antiretroviral Therapy (ART), others are denied treatment initiation by their parents, and others are given treatment but not as prescribed. Six participants indicated that the parents seem not to care, and are failing to acknowledge the seriousness of the matter.

Financial indicator

The study found financial indicators to be amongst the things that indicate that the child is neglected. Some participants outlined that poverty, and lack of finances or means cannot be considered intentional child neglect. However, for the parents that are receiving Child Support Grant (CSG) for the children but fail to meet their needs it is intentional child neglect. Majority of the participants indicated that most parents use the grant to cater for their needs, such as gambling, alcohol, and clothing.

Educational indicator

Participants pointed out this indicator as a visible one as well. They highlighted that children who are educationally neglected lack concentration in school, bunk school frequently, do not attend

school even when they are of school-going age, and lack educational resources such as school uniform, study aids, and stationery.

Theme 2: Characteristics of intentional child neglect

Four subthemes emerged from this theme: (1) the type of ICN that is eminent in the district, (2) the most affected group and victims of ICN, (3) crucial role-players in reporting ICN, and (4) factors associated with ICN. The study found different characteristics of ICN that are eminent in the district. However, they differ per municipalities. Hence, the findings were presented per municipality. This is supported by Svard (2017) that intentional child neglect estimates vary among countries due to differing methods and definitions used in studies as well as socioeconomic status, and it may have implications for social work practice.

The types of intentional child neglect that are eminent in the district

Although all types were eminent in the municipalities, physical neglect was found to be the dominating and common type of neglect reported across the four subdistricts of Capricorn, and the participating NGO. Alongside physical neglect, Blouberg municipality added supervisory neglect, educational neglect, and medical neglect while NGO added medical neglect as the most reported types. The municipalities differed with the least reported type of neglect as Molemole municipality, and the NGO pointed supervisory neglect; Blouberg municipality reported emotional neglect; Polokwane-Seshego municipality pointed financial neglect; and Polokwane-Ceres noted educational neglect, supervisory neglect, medical neglect, and emotional neglect.

Apart from the most, and least reported types, Polokwane-Ceres reported financial neglect; Polokwane-Seshego also reported educational, supervisory, and medical neglect; lastly Molemole municipality pointed educational, emotional, and medical neglect. The following types were not reported in the municipalities: emotional neglect in Polokwane-Seshego; financial neglect in Blouberg and Molemole municipalities. One of the participants articulated as follows:

“We receive reports of educational neglect for children with special needs. We also have medical neglect, where parents do not take care of their children’s medical needs when they are sick. They depend on teachers at school to bring them to the clinic. This can be seen when parents allow the child who is sick or ill to go to school without taking the child to the clinic. Also, those who are HIV positive, most parents seem to be in denial and do not agree for their children to be initiated and get ART. The parent can take ART and deny the child the right to do so. It happens a lot in this area”

Participant J. This articulation shows that people are still violating the children's rights. It is not in line with section 28 (1) (c) of the Constitution of the Republic of South Africa 108 of 1996 which affords children the right to health, education, nutrition, shelter, and access to social services, as well as protection from abuse, maltreatment, and exploitation.

The most affected group and victims of intentional child neglect

Any child can experience and be affected by the ICN, but they only differ with the severity. Participants in Molemole and Polokwane-Seshego reported that children from newborn to 18 years are not immune to ICN. In Blouberg, participants pointed to children of school-going age, and 0 to 15 years as the most reported victims of ICN while Polokwane-Ceres reported an age range of 0 to 12 years. Lastly, the NGO sector reported toddlers below the age of 4 years as the most reported victims of ICN. This shows that any child is susceptible to neglect. Participant F voiced as follows "0 to 18 years, the cause of this neglect includes lack of discipline by parents, unemployment of parents, alcohol and substance abuse by parents, relationships between parents especially breakups where parents are fighting and end up forgetting the needs of the children, in such situations, children are the ones who are suffering". This is supported by Hesselink and Booyens (2016) that neglect can occur to any child across all spheres of life. These findings show that any child may experience intentional child neglect, but the severity of the neglect will be individualised.

Crucial role-players in reporting intentional child neglect

The study found family members, especially grandmothers to be the most prominent role players in reporting ICN in Polokwane-Ceres, Polokwane-Seshego, and Molemole municipalities while Blouberg reported community leaders and development workers, and the NGO reported community members, area social workers, and police. Even though family members were found to be the most reporting role-players, it was discovered that they are doing so anonymously. In contrast the least reported role-players were neighbours and home-based carers in Polokwane-Ceres; nurses and community members in Molemole; pastors, passersby, nurses, and community members in Polokwane-Seshego; other stakeholders and family members in Blouberg; and few family members in the NGO sector.

The following role-players do not fall within the categories of the most, or least reported, but they were reported within the municipalities. Teachers, principals, police, neighbours, and community home-based carers were reported in Molemole municipality; police and community members were reported in Polokwane-Ceres; teachers, police, and neighbours were also reported in

Polokwane-Seshego; lastly, neighbours and community home-based carers were reported in Blouberg. Participants responded as follows:

Participant N: “reporters are mostly grandparents, teachers, police, few community members, few family members. Family members in most cases are afraid of reporting because they are afraid of jeopardizing their relationships, as a result most of them report anonymously”. Corroborating this statement, Christodoulou et al. (2019) state that intentional child neglect that occurs within a family becomes difficult to detect and report, and in most cases identification and reporting of child abuse relies heavily on settings outside the family, such as educators, neighbours, health professionals.

Participant P: “reporters are teachers, community organisations, neighbours, or people who are left with these children, and grandparents, but with grandparents, most of their reported cases involves the CSG.....”.

Factors associated with intentional child neglect within the municipalities of Capricorn District

This study found that there are various factors that are associated with ICN such as biological factors, health factors, economic factors, cultural, social factors, and educational factors. Even so, these factors differed per municipalities. Most participants were constantly mentioning the mother as a parent. Hence, the mother’s age, especially young mothers, play a dominating factor that can be associated with ICN across all the municipalities. Participants reported that mothers are still young, trying to explore life, and find themselves. Socializing and clubbing were not excluded from the contributing factors. Additionally, the accessibility of alcohol and substances for parents, and lack of parenting skills were reported across the four municipalities.

Even though they are not dominating, unemployment, and lack of support from family and the other partner were reported in Molemole, Polokwane-Seshego, Polokwane-Ceres, and NGO. Furthermore, Parents’ past experiences of abuse, and cohabitation were reported in Molemole, Polokwane-Seshego, and Polokwane-Ceres. Divorce of parents, and number of children in the family were also reported in Molemole and Blouberg. Some of the participants reported post-natal depression, parents’ readiness, labour migration, financial constraints, poverty, and relationship between parents as factors that can be associated with ICN. It was also found that parents’ inability to connect with their children, the father’s inability to pay damages, lack of understanding of the children’s stages of development, and insight into neglect were also linked to the ICN.

Participant G was quoted “Majority of the perpetrators are still young, and trying to figure out life, so they are easily influenced by their peers”. Corroborating this statement, Avdibegovic and Brkic (20202) pointed out that younger parents are at a greater risk of neglecting their children due to limited life skills, lack of finance, and a safe home environment, but also due to developmental conditioned poor judgment and weaker affective regulation in behaviour.

Theme 3: Impacts of intentional child neglect

This study found that ICN does not affect children only, it also affects other people who are supposedly to step in and assume the parenting role. Three subthemes emerged under this theme. (1) Impact on the child, (2) impact on family, and (3) impact on parent-child relationship.

Impact of intentional child neglect on the child

The study found that ICN has long-term effects on children. It affects their upbringing and nurturing in different ways. It was reported that these children develop behavioral problems such as bullying other children, anger issues, and disrespect towards their parents. Others were reported to be isolating themselves, having low self-esteem, and poor academic performance.

Impact of intentional child neglect on the family

This study found grandmothers to be the most affected among the family members who step in to provide care and support for neglected children. It was found that ICN alters the lives of family members, especially grandmothers as they have to change their plans, routines, and budgets to accommodate their neglected grandchildren. In support of these findings, Damian et al. (2019) outline that grandmothers step in and assume responsibility for providing security and emotional warmth to their grandchildren to avoid the adverse effects of ICN. Older siblings who look after the children were also found to be affected by intentional neglect as they are still young and need to be nurtured and cared for, instead they assume parenting roles to their siblings. It was reported that they are not coping at school, and they tend to resent their parents for neglect.

Impact of intentional child neglect on parent-child relations

All participants reported that ICN affects the relationship between children and their parents or caregivers in a negative manner. It was found that children tend to resent their parents, they lose respect, trust, bonds and attachments. It was also found that neglected children are more attached to their grandparents who in most cases step in to provide care, love, and nurturing when parents are

failing. Other participants reported that some of the neglected children develop hatred towards their parents, which may lead to them being rebellious.

Theme 4: Commonalities between the existing literature reviewed and social workers' experiences of intentional child neglect

Similarities and differences were identified between the reviewed literature and social workers' experiences pertaining ICN. Both similarities and differences were found within the characteristics of ICN; indicators of ICN; recognition of social work intervention methods; overwhelming consequences of intentional child neglect on children; and challenges experienced by social workers in the child protection unit.

Theme 5: Approaches to alleviate Intentional Child Neglect

Participants suggested different strategies to alleviate intentional child neglect.

Suggestions for Children

Participants suggested more awareness campaigns and life skills programs for children as they will enable them to know when they are violated. Participant O was recited as follows: "we can do more life skills programs so that children find it easy to speak up when they feel that their needs are not being met. It will help them know where to go, what to do, who to trust etc. some are quiet because they do not know".

Suggestions for parents and caregivers

Most participants suggested the strengthening of parenting programs as a method to alleviate the occurrence of ICN. They further pointed to education, parenting skills, and support as services that can be provided to parents and caregivers. One participant made a call for parents to pay attention to their children's needs.

Suggestions for social work practice

Six participants suggested utilization of a multidisciplinary approach to prioritize the children's health and safety. They also highlighted the need for more trainings and workshops, supervisory support for social workers as it will enable them to carry out their duties efficiently.

Participant I: “People need to work together, especially stakeholders. We need a collaborative way of dealing with these cases, everyone needs to do his/her part.....”. In support of this articulation, social workers, state, and the public have a responsibility of ensuring that children are provided with love, care, warmth and protection (Gribble & Gallagher, 2014; Stoddart et al., 2018).

Suggestions for other authorities

Participants call for sufficient resource allocation, establishment of hotlines, facilities to cater for children in need, units that are dedicated for Child Protection, and collaboration with other stakeholders. Such stakeholders include the Department of Health (DoH), Department of Education (DoE), Department of Justice (DoJ), and other organizations. Participants D, F, and N highlighted that the justice system is lenient on perpetrators, especially when no visible harm was done or reported, therefore, there is a greater need for strengthening the relationship between DoJ and social work agencies. Emphasis was also placed on the amendment of legislation pertaining to the cultural influence on the role of the fathers in their children’s lives.

Participant B articulated: “... parents are not allowing children contact with their paternal side because the father did not pay damages or was never in the picture that alone is emotional neglect”. This is contradicting the regulation 35 of the Children’s Act 38 of 2005 that emphasizes the value of the child’s right to continue having relationships with both parents, regardless of cultural or personal conflicts.

Suggestions for communities

Participants highlighted that some people are not reporting or engaging social work offices due to a lack of insight into the kind of services that are offered and available to them. Consequently, they suggested more awareness campaigns that will focus on making people aware of social work services, educating people about children’s rights and parenting responsibilities, the impact of culture in child-rearing, and lobbying for the community’s involvement in child protection. This is supported by Schmidt and Azzi-Lessing’s (2020) argument that there has been a recent increase in awareness of child abuse, but most efforts have focused on publicizing and raising awareness of child sexual and physical abuse while disregarding intentional child neglect.

CONCLUDING DISCUSSIONS

This qualitative study aimed to explore social workers’ experiences and perspectives on the indicators

of intentional child neglect by parents and caregivers. The findings of this study highlight the multifaceted nature of intentional child neglect by parents and caregivers, emphasizing the various indicators that signify intentional neglect. The five key indicators namely physical, emotional, health, financial, and educational serve as critical markers in identifying and addressing child neglect within communities. Physical neglect, as the most visible indicator, underscores the immediate and tangible needs of children that are often unmet. The presence of untidiness, persistent hunger, lack of clothing, and the absence of adult supervision are all glaring signals of neglect. The visibility of these indicators necessitates timely intervention to mitigate potential long-term harm to the child. Emotional neglect, although less visible, has profound and lasting effects on a child's psychological well-being. The study found that loneliness, low self-esteem, social withdrawal, and developmental delays are among the few observable signs of emotional neglect. These indicators suggest that emotionally neglected children may struggle with social integration and psychological resilience, potentially leading to mental health issues later in life.

Health neglect emerged as the most alarming category, with serious implications for child survival and development. The study revealed a troubling trend where children are not accompanied for essential healthcare services such as immunization and ART. The neglect of healthcare needs demonstrates a lack of parental responsibility, particularly for children living with chronic illnesses such as HIV. The refusal or inconsistency in administering prescribed treatment raises significant ethical and legal concerns, calling for urgent intervention by social services and healthcare providers. Financial neglect was a point of debate among participants, with some arguing that poverty alone should not be equated with intentional neglect. However, intentional financial neglect was evident in cases where parents misused Child Support Grants (CSG) for personal indulgences such as gambling and alcohol consumption rather than fulfilling their children's basic needs. These findings highlight the need for stricter monitoring and accountability mechanisms to ensure that financial aid intended for children's welfare is utilized appropriately. Educational neglect, another highly visible indicator, was characterized by frequent absenteeism, lack of concentration, and the absence of necessary educational resources. Education plays a crucial role in shaping a child's future, and failure to provide a conducive learning environment places children at greater risk of academic failure and future socioeconomic disadvantages. The visibility of some indicators, such as physical and educational neglect, facilitates early detection and intervention. However, the more subtle forms, such as emotional and financial neglect, demand a deeper level of awareness and proactive measures.

A key takeaway from the study is that any child can be a victim of ICN, with age ranges varying by municipality. The trend suggests that younger children, particularly those below school-going age,

are among the most vulnerable. This insight calls for a proactive approach in early childhood development programs, parental education, and intervention services. The role of family members, particularly grandmothers, as primary reporters of ICN is a significant finding. However, their tendency to report cases anonymously suggests a fear of social repercussions, which may hinder effective interventions. The involvement of teachers, police, community leaders, and development workers reflects the broader community's responsibility for child protection. However, the low reporting rates from neighbours, nurses, and religious leaders indicate the need for increased awareness and advocacy to encourage active participation in child welfare.

The study further reveals that various factors contribute to ICN, with a dominant focus on young mothers who are still exploring life. Their limited parenting skills, coupled with social influences such as clubbing and substance abuse, worsen the intentional neglect. Economic factors, such as unemployment and financial constraints, alongside social factors like lack of family support, divorce, and past experiences of abuse, further compound the issue. Additionally, health-related challenges such as post-natal depression and parents' inability to connect emotionally with their children are also significant contributors. The intersectionality of these factors highlights the need for a holistic approach to addressing intentional child neglect. Interventions should not only focus on economic empowerment but also on social and psychological support for parents, particularly young mothers as they were found to be at a greater risk of intentionally neglecting their children. Community-based programs that provide parenting skills, substance abuse rehabilitation, and mental health support can be instrumental in mitigating intentional neglect. Strengthening child protection systems, increasing community awareness, and fostering collaborative efforts among families, social workers, and law enforcement can enhance early detection and intervention efforts. Addressing ICN requires a multifaceted strategy that integrates education, policy reforms, and community engagement. The findings underscore the urgency of developing targeted interventions that address the root causes of ICN while strengthening the support systems available to vulnerable children and their families. By fostering a culture of accountability, awareness, and support, communities can work towards minimizing ICN and ensuring the well-being of children within the Capricorn District.

The findings of this study highlight the multifaceted impact of intentional child neglect (ICN) on children, families, and parent-child relationships. ICN does not only compromise the well-being of children but also places a significant burden on other family members who step in to assume parental roles. Grandmothers and older siblings, in particular, experience substantial disruptions in their lives due to the neglect, forcing them to take on caregiving responsibilities that alter their plans and affect their well-being. Children affected by ICN exhibit a range of negative developmental and

psychological outcomes, including behavioural problems, isolation, low self-esteem, and academic struggles. Additionally, the parent-child relationship deteriorates, as neglected children often harbour feelings of resentment, loss of trust, and detachment from their biological parents while forming stronger attachments to substitute caregivers, such as grandparents.

A key theme that emerged from this study is the alignment and divergence between existing literature and social workers' real-world experiences of ICN. Both sources acknowledge the characteristics and indicators of ICN, the overwhelming consequences for children, and the various challenges social workers face when intervening in these cases. The study underscores the necessity for improved intervention strategies and enhanced child protection measures. The findings emphasize that intentional child neglect is a complex and multifaceted issue that requires a multidimensional approach for effective intervention. Social workers, policymakers, legal authorities, and community stakeholders should collaborate to develop and implement comprehensive strategies aimed at preventing and addressing intentional child neglect, ensuring that every child receives the care, support, and opportunities necessary for a healthy and fulfilling life. By implementing comprehensive strategies, there is a potential to mitigate the negative effects of ICN and ensure a more protective and nurturing environment for vulnerable children.

RECOMMENDATIONS

Recommendation for social work practice

- Participants listed the high caseload, lack of resources, lack of support, and the traumatic nature of their work as factors that lead to their burnout and compassion fatigue. It is recommended that social workers be provided with increased support, further training, sufficient resources, and re-structure in an organizational sphere to ease their workloads and improve the quality of their services.
- It was established that social work interventions are rooted in Western methods. The researcher recommends incorporation of the western methods and indigenous knowledge to better fit the cultural context of child rearing.
- Social workers need to be encouraged to participate in research as their inputs are pivotal to inform policy amendments and for developing intervention strategies.

Recommendation to communities

- The researcher recommends that education be provided to families and communities about social work services, ICN and their role in preventing ICN. They also need to be capacitated in children's rights within the prevailing cultural context.

Recommendation to other authorities

- Although collaborations between various stakeholders exist to safeguard children from intentional neglect, effective implementation remains a challenge. Therefore, the researcher recommends strategies that operationalize these collaborations, ensuring they are effectively executed and responsive to the specific needs of children. From the participants' point of view, collaboration between the justice system and social services also needs strengthening.

Recommendation for future research

- The researcher recommends that more research with bigger samples and different approaches be conducted in the other districts of Limpopo Province, South Africa as a whole to ensure representation.
- ICN is a global concern, and it affects every mortal species, but in this research, only social workers' voices were heard. The researcher recommends that parents, caregivers, communities and children's voices be heard in research.

STRENGTHS AND LIMITATIONS OF THE STUDY

Strengths of this study

- The study found a substantial lack of research in terms of child neglect, specifically ICN, therefore, it unlocks doors for future research that will focus on this specific topic.
- It contributed to the knowledge in the child protection sector regarding intentional child neglect and how social workers perceive it.
- It also created an opportunity for social work practice to formulate policies and social work interventions regarding intentional child neglect and abuse in general.

Limitations of this study

Four limitations of this study were identified.

- The study findings cannot be generalised to the entire district because a small sample from four municipalities of Capricorn District was interviewed. To address this limitation, another research with big sample and various sampling methods should be done.
- There were times when participants cancelled the appointments due to the audits and contracting within their municipalities. To address this challenge, the researcher had to reschedule the appointments which led to the researcher adding more days of study leave at work, it also had financial implications on the researcher's budget.
- Some of the NGOs did not show interest in forming part of the study as they were reluctant to issue permission letters regardless of being contacted several times.

CONCLUSION

This study explored social workers' perspectives on the indicators of intentional child neglect by parents and caregivers in the Capricorn District. By achieving its objectives, the study provided an in-depth understanding of intentional child neglect, shedding light on the complexities and contributing factors associated with this form of maltreatment. The research methodology was rigorously applied, guided by a relevant theoretical framework, and ensured trustworthiness through well-established qualitative research principles.

Despite outlined limitations, the study's findings offer valuable insights that can inform policy, practice, and future research. The study highlights the urgent need for intervention strategies that address intentional child neglect at both preventive and remedial levels. It underscores the importance of equipping social workers with adequate resources, strengthening family support systems, and fostering community awareness to safeguard children's well-being.

The recommendations drawn from this research aim to guide relevant authorities in implementing policies and programs that support children, their families, and social workers. It is hoped that these findings contribute to meaningful change by enhancing protective measures and ensuring that vulnerable children receive the care and supervision they deserve.

REFERENCE LIST

- Avdibegovic, E. & Brkic, M. (2020). Child neglect- causes and consequences. *Psychiatria Danubina*, 32(3): 337-342
- Awortwe, V., Bentum, H., Cudjoe, E. & Abdullah, A. (2020). A reason for the unmet needs of children in contact with social services? Non-resident fathers' perspective on delinquent child maintenance claims. *Child and Youth Services Review*, 117: 1-8. <https://doi.org/10.1016/j.childyouth.2020.105298>.
- Badampudi, D., Fotrousi, F., Cartaxo., & Usman, M. (2022). Reporting Consent, Anonymity and Confidentiality Procedures Adopted in Empirical Studies Using Human Participants. *e-formatica Software Engineering Journal*, 16(1): 220109. DOI:10.37190/e-Inf220109.
- Berube, A., Lafantaisie, V., Clement, M., Coutu, S., Dubeau, D., Caron, J. & Lacharite, C. (2017). Caseworkers' perspectives on risk factors in the family environment influencing mothers' difficulties in meeting children's needs. *Children and Youth Services Review*, 82: 365-372. <https://dx.doi.org/10.1016/j.childyouth.2017.09.038>.
- Blackie, D. (2014). Child abandonment and adoption in the context of African ancestral beliefs in contemporary urban South Africa. Fact sheet on child abandonment research in South Africa. Retrieved from [www. Adoptioncoalitionsa.org](http://www.Adoptioncoalitionsa.org). (Accessed on: 02 February 2022).
- Bland, V.J., Lambie, I. & Best, C. (2018). Does childhood neglect contribute to violent behaviour in adulthood? A review of possible links. *Clinical Psychology Review*, 60: 126-135.
- Braun, V & Clarke, V. (2019). Reflecting on reflexive thematic analysis. *Qualitative research in Sport, Exercise and health*, 11(4): 589-597. <https://doi.org/10.1080/2159676X2019.1628806>.
- Bronfenbrenner, U. (1979). *The ecology of human development: Experiments by nature and design*. Havard University Press.
- Brown, R., Alderson, H., Kaner, E., McGovern, R. & Lingam, R. (2019). "There are carers, and then there are carers who actually care": Conceptualizations of care among looked after children and care leavers, social workers, and carers. *Child Abuse & Neglect*, 92: 219-229.

- Christodoulou, A., Abakoumkin, G. & Tseliou, E. (2019). Teacher's Intention to Report Child Maltreatment: Testing Theoretically Derived Predictions. *Child and Youth Forum*, 48: 513-527. <https://doi.org/10.1007/s10566-019-09492-x>.
- Collings, S.J. (2015). The focus of prevention in child abuse research: The Journal of Child abuse research in review. *Child Abuse Research: A South African Journal*, 16(1): 15-22.
- Creswell, J.W. & Poth, N.C. (2018). *Qualitative enquiry and research design: Choosing among five approaches*. (4th ed). SAGE Publications.
- Cui, N., Xue, J., Connolly, C.A. & Liu, J. (2016). Does the gender of parent or child matter in child maltreatment in China. *Child Abuse and Neglect*, 54:1-9. <http://dx.doi.org/10.1016/j.chiabu.2016.01.003>.
- Damian, J.U., Mashau, N.S. & Tugli, A.K. (2019). Experiences of grandmothers raising their grandchildren in Vhembe District, South Africa. *Journal of Gender, Information and Development in Africa*, 137-151.
- Distefano, A.S. & Yang, J.S. (2024). Sample size and saturation: A three-phase method of ethnographic research with multiple qualitative data sources. *Sage publications*. 36(2): 145-159. DOI:10.1177/1525822x231194515.
- Ettekal, A.V. & Mahoney, J.L. (2017). "Ecological Systems Theory". In K. Peppler. (ed) The SAGE Encyclopedia of out-of-school learning, pp. 239-241. SAGE publications. The Oaks. <https://doi.org/10.4135/9781483385198.n94>.
- Finzi-Dottan, R. & Harel, G. (2014). Parents' potential for child abuse: an intergenerational perspective. *J Fam Viol* 29: 397-408. <https://doi.org/10.1007/s10896-014-9592-7>.
- Friedman, E., & Billick, S.B., (2015). Unintentional Child Neglect: Literature review and observational study. *Psychiatry*, 86: 253-259.
- Gentles, S.J., Charles, C., Ploeg, J., & McKibbin, K.A. (2015). Sampling in Qualitative Research: Insights from an Overview of the Methods Literature. *The Qualitative Report*, 20(11): 1772-1789.
- Gribble, K.D., & Gallagher, M. (2014). Rights of Children in Relation to Breastfeeding in Child Protection Cases. *British Journal of Social work*, 44: 434-450. doi:10.1093/bjsw/bcu004.

- Haenssger, M.J. (2019). *Interdisciplinary qualitative research in global development: A concise guide*. Emerald Publishing Limited.
- Haslam, Z. & Taylor, E.P. (2022). The relationship between child neglect and adolescent interpersonal functioning: A systematic review, *Child Abuse and Neglect*, 125: 1-13. <https://doi.org/10.1016/j.chiabu.2022.105510>.
- Hennink, M., Kaiser, B. & Marconi, V. (2017). Code saturation Vs Meaning saturation: How many interviews are enough? *Qualitative Health Research*, 27: 591-608.
- Hesselink, A., & Booyens, K. (2016). When parents interchange love with abuse: An analysis of parent-child abuse for correctional intervention. *A South African Journal*, 17(2): 103-114.
- Hicks, L. & Stein, M. (2015). Understanding and working with adolescent neglect: Perspectives from research, young people and professionals. *Child and Family Social Work*, 22: 223-233. DOI: 10.1111/cfs.12072.
- Innes-Turnill, D. (2023). Child abuse, the narrative of parents living in poverty: a critical analysis of parental and professional explanations of why child was harmed. *Journal of Social Work Practice*, 37(2): 183-197. <https://doi.org/10.1080/02650533.2023.2199195>.
- Kaawa-Mafigiri, D. & Walakiri, E.J. (2017). *Child abuse and neglect in Uganda*. Kampala. Springer International Publishing. <https://doi.org/10.1007/978-319-48535-5>
- Mabetha, K., Wet-Billings, N.C. & Odimegwu, O. (2021). Healthcare beliefs and practices of kin caregivers in South Africa: Implications for child survival. *BMC Health Services Research*, 21: 486. <https://doi.org/10.1186/s12913-021-06357-9>.
- Mqadi, Z.T., (2019). *Experiencing social work interventions: understanding the perspectives of caregivers labelled neglectful in a selected local community, KwaZulu-Natal*. Masters Thesis. University of KwaZulu-Natal.
- Nnadede, I.K.I. (2013). *How do socio-cultural characteristics and maternal mental health influence the parenting patterns of families from Pakistani Origin Living in Bradford? A qualitative study of Pakistani mothers whose children were born in Bradford*. Doctoral Thesis, University of York.

- Poole, M.S. (2014). Systems Theory. In L.L. Putnam & D.K. Mumby(eds). *The SAGE handbook of organizational communication: Advances in theory, research, and methods*. (pp. 49-74). Thousand Oaks, CA: Sage
- Qutoshi, S.B. (2018). Phenomenology: A Philosophy and Method of Inquiry. *Journal of Education and Educational Development*, 5(1): 215-222.
- Rapholo, S.F. & Makhubela, J.C. (2019). Child sexual abuse incidents in the context of Bapedi in Polokwane, Limpopo Province: Phenomenological Study. *Gender & Behaviour*, 17(4): 14125-14136.
- Republic of South Africa (RSA). (2005). Children's Act 38 of 2005. Pretoria. Government printers
- Republic of South Africa (RSA). (1996). The Constitution of the Republic of South Africa 108 of 1996. Pretoria. Government printers
- Rochat, T.J., Mokomane, Z. & Mitchell, J. (2016). Public perceptions, beliefs and experiences of fostering and adoption: A national qualitative study in South Africa. *Children and Society*, 30: 120-131. <https://doi.org/10.1111/chso.12122>.
- Sadownik, A.R. (2023) Bronfenbrenner: Ecology of Human Development in Ecology of Collaboration. In Visnjic Jevtic (ed) theorizing more-than-parental involvement in early childhood education and care. International perspectives on early childhood education and development. (P. 40). https://doi.org/10.1007/978-3-031-38762-3_4
- Safehorizon. (2016). *Moving victims of violence from crisis to confidence*. Child Abuse facts. Available at: <http://www.safehorizon.org/page/child-abuse-facts-56.html> (accessed on: 23 January 2022).
- Schmidt, K. & Azzi-Lessing, L. (2020). Neglect of young children in South Africa: Implications for Prevention, identification and Intervention. *Child Welfare*, 6 (98): 29-52.
- Sciarrino, N.A., Hernandez, T.E & Davidtz, J. (2018). *Understanding child neglect: Biopsychosocial perspectives*. USA. Springer.
- Shung-King, M., Lake, L., Sanders, D. & Hendricks, M. (2019). *South African Child Gauge. Child and adolescent health: Leave no one behind*. University of Cape Town. Children's institute.

- Slemming, W., Biersteker, L. & Lake, L. (2024). *South African Child Gauge: Enhancing Early Childhood Development*. Cape Town. Children's Institute.
- Stoddart, J.K., Fallon, B., Trocme, N., & Fluke, J. (2018). Substantiated Child Maltreatment: Which factors do workers focus on when making this critical decision? *Children and Youth services*, 87: 1-8. <https://doi.org/10.1016/j.childyouth.2018.01.018>.
- Svard, V. (2017). "Why don't they report?" Hospital personnel working with children at risk. *Child Care in Practice*, 23 (4): 342-355. <https://doi.org/10.1080/13575279.2016.1188765>.
- Tiwari, A., Self-Brown, S., Lai, B.S., McCarty, C. & Carruth, L. (2018). Effects of an evidence-based parenting program on biobehavioral stress among at-risk mothers for child maltreatment: A pilot study. *Social Work in Health Care*, 57(3): 137-163. DOI:10.1080/00981389.2017.1371096.
- Tolley, E., Ulin, P.R., Mack, N., Robinson, E.T., & Succop, S.M. (2016). *Qualitative Research in Public Health: A Field guide for Applied Research*. John Willey & Sons, Inc.
- Toros, K., & Tiirik, R. (2016). Preschool teachers' perception about and experience of child abuse and neglect. *Early Childhood Educ j*, 44:21-30. DOI:10.1007/510643-014-0675-0.
- Van Wert, M., Fallon, B., Trocme, N., & Collin-Vezina, D. (2018). Educational neglect: Understanding 20 years of child welfare trends. *Child Abuse & Neglect*, 75: 50-60. <https://doi.org/10.1016/j.chiabu.2017.04.034>.
- Van Westrhenen, N., Fritz, E., Vermeer, A., & Kleber, R. (2017). Reflections of Social Workers on Working with Abused children in South Africa. *Child Abuse Research: A south African Journal*, 18(1): 1-10.
- Von Bertalanffy, L. (1951). General Systems Theory: A new approach to unity of science, Problems of general system theory. *Human Biology*, 23(4): 302-312.
- Voorthuis, A., Bhandari, R., Out, D., Van der Veen, R., Bajermans-Kranenburg, M.J. & Van IJendoorn, M.H. (2014). Childhood Maltreatment experiences and child abuse potential: Temperamental sensitivity as moderator? *J Fam Viol* 29: 749-756. <https://doi.org/10.1007/s10896-014-9624-3>.

- Wang, L., Qu, G., Tang, X, Wu, W, Zhang, J., & Sun, Y. (2019). Child neglect and its association with social living ability: Does resilience attenuate the association? *Psychology, Health & Medicine*, 24 (5): 519-529.
- Watson, A. (2024). A Postmodernist Qualitative Research Approach: Choosing between Descriptive and Interpretive Phenomenology. *A Journal of Advanced Nursing*, 0: 1-6.
<https://doi.org/10.1111/jan.16730>.
- World Health Organisation (2020, 08 June). *Child Maltreatment*. Retrieved 27 May 2021, from <http://www.who.int/news-room/fact-sheets/detail/child-maltreatment>.
- World Health Organisation. (2022, 29 November). Violence against children. Retrieved 07 February 2024, from <https://www.who.int/news-room/fact-sheets/detail/violence-against-children>.
- Zeanah, C.H. & Humphreys, K.L. (2018). Child Abuse and Neglect. *Journal of the American Academy of Child and Adolescent Psychiatry*, 57(9): 6.

PART 3 CONCLUSIONS AND RECOMMENDATIONS & POLICY BRIEF

This section presents the conclusions, limitations, and recommendations of the entire study. It starts with a brief introduction highlighting the aim of the study as well as how the study's objectives were achieved. Subsequently, followed by conclusions emanating from the study findings, contributions of the study, limitations of the study, recommendations drawn from the study findings, personal reflections, and close with a combined reference list.

3.1 INTRODUCTION

This study was aimed at exploring from literature and practice indicators of intentional child neglect by parents and caregivers. The aim was achieved through two manuscripts. A scoping review was conducted to summarise the predictors of intentional child neglect from the existing literature to identify knowledge gaps. This was then followed by individual semi-structured interviews with sixteen social workers in four municipalities of the Capricorn District, Limpopo Province. These interviews served as step 6 of the scoping review. Social workers were consulted for their contributions on the findings of the scoping review, information gathered through literature search as well as their perspectives and experiences pertaining intentional child neglect. This section will provide a summary of this study. It will start with the discussion of the aim and objectives of the study, followed by conclusions emanating from both manuscripts, contributions of the study, personal reflections, limitations, conclusions and recommendations.

3.2 RESEARCH AIM AND OBJECTIVES OF THE STUDY

The aim of the study was to explore, from literature and practice, the indicators of intentional child neglect by parents and caregivers.

Research objectives were used to achieve the aim of the study. Each objective was answered and presented in separate manuscripts.

Objective 1 (Manuscript 1): To conduct a scoping review of the available research on what predicts intentional child neglect by parents and caregivers. A scoping review was conducted following Arksey and O'Malley's (2005) framework. A total of 24 studies dated 2014 – 2023 were included in the review. Only three of the 24 studies were published in South Africa. The review was guided mainly by predictors of intentional child neglect, followed by social work interventions to intentional child neglect, and challenges associated with intentional child neglect. The findings

indicate a variety of predictors that impact social work practice. It also presented strategies to solve and alleviate this predicament. These findings are presented in manuscript 1, and the objective was met.

Objective 2 (Manuscript 2): To explore and describe indicators of intentional child neglect by parents and caregivers from the perspective of the social worker. Individual semi-structured interviews were conducted with 16 social workers from different municipalities of the Capricorn District. Face-to-face interviews were used to carry out step 06 (consultation) of Arksey and O'Malley's framework as well as exploring social workers' practice experiences and perspectives about intentional child neglect. The findings show similarities between the scoping review's conclusion and what social workers are experiencing in their areas of practice. The findings also indicate that no child is immune to intentional child neglect. It also highlights a variety of indicators, role players, contributory factors, and strategies to alleviate intentional child neglect. The findings were presented in manuscript 2, and the objective was met.

3.3 CONCLUSIONS EMANATING FROM THE FINDINGS OF THE STUDY

3.3.1 Findings of the scoping review as presented in manuscript 1

This scoping review, guided by Arksey and O'Malley's (2005) framework, included 24 studies (N=24), of which only three (N=3) were conducted in South Africa. The dominance of studies from Western and other developing countries highlights a significant gap in African research on intentional child neglect. This is particularly concerning given the high rates of child abuse reported in South Africa (Stats SA, 2020), suggesting that this issue remains underexplored despite its potential severity. However, it is crucial to consider whether the limited research is due to an actual lack of attention to the issue or if it stems from differences in how intentional child neglect is conceptualized in different socio-cultural contexts. The Western understanding of intentional neglect may not fully align with African perspectives, where child-rearing practices, extended family involvement, and socio-economic challenges shape caregiving norms. Therefore, further investigation is necessary to determine whether the concept is simply under-researched in Africa or if existing frameworks fail to capture the nuances of child neglect as it manifests in African societies. Addressing this gap requires contextually relevant studies that explore local definitions, cultural influences, and systemic factors contributing to intentional child neglect in South Africa and the broader African context.

The scoping review found a multifaceted interplay of predictors associated with intentional child neglect including health, economic, social, cultural, biological, educational, and environmental

predictors. Factors such as poverty, substance abuse, mental health issues, and lack of parental support were found to be contributing to intentional child neglect and connected to the predictors. A particularly disturbing finding was the prevalence of substance abuse and cultural beliefs and practices where many neglectful parents tend to believe that they are acting in the best interest of their children.

The scoping review also revealed that social workers have a statutory responsibility towards the protection of children. Yet, they find themselves in complex situations that are grounded by culture, economy, health, environmental factors, etc. Other authors reported that social workers experience intrapersonal and institutional issues, which impacted negatively on their interventions. Various issues that affect social work interventions such as lack of understanding and consistency in defining child neglect were also reported. Most studies reported that even though intentional child neglect impacts people differently, it affects individuals from all spheres of life. Hence, the need for utilisation of all social work methods, and comprehensive theories were identified and reported.

To address this predicament, the authors call for strengthening of the existing collaborations between the government, stakeholders, communities, parents, and social services. The findings also showed the need for the government to step in and ensure that policies and legislation are implemented accordingly. The scoping review also found the need for family strengthening and sufficient support for children and their families. Social workers were also reported to be in need of adequate support as they always put the needs of the children before their own.

3.3.2 Findings of the semi-structured interviews as presented in manuscript 2

Sixteen social workers in the Capricorn District within Limpopo Province were interviewed using a semi-structured interview guide. All individual interviews were face-to-face and used to carry out Step 6 of the scoping review as well as feasible comparisons between the findings of the scoping review and practice experience of the social workers. Both the scoping review findings and social workers revealed that intentional child neglect is multifaceted and requires a multidimensional approach. Most participants shared similar views with the findings of the scoping review. They agreed that intentional child neglect has overwhelming consequences on children and their families, and several factors are influential such as parental factors, child characteristics, family dynamics, community factors, environmental factors, etc. Participants also agreed with the findings of the scoping review that social workers are front-runners when championing the protection of children. Yet, they experience a variety of challenges ranging from intrapersonal to institutional.

This study also found various indicators of intentional child neglect including physical indicators, educational indicators, health indicators, emotional indicators, and financial indicators. Most participants articulated the possibility of one child experiencing more than one indicator or type of intentional child neglect. For instance, one child can bunk school regularly, roaming the streets dirty, and begging for food from strangers. HIV was found to be the most disturbing factor of the health indicator across all municipalities. Participants voiced that there are a greater number of children who are HIV positive but are not on Antiretroviral therapy due to the following reasons: deceased parents who failed to disclose the children's status to the caregiver, parents are in denial and refuse for their children to be initiated on treatment, those who are on treatment are not adhering as parents fail to accompany them to the clinics for their monthly check-ups, others are unable to administer the treatment as prescribed, and others, especially older grandparents lack treatment literacy. Even though characteristics of intentional child neglect were segregated per municipality, the findings show that children from 0 to 18 years are susceptible to intentional child neglect regardless of location, socioeconomic status, age, gender, ethnicity, etc. However, they differ in the severity of their neglect.

All the types of intentional child neglect were found to be eminent in the district. However, the specific types of neglect, their frequencies, reporters, and causal factors differed prominently between the municipalities. Physical neglect occurred as the common type of intentional child neglect across all municipalities demonstrating an unswerving concern for children's basic needs such as food, shelter, clothing, health care, etc. Participants noted that physical neglect stands out from the other types because of its visibility. The variations were attributed to various local causal factors, and role players in reporting cases of neglect. Based on the findings, each municipality has unique needs, and it is important to understand the specific types, causes, and reporters of intentional child neglect in different municipalities as this will ensure that interventions and support services are developed and target the relevant populations.

The findings revealed that as much as children are placed at the centre of this study, intentional child neglect also affects their families and communities. On children, participants reported negative impacts such as low self-esteem, self-isolation, inability to cope at school, poor academic performance, and development of behavioural problems. The study also found that intentional child neglect affects the parent-child relationship negatively as children tend to resent, develop hatred, and lose trust, love, bonds, and attachments toward their parents. Older siblings and grandparents were found to be the most affected as they are always expected to step in and provide care, nurturing,

and support to the neglected children. In most cases, the older siblings are also victims of their parents' neglectful behaviours as they are still young themselves and in need of parental love, care, and nurturing.

All participants suggested strategies that will assist in alleviating intentional child neglect. The suggestions include life skills programs for children; strengthened parenting programs and increased support for parents; and awareness campaigns for children, families, and communities. The study found a dire need for the communities, parents, and children to be capacitated on intentional child neglect, its impact on individuals, children's rights, parenting responsibilities, available social work services, and how to access them. Participants are confident that education will assist in alleviating intentional child neglect as some of the neglect cases and poor reporting are due to a lack of insight. Since the study identified that social workers work under complex situations that at times interfere with their work, participants highlighted an urgent need for a strengthened relationship with the Department of Justice, efficient allocation of resources, improved supervisory support, amplified workshops, and training as well as impactful collaboration with other stakeholders and other role players. Participants also made a call for the state to establish more hotlines, facilities, and a unit that is specifically dedicated to child protection. Looking at the participants' responses, it is evident that there is a lot that still needs to be done for the communities to be child neglect-free and conducive to the development of children.

3.4 CONTRIBUTIONS OF THE STUDY

Even though the contributions of this study may not be too significant, it is sure to unlock doors for future research. The scoping review findings showed the gaps that need to be filled which include substantial lack of research in terms of intentional child neglect. It pointed out that most research focuses on visible child maltreatment like sexual abuse, physical abuse, etc. due to visible bodily harm, whilst under-looking child neglect, especially intentional child neglect. During the interviews, it was notable that people are perceiving child neglect differently. It was discovered that in most cases participants' own discretion is used to determine whether the parent's behavior is neglectful or not. For that, this study will lead to a better understanding of intentional child neglect from different perspectives and views, as well as contribute to the acceleration of formulating policies and social work intervention strategies to address child neglect and abuse in general. Inclusively, both manuscripts made a great contribution to the child protection sector, they contributed to the knowledge about intentional child neglect and how it is perceived in the social work field.

3.5 PERSONAL REFLECTIONS

I stepped into this research as a researcher not as a social worker, community member, or a parent. As a social worker, I observed the overwhelming effect of intentional child neglect on children and their families. This observation was made in 2019 when I was a student social worker conducting my fourth-year practical, and in 2020 when I was an Intern social worker. Although the observation was for a short period, I considered child neglect to be a complex issue because it was perceived differently by community members, family members and social workers. For this reason, my desire to understand the underlying factors contributing to this complex issue as well as exploring probable interventions was activated. Conducting this study was very challenging. Yes, I was excited about being admitted and selected for the NWU partial bursary, but my academic life took a drastic downslope when I was appointed in one of the NGOs in Mpumalanga Province which is approximately 800 KM radius from my home, Limpopo Province. This affected every aspect of my life, I had to leave my family, husband, and three children, the youngest was sixteen months at that time.

Starting a new life and settling in a different province all by myself was not an easy task, it was coupled with fear of the unknown, anxiety, and elevated stress levels as I had to constantly prove my worth in the workspace. Sometimes I would feel like I was failing to create balance between work, social life, family, and my studies. I remember there was a time when I felt like quitting was the only option, but I had to remove myself from the equation and think about everyone who believes in me (children, husband, in-laws, siblings, colleagues, and friends). Despite the challenges that I experienced, conducting this research was a deeply touching experience. I have always known that children need a safe and nurturing environment conducive to their growth and development. However, the more I dug deeper into intentional child neglect, the more I realised the severity and complexity of the matter. At some point I found myself engulfed by the feeling of sadness after learning about the heartbreaking stories of children who suffered neglect at the hands of people who were supposed to love, care for, and protect them.

The most challenging aspect of this research was getting study participants, mostly from the NGO sector. One of the gatekeepers in the NGO sector requested payment in order to grant permission to conduct the study. Even though I did not action this request, it made me realise that some people do not value research and the crucial part it plays in the innovative world. In all honesty, conducting this study was financially and emotionally taxing, some participants would cancel the appointments on the day of the interview or when I arrive at their offices. This affected me so badly

because I had to request another leave from my employer, travel between two Provinces, revisit their municipalities, and expend my refreshment budget. Despite all these challenges, the few social workers that participated offered unmatched insight into intentional child neglect, it shed light on the enormous suffering experienced by children, their families, and communities. I was struck by the mental health issues among social workers especially when they are unable to provide interventions to the best of their abilities due to various reasons.

During the study findings write up phase, I was diagnosed with diabetes which impacted the whole process negatively as I had to try and finish writing up while struggling with side effects of the treatment. In spite of everything that emerged, I can confidently say this research was a revelation, it positively impacted my understanding of the systematic factors that contribute to the problem, critical roles played by social workers in supporting the vulnerable children and their families regardless of the intrapersonal and institutional challenges they experience themselves. It also made me realise the significance of providing comprehensive support services to the affected groups all-encompassing of children and their parents. I think in order to gain in-depth and better understanding of intentional child neglect; it will be beneficial to replicate the study in other municipalities and districts of Limpopo Province.

3.6 LIMITATIONS OF THE STUDY

The following limitations were noted during the study:

3.6.1 Limitations of the scoping review (Manuscript 1)

- Only English studies were included in the scoping review, while literature in other languages was excluded, therefore there is a greater likelihood that in-depth and important information could have been missed from the non-English studies.
- Literature on intentional child neglect was limited as only three studies (Bland et al., 2018; Friedman & Billick, 2015; Mqadi, 2019) were found to be directly addressing intentional child neglect. However, Mqadi (2019) could not be included in the review as it did not meet the criteria of inclusion due to being grey literature. For this reason, intentional child neglect and child neglect were used interchangeably.
- Literature search for the scoping review was stopped in January 2024 as the researcher was experiencing time constraints that were coupled with constant engagements with the mediators in

preparation for recruitment and data collection of manuscript 2. The literature that was published post January 2024 might have been missed, and there is a greater likelihood that the missed literature had the relevant and sufficient information to add value to the study. All these activities were associated with deadlines for the completion of a Master's dissertation.

3.6.2 Limitation of the semi-structured interviews (Manuscript 2)

- The researcher sought to include all six municipalities of the Capricorn District. However, a small sample of 16 social workers purposively selected from four municipalities were interviewed. The findings of this study cannot be easily generalised to the entire Capricorn District and Limpopo as a whole.
- Data collection for this manuscript was challenging, because it was physically, emotionally, financially taxing. There were times when participants would confirm their availability but change their minds upon the researcher's arrival at the agreed location for the interviews. Others were not available due to the audits, contracting, and the signing of Key Performance Areas (KPAs) within the district.
- Additionally, the majority of the participants chose to be interviewed around 13:00 pm during their lunchtime, but this time slot was not favorable to the researcher as these participants wanted to be interviewed at the same time, but in different locations or municipalities. For these reasons, the researcher had to reschedule the appointments which led to the researcher adding more days of study leave at work, it also had financial implications on the researcher's budget.
- Even though the study produced the desired results, it also produced complexities. The researcher chose social workers as the study sample, but during the course of this study, it was observed that some of the intentional child neglect cases and social work interventions were left unresolved because caregivers and parents do not share the same sentiments with social workers. This study gave social workers a platform to share their perspectives while parents and caregivers' stories remained unheard. Another study that will allow the parents and caregivers' voices to be heard is needed.
- The researcher hoped to include non-governmental organizations across the Capricorn District such NGOs include Ngwana House, St Joseph Children of Charisma, Save the Children and ChildLine. The aim was to include one NGO per municipality, but only Ngwana House and St Joseph Children of Charisma which are in the same municipality showed interest and provided

the researcher with permission to conduct the study in their organizations. The other NGOs did not show any interest in partaking in the study, as they did not issue permission letters irrespective of being contacted several times. Some of the gatekeepers even demanded payment in exchange for the permission letters.

3.7 RECOMMENDATIONS

3.7.1 Recommendations for future research

Scoping review

- The study recommends that more research be conducted on child neglect, especially intentional child neglect, particularly in South Africa as only a few studies were found to be addressing this phenomenon.
- The study recommends that research incorporate the indigenous knowledge and western methods as Africans have a history of being researched using the Western standpoint and methods. Whereas, some of these western methods do not recognize the integral role played by traditions, norms, beliefs, and taboos that shape African life.

Semi-structured interviews

- The study recommends more research that will give parents, children, and communities a platform to share their views regarding intentional child neglect as some of the parents are blamed for neglecting their children without taking into account their strengths and means.
- Intentional child neglect is a global concern which affects every living individual, and it requires partnership between all the role players. Yet only four municipalities of Capricorn District in Limpopo Province were included. For this reason, the findings of this study cannot be generalized. The study recommends that more research with bigger samples and different approaches be conducted in the other districts of Limpopo Province, and South Africa as a whole to ensure representation.

3.7.2 Recommendations for social work practice

Scoping review

- The findings show that the current social work methods are engraved in the Western values which do not acknowledge the indigenous child-rearing beliefs that are guided by the concept of Ubuntu.

The researcher recommends the need for utilization of comprehensive theories and interventions that will incorporate the current social work methods with the indigenous systems and knowledge.

- The findings show the need for the strengthening and enhancement of the existing policies and guidelines that will enable social workers to perform their duties effectively.

Semi-structured interviews

- The study recommends that social workers be provided with increased support, further training, sufficient resources, and re-structuring in an organizational sphere to ease their workloads and improve the quality of their services. This will be beneficial to the social work practice as it will ensure the reduction of social workers' burnout and compassion fatigue.
- The study recommends the incorporation of Western methods and indigenous knowledge as majority of social work interventions were found to be rooted in the Western methods. This will ensure that the interventions fit the cultural context of child rearing.
- The researcher recommends that social workers be encouraged to participate in research as their inputs are essential to inform policy amendments and for developing intervention strategies.
- From the participants' point of view, cooperation between the justice system and social services needs strengthening. The researcher recommends an alliance between social services agencies, communities, parents, other community organisations, and all sectors of the government as it will ensure that children are protected and well taken care of.

3.7.3 Recommendations for social work clientele

- The study recommends the empowerment of communities and families wherein they will be capacitated about children's rights even within the cultural context they find themselves intertwined with.
- The study recommends that communities and families be made aware of their role in caring and protecting children as well as social services that are available for their utilisation.

3.8 POLICY BRIEF

This policy brief synthesizes the findings from two manuscripts to provide a cohesive understanding of intentional child neglect and its implications. It offers evidence-based recommendations aimed at addressing the issue through targeted policies and interventions.

Indicators of intentional child neglect by parents and caregivers: A social work perspective

Ms. EP Mkhondo | Ms. TK Tshehle | Dr. T Sayed

INTRODUCTION

Children are among society's most vulnerable, often facing abuse from those meant to love and protect them. The WHO (2022) reports over 1 billion children globally experience maltreatment, including neglect, with caregivers, especially mothers, being primary perpetrators. Neglect often coexists with other forms of abuse (Optimus Study, 2015) and has severe consequences. Social workers have a statutory duty to respond and ensure children's protection and care.

RATIONALE

Child neglect is a complex issue requiring a multidimensional approach for thorough understanding. This study aimed to provide deeper insights into intentional neglect, using findings from a scoping review and interviews to inform future practice and knowledge.

METHODOLOGY

The study was two-fold:

- A scoping review to identify predictors of intentional child neglect and knowledge gaps.
- Interviews with social workers to explore their experiences and compare them with the review findings.

IDENTIFIED GAPS

The study highlights:

- Significant gaps in research on child neglect, especially intentional neglect.
- Absence of perspectives from parents, caregivers, and children in existing studies.
- A tendency to blame parents for neglect without considering their strengths or resources.
- A lack of culturally relevant research recognizing African beliefs, practices, norms, and traditions.



RESEARCH FINDINGS

- The study found intentional child neglect arises from complex factors, including health, economic, social, cultural, biological, educational, and environmental influences. Key indicators include emotional, educational, financial, and health neglect, with physical neglect being most visible. Children often face multiple forms of neglect, influenced by poverty, substance abuse, mental health issues, and lack of parental support. Cultural beliefs, HIV prevalence, and substance abuse were major contributors.
- Neglect leads to severe consequences for children, such as low self-esteem, social isolation, academic struggles, and behavioral issues, while damaging parent-child relationships. Older siblings and grandparents often shoulder caregiving responsibilities despite their vulnerabilities.
- Social workers face cultural, economic, environmental, institutional, and personal barriers, complicating effective child protection interventions.

FUTURE RECOMMENDATIONS

- The study found intentional child neglect stems from diverse factors, including poverty, substance abuse, mental health issues, and cultural beliefs. Physical neglect is most visible, often accompanied by emotional, educational, and financial neglect.
- Neglect harms children's self-esteem, relationships, and education, with caregiving burdens often falling on vulnerable family members like siblings and grandparents. Social workers face significant barriers, including cultural and institutional challenges, in addressing the issue effectively.

SELECTED REFERENCES

Research Bulletin (2015). The Optimus Study on Child Abuse, Violence and Neglect in South Africa. Government Printer
 World Health Organisation. (2022, 29 November). Violence against children. Retrieved 07 February 2024, from <https://www.who.int/news-room/fact-sheets/detail/violence-against-children>

3.9 CONCLUDING STATEMENT

The aim of this study was reached, the scoping review provided an extensive summary of the existing literature while social workers' interviews provided a valued insight into the real-life perceptions, experiences, and practices. Based on the findings of the study, the researcher believes that there is a need for increased awareness about signs, consequences, and factors associated with intentional child neglect. Finally, the researcher believes that future research should focus on the development of operative interventions to address the fundamental causes such as poverty, lack of parental support, and other social ills.

COMBINED REFERENCE LIST

- Abdullah, A., Manful, E., Cudjoe, E. & Boateng, L.K. 2021. How did I know when to report physical neglect? Ghanaian mothers' views on Delinquent child maintenance. *Practice: Social work in action*, 33(3): 233-249.
- American Society for the Positive Care of Children. 2022. Child Maltreatment & Neglect Statistics. Available at: <https://americanspcc.org/child-maltreatment-statistics/> (accessed on 08 April 2024).
- Arksey, H., & O'Malley, L. (2005). Scoping Studies: Towards a mythological framework. *International journal of Social Research Methodology*, 8(1): 19-32. <https://doi.org/10.1080/1364557032000119616>.
- Aromataris, E., Fernandez, R., Godfrey, C., Holly, C., Kahlil, H., & Tungpunkom, P. 2015. Summarizing systematic reviews: Methodological development, conduct and reporting of an umbrella review approach. *Int J Evid Healthc*, 13 (3): 132-140.
- Artz, L., Burton, P., Ward, C.L., Leoschut, L., Phyfer, J., Loyd, S., Kassanje, R. & Le Mottee, C. (2016). *Optimus study South Africa: Technical report. Sexual victimisation of children in South Africa. Final report of the Optimus Foundation Study: South Africa*. Centre for Justice and Crime Prevention. South Africa.
- Avdibegovic, E. & Brkic, M. (2020). Child neglect- causes and consequences. *Psychiatria Danubina*, 32(3): 337-342
- Awortwe, V., Bentum, H., Cudjoe, E. & Abdullah, A. (2020). A reason for the unmet needs of children in contact with social services? Non-resident fathers' perspective on delinquent child maintenance claims. *Child and Youth Services Review*, 117: 1-8. <https://doi.org/10.1016/j.childyouth.2020.105298>.
- Babbie, E. (2016). *The Practice of Social Research*. 4th Ed. Cengage Learning.
- Badampudi, D., Fotrousi, F., Cartaxo., & Usman, M. (2022). Reporting Consent, Anonymity and Confidentiality Procedures Adopted in Empirical Studies Using Human Participants. *e-formatica Software Engineering Journal*, 16(1): 220109. DOI:10.37190/e-Inf220109.

- Bernard, C. & Greenwood, T. (2019). 'We're giving you the sack'- Social workers perspectives of intervening in affluent families when there are concerns about child neglect. *British Journal of Social work*, 49: 2266-2282. Doi:10.1093/bjsw/bcz003.
- Berube, A., Lafantaisie, V., Clement, M., Coutu, S., Dubeau, D., Caron, J. & Lacharite, C. (2017). Caseworkers' perspectives on risk factors in the family environment influencing mothers' difficulties in meeting children's needs. *Children and Youth Services Review*, 82: 365-372. <https://dx.doi.org/10.1016/j.childyouth.2017.09.038>.
- Blackie, D. (2014). Child abandonment and adoption in the context of African ancestral beliefs in contemporary urban South Africa. Fact sheet on child abandonment research in South Africa. Retrieved from [www. Adoptioncoalitionsa.org](http://www.Adoptioncoalitionsa.org). (Accessed on: 02 February 2022).
- Bland, V.J., Lambie, I. & Best, C. (2018). Does childhood neglect contribute to violent behaviour in adulthood? A review of possible links. *Clinical Psychology Review*, 60: 126-135.
- Boonzaaier, E. (2019). Exploring risk and resilience as experienced by designated social workers in the Western Cape. Masters Thesis. North West University.
- Braun, V & Clarke, V. (2019). Reflecting on reflexive thematic analysis. *Qualitative research in Sport, Exercise and health*, 11(4) 589-597. <https://doi.org/10.1080/2159676X2019.1628806>.
- Bronfenbrenner, U. (1979). *The ecology of human development: Experiments by nature and design*. Havard University Press.
- Brown, R., Alderson, H., Kaner, E., McGovern, R. & Lingam, R. (2019). "There are carers, and then there are carers who actually care": Conceptualizations of care among looked after children and care leavers, social workers, and carers. *Child Abuse & Neglect*, 92: 219-229.
- Burton, P., Ward, C.L., Artz, L., & Leoschut, L. (2015). *The Optimus Study on Child Abuse, Violence and Neglect in South Africa*. Cape Town. Centre for Justice and Crime Prevention.
- Butts, J.B., & Rich, K.L. (2018). *Philosophies and Theories for Advanced Nursing Practice*. (3rd ed.). Burlington. Jones & Bartlett Learning.
- Casey, B. & Hackett, S. 2021. Deconstructing discourse in assessments of child neglect. *British Journal of Social Work*, 51: 2097-2115. Doi:10.1093/bjsw/bcab044.

- Christodoulou, A., Abakoumkin, G. & Tseliou, E. (2019). Teacher's Intention to Report Child Maltreatment: Testing Theoretically Derived Predictions. *Child and Youth Forum*, 48: 513-527. <https://doi.org/10.1007/s10566-019-09492-x>.
- Collings, S.J. (2015). The focus of prevention in child abuse research: The Journal of Child abuse research in review. *Child Abuse Research: A South African Journal*, 16(1): 15-22.
- Creswell, J.W. & Poth, N.C. (2018). *Qualitative enquiry and research design: Choosing among five approaches*. (4th ed). SAGE Publications.
- Creswell, J.W., & Creswell, J.D. (2018). *Research design: Qualitative, quantitative, and mixed methods approach*. (5th ed.). Sage Publications.
- Cui, N., Xue, J., Connolly, C.A. & Liu, J. (2016). Does the gender of parent or child matter in child maltreatment in China. *Child Abuse and Neglect*, 54:1-9. <http://dx.doi.org/10.1016/j.chiabu.2016.01.003>.
- Damian, J.U., Mashau, N.S. & Tugli, A.K. (2019). Experiences of grandmothers raising their grandchildren in Vhembe District, South Africa. *Journal of Gender, Information and Development in Africa*, 137-151.
- Damman, J.L., Johnson-Motoyama, M., Wells, S.J. & Harrington, K. 2020. Factors associated with the decision to investigate child protective services referrals: A systematic review. *Child and family Social Work*, 25: 785-804. Doi:10.1111/cfs.12755.
- Daniel, B. 2015. Why have we made neglect so complicated? Taking a fresh look at noticing and helping the neglected child. *Child abuse review*, 24: 82-94. DOI: 10.1002/car.2296.
- Davies, L. (2014). Working positively with media to protect children. *Journal of Social Welfare and Family Law*, 36 (1): 47-58.
- Deb, S. 2018. *An Empirical Investigation into Child Abuse and Neglect in India: Burden, Impact, and Protective*. India. Springer.
- Denzin, N.K., & Lincoln, Y.S. (2018). *The SAGE Handbook of Qualitative Research*. (5th ed.). SAGE Publications.

- Department of Social Development [DSD]. (2021). *Revised White paper on families in South Africa*. Pretoria. Government Printer.
- Department of Social Development. (2011). *Framework for Social Welfare Services*. Pretoria. Government printers
- Dickerson, K., Lindner, S., Scurich, N., & Quas, J.A. 2017. When is neglect? It depends on who you ask. *Child maltreatment*, 22(3): 256-264. Doi:10.1177/1077559517709558.
- Distefano, A.S. & Yang, J.S. (2024). Sample size and saturation: A three-phase method of ethnographic research with multiple qualitative data sources. *Sage publications*. 36(2): 145-159. DOI:10.1177/1525822x231194515.
- Dobrick, F.M., Fischer, J. & Hagen, L. M. (2018). *Research ethics in the Digital Age: Ethics for the social research and humanities in times of mediatization and digitization*. Germany. Springer.
- Ettetal, A.V. & Mahoney, J.L. (2017). "Ecological Systems Theory". In K. Peppler. (ed) The SAGE Encyclopedia of out-of-school learning, pp. 239-241. SAGE publications. The Oaks. <https://doi.org/10.4135/9781483385198.n94>.
- Finzi-Dottan, R. & Harel, G. (2014). Parents' potential for child abuse: an intergenerational perspective. *J Fam Viol*, 29: 397-408. <https://doi.org/10.1007/s10896-014-9592-7>.
- Forsner, M., Elvhage, G., Ewalds-Kvist, B.M. & Lutzen, K. 2021. Moral challenges when suspecting abuse and neglect in school children: A mixed method study. *Child Adolescent Social Work Journal*, 38: 599-610. <https://doi.org/10.1007/510560-020-00680-6>.
- Friedman, E., & Billick, S.B., (2015). Unintentional Child Neglect: Literature review and observational study. *Psychiatry*, 86: 253-259.
- Gentles, S.J., Charles, C., Ploeg, J., & McKibbin, K.A. (2015). Sampling in Qualitative Research: Insights from an Overview of the Methods Literature. *The Qualitative Report*, 20(11): 1772-1789.
- Gribble, K.D., & Gallagher, M. (2014). Rights of Children in Relation to Breastfeeding in Child Protection Cases. *British Journal of Social work*, 44: 434-450. doi:10.1093/bjsw/bcu004.

- Haenssger, M.J. (2019). *Interdisciplinary qualitative research in global development: A concise guide*. Emerald Publishing Limited.
- Hall, K. & Sambu, W. (2018). *South African Child Gauge. Demography of South Africa's Children*. University of Cape Town. Children's institute.
- Haslam, Z. & Taylor, E.P. (2022). The relationship between child neglect and adolescent interpersonal functioning: A systematic review, *Child Abuse and Neglect*, 125: 1-13. <https://doi.org/10.1016/j.chiabu.2022.105510>.
- Hennink, M., Kaiser, B. & Marconi, V. (2017). Code saturation Vs Meaning saturation: How many interviews are enough? *Qualitative Health Research*, 27: 591-608.
- Hesselink, A., & Booyens, K. (2016). When parents interchange love with abuse: An analysis of parent-child abuse for correctional intervention. *A South African Journal*, 17(2): 103-114.
- Hicks, L. & Stein, M. (2015). Understanding and working with adolescent neglect: Perspectives from research, young people and professionals. *Child and Family Social Work*, 22: 223-233. DOI: 10.1111/cfs.12072.
- Innes-Turnill, D. (2023). Child abuse, the narrative of parents living in poverty: a critical analysis of parental and professional explanations of why child was harmed. *Journal of Social Work Practice*, 37(2): 183-197. <https://doi.org/10.1080/02650533.2023.2199195>.
- Kaawa-Mafigiri, D. & Walakiri, E.J. (2017). *Child abuse and neglect in Uganda*. Kampala. Springer International Publishing. <https://doi.org/10.1007/978-319-48535-5>.
- Katz, C., Clucklich, T., Piller, S. & Matty, D.E. (2019). Between chaos and danger: Spotlighting social workers' views in cases of child maltreatment associations in the context of high intensity parental disputes. *Children and Youth Services Review*, 107: 1-7.
- Khalil, H., Peters, M., Godfrey, C. M, McInerney, P., Soares, C. B., & Parker, D. (2016). An evidence based-based approach to scoping reviews. *Worldviews on Evidence-Based Nursing*, 13(2): 119-123. <https://doi.org/10.1111/wvn.12144>.
- Kim, H. & Drake, B. (2023). Has the relationship between community poverty and child maltreatment report rates become stronger or weaker over time? *Child Abuse and Neglect*, 143: 1-14. <https://doi.org/10.1016/j.chiabu.2023.106333>.

- Levac, D., Colquhoun, H., & O'Brien, K.K. (2010). Scoping studies: advancing the methodology. *Implementation Science*, 5(69): 1-9. Doi:10.1186/1748-5908-5-69.
- Lincoln, Y. S. & Guba, E.G. (1985). *Naturalistic Inquiry*. USA: Sage Publications.
- Lockwood, C., Munn, Z., & Porrit, K. (2015). Qualitative research synthesis: Methodological guidance for systematic reviewers utilizing meta-aggregation. *Int j Evid Based Healthc*, 13 (3): 179-187.
- Logan-Greene, P. & Jones, A.S. 2017. Predicting chronic neglect: Understanding risk and protective factors for CPS-involved families. *Child and Family Social Work*, 23: 264-272. DOI:10.1111/cfs.12414.
- Mabetha, K., Wet-Billings, N.C. & Odimegwu, O. (2021). Healthcare beliefs and practices of kin caregivers in South Africa: Implications for child survival. *BMC Health Services Research*, 21: 486. <https://doi.org/10.1186/s12913-021-06357-9>.
- Makhubele, J., Mogorosi, L., & Mabasa, A. (2018). Interfacing of Folklore as Societal Cultural Capital and Social Welfare: Implications for Practice Initiatives. *Southern African Journal for Folklore Studies*, 28(1): 1-16.
- Mamaleka, M.M. (2019). *Developing guidelines for indigenous parenting practices: A case study of Makhuduthamaga Municipality at Sekhukhune District, Limpopo Province, South Africa*. Doctoral Thesis, University of the Western Cape.
- Masoga, M.A., & Shokane, A.L. (2018). *Epistemology and theory framing for this volume*. In A.L. Shokane, J.C. Makhubele. & L.V. Blitz (eds.). *Issues Around Aligning Theory, Research and Practice in Social Work Education (Knowledge pathing: Multi-, Inter- and Trans-Disciplining in Social Sciences Series Volume 1)*, pp. 1-9, AOSIS, Cape Town. <https://doi.org/10.4102/aosis.2018.BK76.00i>.
- Mathews, B., Pacella, R., Dunne, M.P., Simunovic, M. & Marston, C. 2020. Improving measurements of child abuse and neglect: A systematic review and analysis of national prevalence studies. *PLoS ONE*, 15(1): 1-22. <https://doi.org/10.1371/journal.pone.0227884>.

- Moalosi, L.C. (2019). *Focusing on caregivers: The experiences of women caregivers caring for orphans and vulnerable children at Crossroads Child and Youth Care Center, Matatiele*. Masters' thesis. University of KwaZulu-Natal.
- Mocanasu, D.R. (2020). Determining the sample size in qualitative research. *International Multidisciplinary Scientific conference on the Dialogue between Sciences & Arts, Religion & Education*, 4: 181-187. [https:// doi.org/10.26520/mcdsare.2020.4.181-187](https://doi.org/10.26520/mcdsare.2020.4.181-187).
- Monette, D.R, Sullivan, J.T, De Jong C.R., & Hilton, T.P. (2014). *Applied social research: A tool for the human services*. Thomson Brooks/Cole.
- Mqadi, Z.T., (2019). *Experiencing social work interventions: understanding the perspectives of caregivers labelled neglectful in a selected local community, KwaZulu-Natal*. Masters Thesis. University of KwaZulu-Natal.
- Munn, Z., Peters, M.D.J., Stern, C., Tufanaru, C., McArthur, A. & Aromataris, E. 2018. Systematic review or scoping review? Guidance for authors when choosing between a systematic or scoping review approach. *BMC Medical Research Methodology*, 18(143): 1-7. <https://doi.org/10.1186/s12874-018-0611-x>.
- Nadan, Y., Roer-Strier, D., Gemara, N., Engdau-vanda, S. & Tener, D. 2018. In the eyes of the beholder: parental and professional value mismatch in child risk and protection in two communities in Israel. *International Journal of Psychology*, 53(2): 23-33. DOI: 10.1002/ijop.12513.
- National Society for the Protection of Cruelty to Children. 2024. *Statistics briefing: Neglect*. Available at: <https://learning.nspcc.org.uk/research-resources/statistics-briefings/child-neglect>. (accessed on: 08 April 2024).
- Neuman, W.L. (2017). *Understanding Research*. 2nd Ed. Pearson Education Inc.
- Nnadede, I.K.I. (2013). *How do socio-cultural characteristics and maternal mental health influence the parenting patterns of families from Pakistani Origin Living in Bradford? A qualitative study of Pakistani mothers whose children were born in Bradford*. Doctoral Thesis, University of York.
- Nowell, L.S., Norris, J.M., White, D.E. & Moules, N.J. (2017). Thematic Analysis: Striving to meet the trustworthiness criteria. *International journal of Qualitative methods*, 16: 1-13.

- Page, M.J., McKenzie, J.E., Bossuyt, P.M., Boutron, I., Hoffmann, T.C., & Mulrow, C.D. 2021. The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. *BMJ*, 372: 71. doi: 10.1136/bmj.n71.
- Persson, K. (2019). *What defines a parent? A corpus study of the shift in the meaning of the word parent. In American English during the 19th and 20th centuries*. Stockholms. Spring.
- Poole, M.S. (2014). Systems Theory. In L.L. Putnam & D.K. Mumby(eds). *The SAGE handbook of organizational communication: Advances in theory, research, and methods*. (pp. 49-74). Thousand Oaks, CA: Sage
- Pope, C. & Mays, N. (2020). *Qualitative Research in Healthcare*. (4th ed.). Wileys & sons Ltd.
- Qutoshi, S.B. (2018). Phenomenology: A Philosophy and Method of Inquiry. *Journal of Education and Educational Development*, 5(1): 215-222.
- Rapholo, S.F. & Makhubela, J.C. (2019). Child sexual abuse incidents in the context of Bapedi in Polokwane, Limpopo Province: Phenomenological Study. *Gender & Behaviour*, 17(4): 14125-14136.
- Republic of South Africa (RSA). (1996). The Constitution of the Republic of South Africa 108 of 1996. Pretoria. Government printers.
- Republic of South Africa (RSA). (1998). Domestic Violence Act 116 of 1998. Pretoria. Government printers.
- Republic of South Africa (RSA). (1998). Maintenance Act 99 of 1998. Pretoria. Government printers.
- Republic of South Africa (RSA). (2005). Children's Act 38 of 2005. Pretoria. Government printers.
- Republic of South Africa (RSA). (2007). Children Amendment Act 41 of 2007. Pretoria. Government printers.
- Ringson, J. (2019). The impact of child rights cultural contestation in orphans and vulnerable children (OVC) support in Zimbabwe. *Child Abuse Research: A South African Journal*, 20(1): 51-61.

- Rochat, T.J., Mokomane, Z. & Mitchelle, J. (2016). Public perceptions, beliefs and experiences of fostering and adoption: A national qualitative study in South Africa. *Children and Society*, 30: 120-131. <https://doi.org/10.1111/chso.12122>.
- Sadownik, A.R. (2023) Bronfenbrenner: Ecology of Human Development in Ecology of Collaboration. In Visnjic Jevtic (ed) theorizing more-than-parental involvement in early childhood education and care. International perspectives on early childhood education and development. (P. 40). https://doi.org/10.1007/978-3-031-38762-3_4
- Safehorizon. (2016). *Moving victims of violence from crisis to confidence*. Child Abuse facts. Available at: <http://www.safehorizon.org/page/child-abuse-facts-56.html> (accessed on: 23 January 2022).
- Schmidt, K. & Azzi-Lessing, L. (2020). Neglect of young children in South Africa: Implications for Prevention, identification and Intervention. *Child Welfare*, 6 (98): 29-52.
- Sciarrino, N.A., Hernandez, T.E & Davidtz, J. (2018). *Understanding child neglect: Biopsychosocial perspectives*. USA. Springer.
- Shadik, J.A. & O'Connor, M.K. 2016. Fathering and child maltreatment: Building theory to enhance treatment interventions. *National Association of Social Workers*, 40 (4): 213-224. Doi:10.1093swr/svw016.
- Shung-King, M., Lake, L., Sanders, D. & Hendricks, M. (2019). *South African Child Gauge. Child and adolescent health: Leave no one behind*. University of Cape Town. Children's institute.
- Slemming, W., Biersteker, L. & Lake, L. (2024). *South African Child Gauge: Enhancing Early Childhood Development*. Cape Town. Children's Institute.
- Songca, R. (2016). *Vulnerable children in South Africa: Legal, social development and criminological aspects*. Claremont. Juta.
- Statistics South Africa (Stats SA). 2020. *Statistical release: Mid-year population estimates*. Pretoria. Government printers.
- Stoddart, J.K., Fallon, B., Trocme, N., & Fluke, J. (2018). Substantiated Child Maltreatment: Which factors do workers focus on when making this critical decision? *Children and Youth services*, 87: 1-8. <https://doi.org/10.1016/j.childyouth.2018.01.018>.

- Strydom, M., Schiller, U. & Orme, J. (2020). The current landscape of child protection services in South Africa: A systematic review. *Social work/Maatskaplike Werk*, 56 (4): 382-402. <https://dx.doi.org/10.15270/52-2-881>.
- Svard, V. (2017). "Why don't they report?" Hospital personnel working with children at risk. *Child Care in Practice* 23 (4): 342-355. <https://doi.org/10.1080/13575279.2016.1188765>.
- The Joanna Briggs Institute. (2015). *Reviewers' manual: Methodology for JBI Scoping Reviews*. Australia. Joanna Briggs Institute.
- Tiwari, A., Self-Brown, S., Lai, B.S., McCarty, C. & Carruth, L. (2018). Effects of an evidence-based parenting program on biobehavioral stress among at-risk mothers for child maltreatment: A pilot study. *Social Work in Health Care*, 57(3): 137-163. DOI:10.1080/00981389.2017.1371096.
- Tolley, E., Ulin, P.R., Mack, N., Robinson, E.T., & Succop, S.M. (2016). *Qualitative Research in Public Health: A Field guide for Applied Research*. John Willey & Sons, Inc.
- Toros, K., & Tiirik, R. (2016). Preschool teachers' perception about and experience of child abuse and neglect. *Early Childhood Educ j*, 44:21-30. DOI:10.1007/510643-014-0675-0.
- Van Wert, M., Fallon, B., Trocme, N., & Collin-Vezina, D. (2018). Educational neglect: Understanding 20 years of child welfare trends. *Child Abuse & Neglect*, 75: 50-60. <https://doi.org/10.1016/j.chiabu.2017.04.034>.
- Van Westrhenen, N., Fritz, E., Vermeer, A., & Kleber, R. (2017). Reflections of Social Workers on Working with Abused children in South Africa. *Child Abuse Research: A south African Journal*, 18(1): 1-10.
- Von Bertalanffy, L. (1951). General Systems Theory: A new approach to unity of science, Problems of general system theory. *Human Biology*, 23(4): 302-312.
- Voorthuis, A., Bhandari, R., Out, D., Van der Veen, R., Bajermans-Kranenburg, M.J. & Van IJzendoorn, M.H. (2014). Childhood Maltreatment experiences and child abuse potential: Temperamental sensitivity as moderator? *J Fam Viol*, 29: 749-756. <https://doi.org/10.1007/s10896-014-9624-3>.

- Walker, S. (2019). *Systems theory and social work*. In effective social work with children young people and families. Putting Systems theory into practice, pp. 1-15. SAGE Publishers.
- Wang, L., Qu, G., Tang, X, Wu, W, Zhang, J., & Sun, Y. (2019). Child neglect and its association with social living ability: Does resilience attenuate the association? *Psychology, Health & Medicine*, 24 (5): 519-529.
- Warria, A. (2018). *Social work with transnational migrant children in South Africa*. In A.L. Shokane, J.C. Makhubele. & L.V. Blitz (eds.). Issues Around Aligning Theory, Research and Practice in Social Work Education (Knowledge pathing: Multi-, Inter- and Trans-Disciplining in Social Sciences Series Volume 1), pp. 261-299, AOSIS, Cape Town.
<https://doi.org/10.4102/aosis.2018.BK76.12>.
- Watson, A. (2024). A Postmodernist Qualitative Research Approach: Choosing between Descriptive and Interpretive Phenomenology. *A Journal of Advanced Nursing*, 0: 1-6.
<https://doi.org/10.1111/jan.16730>.
- World Health Organisation (2020, 08 June). *Child Maltreatment*. Retrieved 27 May 2021, from <http://www.who.int/news-room/fact-sheets/detail/child-maltreatment>.
- World Health Organisation (WHO). 2022. *Violence against children*, 29 November. Available at: <https://www.who.int/news-room/fact-sheets/detail/violence-against-children>. (accessed on: 07 February 2024).
- Yin, R.K. (2016). *Qualitative Research from Start to Finish*. (2nd ed.). The Guilford Press.
- Zeanah, C.H. & Humphreys, K.L. (2018). Child Abuse and Neglect. *Journal of the American Academy of Child and Adolescent Psychiatry*, 57(9): 6.

SECTION C: ADDENDUMS

ADDENDUM 1:	NWU-HREC ETHICS APPROVAL LETTER	122
ADDENDUM 2:	SCOPING REVIEW PROCESSES AND PROTOCOLS	124
ADDENDUM 3:	CASP TOOL	126
ADDENDUM 4:	APPRAISAL TOOL SYSTEMATIC REVIEWS	129
ADDENDUM 5:	APPRAISAL TOOL QUALITATIVE RESEARCH	130
ADDENDUM 6:	SUMMARY OF THE SCOPING REVIEW.....	131
ADDENDUM 7:	CARSA AUTHOR GUIDELINES.....	134
ADDENDUM 8:	ETHICAL CLEARANCE CERTIFICATE, LIMPOPO	143
ADDENDUM 9:	PERMISSION LETTER LIMPOPO, DSD	145
ADDENDUM 10:	GATEKEEPER_PERMISSION LETTER	146
ADDENDUM 11:	GATEKEEPER PERMISSION LETTER	147
ADDENDUM 12:	PARTICIPANT INFORMATION SHEET	148
ADDENDUM 13:	INFORMED CONSENT	150
ADDENDUM 14:	CONFIDENTIALITY AGREEMENT, REGISTERED SOCIAL WORKER	156
ADDENDUM 15	CONFIDENTIALITY AGREEMENT INDEPENDENT PERSON AND CO-CODER.....	158
ADDENDUM 16:	INTERVIEW GUIDE FOR SEMI-STRUCTURED INTERVIEWS...	160
ADDENDUM 17:	AUTHOR GUIDELINES JSW.....	161
ADDENDUM 18:	DATA EXTRACTING TABLE.....	165
ADDENDUM 19:	PARTICIPANT BIOGRAPHICAL AND CONFIRMATION SHEET	178
ADDENDUM 20:	PARTICIPANTS' RESPONSES.....	180

ADDENDUM 21: DECLARATION BY LANGUAGE EDITOR.....205

ADDENDUM 1: NWU-HREC ETHICS APPROVAL LETTER



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**North-West University Health Research Ethics
Committee (NWU-HREC)**

Tel: 018 299-1206

Email: Ethics-HRECAppl@nwu.ac.za (for human
studies)

8 February 2024

ETHICS APPROVAL LETTER OF STUDY

Based on approval by the North-West University Health Research Ethics Committee (NWU-HREC) on 08/02/2024, the NWU-HREC hereby approves your study as indicated below. This implies that the NWU-HREC grants its permission that, provided the general and specific conditions specified below are met and pending any other authorisation that may be necessary, the study may be initiated, using the ethics number below.

Study title: Indicators of intentional child neglect by parents and caregivers: A social work perspective																														
Principal Investigator/Study Supervisor/Researcher: Ms TK Tshehle																														
Student: EP Mkhondo																														
Ethics number:	<table><tr><td>N</td><td>W</td><td>U</td><td>-</td><td>0</td><td>0</td><td>1</td><td>5</td><td>0</td><td>-</td><td>2</td><td>3</td><td>-</td><td>A</td><td>1</td></tr><tr><td colspan="3">Institution</td><td colspan="3">Study Number</td><td colspan="3">Year</td><td colspan="3">Status</td></tr></table>			N	W	U	-	0	0	1	5	0	-	2	3	-	A	1	Institution			Study Number			Year			Status		
N	W	U	-	0	0	1	5	0	-	2	3	-	A	1																
Institution			Study Number			Year			Status																					
<u>Status:</u> S = Submission; R = Re-Submission; P = Provisional Authorisation; A = Authorisation																														
Application Type: Single study		Risk:	<table><tr><td>Minimal</td></tr></table>	Minimal																										
Minimal																														
Commencement date: 08/02/2024																														
Expiry date: 28/02/2025																														
Approval of the study is provided for a year, after which continuation of the study is dependent on receipt and review of an annual monitoring report and the concomitant issuing of a letter of continuation. A monitoring report is due at the end of February annually until completion of the study.																														

General conditions:

While this ethics approval is subject to all declarations, undertakings and agreements incorporated and signed in the application form, the following general terms and conditions will apply:

- The principal investigator/study supervisor/researcher must report in the prescribed format to the NWU-HREC:
 - Annually on the monitoring of the study, whereby a letter of continuation will be provided annually, and upon completion of the study; and
 - without any delay in case of any adverse event or incident (or any matter that interrupts sound ethical principles) during the course of the study.
- The approval applies strictly to the proposal as stipulated in the application form. Should any amendments to the proposal be deemed necessary during the course of the study, the principal investigator/study supervisor/researcher must apply for approval of these amendments at the NWU-HREC, prior to implementation. Should there be any deviations from the study proposal without the necessary approval of such amendments, the ethics approval is immediately and automatically forfeited.
- Annually a number of studies may be randomly selected for active monitoring.
- The date of approval indicates the first date that the study may be started.

- In the interest of ethical responsibility, the NWU-HREC reserves the right to:
 - request access to any information or data at any time during the course or after completion of the study;
 - to ask further questions, seek additional information, require further modification or monitor the conduct of your research or the informed consent process;
 - withdraw or postpone approval if:
 - any unethical principles or practices of the study are revealed or suspected;
 - it becomes apparent that any relevant information was withheld from the NWU-HREC or that information has been false or misrepresented;
 - submission of the annual monitoring report, the required amendments, or reporting of adverse events or incidents was not done in a timely manner and accurately; and/or
 - new institutional rules, national legislation or international conventions deem it necessary.
- NWU-HREC can be contacted for further information via Ethics-HRECApply@nwu.ac.za or 018 299 1206

Special in process conditions of the research for approval (if applicable):

- a. Please provide the NWU-HREC with the goodwill permission letter from the Capricorn District DSD, indicating that the study can proceed.
- b. Please provide the NWU-HREC with copies of the goodwill permission letters from the managers of the DSD and NGO offices to be included in the study, indicating access to these facilities.

As the study progresses the aforementioned conditions should be submitted to Ethics-HRECProcess@nwu.ac.za with a cover letter with a specific subject title indicating "Outstanding documents for approval: NWU-XXXXX-XX-XX." The letter should include the title of the approved study, the names of the researchers involved, that the documents are being submitted as part of the conditions of the approval set by the NWU-HREC, the nature of the document i.e. which condition is being fulfilled and any further explanation to clarify the submission.

The *e-mail*, to which you attach the documents that you send, should have a *specific subject line* indicating the nature of the submission e.g. "Outstanding documents for approval: NWU-XXXXX-XX-XX". The e-mail should indicate the nature of the document being sent. This submission will be handled via the expedited process.

The NWU-HREC would like to remain at your service and wishes you well with your study. Please do not hesitate to contact the NWU-HREC for any further enquiries or requests for assistance.

Yours sincerely,



Chairperson NWU-HREC

Current details: (23239522) G:\My Drive\9. Research and Postgraduate Education\9.1.5.4 Templates\9.1.5.4.2_NWU-HREC_EAL.docm
20 August 2019
File Reference: 9.1.5.4.2

ADDENDUM 2: SCOPING REVIEW PROCESSES AND PROTOCOLS

Scoping review processes and protocols

1. Review title

Exploring predictors of intentional child neglect by parents and caregivers: A scoping review

2. Reviewer:

Enicca Phillipine Mkhondo

3. Centre conducting the review:

North West University, Vanderbijlpark Campus

4. Review question:

What can be learned from existing literature regarding predictors of intentional child neglect by parents and caregivers?

5. Inclusion criteria

Participants:

Studies that include child neglect, and/ social workers perspectives or experiences

Phenomenon under study:

Studies that include intentional child neglect, or child neglect since literature that focused specifically on intentional child neglect is limited.

<i>Type of studies</i>	<i>Geographical location of the studies</i>	<i>Language</i>	<i>Databases</i>	<i>Publication dates</i>	<i>Keywords</i>
-Quantitative -Qualitative -Mixed methods -Meta-synthesis -Systematic reviews -Observational studies	Studies conducted across the globe	English	-Sabinet -EBSCOhost -Academic search Complete -APA PsycINFO -APA PsycArticles -SocINDEX	2014-2023	“Intentional child neglect” OR “indicators of intentional child neglect” OR “child neglect” AND “Parent+” OR “caregivers” AND “Social worker+” OR “social workers perspectives”

6. Exclusion criteria

<i>Types of studies</i>	<i>Language</i>	<i>Year of Publication</i>	<i>Publications</i>	<i>Sources</i>
-Studies that focus on other professionals while excluding social workers -Studies that include child maltreatment while neglecting child neglect	Non-English studies, e.g. Afrikaans, native language, Spanish, French	Studies published prior 2014	Studies that are not peer reviewed	-Studies that are not peer reviewed -Information from conference proceedings -Grey literature -Social media platforms -Studies that are not peer-reviewed

7. study selection process

- Identify articles from selected databases using relevant keywords
- Limit the search to academic journals still using the relevant keywords
- Limit the search to a timeframe, 2014-2023
- Exclude non-English studies from the search
- Limit the search to full text, and assess the studies for inclusion and remove the studies that do not meet the criteria.
- Screen all titles and abstracts for inclusion
- Download all full publications that meet criteria, and appear to be answering the review question for further scrutinization and double checking.
- Read all the publications and record them for inclusion in the scoping review

8. Search strategy

- Analyse the text words contained in the titles and abstracts
- Index terms used to describe the articles
- Identify keywords and index terms
- Reference list of all identified publications and articles.

9. charting the data:

- Map and extract data from the selected studies and record it into the data charting table.

ADDENDUM 3: CASP TOOL

CRITICAL APPRAISAL SKILLS PROGRAMME

Criteria	Yes	No	Can't tell
Section A: Are the results of the review valid			
Question 01 Did the review address a clearly focused question? <i>An issue can be focused in terms of:</i> • <i>the population Studied</i> • <i>the intervention given</i> • <i>the outcome considered</i> Comments:			
Question 02 Did the authors look for the right type of papers <i>The best sort of studies would</i> • <i>address the review question</i> • <i>have an appropriate study design (usually RTCs for papers evaluating interventions)</i> Comments:			
Is it worth continuing?			
Question 03 Do you think all important relevant studies were included? <i>Look for</i> • <i>which bibliographic databases were used</i> • <i>follow up from reference lists</i> • <i>personal contact with experts</i> • <i>unpublished as well as published studies</i> • <i>non-English language studied</i> Comments:			
Question 04 Did the review's authors do enough to assess quality of the included studies?			

<i>The authors need to consider the rigour of the studies they have identified. Lack of rigour may affect the studies' results ("All that glitters is not gold" Merchant of Venice- Act II Scene 7)</i> Comments:			
Question 05 If the results of the review have been combined, was it reasonable to do so? <i>Consider whether</i> <i>• results were similar from study to study</i> <i>• results of all the included studies are clearly displayed</i> <i>• results of different studies are similar</i> <i>• reasons for any variations in results are discussed</i> Comments:			
Section B: What are the results?			
Question 06 What are the overall results of the review? <i>Consider</i> <i>• if you are clear about the review's 'bottom line' results</i> <i>• what these are (numerically if appropriate)</i> <i>• how were the results expressed (NNT, odds ratio etc.)</i> Comments:			
Question 07 How precise are the results? <i>Look at the confidence intervals, if given</i> Comments:			
Section C: Will the results help locally?			
Question 08 Can the results be applied to the local population? <i>Consider whether</i>			

• <i>the patients covered by the review could be sufficiently different to your population to cause concern</i> • <i>your local setting is likely to differ much from that of the review</i> Comments:			
Question 09 Were all important outcomes considered? <i>Consider whether there is other information you would like to have seen</i> Comments:			
Question 10 Are the benefits worth the harms and costs? <i>Consider even if this is not addressed by the review, what do you think?</i> Comments:			

ADDENDUM 4: APPRAISAL TOOL SYSTEMATIC REVIEWS

JBI CRITICAL APPRAISAL CHECKLIST FOR SYSTEMATIC REVIEWS AND RESEARCH SYNTHESSES

Reviewer _____ Date _____

Author _____ Year _____ Record Number _____

	Yes	No	Unclear	Not applicable
1. Is the review question clearly and explicitly stated?	☐	☐	☐	☐
2. Were the inclusion criteria appropriate for the review question?	☐	☐	☐	☐
3. Was the search strategy appropriate?	☐	☐	☐	☐
4. Were the sources and resources used to search for studies adequate?	☐	☐	☐	☐
5. Were the criteria for appraising studies appropriate?	☐	☐	☐	☐
6. Was critical appraisal conducted by two or more reviewers independently?	☐	☐	☐	☐
7. Were there methods to minimize errors in data extraction?	☐	☐	☐	☐
8. Were the methods used to combine studies appropriate?	☐	☐	☐	☐
9. Was the likelihood of publication bias assessed?	☐	☐	☐	☐
10. Were recommendations for policy and/or practice supported by the reported data?	☐	☐	☐	☐
11. Were the specific directives for new research appropriate?	☐	☐	☐	☐

Overall appraisal: Include ☐ Exclude ☐ Seek further info ☐

Comments (Including reason for exclusion)

ADDENDUM 5: APPRAISAL TOOL QUALITATIVE RESEARCH

JBI CRITICAL APPRAISAL CHECKLIST FOR QUALITATIVE RESEARCH

Reviewer _____ Date _____

Author _____ Year _____ Record Number _____

	Yes	No	Unclear	Not applicable
1. Is there congruity between the stated philosophical perspective and the research methodology?	☐	☐	☐	☐
2. Is there congruity between the research methodology and the research question or objectives?	☐	☐	☐	☐
3. Is there congruity between the research methodology and the methods used to collect data?	☐	☐	☐	☐
4. Is there congruity between the research methodology and the representation and analysis of data?	☐	☐	☐	☐
5. Is there congruity between the research methodology and the interpretation of results?	☐	☐	☐	☐
6. Is there a statement locating the researcher culturally or theoretically?	☐	☐	☐	☐
7. Is the influence of the researcher on the research, and vice-versa, addressed?	☐	☐	☐	☐
8. Are participants, and their voices, adequately represented?	☐	☐	☐	☐
9. Is the research ethical according to current criteria or, for recent studies, and is there evidence of ethical approval by an appropriate body?	☐	☐	☐	☐
10. Do the conclusions drawn in the research report flow from the analysis, or interpretation, of the data?	☐	☐	☐	☐

Overall appraisal: Include ☐ Exclude ☐ Seek further info ☐

Comments (Including reason for exclusion)

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Critical Appraisal Checklist for Qualitative Research - 3

ADDENDUM 6: SUMMARY OF THE SCOPING REVIEW

INFORMATION/ SUMMARY OF THE SCOPING REVIEW

INFORMATION/ SUMMARY OBTAINED THROUGH SCOPING REVIEW

		Y	N	Comments
1. Characteristics of intentional child neglect				
1.1. Types of intentional child neglect	i. Emotional neglect			
	ii. Educational neglect			
	iii. Physical neglect			
	iv. Medical neglect			
	v. Supervisory neglect			
	vi. Selective child neglect			
1.2. The most affected group	i. Children of school going age			
	ii. Boy child			
	iii. Children with special needs			
	iv. Orphans			
1.3. The perpetrators	i. Parents			
	ii. Caregivers			
	iii. Family members			
	iv. Guardians			
1.4. Reporters of intentional child neglect	i. Hospital personnel (doctors, pediatric ward nurses)			
	ii. Teachers			
	iii. Police			
	iv. Few community members			
	v. Few family members			
2. Predictors of intentional child neglect				
2.1. Economic factor	i. Poverty			
	ii. Labor migration			
2.2. Health factor	i. Alcohol and substance abuse			
	ii. High burden of HIV/AIDS which led to children being orphans			

	iii. Stress/ parents' past experiences			
2.3. Cultural factor	i. Cultural beliefs and practices			
	ii. Societal norms			
	iii. Family values			
2.4. Social factor	i. Lack of housing			
	ii. Low marriages			
	iii. High rates of cohabitation			
	iv. Educational opportunities			
	v. Relationship between parents			
	vi. Lack of support from family members and community			
3. Social work approaches to Intentional Child neglect				
3.1. Primary Measures	i. Awareness campaigns-			
	ii. Life skills programmes			
	iii. Parenting skills programme			
	iv. Multidisciplinary efforts			
	v. Parents involvement			
3.2. Secondary measures	i. Statutory intervention			
	ii. Removing and placing children in foster homes			
	iii. Reunifications			
4. Impact of intentional child neglect				
4.1. Impact on the child	i. Low self-esteem			
	ii. Delayed cognitive development			
	iii. Impaired social skills			
	iv. Impaired emotional nurturing			
	v. Physical injuries/deaths			
	vi. Poor school performance			
	vii. The children turning into future abusers			
4.2. Impact on family	i. Financial burden			
	ii. Family conflicts			

	iii. Intergenerational abuse			
5. Challenges to social work practice				
5.1. Institutional challenges	i. Lack of supervisory support			
	ii. Insufficient training to deal with child neglect			
	iii. Lack of consensus in defining child neglect			
	iv. Lack of resources			
	v. Lack of standardized risk assessment tools			
	vi. Parents' aggression and intimidation			
	vii. Lack of reporting (cases of neglect)			

ADDENDUM 7: CARSA AUTHOR GUIDELINES

1 EDITORIAL POLICY

Child Abuse Research a South African Journal (CARSA) has been published biannually since 2000. CARSA is an accredited journal approved by the South African Department of Education and Higher Training and it was SAPSE accredited in 2003 for articles published in the journal from 2004 onwards. This means that CARSA is a peer reviewed, fully accredited, professional journal and academics at higher education institutions receive credits if their articles are published in CARSA.

An article contribution to the editor(s) will only be considered provided it has been edited and is **ready for processing**, namely: language edited, stylistically polished and carefully proofread and to follow the technical format and referencing guidelines as provided below. Manuscripts not following the journal style, referencing technique, technical format and language edited will be returned to author(s) for correction and re-submission before being sent out for refereeing. In submitting an article author(s) acknowledge that it is their own original work and that all content sourced from other authors and/or publications have been fully recognised and referenced according to the guidelines for authors.

Review and refereeing of submitted articles

According to the Policy and Procedures for Measurement of Research Output of Public Higher Education Institutions, research output is defined as *“textual output where research is understood as original, systematic investigation undertaken in order to gain new knowledge and understanding”* (Ministry of Education, 2003: 3). Therefore, an uncritical synthesis of literature without contributing any new insight to existing knowledge falls outside the scope of this definition. Furthermore, *“peer evaluation of the research is considered a fundamental prerequisite of all recognised output and is the mechanism of ensuring and thus enhancing quality”* (Ministry of Education, 2003: 3-4).

The Journal also subscribes to and follows the peer review principles and guidelines as outlined in the Academy of Science of South Africa (ASSAF) document: *National Code of Best Practice in Editorial Discretion and Peer Review for South African Scholarly Journals* (Assaf, 2008).

Accordingly the Editorial Team will carefully examine submitted article manuscripts with a view to the selection of appropriate peer reviewers (who should be scholars who have not previously co-published extensively with the author(s), who are for this and other reasons free of known bias in relation to the subject matter, the author(s) and/or their institutions, and who can cover, from a position of authority and peer expertise, the topic(s) dealt with in the article concerned, i.e. are recognised experts in a specific specialist field in the disciplines served by this journal.

The Editor(s) will submit article contributions to referees (in a double blind review process) for evaluation and may alter or amend the manuscript in the interests of stylistic consistency, grammatical correctness or coherence. The refereeing process is always anonymous and the identity of referees will remain confidential. It remains the prerogative of the editors to accept or reject for publication any submission and their decisions are final. They will not enter into any debate or correspondence regarding any decision made. Evaluators agreeing to referee articles are requested to provide, where possible, critical and constructive feedback on the work of their peers. They are requested to make a recommendation based on the following:

- i Accept for publication in its present form;
- ii Accept with minor revisions as indicated; or
- iii Resubmit with major revisions in accordance with critical and constructive feedback provided;
- iv Reject (unlikely to be accepted even after revision). In this instance it would be senseless to provide feedback and the decision of the editors would be final.

Apart from scientific shortcomings or inconsistencies, the following evaluative criteria are considered:

- The theme is academically significant (timely, important, in need of addressing);
- The theme contributes to an existing (professional) body of knowledge (knowledge useful);
- Author(s)’ goals and objectives are clearly stated;
- The article addresses (unpacks) themes logically, consistently and convincingly;
- The article demonstrates an adequate understanding of the literature in the field;
- The research design is built on adequate understanding, evidence, informational input;
- The interpretative potential of the data has been realised;
- The article demonstrates a critical self-awareness of the author’s own perspectives and interests;

- Holistically, the article is properly integrated and clearly expresses its case measured against the technical language of the field (theory, data and critical perspectives are well structured and the presentation is clear);
- Conclusions are clearly stated and adequately tie together the elements of the article
- The standard of writing (including spelling and grammar) is satisfactory;
- The APA CARSA adapted reference technique is consistently applied throughout the article ;
- Sources consulted are sufficiently acknowledged (included in a list of references) and consistently cited to:
 - supply academically sound **evidence** on which the author's observations, statements, and/or conclusions are based;
 - enable readers to **consult** original sources themselves (precisely stating where and/or under which circumstances); and
 - **acknowledge** the authors (source) from whom information was taken.

Effective and detailed source referencing is of paramount importance. Articles will be scrutinised and checked for bibliographic references and any proven evidence of plagiarism (including self-plagiarism where more than one-third of previously published work by the author(s) is being used in the author(s)' submitted article) will result in non-publication.

The authors bear full responsibility for the accuracy of the factual content of their contributions and indemnify SAPSAC or its agent against any loss, damage, cost, liability or expense, including legal and professional fees arising out of legal action against SAPSAC or its agent with reference to actual or alleged infringement of copyright or the intellectual property rights of any natural or legal person. Copyright of all published material is vested in SAPSAC. Please note that the views and opinions expressed by the authors are not necessarily those of the editor or SAPSAC and do not necessarily reflect the policies or views of SAPSAC. Authors are solely responsible for the content of their articles.

Manuscripts for publication or enquiries pertaining to CARSA should be directed to: The Editor-in-Chief: Prof M Ovens ovensm@unisa.ac.za

2 GUIDELINES FOR AUTHORS

Referencing guidelines

Notes: References and citations should be prepared in accordance with the *CARSA adapted APA format* (see below examples of various reference listing types). The 'in-text' referencing format is followed by the Journal with full source referencing information listed under the heading: **LIST OF REFERENCES** (uppercase), which list to be placed at the end of your article. All sources in the List of References must be listed alphabetically by author(s)' surname(s), according to the following examples. Please note the indenting of the second and additional lines of a reference listing when longer than one line. Use of full stops in listing: Generally each separate piece of information is standardly followed by a full stop. A comma only used if part of that one piece of information. Exception being the use of the colon [:] – and not a dash [-] or semi-colon [;] – in a split article or book title and after the place of publication before the name of the publisher.

List of references [examples]

African Commission on Human and Peoples' Rights, Organisation of African Unity (OAU). 1999. *African Charter on the Rights and Welfare of the Child*. Available at: http://www.childinfo.org/files/fgmc_African_Charterontherightsandwelfareofthechild.pdf (accessed on: 14 January 2005). [alternately the term: retrieved from: ... can be used in place of the term: accessed].

Alberts, C. & Meyer, J.C. 1998. The relationship between Marcia's ego identity status and selected variables in an African context. *International Journal for the Advancement of Counselling*, 20(4): 277-288.

Ammaniti, M., Van Ijzendoorn, M.H., Speranza, A.M. & Tambelli, R. 2000. Internal working models of attachment during late childhood: An exploration of stability and change. *Attachment and Human Development*, 2(3): 328-346.

Anon. 2005. Worry over training of police units. *Eastern Province Herald*, 26 August: 3.

- Arndt, H. 1989. *Children and juveniles in prisons of South Africa*. Heidelberg: Sached/Ravan.
- Babbie, E. 1990. *Survey research methods*. (2nd edn.). Belmont, CA: Wadsworth.
- Dos Reis, K.M. 2007. *The influence of gangsterism on the morale of educators on the Cape Flats, Western Cape*. Unpublished MEd dissertation, Cape Peninsula University of Technology, Cape Town.
- Gallinetti, J. Muntingh, L. & Skelton, A. 2004. Child justice concepts. (Pp. 24-38). In J. Sloth-Nielsen. (Ed.). *Child justice in Africa: A guide to good practice*. Community Law Centre, University of the Western Cape, Cape Town.
- Leedy, P.D. & Omrod, J.E. 2005. *Practical research: Planning and design*. (8th edn.). Upper Saddle River, NJ: Pearson Prentice Hall.
- Mashaba, S. 2008. State intensifies war against drug abuse. *Sowetan*, 23 June: 5. Available at: <http://www.sowetan.co.za/PrintArticle.aspx?ID=1147429> (accessed on: 25 June 2008).
- Moffett, H. 2006. 'These women, they force us to rape them': Rape as narrative of social control in post-Apartheid South Africa. *Journal of Southern African Studies*, 32(1): 129-135.
- South African Police Service (SAPS). 2004. *Annual Report 2002/3*. Available at: <http://www.saps.gov.za/areport03/part6.htm> (accessed on: 19 November 2004).
- Strydom, H. & Venter, L. 2002. Sampling and sampling methods. (Pp. 56-67). In A.S. de Vos, H. Strydom, C.B. Fouche & C.S.L. Delpont. (Eds). *Research at grass roots: For the social sciences and human service professions*. Pretoria: Van Schaik.

Interviews

- Byleveld, P. 2003. Superintendent and Commander of the Serious Violent Crime Unit, Johannesburg, South African Police Service, Johannesburg. Personal interview, 26 March.

Legislation

- Criminal Procedure Amendment Act 65 of 2008. Department of Justice, South Africa. 2008. *Government Gazette*, 524(31911). 18 February. Pretoria: Government Printers.
- Correctional Matters Amendment Act 5 of 2011. South Africa. 2011. *Government Gazette*, 551(34315). 25 May. Pretoria: Government Printers.
- Domestic Violence Act 116 of 1998 (as amended by the Judicial Matters Second Amendment Act 55 of 2003 and the Jurisdiction of Regional Courts Amendment Act 31 of 2008). South Africa. 1998/2003/2008. Available at: <http://www.justice.gov.za/legislation/acts/1998-116.pdf>. s6(1a): 5
- Serious Organised Crime and Police Act 2005. Chapter 15. UK. Available at: http://www.legislation.gov.uk/ukpga/2005/15/pdfs/ukpga_20050015_en.pdf.
- Crime and Misconduct Act 2001. Queensland, Australia. Available at: <https://www.legislation.qld.gov.au/legisln/current/c/crimeandmisa01.pdf>.
- Uniting and Strengthening America by Providing Appropriate Tools Required to Intercept and Obstruct Terrorism Act of 2001 (USA Patriot Act). Public Law 107-56, 107th Congress. 26 October. USA. Available at: <http://www.gpo.gov/fdsys/pkg/PLAW-107pub156/pdf/PLAW-107pub156.pdf>.

Case Law

- Holomisa v Argus Newspapers Ltd* [1996] 1 All SA 478 (W)
- S v Makwanyane and another* 1995 (6) BCLR 665 (CC)
- S v Soci* 1986 (2) SA 14 (A)

International Case Law

- Inter-American Commission of Human Rights. 1997. *Haitian Center for Human Rights v. United States*, Case 10.675, Report No. 51/96. Doc. OEA/Ser.L/V/II.95 Doc. 7 rev. 13 March.
- International Court of Justice (ICJ). (1949). *Corfu Channel Case* (United Kingdom v Albania). Judgment 9 April. Available at: <http://www.icj-cij.org/docket/index.php?p1=3&p2=3&case=1>.
- European Court of Human Rights (ECtHR). 2010. *Medvedyev a.o.v. France*, (Appl. No. 3394/03), Judgment of 10 July 2008, confirmed by the Grand Chamber in its judgment of 29 March 2010.
- European Court of Human Rights (ECtHR). 2011a. *M.S.S. v. Belgium and Greece*, Application No. 30696/09. Grand Chamber Judgment 21 January. Available at: <http://hudoc.echr.coe.int/sites/eng/pages/>

search.aspx?i=001-103050#{"itemid": ["001-103050"]}

European Court of Human Rights (ECtHR), 2012a. *Hirsi Jamaa and Others v. Italy*. Judgment 23 February. Available at: <http://www.refworld.org/docid/4f4507942.html>.

European Court of Justice (ECJ). 2012. *European Parliament v Council of the European Union*, 5 September. Case C 355/10 (2012).

US Supreme Court. 1993. *Sale, Acting Commissioner, INS v. Haitian Centers Council*, 113 S. Ct. 2549. 21 June. Available at: <http://www.law.cornell.edu/supct/html/92-344.ZO.html>

Notes on examples

List of References: Sources in general

The sources in the list of references must be listed in alphabetical order according to the surnames of the authors. They are not numbered.

Note that all the details of a source are given in the language of the source itself. If you were to use a German book, for instance, its title would be in German [with the English translation after it in square brackets] and the place of publication might be München, not Munich.

If multiple entries for the same author, i.e. different publications/articles etc. then the author must be listed by date (oldest first) of the publication/article. If there are two or more from the same year they are indicated (again first in the year by month). For example: Jones, A. 2004a; Jones, A. 2004b; and Jones, A. 2004c... etc. In the text such additions of a, b, c, ... would then also occur in the text reference accordingly. For example:... (Jones, 2004c: 12).

If authors surnames are the same then the author listed first is the one with the first alphabetic initial, e.g. Brown, B. comes before Brown, D.

Source references in the text

These are indicated by the surname(s) of the author(s) and the year of publication, as well as the page number from where the reference is cited/sourced. For example:... (Nkosi, 2005: 4) or Nkosi (2005: 4). If you are referencing generally some information (ideas, concepts interpretations) drawn from a publication and paraphrased them, i.e. there is no specific page number or numbers, this can be referenced as: (cf Parsons, 2011: 34-41). It would not be acceptable merely to list this reference as (Parsons, 2011) with no page numbers. A reader must be able to go to the Parsons' publication and see where you obtained the general information being referred to, even if from a number of consecutive pages. If the information is general information extracted from a whole publication then the reference does not need to have page numbers indicated.

Comma or not after author(s) name(s) in bracket

It is your choice of whether to insert a comma or not after an author(s) name in the bracketed reference. However, whichever style you choose to implement it must be applied consistently throughout your submitted article. Accordingly it can be either as follows:

... (Moffett, 2006: 129). Or: (Moffett 2006: 129).

Secondary referencing

For example: Morrison (1998) (as cited in Prinsloo, 2001: 7).... This is generally not acceptable in academic terms. Author(s) should go to the primary source, i.e. Morrison (1998), and reference the information used directly from the relevant page numbers in the Morrison publication. However, sometimes in a newspaper or journal article a specific person is quoted. In other words, such person does not have a primary publication from which the information is being quoted but was interviewed by the writer. In such circumstances the person so quoted can be referenced accordingly by name as, for example, ...National Police Commissioner Selebi (as cited in Mashaba, 2008) said that the SAPS must fight drug dealers on the streets....

Three or more authors for one publication: Use of 'et al,'

In the text the first time three or more authors are cited in the text then all authors' names to be indicated in the reference. Thereafter only the first author name and the term 'et al,' to be used. For example: (Ammaniti et al, 2000: 12) ('et al,' is not used in the List of References).

The term 'et al,' although a Latin term which means 'and others', is no longer italicised.

Also if there are only two authors both authors surnames are used for every in-text reference to them and not et al, in place of the second author's name.

No author identified

If no author is identified the appellation: Anon. must be used. In newspaper articles cited if there is no author listed for the particular article, then the news source should then be put as the author. For example: SAPA, Reuters or AFP. In the List of References a month date is always added after the newspaper title, e.g. 6 July (year date comes after author), followed by the newspaper page number (if available) where the cited article appeared.

Author(s) initials followed by date of publication

All multiple initials are separated by full stops, but without any spaces in-between. Date of publication follows author(s)'s surname and initials and date is itself followed by a full stop (Note: Alternate option: Date in bracket. You can place the year date in brackets, but this is your choice. Remember, whichever choice you make to apply it consistently throughout.)

Titles of article, chapter or document, place of publication and publisher's name

Titles of article, chapter, document being referenced only has the first letter of the first word (unless a Proper Noun) as a capital (uppercase). This rule also applies to the first word after a colon in the title. However, all words in the title of a journal (except pronouns) have the first letter as a capital. Only book, journal and newspaper titles (not chapters or article titles) are *italicised*.

Place of publication is followed by a colon and then the publisher's name. Note: Little known places of publication: Sometimes the place of publication is not a well-known city/town, so either the country or state is inserted after it. For example: Cullompton, Devon, UK; Baton Rouge, FL; Seven Oaks, CA; Aberdeen, Scotland. The acronym for the American states is usually given in such cases. FL = Florida; CA = California. Sometimes because a city or town occurs in two or more countries, which country it occurs would also be provided. For example: Albany, NY, USA and Albany, UK.

Publishers: You only need to give the publishers name and not for instance 'Pty Ltd', or 'Inc.' or 'Books' or even 'Publishers' (There are a few exceptions to this rule, namely Oxford University Publishers but 'Publishers' would not be added to a publishing company, since that is their only business. For example it would only be 'Sage' and not 'Sage Publishers').

Volume and edition numbers

The volume and/or edition numbers are not part of the Journal title, i.e. are therefore not italicised. Note the volume number is followed by issue/edition number in brackets followed by a colon and the journal page numbers of the specific article. No use is made of the abbreviations: Vol. or No. Journal titles are not abbreviated or given acronyms when referenced in the text for the first time. For example: SAJCI is written out as: *South African Journal of Criminal Justice*, the first time it is used as a reference in the text (and in the List of References) with the acronym in brackets after the full title (when used first time in the text), and thereafter you can use the acronym in the subsequent reference listings to this journal in the text.

Chapter in a publication

Please note the specific listing for a chapter in a publication, as well as the insertion after the chapter title of the page numbers in which it appears in the publication. If only one editor for the publication this is indicated in brackets after the editor's surname (which has a full stop before the bracket) as: (Ed.). ...while multiple editors will be the abbreviation: (Eds). Note editor(s) initials come before their surname in the listing of a chapter. Note no full stop after the abbreviation 'Eds' and the cap 'E' in both usages and a full stop after the last bracket.

The chapter title is followed by the page numbers of the chapter in the publication. The page numbers must also be indicated in brackets immediately after the chapter title and preceded by the letters: 'Pp.'. The page numbers bracket is then closed by a full stop; hence the 'In' (in which publication the chapter appears) has a capital letter.

If a publication has a number of editions the specific edition consulted must be listed. In the example above note the edition number is not written out as 'eighth' but as 8th. Also that it is in brackets after the title full stop, as well as the closing bracket is followed by another full stop. Also 'edition' is abbreviated as 'edn.' to distinguish it from the abbreviation for 'editor' which is 'ed.'

No date or place of publication

If the date of the publication is unknown, the abbreviation of the Latin expression '*sine anno*' (without a year): sa, is used in square brackets. If the place of publication is unknown, the abbreviation of the Latin expression '*sine loco*' (without place): sl, is used in square brackets, for example:

According to Smith ([sa]: 12) there are...

.. in that regard (Smith [sa]: 9)...

Note: In the list of reference sources, the 'S' of both *sine anno* and *sine loco* is capitalised (upper case) because it introduces a new element of the entry. In the in-text reference, however, the 's' is written with a small letter (lower case).

Referencing information from the internet

This is treated exactly the same as if it is a publication. In other words, look for an author. Sometimes this is merely the organisation on whose website such information has been found. Then try and establish a date for when the downloaded document was placed on the website or the report (often if in pdf format) published. If the date of the publication is unknown, then use the abbreviation 'sa' and no place of publication indicated then the abbreviation 'sl' (as above example). You must indicate a title for the document – this can be the first heading of the document. Then a publisher, usually the website organisation, e.g. Consumer Goods Council of South Africa (CGCSA). No place of publication (sl) needs to be inserted unless indicated in the report/document downloaded.

Then the use of the terms: 'Available at: ' followed by the URL web address for the downloaded document. This is followed (in brackets) with the terms: '(accessed on: ' or alternately the term 'retrieved on: ' (again your choice of which of these two terms to use. Also your choice whether 'at' and 'on' added to either 'Available' or 'accessed' respectively. Note: colon use after 'at' and 'on'); followed by the date when such internet document was downloaded. The date should be written out as 6 March 2012 (required date format to be: dd-mm-yy) but the format 06/03/2012 can also be used. Whichever form used that should be applied throughout the article.

Note that 'Available' has a cap but 'accessed' lower case used – and that there is no full stop after the URL web address before the bracket (accessed on: ...). But if you choose to drop the brackets for: (accessed on: ... then a CAP 'A' and a full stop after the web address to be inserted.

Wikipedia references are not a primary source for referencing and are not academically acceptable in this journal's articles.

Referencing of legislative Acts

Note how legislative Acts are listed (under their own sub-heading: Legislation) with the provision of as much detail as possible. For example: **Domestic Violence Act 116 of 1998**. [the name of the Act to identify the exact piece of legislation (and add in brackets if there have been Amendment Act(s) to the original piece of legislation, i.e. the specific version consulted and quoted from; followed by the country of origin of this particular Act] **South Africa. 1998**. [date of Act's promulgation] *Government Gazette*, [which is italicised – treated as a journal publication] **524(31911)**. [the GG volume and issue no] **Pretoria**: [place of publication] **Government Printers** [as the publishers/printers]. **18 February** [date of GG and/or date Act assented to by the State President]. All this information is available on the actual published Act document in the *Government Gazette*. If the Act is available in pdf on a government department website this URL can be added after the listing as above.

When referencing a piece of legislation (Act) in-text the following format to be followed:

... (Domestic Violence Act (DVA), 1998: s6(1a): 5).

Note the following: The use of the name of the specific Act; first time use the acronym can be placed in brackets, thereafter the acronym can be used in the reference brackets; it is not necessary to insert the number of the Act in the reference; if the piece of information used can be identified by section (s); paragraph (1a), and a page number, then such should be inserted in the reference paragraph. The country of origin is not to be used as the identifier (author) of the reference.

South African Case Law

Case law (cases and judgments) are usually reported in various so-called (South African) Law Reports. For example:

All SA = All South African Law Reports; BCLR = Butterworths Constitutional Law Reports; SA = South African Law Reports, etc.

The examples above, if you were referencing information from them, would be listed in your List of References, as exactly as they appear above (under the heading: Case Law in your List of References and listed alphabetically). However, in your in-text referencing they would appear as follows (shortened):(*Holomisa v Argus Newspapers Ltd* [1996]) (If you have a page number from the court records – usually the judgement/decision document as appearing in the specific Law Report, then it can be inserted as part of your reference.)

Note the following: The names of the litigants in the examples of cases are *italicised*. Only first respondents surname is given. Other parties to the case are indicated as ‘and another’ or ‘and others’. The date of the above *Holomisa*... example is in square brackets – only to indicate that 1996 was when the case was first lodged in court and also indicates that [1996] is not the date – which might be a few years after – when the case was finalised and judgement given. Specific sections of a case are referred to with reference to either the page(s), for example 263H, where it is indicated in the reported volume, or a paragraph(s) of the judgment (as has become customary for judges in their judgements nowadays). The paragraph is identified by way of square brackets, for example [137]. The letters after the date indicate in which Law Report (e.g. Butterworths Constitutional Law Reports = BCLR) the case was reported, followed by page numbers of that specific Law Report edition followed in brackets by the Court Division in which the case was heard. The reference to the court is in the letter or letters in the last parenthesis of the citation.

International Case Law

With the digitisation of much of international (Europe, UK and USA) case law the tendency in listing such international cases has been towards more detailed referencing so that researchers can better track and find such international case law. The examples provided are from USA and Europe as preferred referencing examples to be used in this journal for international case law referencing. For example in text referencing as follows:

.... the subsequent decision of the Inter-American Court of Human Rights in the *Haitian Center for Human Rights v. United States* case (Inter-American Commission of Human Rights, 1997)...[or] the Refugee Convention and article 33 fall short of applying on the high seas, (US Supreme Court, 1993: 2549) the subsequent decision of....

Use of footnotes/endnotes

The journal style does not use references in footnotes. But, if necessary, content references in the form of footnotes/endnotes may be used to provide additional information or explanation but all source referencing follows the ‘in-text’ referencing style.

Technical and formatting requirements

Articles that are submitted for consideration should adhere to the following minimum standards and technical and formatting requirements before submission:

- 1 An **electronic copy** (computer disk or document sent by e-mail (to the Editor-in-Chief) in MS Word (or Word compatible software programme) may be submitted. If not e-mailed, the file name of the manuscript must be specified on the accompanying computer disk.
- 2 **Length:** Contributions must be submitted in English and should preferably not exceed **20** typed A4 pages (electronically minimum word count should not be less than **7 000** words (approx. **15** pages) or exceed **10 000** words of **text** (approx. **20** pages)
- 3 The **title** of the article (in uppercase) and the **author’s full first name and surname**, designation, institutional affiliation, address & contact email should appear on the first page.
- 4 A **summary/abstract** of approximately 150-300 words on the first page of the submitted article must also be included. The abstract to be **italicised**.
- 5 **Keywords:** Directly below the abstract paragraph insert **Keywords** (maximum of TEN (10) – approximately TWO (2) lines.
- 6 If **funding** has been received from your University/Organisation or external funders for the research on which this article is based, such support funding can be acknowledged in the first footnote.

- 7 **Line spacing:** The document should be typed in A4 format using **SINGLE (1)** line spacing and 'normal margins' selected. No double spacing between words or after full stops and commas. Only single spacing throughout text. No line space to be inserted between paragraphs except between a paragraph and a heading.
- 8 **Paragraph indenting.** All paragraphs first line to be indented except for first paragraph after a heading. Please do not use the automated 'space after a paragraph' or 'space before a paragraph' function in MSWord.
- 9 **Font: Times New Roman 12.**
- 10 **Page numbers:** are also TNR 12 font and centred in the footer section of each page.
- 11 **Spelling:** Please make use (choose this as your default option) of the UK spellcheck and NOT the USA one. For example replace the 'z' in organization (US spelling) with an 's' – organisation (UK spelling).
- 12 **Use of quotes and italics:** Long quotes are placed in a separate paragraph and must be indented from both sides, (see below for short quotes usage) as in the following example:

Quotes that are **45** words long or longer (three lines and more) should be indented from both sides (of the paragraph) as in this example. If the quote is shorter, then it needs to be imbedded in the text of a paragraph and set in between **double** quotation marks, i.e. "inverted commas". Quotes from published information are generally not **italicised**. However, actual words of interviewed respondents are recommended to be italicised. Field note comments by the researcher on the respondent's responses (in the italicised responses) are not italicised but are placed in square brackets [...], note not round brackets (...). For example:... *"I did not commit the crime but the policeman [sic.] they abuse us foreigners because me I was just sitting down with my friends and just talking stories, suddenly police came and arrest us."* An additional use of italics is all non-English words, for e.g. ...Another participant said: *"Ek sal dit nooit vergeet nie"* (I will never forget it) (note the provision of an English translation after such use). All indented quotes need to end with the precise source reference placed in brackets and closed with a full stop (*Acta Editor*, 2013: 7).
- 13 **Single quotation marks:** Single inverted commas are only used when you want to emphasise a term or a common saying especially when it is not a direct use of words from another author. e.g. 'Zero Tolerance' or ... a 'live-and-let-die' approach. Single quotation marks are also used for a quote within a quote. For example: "It was patently obvious from the research that police officers use of force was not following the regulations. As indicated by one interviewee: *'they shoot wildly in a crime situation'*. This indicated that they needed to be trained to follow the set rules (Mistry, 2003: 6).
- 14 **Text justification:** Text is always full justified (squared), except for article title, author(s) name and the heading: **ABSTRACT** – all of which are centred – on the first page of the article. One further exception being the numerals in a table that are column centred.
- 15 **Headings and sub-headings:** All headings and sub-headings must be **bold**. There is **no use of numbering or underlining** of headings in this journal. Only three levels of headings' format to be used, namely:
 - a Main headings which are: **UPPERCASE (CAPS)**;
 - b 2nd level, i.e. sub-heading, only the first letter of the first word in the heading is a CAP unless it is a proper noun, for example: **Crime in Cape Town's informal settlements**
 - c 3rd level sub-sub-heading is indicated in bold and italicised with the same CAPS convention for 2nd level heading. For example: ***Crime findings from the Crossroads informal settlement***. All headings do not have a full stop at the end.

Note that there is no line spacing between a heading or sub-heading and the immediate following paragraph, a line spacing is inserted only before a heading and the preceding paragraph.
- 16 **Use of dates in text** – as follows: 11 September 2001 and not September 11, 2001. Also no use of abbreviations as in 1st, 2nd or 3rd just 1, 2, 3 etc. In the text do not use the date format of 11-09-2001 or 11/09/2011.
- 17 **Use of tables, figures, graphs and diagrams in text:** These render the layout difficult and should be used sparingly. All diagrams and tables must be numbered sequentially and referred to in the text, e.g. In Table 2 the falling statistics for the crime of murder can be discerned over the period 2000/01

to 2005/06. The use of such diagrams or tables must have a heading (also to be made bold) before the table or diagram and not after it. For e.g.:

Table 2: Statistics on violent crimes during 2000-2006

Crimes	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06
Murder	21 758	21 405	21 553	19 824	18 793	18 545
Attempted murder	28 128	31 293	35 861	30 076	24 576	20 553
Assault GBH	275 289	264 012	266 321	260 082	249 369	276 942
Robbery aggravating	113 716	116 736	126 905	133 658	126 789	119 726
Total	438 891	433 446	450 640	443 640	419 527	435 766

ADDENDUM 8: ETHICAL CLEARANCE CERTIFICATE, LIMPOPO



LIMPOPO
PROVINCIAL GOVERNMENT
REPUBLIC OF SOUTH AFRICA

OFFICE OF THE PREMIER

Office of the Premier

Research and Development Directorate

Private Bag X9483, Polokwane, 0700, South Africa

Tel: (015) 230 9910, Email: mokobij@premier.limpopo.gov.za

LIMPOPO PROVINCIAL RESEARCH ETHICS COMMITTEE CLEARANCE CERTIFICATE

Review Date: 27 November 2023

Project Number: LPREC/150/2023: PG

Subject: Indicators of Intentional Child Neglect by Parents and Caregivers: A Social Work Perspective

Researcher: Mkhondo EP

Chairperson: Prof I Swarts

Chairperson: Limpopo Provincial Research Ethics Committee

The Limpopo Provincial Research Ethics Committee (LPREC) is registered with National Health Research Council (NHREC) Registration Number **REC-111513-038**.

Note:

- i. **This study is categorized as a Low Risk Level in accordance with risk level descriptors as enshrined in LPREC Standard Operating Procedures (SOPs)**
- ii. **Should there be any amendment to the approved research proposal; the researcher(s) must re-submit the proposal to the ethics committee for review prior data collection.**
- iii. **The researcher(s) must provide annual reporting to the committee as well as the relevant department and also provide the department with the final report/thesis.**
- iv. **The ethical clearance certificate is valid for 12 months. Should the need to extend the period for data collection arise then the researcher should renew the certificate through LPREC secretariat. PLEASE QUOTE THE PROJECT NUMBER IN ALL ENQUIRIES.**

CONFIDENTIAL



LIMPOPO
PROVINCIAL GOVERNMENT
REPUBLIC OF SOUTH AFRICA

OFFICE OF THE PREMIER

TO: MR MJ MOLOISI

FROM: PROF I SWARTS

CHAIRPERSON: LIMPOPO PROVINCIAL RESEARCH ETHICS COMMITTEE (LPREC)

REVIEW DATE: 27 NOVEMBER 2023

**SUBJECT: INDICATORS OF INTENTIONAL CHILD NEGLECT BY PARENTS AND
CAREGIVERS: A SOCIAL WORK PERSPECTIVE**

RESEARCHER: MKHONDO EP

Dear Colleague

The above researcher's research proposal served at the Limpopo Provincial Research Ethics Committee (LPREC). The committee is satisfied with methodological and ethical soundness of the proposed study.

Decision: The proposal is granted full approval.

Regards

Chairperson: Prof I Swarts

Secretariat: Ms J Mokobi

Date: 16/01/2024

ADDENDUM 9: PERMISSION LETTER LIMPOPO, DSD



LIMPOPO
PROVINCIAL GOVERNMENT
REPUBLIC OF SOUTH AFRICA

DEPARTMENT OF SOCIAL DEVELOPMENT

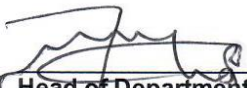
Ref : S4/3/2
Enq : MJ Moloisi
Tel : 015 230 4381 / 082 457 7120
Email : MoloisiMJ@dsd.limpopo.gov.za

No. 574 Mashima Section
Moletjie, Ga-Rammetloana
Lonsdale
0710

Dear Ms EP Mkhondo

RE: REQUISITION FOR PERMISSION TO CONDUCT A RESEARCH STUDY

1. Your email dated 26 October 2023 with accompanying research application package refers.
2. One of the attached documents is the research proposal with the title: **"Indicators of Intentional Child Neglect by Parents and Caregivers: A Social Work Perspective"**. You indicated in the email that *"I did not attach the university ethics clearance because HREC did not issue it reasoning is, that I need to provide them with a letter of goodwill from your institution showing that you allow me to conduct the study in your department"*.
3. You are further quoted stating *"if I can't be granted permission, I will not get the clearance which means I won't be able to conduct the study"*. It is uncommon for the department to issue a Permission Letter without ethics clearance certificate. However, given the situation you find yourself in – the least the Limpopo Department of Social Development can do is to provide you a provisional permission letter.
4. To this effect, this letter serves to grant you (i.e., Ms EP Mkhondo) conditional permission to conduct research at the Department of Social Development in Limpopo Province pending the approval of your research proposal by the North-West University Health Research Ethics Committee (HREC).
5. We trust you will find this to be in order.


Head of Department
Limpopo Department of Social Development


Date

21 Biccard Street, Polokwane, 0700, Private Bag x9710, POLOLKWANE, 0700
Tel: (015) 230 4300, Fax: (015) 291 2298 Website: <http://www.dsd.limpopo.gov.za>

The heartland of Southern Africa – development is about people

ADDENDUM 10: GATEKEEPER_PERMISSION LETTER



The Executive Welfare Council of the AFM of SA (AFM Welfare)

NGWANA HOUSE

Thabitha Phalane 015 296 2771
30 Springbok Street, Fauna Park
Email: ngwanasw@gmail.com

15/11/2023

North West University
Faculty of Health Sciences

Re: Approval of the research study of: **Enicca Phillipine Mkhondo** a masters of social work student at North West University. Student number: **37745816** and Ethics reference number: **NWU-00150-23-S1**

Ngwana House, situated at No. 30 Springbok street, Fauna Park, Polokwane approves for permission of the above mentioned student to conduct her study in our organization.

An appointment must be booked 7 business days in advance with an exact date and time for this study to be conducted.

Your cooperation and consideration is appreciated.

Kind regards

.....
T.E Phalane
Social worker
On behalf of the Ngwana House Board

ADDENDUM 11: GATEKEEPER PERMISSION LETTER



**ST JOSEPH'S CHILDREN
OF
CHARISMA**

Cell no: 0725497795/0838751814
Fax: 0864715729
E-mail: stjoseph@polka.co.za

Private Bag X7824
Polokwane
0700

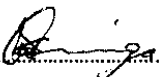
090-009 NPO

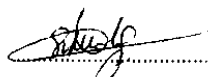
Dear Mkhondo E P

Subject: Response letter to conduct Research in the Organisation

We hereby inform Enicca Phillippine Mkhondo Student Number: 37745816 with ethics reference number: NWU - 00150 – 23 – S1 that your permission request for conducting study research at St Joseph Children of Charisma has been accepted and you are also granted permission to conduct access our Social workers (local Municipality, the district and the provincial level)
Hoping to hear from you regarding the start date. To our side you are always welcome.

Warm regards

 : Date 12/01/2024
A. L. Malinga (Board member Chairperson)

 : Date 12/01/2024
N. M. Butsila (Administrator)

ADDENDUM 12: PARTICIPANT INFORMATION SHEET



PARTICIPANT INFORMATION SHEET

What is the title of the study?

This is a single study titled: Indicators of Intentional Child Neglect by Parents and Caregivers: A Social Work Perspective.

What is this research all about?

This **research study** forms part of a Masters Degree. The study seeks to explore from literature and practice, indicators of intentional child neglect by parents and caregivers from a social worker's perspective, and it will be conducted in the four sub-districts of Capricorn District by a trained researcher. 16 participants will be included in this study.

Why have you been invited to participate in the study?

You have been invited to be part of this research because you are a registered social worker with three or more years of experience who is employed by DSD or an NGOs dealing with child neglect cases in the Capricorn District. You are willing to give written consent and willing to participate voluntarily.

What will be expected of you?

You will be expected to avail yourself for individual semi-structured interviews that will be conducted in the comfort of your working space. The duration of the interview is estimated at 45 minutes to 1 hour. The researcher will conduct a review on what have been studied about intentional child neglect, therefore you will be provided with a summary of the findings and an interview guide which will focus more on what you have observed and experienced about indicators of intentional child neglect perpetrated by parents and caregivers in your district as well as how the findings of the scoping review can add and improve social work practice. These documents will be provided to you one week before the interview commences. You will be given an opportunity to respond based on your experience while I (researcher) will be writing down your responses. During the interview the researcher will use audio recording as

well as taking field notes to record your responses, these recordings will be used when analyzing data at a later stage. You will be requested to consent in writing to the use of audio recording, and you will be allowed to withdraw from the study at any stage. These recordings will be moved from the audio recorder immediately after the interview, and they will be stored in the password-protected folder on the researcher's laptop.

Will you be paid for participating in this study?

You will not be reimbursed to participate in this study. The interview will be conducted in the comfort of your own working space or subdistrict, you will not suffer any travel expenses. The researcher will provide snacks and water after the interview as a courtesy for your participation and time spent. You will also be provided with 01 Gigabyte data for the internet as you will be expected to receive and send emails pertaining to the informed consent form, interview guide, and summary of the review's findings.

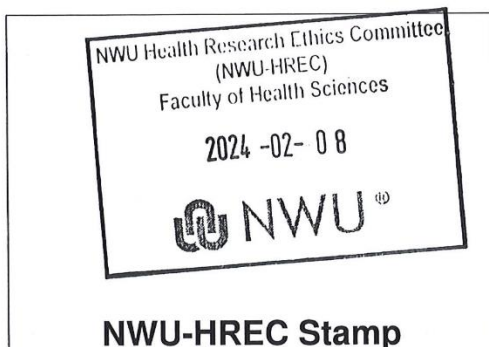
How will you know about the results of this study?

The findings of this study will be shared with you soon after the study has been accepted and the qualification has been obtained. You will receive a summarised report of the findings via email. If you meet the requirements and are interested in forming part of this study, kindly contact Ms. Enicca Phillipine Mkhondo (researcher) at 071 6440 460, you can also contact the study leader Ms. Tiisetso Tshehle at 073 958 0047 if you have any further questions or have any problems.

ADDENDUM 13: INFORMED CONSENT



Private Bag X1290, Potchefstroom
South Africa 2520
Tel: +2718 299-1111/2222
Fax: +2718 299-4910
Web: <http://www.nwu.ac.za>



INFORMED CONSENT DOCUMENTATION FOR SOCIAL WORKERS BEING INTERVIEWED

TITLE OF THE RESEARCH STUDY: Indicators of intentional child neglect by parents and caregivers: A social work perspective

ETHICS REFERENCE NUMBERS: NWU-00150-23-A1

PRINCIPAL INVESTIGATOR: Ms Tiisetso Tshehle

POST GRADUATE STUDENT: Enicca Phillipine Mkhondo

ADDRESS: P O Box 87 Lonsdale 0710

CONTACT NUMBER: 071 6440 460

You are being invited to take part in a **research study** that forms part of a Masters Degree. Please take some time to read the information presented here, which will explain the details of this study. Please ask the researcher or person explaining the research to you any questions about any part of this study that you do not fully understand. It is very important that you are fully satisfied that you clearly understand what this research is about and how you might be involved. Also, your participation is **entirely voluntary** and you are free to say no to participate. If you say no, this will not affect you negatively in

any way whatsoever. You are also free to withdraw from the study at any point, even if you do agree to take part now.

This study has been approved by the **NWU-Health Research Ethics Committee of the Faculty of Health Sciences of the North-West University (NWU-00150-23-A1)** and will be conducted according to the ethical guidelines and principles of Ethics in Health Research: Principles, Processes and Structures (DoH, 2015) and other international ethical guidelines applicable to this study. It might be necessary for the research ethics committee members or other relevant people to inspect the research records.

What is this research study all about?

This study seeks to explore from literature and practice, indicators of intentional child neglect by parents and caregivers from a social worker's perspective, and it will be conducted in the four sub-districts of Capricorn District by a trained researcher. 16 participants will be included in this study.

Why have you been invited to participate?

You have been invited to be part of this research because you are a registered social worker with three or more years' experience who is employed by DSD or an NGOs dealing with child neglect cases in the Capricorn District. You are willing to give written consent and willing to participate voluntarily.

What will be expected of you?

You will be expected to avail yourself for individual semi-structured interviews that will be conducted in the comfort of your working space. The duration of the interview is estimated at 45 minutes to 1 hour. The researcher will conduct a review on what have been studied about intentional child neglect, therefore you will be provided with a summary of the findings and an interview guide which will focus more on what you have observed and experienced about indicators of intentional child neglect perpetrated by parents and caregivers in your district as well as how the findings of the scoping review can add and improve social work practice. These documents will be provided to you one week before the interview commences. You will be given an opportunity to respond based on your experience while I (researcher) will be writing down your responses. During the interview the researcher will use audio recording as well as taking field notes to record your responses, these recordings will be used when analyzing data at a later stage. You will be requested to consent in writing to the use of audio recording, and you will be allowed to withdraw from the study at any stage. These recordings will be moved from the audio recorder immediately after the interview, and they will be stored in the password protected folder on the researcher' laptop.

Will you gain anything from taking part in this research?

There will be no direct benefit for you to participate in this study. However, there will be an indirect benefit for both social work practice and the community at large as the findings

of this study will help the researcher to make recommendations for future research and guide the future practice.

Are there risks involved in you taking part in this research and what will be done to prevent them?

The risks in this study are minimal. The following risks are taken into consideration: you might experience fatigue due to sitting for the duration of the interview, this will be minimized by allowing a five minutes leg stretching break when you feel tired; you might recall negative events that you experienced when handling child neglect cases that might lead to you experiencing emotional discomfort/distress, this will be attended to as there will be a registered counsellor/ social worker on standby to provide counselling should the need arise, this will be done telephonically; you might experience economic panic due to expenses such as transport expenses to the meeting places, this will be limited as the researcher will be the one travelling to your sub-district/ workplace for the interview; You might feel uncertain on which answers to give, this will be minimized by providing you with the interview guide a week before the commencement of the interview, you also have a choice of not providing an answer if you do not feel like answering. There are more gains for you in joining the study than there are risks.

How will we protect your confidentiality and who will see your findings?

The information you share with the researcher will not be shared with other people. It will be treated with confidentiality, only the researcher and the study leader will have access and be able to look into your findings. The audio recordings will be removed from the recorder immediately after the interviews, they will be stored in a password protected folder on the researcher's laptop. No files, recordings, and notes will be left lying around, the transcripts will be kept in a lockable cabinet. Data will be stored for five years. Pseudonyms such as participant A will be used to protect your identity.

What will happen with the findings or samples?

The findings of this study will only be used for this study, after the completion the recorded data (scripts) will be stored for a period of five years in a lockable safe at Centre for Child, youth and family studies, NWU. Once the five years period has lapsed, the line manager of the centre will be responsible to destroy the data following the policies and guidelines of the university. Data stored in the researcher's laptop will be deleted immediately after completion.

How will you know about the results of this research?

The findings of this study will be shared with you soon after the study have been accepted and the qualification have been obtained. You will receive a summarised report of the findings via email.

Will you be paid to take part in this study and are there any costs for you?

You will not be reimbursed to participate in this study. The interview will be conducted at the comfort of your own working space or subdistrict, you will not suffer any travel expenses. The researcher will provide you with snacks and water after the interview as a courtesy for your participation and time spend. You will also be provided with 01 Gigabyte data for internet as you will be expected to receive and send emails pertaining this form, interview guide and summary of the review's findings.

Is there anything else that you should know or do?

You can contact Ms Enicca Phillipine Mkhondo at 071 644 0460 if you have any further questions or have any problems, or the study leader Ms Tiisetso Tshehle at 073 958 0047.

You can also contact the NWU-Health Research Ethics Committee via Mrs Carolien van Zyl at 018 299 1206 or carolien.vanzyl@nwu.ac.za if you have any concerns that were not answered about the research or if you have complaints about the research.

You will receive a copy of this information and consent form for your own purposes.

Declaration by participant

By signing below, I agree to take part in the research study titled: indicators of intentional child neglect by parents and caregivers: A social work perspective

I declare that:

- I have read this information/it was explained to me by a trusted person in a language with which I am fluent and comfortable.
- The research was clearly explained to me.
- I have had a chance to ask questions to both the person getting the consent from me, as well as the researcher and all my questions have been answered.
- I understand that taking part in this study is **voluntary** and I have not been pressurised to take part.
- I may choose to leave the study at any time and will not be handled in a negative way if I do so.
- I may be asked to leave the study before it has finished, if the researcher feels it is in the best interest, or if I do not follow the study plan, as agreed to.

Signed at (*place*) on (*date*) 20....

.....
Signature of participant

Declaration by person obtaining consent

I (name) declare that:

- I clearly and in detail explained the information in this document to
.....
- I did not use an interpreter.
- I encouraged him/her to ask questions and took adequate time to answer them.
- I am satisfied that he/she adequately understands all aspects of the research,
as discussed above
- I gave him/her time to discuss it with others if he/she wished to do so.

Signed at (place) on (date) 20....

.....
Signature of person obtaining consent

Declaration by researcher

I *Enicca Phillipine Mkhondo* declare that:

- I had the information in this document explained by the independent person
who received ethics training, and trained for this purpose.
- I did not use an interpreter
- I encouraged her to ask questions and took adequate time to answer them
and I was available should she want to ask any further questions.
- The informed consent was obtained by an independent person.
- I am satisfied that she adequately understands all aspects of the research, as
described above.
- I am satisfied that she had time to discuss it with others if she wished to do so.

Signed at (place) on (date) 20....

.....
Signature of researcher

Current details: (23239522) G:\My Drive\9. Research and Postgraduate Education\9.1.5.6 Forms\HREC\9.1.5.6_NWU-HREC_ICF_Template_Feb2019.docm
7 February 2019
File reference: 9.1.5.6

ADDENDUM 14: CONFIDENTIALITY AGREEMENT, REGISTERED SOCIAL WORKER



VAAL TRIANGLE CAMPUS

P O Box 1174, Vanderbijlpark

South Africa, 1900

Web: <http://www.nwu.ac.za>

Enicca Phillipine Mkhondo

Social Worker

Masters Student

mkhondophillipine@gmail.com

071 644 0460/078 949 8911

Re: Debriefing of research participants

Dear Mr. Bongani Mbiza

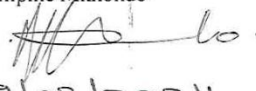
I hereby formally requesting your assistance with regards to my study titled: Indicators of Intentional Child Neglect by Parents and Caregivers: A Social Work Perspective. I will be conducting 16 individual interviews with social workers within the Child Protection Unit in Capricorn District, Limpopo Province. The interviews will be conducted using semi-structured interview guide. These interviews are aimed to explore their experiences and perspectives related to intentional child neglect by parents and caregivers in the area. However, in the unlikely event that they may experience any kind of emotional distress as a result of participating in the research interviews and require debriefing. As the researcher I am obliged to have a health care professional on standby to provide debriefing sessions whenever the need arises, such health care professional includes a registered counselor or social worker like yourself. The sessions will be conducted telephonically, and you will be required to provide one session per participant when needed, should the participant require further counselling you will be expected to refer them for further assistance and more sessions. Should you agree to this request, please note that I will not be able to offer remuneration for your services. However, you will be provided with airtime for the calls, this is to ensure that you do not experience any economic harm.

Should you decide to avail yourself for the debriefing sessions during qualitative data collection, kindly confirm your availability, and willingness by completing the form below and return it back to me.

Thank you in advance, your assistance will be greatly appreciated.

Kind regards

Enicca Phillipine Mkhondo

Signature: 

Date: 19/03/2024

AGREEMENT

I **Mr. Bongani Mbiza** hereby agree to avail myself for debriefing sessions with your study research participants in such times that it may be required. I also understand and acknowledge that no remuneration will be made for my services.

Signature:



Date:

21/03/2024

ADDENDUM 15 CONFIDENTIALITY AGREEMENT INDEPENDENT PERSON AND CO-CODER



VAAL TRIANGLE CAMPUS

P O Box 1174, Vanderbijlpark

South Africa, 1900

Web: <http://www.nwu.ac.za>

Enicca Phillipine Mkhondo

Social Worker

Masters Student

mkhondophilipine@gmail.com

071 644 0460/078 949 8911

Re: Independent person and co-coding

Dear Ms. Tumi Madimola

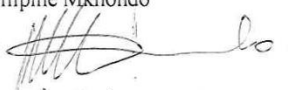
I hereby formally requesting your assistance with co-coding and being an independent person to my study titled: Indicators of Intentional Child Neglect by Parents and Caregivers: A Social Work Perspective. My study will be two-fold, firstly I will conduct a scoping review to explore from existing literature about what predicts intentional child neglect by parents and caregivers. Secondly, I will be conducting 16 individual interviews with social workers within the Child Protection Unit in Capricorn District, Limpopo Province. These interviews are aimed to explore their experiences and perspectives related to intentional child neglect by parents and caregivers in the area as well as corroborating the findings of the scoping review and exploring additional dimensions of the issue from the participants' viewpoint. Should you agree to this request, please note that I will not be able to offer remuneration for your services. However, you will be provided with airtime and data for virtual meetings with the researcher, and communication with the participants. This is to ensure that you do not suffer any economic harm.

Should you decide to avail yourself for the abovementioned services, kindly confirm your availability, and willingness by completing the form below and return it back to me.

Thank you in advance, your assistance will be greatly appreciated.

Kind regards

Enicca Phillipine Mkhondo

Signature: 

Date: 25/02/2024

AGREEMENT

I **Ms. Tumi Ingrid Madimola** hereby agree to be the independent person for this study, and also to avail myself for co-coding of the collected data. I hereby understand that obtaining informed consent from the research participants is for the purpose of doing the abovementioned study and also ensuring that participants are knowledgeable about the study. I also declare that any information about this study will be kept as confidential as possible. I will not disclose to anyone who the research participants were, and what the study findings are, instead, I will allow the researcher to disseminate the study findings herself. I also understand and acknowledge that no remuneration will be made for my services.

Signature: *Madimola T.I*

Date: *28/02/2024*

ADDENDUM 16: INTERVIEW GUIDE FOR SEMI-STRUCTURED INTERVIEWS

SEMI-STRUCTURES INTERVIEW SCHEDULE

TITLE OF THE STUDY: Indicators of intentional child neglect by parents and caregivers from a social worker's perspective.

SECTION A: BIOGRAPHICAL INFORMATION

- Gender:
- Age:
- Highest qualification:

SECTION B: CONFIRMATION SECTION

- Are you a social worker working for DSD or an NGO?
- Are you registered with South African Council for Social Services Professions (SACSSP)?
- How many years experience do you have of working with child neglect cases?
- In your view what is child neglect?
- Are you dealing with child neglect cases/ have you ever handled cases of child neglect?
- Did you receive a summary of the findings obtained through the scoping review?

SECTION C: INDICATORS OF INTENTIONAL CHILD NEGLECT BY PARENTS AND CAREGIVERS

- In your view, what indicates that a child is possibly neglected?
- What is the most reported type of child neglect within your institution? And who report these cases?
- Which age groups are mostly affected by intentional child neglect? and what do you think is the cause?
- In your views, what lead parents and caregivers to neglect their children intentionally?
- In your views, how does child neglect affect the relationship between children, their parents and caregivers?
- Do you see any similarities between what you experience in your district and what you have read from the summary that was provided to you? If yes, please highlight them.
- What do you suggest can be done to alleviate intentional child neglect?

ADDENDUM 17: AUTHOR GUIDELINES JOURNAL OF SOCIAL WORK

Author guidelines of journal

The Journal of Social Work is a forum for the publication, dissemination and debate of key ideas and research in social work. The journal aims to advance theoretical understanding, shape policy, and inform practice, and welcomes submissions from all areas of social work.

Articles

The Journal of Social Work publishes both articles reporting empirical research and theoretical articles that:

- Promote, debate and analyse current themes and issues in social work theory, research, policy and practice
- Encourage the publication and development of key aspects of social work within the evolving context of social work
- Embrace a broad definition of social work and social care
- Are at the interface of the human service professions
- Have international significance
- Reflect the diversity of social work Critical Forum

In addition to longer articles, the Journal of Social Work publishes occasional shorter 'think pieces': reports of research in progress, comments on previously published articles, and analyses of current and topical practice, policy and theory.

This Journal is a member of the [Committee on Publication Ethics](#)

Please read the guidelines below then visit the Journal's submission site <http://mc.manuscriptcentral.com/jsw> to upload your manuscript. Please note that manuscripts not conforming to these guidelines may be returned.

Only manuscripts of sufficient quality that meet the aims and scope of *Journal of Social Work* will be reviewed.

There are no fees payable to submit or publish in this journal.

As part of the submission process you will be required to warrant that you are submitting your original work, that you have the rights in the work, and that you have obtained and can supply all necessary permissions for the reproduction of any copyright works not owned by you, that you are submitting the work for first publication in the Journal and that it is not being considered for publication elsewhere and has not already been published elsewhere. Please see our guidelines on [prior publication](#) and note that ***Journal of Social Work* may accept submissions of papers that have been posted on pre-print servers**; please alert the Editorial Office when submitting (contact details are at the end of these guidelines) and

include the DOI for the preprint in the designated field in the manuscript submission system. Authors should not post an updated version of their paper on the preprint server while it is being peer reviewed for possible publication in the journal. If the article is accepted for publication, the author may re-use their work according to the journal's author archiving policy.

If your paper is accepted, you must include a link on your preprint to the final version of your paper.

1. What do we publish?

1.1 Aims & Scope

Before submitting your manuscript to *Journal of Social Work*, please ensure you have read the [Aims & Scope](#).

1.2 Article Types

In addition to full articles, which should be a maximum of 8000 words, the *Journal of Social Work* publishes occasional shorter 'think pieces': reports of research in progress, comments on previously published articles, and analyses of current and topical practice, policy and theory (maximum 2000 words).

1.3 Writing your paper

The SAGE Author Gateway has some general advice and on [how to get published](#), plus links to further resources.

1.3.1 Make your article discoverable

For information and guidance on how to make your article more discoverable, visit our Gateway page on [How to Help Readers Find Your Article Online](#).

2. Editorial policies

2.1 Peer review policy

The *Journal of Social Work* is a peer-reviewed forum for the publication, dissemination and debate of key ideas and research in social work.

2.2 Authorship

All parties who have made a substantive contribution to the article should be listed as authors. Principal authorship, authorship order, and other publication credits should be based on the relative scientific or professional contributions of the individuals involved, regardless of their status. A student is usually listed as principal author on any multiple-authored publication that substantially derives from the student's dissertation or thesis.

2.3 Acknowledgements

All contributors who do not meet the criteria for authorship should be listed in an Acknowledgements section. Examples of those who might be acknowledged include a person who provided purely technical help, or a department chair who provided only general support.

Please supply any personal acknowledgements separately to the main text to facilitate anonymous peer review.

2.4 Funding

Journal of Social Work requires all authors to acknowledge their funding in a consistent fashion under a separate heading. Please visit the [Funding Acknowledgements](#) page on the SAGE Journal Author Gateway to confirm the format of the acknowledgment text in the event of funding, or state that: This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

2.5 Declaration of conflicting interests

Journal of Social Work encourages authors to include a declaration of any conflicting interests and recommends you review the good practice guidelines on the [SAGE Journal Author Gateway](#).

2.6 Research ethics and patient consent

Medical research involving human subjects must be conducted according to the [World Medical Association Declaration of Helsinki](#).

Submitted manuscripts should conform to the [ICMJE Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals](#), and all papers reporting animal and/or human studies must state in the methods section that the relevant Ethics Committee or Institutional Review Board provided (or waived) approval. Please ensure that you have provided the full name and institution of the review committee, in addition to the approval number.

For research articles, authors are also required to state in the methods section whether participants provided informed consent and whether the consent was written or verbal.

Information on informed consent to report individual cases or case series should be included in the manuscript text. A statement is required regarding whether written informed consent for patient information and images to be published was provided by the patient(s) or a legally authorized representative.

Please also refer to the [ICMJE Recommendations for the Protection of Research Participants](#).

2.7 Research data

At SAGE we are committed to facilitating openness, transparency and reproducibility of research. Where relevant, *Journal of Social Work* encourages authors to share their research data in a suitable public repository subject to ethical considerations and where data is included, to add a data accessibility statement in their manuscript file. Authors should also follow data citation principles. For more information please visit the [SAGE Author Gateway](#), which includes information about SAGE's partnership with the data repository Figshare.

3. Publishing Policies

3.1 Publication ethics

SAGE is committed to upholding the integrity of the academic record. We encourage authors to refer to the Committee on Publication Ethics' [International Standards for Authors](#) and view the Publication Ethics page on the [SAGE Author Gateway](#).

3.1.1 Plagiarism

Journal of Social Work and SAGE take issues of copyright infringement, plagiarism or other breaches of best practice in publication very seriously. We seek to protect the rights of our authors and we always investigate claims of plagiarism or misuse of published articles. Equally, we seek to protect the reputation of the journal against malpractice. Submitted articles may be checked with duplication-checking software. Where an article, for example, is found to have plagiarised other work or included third-party copyright material without permission or with insufficient acknowledgement, or where

the authorship of the article is contested, we reserve the right to take action including, but not limited to: publishing an erratum or corrigendum (correction); retracting the article; taking up the matter with the head of department or dean of the author's institution and/or relevant academic bodies or societies; or taking appropriate legal action.

3.1.2 Prior publication

If material has been previously published it is not generally acceptable for publication in a SAGE journal. However, there are certain circumstances where previously published material can be considered for publication. Please refer to the guidance on the [SAGE Author Gateway](#) or if in doubt, contact the Editor at the address given below.

3.2 Contributor's publishing agreement

Before publication, SAGE requires the author as the rights holder to sign a Journal Contributor's Publishing Agreement. SAGE's Journal Contributor's Publishing Agreement is an exclusive licence agreement which means that the author retains copyright in the work but grants SAGE the sole and exclusive right and licence to publish for the full legal term of copyright. Exceptions may exist where an assignment of copyright is required or preferred by a proprietor other than SAGE. In this case copyright in the work will be assigned from the author to the society. For more information please visit the [SAGE Author Gateway](#).

3.3 Open access and author archiving

Journal of Social Work offers optional open access publishing via the SAGE Choice programme. For more information please visit the [SAGE Choice website](#). For information on funding body compliance, and depositing your article in repositories, please visit [SAGE Publishing Policies](#) on our Journal Author Gateway.

4. Preparing your manuscript for submission

4.1 Formatting

The preferred format for your manuscript is Word. LaTeX files are also accepted. Word and (La)Tex templates are available on the [Manuscript Submission Guidelines](#) page of our Author Gateway.

The abstract should be no more than 250 words and should have the following subsections.

- **Summary** (which should contain details of the context for the article and methods/approach used)
- **Findings** (which should contain the key findings)
- **Applications** (which should contain details of impact and application to professional practice)

4.2 Artwork, figures and other graphics

For guidance on the preparation of illustrations, pictures and graphs in electronic format, please visit SAGE's [Manuscript Submission Guidelines](#).

4.3 Supplemental material

For guidance on the preparation of illustrations, pictures and graphs in electronic format, please visit SAGE's [Manuscript Submission Guidelines](#).

Figures supplied in colour will appear in colour online regardless of whether or not these illustrations are reproduced in colour in the printed version. For specifically requested colour reproduction in print, you will receive information regarding the costs from SAGE after receipt of your accepted article.

4.4 Reference style

Journal of Social Work adheres to the APA reference style. View the [APA](#) guidelines to ensure your manuscript conforms to this reference style.

4.5 English language editing services

Authors seeking assistance with English language editing, translation, or figure and manuscript formatting to fit the journal's specifications should consider using SAGE Language Services. Visit [SAGE Language Services](#) on our Journal Author Gateway for further information.

5. Submitting your manuscript

Journal of Social Work is hosted on SAGE Track, a web based online submission and peer review system powered by ScholarOne™ Manuscripts. Visit <http://mc.manuscriptcentral.com/jsw> to login and submit your article online.

IMPORTANT: Please check whether you already have an account in the system before trying to create a new one. If you have reviewed or authored for the journal in the past year it is likely that you will have had an account created. For further guidance on submitting your manuscript online please visit ScholarOne [Online Help](#).

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ADDENDUM 18: DATA EXTRACTING TABLE

DATA EXTRACTING TABLE, SCOPING REVIEW

No	Author, Year, & country	Journal	Title	Research approach and design, methods and techniques used	Indicators/predictors of intentional child neglect	Interventions	Outcomes or Challenges
1	Schmidt, K. & Azzi-Lessing, L. 2021, South Africa	<i>Child welfare</i>	Neglect of young children in South Africa: Implications for prevention, identification, and intervention	Qualitative study N=8	*Cultural norms and practices *Poverty in the family *Inequality in wages *High rates of unemployment *Substance use disorders	*Improvement in defining, identification and interventions of child maltreatment, including neglect in South Africa *The South African Government (leaders) must ensure that all legislations that are governing the issues of child protection are fully implemented, and *Allocation of sufficient resources to ensure that comprehensive interventions are provided without any difficulties.	*South Africa has high rates of child maltreatment cases with limited resources to intervene *The lack of consistency in defining child neglect has an impact on social work interventions *Challenges in obtaining accurate information on the incidence of child neglect *Inadequate reporting and tracking systems
2	Berube, A., Lafantaisie, V., Clementa, M., Coutua, S., Dubeaua, D., Caron, J. & Lacharite, C. 2017, Canada	<i>Children and Youth Services Review</i>	Case workers perspective on risk factors in the family environment influencing mothers difficulties in meeting children's needs	Qualitative Study N=55	*Lack of social and family's social support *Parental mental health problems *Parents' alcohol and substance misuse problems *Economic burden- poverty, unemployment, low-income *Child's age- young children are more vulnerable and generally perceived as more demanding than the older ones *Family structure- single parent families * Children growing up in neglectful environment are at elevated risks	* Adoption of ecosystemic approach when addressing child neglect cases; *Child neglect should be treated as a multidimensional reality that is affected by a variety of risk factors; therefore, these factors should be considered. *Implementation of the framework for the assessment of children in need and their families; *Need for parenting education that will ensure that adults are able to supervise and maintain safety for the children.	*Lack of consensus on definition of child neglect makes it difficult for its identification, reporting and intervention *The difficulties regarding the definition of child neglect have repercussions on the understanding of its causes and the family profiles pertaining neglect. * The assessment of child neglect focuses more on families' lifestyle or parenting behaviours rather than predictors of child neglect.

3	Cui, N., Xue, J., Connolly, A. & Liu, J. 2016, China	<i>Child Abuse and Neglect</i>	Does gender of parent or child matter in child maltreatment in China	Quantitative study, N=997	*Gender: parent-child gender; gender-linked parenting style; *Traditional gender-roles *Traditional child-rearing practices * Parents' experiences of psychological and behavioural problems in childhood.	*The interventions need to be gender-sensitive as both mother and father are capable of neglecting their children *Interventions that will encourage parents to use non-violent discipline strategies need to be put in place.	*Gender still plays a significant role in the occurrence of child maltreatment, whereby mothers are more blamed as compared to fathers. *Socio-economic status of the families was unmeasured in the study.
4	Katz, c., Clucklich, T., Piller, S. & Matty D.E. 2019, Israel	<i>Children and Youth Services Review</i>	Between chaos and danger: spotlighting social workers view in cases of child maltreatment accusations in the context of high-intensity parental disputes	Qualitative study N=95	*Parental separation; *Parents' mental health problems; *Parental conflicts and disputes; *Parental substance abuse; *Violence between parents; *Involvement of children in conflicts; *Sensitive and nuanced relationship that exists between children and their parents; * Disagreements concerning day-to-day parental functioning	*Drastic changes must be made at policy making level to advance knowledge and develop training programs with practical guidelines for social workers; *Better allocation of resources to efforts that protect children, parents, and families.	*Social work lack practical guidelines for identification and interventions
5	Hesselink, A & Booyens, K 2016, South Africa	<i>Child Abuse Research: A South African Journal</i>	When parents interchange love with abuse: An analysis of parental-child abuse for correctional intervention	Qualitative study N=01 (case study)	*Parent-child gender *Mental health (stress) *Socioeconomic deprivation (parents' unresponsiveness to the child's needs) *Parental substance abuse *Interpersonal relationships *Limited education and skills *Poor parenting skills *mother's own victimisation and trauma as a child and as an adult.	* Interventions should include both the child victims and the perpetrators, Effective offender-oriented strategies; offender reconciliation through family-oriented therapy and offender-victim conferencing. *Individualised approach treatment that allows clients to be assessed holistically *The interventions should be gender-sensitive *Promote rehabilitation and positive re-integration * Purposeful intervention strategies	*In South Africa, little effort has been made to unpack the details of the parent as a child abuser. *Interventions focuses only on children while neglecting the parents,

6	Dickerson, K.L., Lindner, S., Scurich, N. & Jodi. A 2017, United state of America	<i>Child maltreatment</i>	When is Neglect, Neglect? It depends on who you ask	Quantitative study, N=219	*Gender (Parent-mothers are perceived to be more intentionally harmful than absent fathers; Child- girls are perceived to be more vulnerable than boys, and layperson-) *Age of the child *Persisting cultural norms-community's perception of child neglect tend to influence their decision to report*poor caregiving behaviours committed by both parents might be considered neglectful	*Efforts to consider parents, caregivers, and community's interpretation and perceptions of child neglect should be put in place; *The need for interventions that are targeting to change the community, parents, and caregivers' negative perceptions about child neglect. *Social services professionals investigate neglect and make a determination of whether the parent's behaviour meet the legal definition.	*Identifying situations of child neglect remains a challenge due to difficulties in differentiating between extreme poverty and neglect, and also the lack of uniformity in assessing and evaluating parents' neglectful behaviours, thus lead to implications for social work intervention * Social workers rely heavily on referrals from concerned friends, neighbours, and other community members *Little information is available. *Difficulties in detecting and substantiating results in neglect occurring for longer period prior to intervention; * The definition largely excludes largely excludes intent to harm, even though from a practical perspective, intent may be relevant to whether or not parents' behaviour is perceived of as neglectful. *Mothers are typically considered more responsible for the well-being of the family, and their behaviour are responsibilities are often targeted by social services investigations even in families with both parents when they both perpetrated the neglect.
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							* Social services investigation efforts has not been systematically examined in professionals.
7	Daniel, B 2015, United Kingdom	<i>Child abuse review</i>	Why have we made neglect so complicated? Taking a fresh look at noticing and helping the neglected child.	Systematic Review	*Substance misuse *Parental mental health *Domestic abuse	* The need for a simple standardised definition of child neglect; *Development of a simple framework for dealing with child neglect, and clearer guidelines on when to intervene *Employer's support: in terms of resources allocation, guidance and supervision, time allocation * Consideration of supportive services in the assessments; *Utilisation of forensic investigative approaches; * Incorporation of protection systems within more holistic approaches; *Intensive and sustained family support within child protection system. * Systems need to change to become more child-focused.	*The definition serves as a padlock while it was supposed to be the key to unlock the intervention. *Lack of specialist treatment services for parents facing difficulties in meeting their children's basic needs; *Current protective systems are still struggling to provide an effective response to neglected children; *Services are in place for a short time, and outcome of service provision is not adequate; *Focus on the impact of child neglect on the child is lost; *Provision of child-parent's long-term needs is not forthright.
8	Hicks, L & Stein, M 2015, United Kingdom	<i>Child and Family Social Work</i>	Understanding and working with adolescent neglect: perspective from research, young people and professionals	Qualitative study	*Economic factors *Age of the child *Levels of support within the extended family and community networks *Family history *Family structure and functioning *Cultural practices * Parental substance abuse *Parents favouring siblings or prioritizing new partners over their children.	*Social workers should be imparted with skills and knowledge that will enable them to work effectively with the needs of children, and tailor interventions appropriately *The social workers use primary, secondary and tertiary as models of intervention *The is a need to re-examine the definition of child neglect, and age-related interpretation of neglect is required;	*The age of the child, cultural practices and the complexity in defining child neglect makes it difficult for professionals to intervene accordingly * Little is known about the relationship between neglect and physical health, peer relationships, and bullying, and the consequences of neglect;

						* Collaboration with young people and their families in child protection processes, and developing and information guide; *Need for effective interventions to prevent the neglect of young people, and to support those who have experienced it, * Need for logical and multi-systemic approach to interventions, which fits well with the approach of the assessments *Need for a shared concern on the importance of neglect and its crucial influence on the life chance of adolescents	
9	Avdibegovic, E. & Brkic, M. 2020, Europe	<i>Psychiatria Danubina</i>	Child neglect- causes and consequences	Meta-synthesis N= not stated	*Parental stress, low self-esteem, difficulties in affective regulation, unemployment, lack of social support, poor relationship (parent-child relationship), parental substance abuse, lack of parenting knowledge and skills; criminal activities that lead to detention; gambling problems; younger parents with limited life skills and experience; Parents' past experiences of abuse including neglect; the quality of parent-child relationship; *Family related: family relationships; Family stress; level of education, income and socio-economic status of family; structure and number of family members; poverty unable parents to materially	*Child neglect requires urgent attention, and a collaboration between social services and other stakeholders *Factors such as parents means, strengths and available resources need to be taken into consideration when assessing the risk, abuse and neglect as well as when putting interventions into play.	*Inconsistency in defining child neglect * Cultural practices: parental responsibility of child rearing is replaced by shared/collective responsibility involving family, community, society, as a result it becomes difficult to identify neglectful parents.

					and emotionally satisfy their children's needs. *Environmental factors: poor community support, lack of safe home environment, cultural and social norms, child exposure substances and dangerous environment; Easy access to alcohol and substances for parents; material deprivation is the primary cause of child neglect; poor environment and poor socio-economic status of the neighbourhood. *Child related: characteristics such as age, gender, behaviour, disability increase the child's risk of being neglected; Children's disability that is associated with complex medical needs may increase the risk of child vulnerability to neglect * Cultural factors: Culture and social norms; religious beliefs can influence the behavior of parents		
10	Bernard, C. & Greenwood, T 2019, United Kingdom	<i>British Journal of Social work</i>	'We're giving you the sack'- social workers' perspectives of intervening in affluent families when there are concerns about child neglect.	Qualitative study Exploratory N=30	*Cultural indicators *Housing conditions *Educational attainment *Forms of leisure participation *Parent's availability (Time)	*Children need to be placed at the centre of the assessment to correctly identify child neglect *The need for rigorous and standardised assessment tools that does not pay attention to the family's social class but focus on the neglect itself *Understanding of child development is needed to comprehend the impact of child neglect	*In ability of social workers to determine and respond in affluent families *Lack of cooperation from affluent parents *Emotional neglect is the most prevalent type of child neglect in affluent families. *The threshold for determining neglect is not well understood, and it is differently interpreted, as a result the affluent children's neglect may go undetected and unrecognised.

							* Involuntary and highly resistant parents in child protection work. * Some professionals experience difficulties in recognising indicators of emotional child neglect, and in assessing children in their familial situations. * Practitioners experience difficulties in speaking to the affected children
11	Awortwe, V., Bentum, H., Cudjo, E. Abdullah, A. 2020, Ghana	<i>Child and Youth Services Review</i>	A reason for the unmet needs of children in contact with social services? Non-resident fathers' perspectives on delinquent child maintenance claims.	Qualitative study	*Cultural beliefs and values influence matrilineal system of inheritance *Poverty is more likely to co-occur with single parenthood which consequently affects children; and *unemployment *Stressful interfamilial relations *Parental separation that results in children staying with their mothers threaten the well-being of children; *Fathers face challenges in meeting their children's needs due to unemployment and inadequate income; * Non-resident fathers do not have enough contact or relationship with their children.	*The influence of culture should be taken into consideration when dealing with child neglect issues as they might have negative impact on the well-being of the children; *Relationships with extended families need to be strengthened as they play a vital role in the upbringing of the children *Social workers need to have understanding of cultural values and their implications on the well-being of children * Child welfare policies and legislations are used to address the issues of families in contact with social services; *Provision of social work services to fathers may improve their roles and interaction with their children; *State can be involved to ensure that some form of stability is maintained for the children; *Contribution of regular child maintenance and income from mothers' employment could	*Less attention is given to the cultural values, roles and responsibility of parents, and this impact children negatively *Childcare practices and responsibilities have been reduced to cultural discourses; * No clear guidelines about how social workers should go about dealing with issues of child maintenance; *Poverty and employment are linked to fathers' inability to pay their children's maintenance; *Social workers make decisions based on their own discretion due to lack of strict regulations that are put in place; *Court order is not able to guarantee that the child maintenance expectations will be honoured.

						make a significant contribution to the financial well-being of the children	
12	Nadan, Y., Roer-Strier, D., Gemara, N., Engdau-Vanda, S. & Tener, D. 2018, Israel	<i>International Journal of Psychology</i>	In the eyes of the beholder: parental and professional value mismatch in child risk and protection in two communities in Israel.	Qualitative Study N=110 (N=50 Social workers; N=60 Parents)	*Cultural norms of child-rearing practices *Poverty in the families *Physical closeness *Number of children in the family *Unemployment *Availability of financial resources	*The need for social workers and child protection workers to be culturally competent *The interventions should involve clients (developmental approach) *The need to educate and train social workers and child protection workers to enable them to empathize with parents; * Need for prevention and intervention programs that are context-informed, culturally sensitive, and taking into consideration values that guide parents in raising their children; *Parental practices that rely on cultural norms and values, and external economic and social constraints.	*The universal theories make it difficult for social workers to define the risk, abuse and neglect *Value mismatch and conflict between social workers and parents in terms of religion, nationality, socioeconomic status, race, gender, age and culture. *Professional literature still lacks the perspectives of parents, professionals and community itself.
13	Abdulla, A., Manful, E., Cudjoe, E. & Boateng, L.K. 2021, Ghana	<i>Practice: Social work in action</i>	How did I know when to report physical neglect? Ghanaian mothers' views on Delinquent child maintenance	Qualitative study, N=15	*Cultural practices *Existence of poverty in the family can result in parents neglecting their duties to provide their children's basic needs; *Separation or divorce of parents *Lack of adequate social support for families *Lack of informal support from kin * Non-resident fathers living in poverty are more likely to neglect their responsibilities of providing for their children; * Fathers shrink their responsibilities following	*The need for an awareness about child welfare legislations as well as the obligations that they place on parents to provide for the needs of their children. *Social workers should make service users aware of the services, processes, and channels that are available for them. *An early report of delinquent child maintenance is key in the prevention of persistent parental physical and financial neglect and in promoting the well-being of children. *Social workers oversee the agreement to ensure that non-	*There is lack of consistency in defining child neglect *There is a gap between the legal, society's expectations and the lack of means and resources to enable parents to provide for their children * Mothers seek the intervention of social workers after unsuccessful efforts at the family level; *Parental separation or separate living arrangements or divorce limits the level of interaction and engagements between children and their fathers;

					separation or divorce as punishment for their divorced partners	resident fathers are up-to date with the payment of maintenance as well as engagements with their children.	*Mothers providing care for children because the fathers become non-residents after separations.
14	Shadik, J.A. & O'Connor 2016, United States of America	<i>Child and Family Social Work</i>	Fathering and child maltreatment: Building theory to enhance treatment interventions	Qualitative study, N=15	*Relationship between parents *Parents' mental health issues *Parents' incarceration	*The need to utilize comprehensive theories and effective interventions when dealing with child neglect cases *The interventions need to consider the parents' strengths, means and resources available for them to nurture the children.	*Parents are labelled to be neglectful without taking into consideration the factors that influence their parenting
15	Casey, B. & Hackett, S 2021, United Kingdom	<i>British Journal of Social Work</i>	Deconstructing discourses in assessments of child neglect	Qualitative study, N=26 (parents and social workers)	*Poverty in the family *Cultural norms *Family relationships *Parental history of maltreatment * Parent-child interactions; *Marginalisation of parenting capacity * Reduction in financial support	*Children should be involved in the matters that affects them, they should be consulted about their views of their situations *A need for improved training and supervision for social workers on how to use assessment tool when responding to neglect; *The need for increased support in terms of resource allocation, employment of more social workers, and reduction of high caseloads. *The need for ecological and analytical assessments; *Combining developmental and contextual understanding of neglect with children's rights perspective; * Build relationships and an understanding approach with families; and increased in therapeutic work while observing their attachment behaviours. * Training on communicating children's experience of	*Perceptions of child neglect differ between social workers depending on individual values and beliefs *The inconsistency in defining child neglect still makes it difficult for social workers when they have to make a decision about whether a case is neglect or lack of means *The high demands and threshold levels are also frustrating for social workers which result in reactive rather than preventative *High caseloads and abundance of paperwork; *Holistic and analytical approaches to assessment are viewed as hindered by statutory requirements; * Pressure to complete assessments within legal timescales resulting in quick closure of cases;

						neglect within assessments needs development.	*Inadequate social welfare policies and infrastructure; *Training on communicating children's experience of neglect within assessments is still lacking.
16	Innes-Turnill, D. 2023, United Kingdom	<i>Journal of Social Work Practice</i>	Child abuse, the negative of parents living in poverty: a critical analysis of parental and professional explanations why a child was harmed	Qualitative Study, N=5	*Parents' life experiences *Parents' mental health issues *Social health (partner issues) *Environmental contexts *Living conditions *Dissonance (lack of harmony between people) *Poverty increases the risk of children being neglected; *Household finances can contribute to children being neglected; * Single parenthood	*Social work interventions should take into account parent's poverty as it is a major and the precipitating factor *Interventions should be developed in partnership with parents; *Poor parents in the child protection need better opportunities to be treated equally.	*Social work interventions are embedded in a system that does not provide for assessing poverty, parents' behaviour, and other risk factors associated with child neglect.
17	Logan-Greene, P & Jones, S.A. 2017, United States of America	<i>Child and Family Social Work</i>	Predicting Chronic neglect: understanding risk and protective factors for CPS involved	Quantitative study N=2074	*Age (both parent and child) *Financial hardship *Family structure (single-parent headed household, household with more children, *Parental mental health (depression and stress) *Parental substance abuse issues *Domestic violence *Poverty (both neighbourhood and Family) *Neighbourhood disorder and lack of cohesion *Lower social support for parents. * inadequate hygiene.	* Risk assessment tools need refinement to better address chronic neglect *Implementation of risk assessment and intervention tools needs to be monitored to track its effectiveness. * Need for developed specialised chronic teams.	*Despite being understudied, there are so many aspects of child neglect that are still unclear, such as definition, risk factors, intervention tools
18	Friedman, E & Billick, S. B 2015, New York	<i>Psychiatr Q</i>	Unintentional child neglect: literature review and observational study	Observational Study, N=170	*Educational level (not understanding the needs of the child) *Cultural differences	*Suggestion: parenting classes should be used as corrective measures for parents found to be abusive or neglectful, and	*Child neglect is difficult to define; therefore, it becomes difficult to identify, and intervene.

					*Socioeconomic status *Family composition *Parental substance abuse *Parental mental health issues (stress & depression) *Parental personal history of neglect *Dysfunctional family characteristics *Unemployed or poor parents	they can also be used as preventative measures; *Professionals need to have a clear understanding of child neglect and its surrounding issues so that they can be able to render both prevention and treatment services. * Identification of risk factors could lead to the development of an Evidence-Based intervention strategy.	* Injury prevention education was less effective for helping children with neglectful parents who had low education levels.
19	Finzi-Dottan, R & Harel, G 2014, New York	<i>J Fam Viol</i>	Parents potential for child abuse: an intergenerational perspective	Quantitative study N=177	*Cultural contexts *Low-socioeconomic status of parents, including first time mothers *Parental stress and poor emotional regulation *Parenthood as stressful or as a threat *Environmental factor (neighbourhood) *Age, ethnicity, family income, marital status *Parents' past experiences of abuse (Neglect, physical, sexual and emotional); *Family income/economic status * Lack of reciprocity in parent-child relations	*Suggestion: Long-term interventions that include parents need to be rendered to parents (child abusers) to improve their well-being. *Interventions should be provided according to the parents' needs, e.g. behaviour management to improve emotional regulation, stress reduction programs, parenting programs, etc. *State institutions to work together in punishing the abusers and ensure safe environments and appropriate interventions for victims. *Provide supportive interventions, whether individual or family, or in a group setting * Changing rigid attributions about child rearing practice	*Less attention is given to parents (child abusers), whereas their parenting in most cases is shaped by their history and past experiences of abuse and neglect.
20	Toros, K & Tiirik, R 2016, New York	<i>Early Childhood Educ J</i>	Preschool teachers' perception about and experience of child abuse and neglect	Quantitative study,	*Poverty in the family *Divorce of parents *Social problems experienced by the parents *Exclusions	*Suggestion: Effective support system that will enable professionals to foster the well-being of children; *Equip teachers with education and training not only for fostering age-appropriate play and learning environment, but	*Challenges in identifying and reporting children in need of timely help and support.

						also for identifying and reporting children in need. *Collaboration between stakeholders and communities to ensure that children are protected	
21	Tiwari, A., Self-Brown, S., Lai, B.S., McCarty, C. & Carruth, L. 2018, United States of America	<i>Social Work in Health Care</i>	Effects of an evidence-based parenting program on biobehavioural stress among at-risk mothers for child maltreatment: A pilot study	Qualitative study, N=18	*Parental mental health issues (stress, trauma exposure) *Parental substance abuse *Family's low socio-economic status *Part-time employment *Low-household income *Poor parent-child interactions * Heighted Parent-child conflict	*Suggestion: utilisation of evidence-based parenting programs to reduce child maltreatment perpetration risk and decrease self-reported parental stress *Provision of close monitoring and evaluation of interventions that are provided to parents that are considered to be neglectful.	*There is a lack of evaluation and monitoring on how social work interventions impact clients' behavioural, psychological and biological levels.
22	Kim, H & Drake, B 2023, United States of America	<i>Child Abuse and Neglect</i>	Has the relationship between community poverty and child maltreatment report rates become stronger or weaker over time?	Meta-Synthesis, N=50	*Poverty in the family	*Suggestion: there is a dire need for social workers to understand the association between the parents' strengths, poverty, and maltreatment *There is a need to build policies and practices that will reduce the families' economic hardships. *The need to implement strategies to address poverty; *Resources should be provided for economically at-risk populations	*Sometimes parents' lack of means to cater to the development of children is mistaken for neglect.
23	Van Westrhenen, N., Fritz, E., Vermeer, A. & Kleber, R. 2017, South Africa	<i>Child Abuse Research: A South African Journal</i>	Reflections of social workers on working with abused children in South Africa	Qualitative study N=8 Social workers	*Discrepancy in cultural beliefs system *Religion *Socioeconomic dynamics *Poverty in families *Traditional values and practices as a consequence	*Professional development and further training to social workers working and other professionals working with child abuse *Collaboration with communities, parents and other stakeholders * Provision of support and resource allocation to enable	* Cultural barriers that hinder social workers from doing their work; * Social workers experience compassion fatigue and trauma

						social workers to perform their duties *The western methods that the social workers are utilising need to incorporate indigenous knowledge to fit the cultural contexts better	
24	Ringson, J 2019, Zimbabwe	<i>Child Abuse Research: A South African Journal</i>	The impact of child rights cultural contestation in orphans and vulnerable children (OVC) support in Zimbabwe	Qualitative study N=40	*Cultural values and beliefs (children assuming adulthood responsibilities at an early age; children were viewed as the property of parents and sold into slavery or abandoned)	*A collaboration of the universal children's rights approach with the African cultural oriented approach is needed *Interventions should be conversant with the indigenous culture and its impact in the livelihood of clientele.	*There is a discrepancy caused by the subversion of indigenous culture and traditions of childrearing *Cultural mismatches have made it difficult for children's rights to find space in other cultural contexts; * Rural communities adopt their traditional approaches of child upbringing in contravention to some critical children's rights.

ADDENDUM 19: PARTICIPANT BIOGRAPHICAL AND CONFIRMATION SHEET

PARTICIPANT BIOGRAPHICAL AND CONFIRMATION SHEET

Participants	Age	Gender	Highest qualification	Registration with SACSSP	Local municipality	Employment	Years of experience	Are you dealing with child neglect cases/ have you ever handled cases of child neglect?	Did you receive a summary of information obtained through scoping review?
Participant A	37 years	Female	BASW	Yes	Polokwane-Seshego	DSD supporting NGOs	14 years	Yes	Yes
Participant B	36 years	Female	Masters	Yes	Polokwane-Ceres	DSD	11 years	Yes	Yes
Participant C	30 years	Female	BSW	Yes	Polokwane NGO	NGO	08 years	Yes	Yes
Participant D	36 years	Female	BSW	Yes	Polokwane Seshego	DSD	10 years	Yes	Yes
Participant E	40 years	Female	BASW	Yes	Molemole	DSD	12 years	Yes	Yes
Participant F	45 years	Female	BASW	Yes	Molemole	DSD	16 years	Yes	Yes
Participant G	38 Years	Male	Honours Degree	Yes	Molemole	DSD	07 years	Yes	Yes
Participant H	35 years	Female	BSW	Yes	Blouberg	DSD	06 years	Yes	Yes
Participant I	34 years	Male	Masters	Yes	Blouberg	DSD	09 years	Yes	Yes
Participant J	38 years	Female	Honours degree	Yes	Blouberg	DSD	15 years	Yes	Yes
Participant K	37 years	Female	BSW	Yes	Molemole	DSD	12 years	Yes	Yes

Participant L	46 years	Female	BSW	Yes	Molemole	DSD	14 years	Yes	Yes
Participant M	37 years	Female	BSW	Yes	Polokwane Ceres	DSD	10 years	Yes	Yes
Participant N	39 years	Female	BSW	Yes	Polokwane Ceres	DSD	11 years	Yes	Yes
Participant O	34 years	Female	BSW	Yes	Polokwane- Seshego	DSD	11 years	Yes	Yes
Participant P	33 years	Female	BSW	Yes	Polokwane Seshego	DSD	10 years	Yes	Yes

ADDENDUM 20: PARTICIPANTS' RESPONSES

Confirmation question: In your view, what is child neglect?	
Participant A	I think child neglect is a child which is not well taken care of, it can be physically in a way you find that the child is not neat, have sores and he/she is not taken to the clinic for medical attention; emotionally, you find that the child when interacting with other children within school activities, he/she is passive because of neglect. To us neglect goes hand-in-hand with other types of abuse, you find that the child can bully other children. It depends on the outcomes or how is the environment that the child comes from.
Participant B	Child neglect is an act of a parent or caregiver who fails to provide care and protection to the child in the sense that the child safety is compromised, these can come in a form of emotional neglect/failure to provide emotional support, lack of supervision, lack of health attention in terms of failing to take the child to a doctor or clinic for medical attention, and failure to provide basic needs such as food, clothes, and proper shelter.
Participant C	*It varies from case to case, neglect is a state of leaving a child in an environment that exposes them to danger, or where their health is exposed to danger because they are not receiving the correct treatment or medical attention that they need. *It can also be psychological because sometimes when you neglect a child it tends to affect them psychologically. So, neglect is vast and differ form case to case. However, child neglect can either be physical, emotional, health, psychological.
Participant D	Child neglect is when a parent fails to assume his/her responsibilities to the child, or fails to assume his/her parental care to the child.
Participant E	I think child neglect is a situation wherein a caregiver or a parent leave the child alone without a supervision of an adult.
Participant F	According to my understanding, child neglect is when a parent is denying the child medical attention, he/she does not want the child to go to school. Or I can say the parent is denying the child the right to basic need, like food, medical attention, clothes including school uniform.
Participant G	A child is neglected if he/she is under age and the parent who is supposed to take care of the him/her might be going out without making sure that the child is left with someone who can be held responsible to supervise and take care of the child, sometimes the children are left alone.
Participant H	Child neglect is when a parent or caregiver deliberately leaving the child alone without the care of an adult or supervision, and also, I think neglect is a broad word, sometimes they leave the children without adult supervision or they neglect the essential needs of the children like leaving the child without attending school or creche, neglecting the medical and other basic needs of the child.

Participant I	Child neglect is a deliberate way of a parent of not utilizing their full responsibility towards care and nurturing of their children.
Participant J	I can say child neglect is lack of providing care and protection for the child. When we talk about providing care, I can cover the educational, and other basic needs that the child can need.
Participant K	Child neglect is when a mother or a parent has neglected his/her responsibility of taking care of the child
Participant L	Child neglect is when children are being neglected for their rights, and the parents neglecting their responsibilities as parents over the children, like taking care of the children, and providing emotional needs of the children. Parents' responsibilities include provide care, love, support, and basic needs of their children.
Participant M	In my opinion, child neglect is when the child/ren's needs are being ignored. It also highlights that sometimes you might find that the children are living without supervision and guidance, or they are exposed to dangerous situations. For example, you find that the mother or the caregiver is taking the child to the shebeens or taverns where they sell alcohol, and those places are very dangerous and place the child's life at risk. So that's my definition of child neglect.
Participant N	Child neglect is whereby the parent or caregiver or whoever is responsible for taking care of the child is not doing that. It can be in a form of lack of supervising the child, emotional neglect, educational neglect whereby the educational needs of the child are not met.
Participant O	Basically, child neglect is when a parent or a caregiver fails to provide the basic needs of a child, these needs can include anything from medical, physical, educational, clothing, etc.
Participant P	Child neglect is the deliberate neglect of the children's needs by the caregivers or parents
1. In your view, what indicates that the child is possibly neglected?	
Participant A	*Levels of neglect comes in different forms; it can be severe or mild. *Mild can be described as a situation where the mother is there, but she neglects some of her responsibilities of providing for the child. The mother can leave the child with a relative, and not care if the child has all the things she/he needs such as educational, medical, and other basic needs. I say it is mild because the child has shelter, even when the mother is not around there is someone to supervise the child. Severe neglect- it is a situation where you find that the parents are abusing alcohol and substances. It also involves parents that are too much sexually active, where the mother always wants to be busy sexually and you find that there is no relative to look after the child, she will leave the child alone and go to the shebeen with her boyfriend, get drunk and pass out there. *For example, we had a case where were left alone in a locked shack, unfortunately their shack caught fire, and they burnt in there. During investigations, we found that the mother left the children and went to the neighbouring extensions for a drinking spree, unfortunately we lost lives due to such behaviour.

	The issue of boyfriends is also a serious concern, you find that the mother is pressurised and caught between the boyfriend and her children, in most cases they leave the children alone and go to attend to the needs of the boyfriends within the boyfriends' households, to me that is severe neglect because anything can happen, people can come and rape the children, or even worse kill them.
Participant B	*As I have already indicated when I was defining it, I think the indicators will include physical neglect as a parent or caregiver fails to provide the child with food, and other basic needs; lack of supervision, inability to take the child for medical check-ups which is now medical neglect. *Also, emotional neglect which I believe is derived or channelled by a lack of supervision, the physical one, if the parent is not there physically. This led to child becoming emotionally neglected because they have no one to share their concerns, fears, views, etc. *Also, children who does not have clothes or wear torn clothes on regular basis. In most cases we receive reports from schools that a child is a Child Support Grant beneficiary, but he/she does not have a school uniform, or he/she has torn uniform and not presentable. *Lack of food at home, leaving the child alone or with other children without the supervision of an adult person are also signs of neglect.
Participant C	A lot of factors can indicate a neglected child, * I will start with physical neglect, the child is typically not clean, the child with skin rash that is not treated, they are not just appealing to the eye when you look at them. * In terms of health neglected child, the child is malnourished, the child is not being treated for both chronic and non-chronic illnesses that they might have, and also a child that is exposed to a lot of unhealthy environments that can affect their health and this child tend to be sick quite often. * Emotionally, the child is not given attention, the child keeps a lot to him/herself, they shy away, others cannot even socialize, they cannot concentrate at school to show that the attention that the child requires, he/she is not getting it from home from his/her parent/s or caregiver/s.
Participant D	I am responding to this question looking at the cases that I normally have. *Most of the children don't go to school or creche, you find that the child is of school going age where he/she was supposed to be at school, but they are not attending or going to school. * malnourished children,* hygiene, in a sense that children are not well taken care of, you go to home visit and find dirty children and you can see that the dirtiness does not result from playing. * Some do not have birth certificates; we experience high cases of late registrations.
Participant E	*In some cases, you will see children roaming around the streets alone, dirty, hungry, or even at school these children are not concentrating. *For example, a thirteen years old child who is looking after his/her siblings cannot cope at school. *The kind of dirtiness that can be considered neglect is the one where a child is always dirty, from morning to the evening, and every day, you can see by just looking at them that there is a problem, *Some of them are of school going age, but they are not going to school. When we investigate further, we find that these children are spending most of their time alone at home, and they end up leaving to the streets due to hunger, and this happens on regular basis.
Participant F	*When we say the child is neglected, we will see his/her appearance such as wearing dirty clothes on regular basis, or even on Monday mornings the children will look dirty at school.

	*The children will go to school even when they are sick, it shows that the parents do not care about the health of their children. *Children begging for food at the shopping centre, it shows that they are not getting food from home. *I can also add by giving an example of the case that I had recently, the mother was HIV positive and the child was also found to be infected. The mother failed to protect the child during her pregnancy even when she was given nevirapine. She also failed to take the child to the clinic for some tests after she gave birth and breastfed the child, until the case was brought to the social workers and they took the child to the clinic where it was confirmed that the child is also infected. I don't know whether the mother failed to take the medication as prescribed or she did not take it at all, but the child is 09 months old and infected with HIV by the person who was supposed to protect her.
Participant G	*I will say the child is neglected when he/she is left alone without the adult who can be responsible for providing care and support to the child; *The child is neglected if he/she is not receiving care from the parents or caregivers, such as getting food, school uniform, and proper and clean clothes.
Participant H	*Mostly parents don't see that they are neglecting their children, unless somebody sees that the child might be possibly neglected. *Most cases of CN are reported by the witnesses, while the perpetrators themselves can't see anything wrong with their actions. *Loneliness, they show signs of loneliness, change in patterns such as wet dreams, developmental delays, bruises because they injure themselves due to lack of supervision
Participant I	There are many things that can indicate that the child is neglected. First check the needs of the child like clothing and see if they are clean or not. Others distance themselves from their peers because sometimes they feel that they do not belong or meet criteria of being in a group or hang around with other children, this might be due to lack of clothing and other needs as compared to the peers whose parents are providing.
Participant J	*For me to say the child is possible neglected is due to the child not having proper basic needs like clothes such as school uniform and other clothes to wear at home. *Children of school going age but you find that they are not attending school or creche, or if they attend the do not attend on regular basis. *Also, the children who their parents are not emotionally available for them.
Participant K	*I can say the child is neglected when he/she is not going to school on regular basis, when the child is not receiving proper care, when he/she does not have school uniform, and also when the child is not clean and there is a type of dirtiness that can be considered to be neglect, like children with dirty and torn clothes, including school uniform, you can see that there is no time for bathing because when the parent is taking full responsibility of his/her child is noticeable. The child will be neat with clean clothes including school uniform.

	*If the parent has a tendency of leaving the children alone at night, in the morning when the child goes to school you can easily see that he/she was not assisted to bath and put on proper school uniform.
Participant L	The possible signs of neglect include when a child is looking dirty, when the child is wearing torn clothes, when the child is not attending school, when the child is not getting supervision from his/her parents or guardians, and also when a child is malnourished and underweight.
Participant M	There are physical and emotional signs that I am going to mention. With physical signs, you find that the child looks dirty, has bruises on his/her body, and malnutrition where you find that the child is not well fed or denied food at home. * with emotional signs you may find that the child isolate him/herself from the peers, in most cases, you find that the child is isolating him/herself from people, that's where we interview the children to try and find the problem, and these children are able to explain their situations, some will say “ yes I have a problem, I am not loved at home”, “my mother is always away from home”, “I don't eat at home”, “I don't feel good about being around people because I don't have this and that”. Most of these cases are found at school where children isolate themselves from peers due to low self-esteem.
Participant N	Sometimes the neglected child has a very low self-esteem, the child is not confident enough because he/she can realise he/she does not have the things that other children have, such as clothing etc. also delayed development of the child, with these ones, they do not interact with their peers, instead they interact with the younger children because they are unable to differentiate things.
Participant O	Usually if a child is neglected you will notice the following: *Emotionally, the child will be withdrawn or clingy, the child is never happy, most of the time they want to cry, they don't play with other children, they are just not happy at all. *Also, these children are dirty, they wear torn or worn-out clothes, the child is untidy and never clean at all, and sometimes they look malnourished, the reason why I am saying they look malnourished is because they might not be medical tested or concluded, but you can see that the child is not growing according to their milestones. *Also, they might not be going to school, these children are always lingering around the streets during school hours, and no one is ensuring that the children are at school or not, in a nutshell they are on their own. Sometimes if they go to school, they are always hungry, or do not have proper school uniform. *Sometimes they have cold due to lack of warm clothing, and you can see that the parent is not willing to take the child to the clinic for medical attention, these children are usually sickly, and they are unsupervised most of the time, and they are always fending for themselves. * Some might even have scars, you never know who is abusing the child physically, they usually have unexplainable scars
Participant P	*In my view the indicators will be neglecting the child's health needs in a sense that we have parents that don't bring their children for immunisation. *We have parents that don't buy clothes or school uniform for their children irrespective of getting Child Support Grant. *Parents that abandon or leave their children under the care of their grandparents for months or even years.

2. What is the most reported type of child neglect within your institution? And who reports these cases?	
Participant A	*I can say all kinds of neglect, it is just that they come in different ways but we receive and attend to them all. *I can give example of the supervisory neglect that was brought to my attention in December, the mother from Gauteng province visited our province for her father in-law's anniversary, she was drinking and late at night she ran out of alcohol, so she went out to buy more alcohol leaving her two years old baby alone and unattended. The child woke up around midnight and found herself alone, so she went out and wonder off the streets. The community upon realising the unattended child called "<i>Sebatakomo</i>" and blow their whistles. *Most of our cases are reported by SAPS as they are also responders of intentional child neglect. Family members protect each other by hiding information, so only few reports are received from the family members and this depends on how fed up they are with the neglect that is happening.
Participant B	*In this area we experience supervisory neglect. *Mostly done by young parents who are able to leave the children alone without the supervision of an adult for the weekend and go to the bars, shebeens, and taverns. *Some leave with their boyfriends, others will leave them alone when they go for job hunting because this is a rural setup and the unemployment rates are very high. Some leave them in the morning and come back later, others come back after few days or even weeks. *Reports are mostly done by teachers, relatives, neighbours, SAPS and home-based carers
Participant C	Our focus is babies, and the most reported type is medical neglect, where children will be taken to the clinics and the nurses will not be pleased with the child's health and development. During these clinic visits malnutrition will be discovered, or it will be discovered that the child is infected with HIV and treatment was never given or it was given but not as prescribed, they will then take the child to hospital for further assessment. *We also have abandonment cases, because parents will leave their children for weekends or couple of days with family members and not come back. If it is a repetitive behaviour, family members get tired of looking after the child while the mother will be roaming around, it is when you will see them reporting. *Once in a while we will get a case of neglect where the child is harmed, maybe they play around fire and get burned, then they get admitted to hospitals, the parent will be reported as this is considered neglect, and the child will be placed in place of safety for safety purposes. * Most of our reports are police officers, community members, area social workers, we don't have nurses reporting to us as they report to area social workers.
Participant D	*In most cases children leave their children alone without supervision of an adult person. Lack of supervision from parents is the type of neglect that is eminent in my area of practice.

	*Normally these cases are reported by neighbours, grandparents, other family members, and school teachers. Why am I forgetting school teachers, even yesterday they came and reported a case of a particular child who bunked school for 03 weeks.
Participant E	*The most reported type of neglect in my area are physical neglect, educational neglect, and emotional neglect. *Reporters of these cases are school teachers, school principals, neighbours, few family members and the police. *Neighbours report these cases anonymously.
Participant F	*The most reported type of child neglect is physical neglect and medical neglect. You can trace back to our previous questions, these are the types that are most eminent in this area. *Some of these cases are reported by neighbours, community home-based carers, even family members, and we also have cases that are referred by the police, teachers and nurses.
Participant G	*Physical neglect and supervisory neglect, *I have once had a case where the mother was reported to be going to the shebeens and sometimes she will sleep out and come back the following day or even after two or three days. It was also reported that she locks the child inside the house with a pot full of food, the child was a toddler and he was expected to dish for himself. *These cases are reported by family members, neighbours, other authorities like SAPS, in most cases the police arrest the parents after receiving the reports, after the arrest they will then notify the social worker so that we can take the child to CYCC while the perpetrator is still in the holding cells.
Participant H	*Educational neglect, especially teenage mothers, we receive a lot of cases from schools about children going to school with dirty and torn clothes, not well kept and sometimes children can be allowed to bunk school for more than two weeks. *Medical neglect, we are in the rural areas and some of the parents have passed away leaving the children under the care of their grandparents and caregivers, and you find that the child is infected with HIV, most of our cases the children are denied their right to medical attention due to problems with disclosure from the late parents, or grandparents failing to understand the children's diagnosis as a result they fail to give the children proper care and treatment as prescribed at the clinic. * Supervisory neglect, we have parents leaving their children without the supervision of an adult, you find parents leaving children under the care of the older sibling when going to shebeens or taverns, or gambling. *Most of our cases are reported by class teachers, home based carers, concerned neighbours, and I cannot say the same about family members because they cover for each other, and they do not report INTENTIONAL CHILD NEGLECT cases that are happening in their households.
Participant I	Most reported type is undocumented children; we have a lot of cases of children who were not registered for certificates at birth. Schools will give us an indication of undocumented children, that is a problem for schools and us as we expect to know a lot about our clients when we are dealing with cases, and without documentation it becomes difficult. Others are deprived for their right to education. The most prevalent neglect is supervisory where parents leave children alone

	without supervision of an adult when going to the clubs or taverns. Sometimes they leave their children under the care of an older sibling, shifting their responsibilities to the children. *Most of our reports are made by community leaders, home-based carers, other stakeholders, school teachers, neighbours community development workers, family members but with this one it differs with cases, some will do it anonymously while others will not mind to be known.
Participant J	*Educational neglect for children with special needs. * Medical neglect, in most cases parents do not take care of their children's medical needs when they are ill or sick. They depend on teachers at school to bring them to the clinic. This can be seen when parents allow the child who is sick or ill to go to school without taking the child to the clinic. Sometimes when the child is injured or needs to change the bandage, they will just leave him/her at home. * Also, those who are HIV positive, most parents seem to be in denial and do not agree for their children to be initiated and get ART. The parent can take ART and deny the child the right to do so. It happens a lot in this area. * These cases are brought to our attention by teachers, community members, I have never experienced or receive a report from a family member.
Participant K	*Educational neglect, whereby children are not going to school on regular basis, or parents are not assisting the children with homework and other school work. *Medical neglect, whereby you find a certain child diagnosed with HIV, and the parents are refusing the child to take ART medication and /or not taking the child to the clinic. In most cases you find that the parent is the only one taking Art while denying the child the right to access medical attention. *Physical neglect, whereby you find parents beating children and leaving them with bruises, and also leaving them under the care of older siblings. *These cases are brought to our attention by grandparents, home-based carers
Participant L	*Most reported cases within my area of practice include parents neglecting their children medical care, educational needs, physical needs, and emotional needs. *Physical needs I am referring to the child looking malnourished, looking dirty, not looking neat and presentable, wearing torn clothes not excluding school uniform, generally the child is not being taken care of physically by parents or caregivers. *Mostly we are getting these reports from school teachers and principals, neighbours, some of the community members, family members, and in most cases family members report anonymously.
Participant M	The most reported one is whereby you find that the child is denied access to medical treatment, there is CSG, you find that the mother is receiving the grant on behalf of the child but then she fails to support the child financially. We also experience physical neglect.

	*Reporters of these cases are teachers, community members, and family members, most of them report anonymously while others do not mind being known.
Participant N	*Economic neglect, most parents in this area can take their children's grants and go away with the cards, and the children will be remaining at home while the mothers will be using the CSG on themselves instead of meeting the children's basic needs. *Educational neglect, you find that the child does not have school uniform, she/he does not look like other children, and the child's stationery is not even complete. *Medical neglect, some of the children who are HIV positive are lost to follow up on ART because their parents are failing to accompany them to the clinic for their treatments or medical attention. *Emotional neglect, we have parents who do not care about the feelings of their children, they do not create time to sit with their children and explore the challenges that the children are facing forgetting that every child or age group has problems. Most of our cases, you find that the child tried to tell the parent or caregiver but she/he was not given a chance to do so. *Reporters are mostly grandparents, teachers, police, few community members, few family members. Family members in most cases are afraid of reporting because they are afraid of jeopardizing their relationships, as a result most of them report anonymously.
Participant O	It is usually physical neglect as we are operating in town, the challenge in most cases is shelter. Basically, these children are never alone, they have a caregiver or a parent who sleeps on the streets or abandoned buildings, you find that the child will be left alone for a particular period of the time while the mother will be shoplifting or busy with prostitution in town. These mothers can leave the children alone on the streets without an adult to look after them. These children are not well taken care of, they look dirty, their skin texture is not satisfactorily, and they look malnourished. Some of the children are diagnosed with HIV and they are never given their treatment, and no one follows up on that. Some do come to the clinic to receive their treatment, but no one is supervising if they are adhering to treatment or not. Even children who are attending school, you find that they don't have uniform, they are dirty, and they are not neat or clean. *Reporters are mostly police, passerby, teachers, pastors, nurses.
Participant P	*We have parents that are deliberately neglecting their responsibilities and they are very prevalent in this area. They leave children under the care of their grandparents while they will be gallivanting the streets misusing the children's CSG. *Physical neglect, medical neglect, and financial neglect where parents are abusing the children's CSG, and it is the highest in this area. *Also, their health, we have children who are born with HIV and they are not well taken care of. It is prevalent in this area. These children are denied health care by their parents, you find that the mother did not disclose the status of the child to her family and she pass away or decide to neglect or abandon the child. The child will struggle because he/she needs to be put on treatment. In most cases grandmothers are the ones who will seek for assistance when the child is sick, it will be then that we discover the child status. We also have mothers who neglect the health needs of the children intentionally due to being in denial.

	*These mothers don't care if the children have food, winter clothes, whether the child goes to school or not, whether the child is immunised, they are able to leave newborns without any care as long there is someone in the house. *Reporters are teachers, community organisations, neighbours, or people who are left with these children, and grandparents, but with grandparents, most of their reported cases involves the CSG, in most cases the parents leave with the children's birth certificates because they know the social workers and grandparents can change the beneficiary to the person who is remaining with the children.
3. Which age groups are mostly affected by intentional child neglect? And what do you think is the cause?	
Participant A	*0-18 years. I think some parents have children at a very younger age and they do not understand the responsibilities that comes with parenting. Imagine having a child at the age of 13 or 14 years, they don't understand the roles and responsibilities. *Some still wants to explore life, others still want to go clubbing, others don't have parents themselves, some don't even have good relations with their families. *Based on my experience, most of the cases that I have handled majority of the perpetrators were below the age of 20 years and they were mothers.
Participant B	*Most reports are for 0-12 years old children; 13 to 18 years we rarely get them. *Perpetrators are young parents as they are still young themselves. *It is a difficult one, we also ask ourselves what could be the problem. But like I have said in some areas we already know that there are full of young unemployed people who are loitering around the village, and have easy access to alcohol and substances. *I think unemployment is their main stressor, because knowing people, some are resilient and they are able to do other things that will keep them busy while others don't have things or capabilities or thinking that they can do something to keep busy. *Most resort to substance abuse as their coping mechanism, others resort to visiting their boyfriends hoping to receive money in return, and they leave the children alone in the name of providing for them. *Unemployment is the most contributory factor, and it is associated with other social ills.
Participant C	*I think the most vulnerable group is children below the age of 04 years, because they are too much dependent on their caregivers, they need to be fended for, and they need to be protected at all times as they cannot do things for themselves. For example, if a child has influenza (Flu), he/she won't have an understanding that she/he need to drink medication, when, and how. If the caregiver does not execute that responsibility, the child will develop something more extreme from something that could have been avoided or curable. The flu can develop into bronchitis, bronchitis into lung infection, lung infection into Tuberculosis. *A lot of things can come into play, one of them being post-natal depression, a lot of us, Africans, do not believe in issues like post-natal depression whereas it can lead to mothers' failure to execute some of her responsibilities. Others do not get necessary support from boyfriends or spouses. Also, lack of support from family and community or social networks. Parenting is a fulltime job, but honestly people sometimes do need a break.

Participant D	05 years and below, because I have children that I placed in place of safety and the eldest is 05 years. I think in most cases their parents are unemployed, and you find that others are orphans, both parents are deceased and they lack support from family members. Some parents were raised in dysfunctional families, therefore, have childhood traumas themselves, so it is a cycle that is difficult to break. In most cases when we intervene, we find that there are lot of issues that are contributing to this child neglect. Mostly the age of the parent is considered a challenge because most parents are still young and make babies without realizing the responsibilities that comes with having a baby. Some parents are orphans and being raised by foster parents and you find that they were troublesome prior their pregnancies, therefore it becomes difficult for family members to provide support due to the constraints that comes with adding a child into the already burdened family.
Participant E	From 06 years and above. According to my experience the perpetrators are mothers, and in most cases, they don't see it as an offence as they are still young themselves and also needs to be cared for. The parents are still enjoying clubbing, gambling, and leaving children unattended is not something that they see as a serious and concerning matter. You will see after receiving the CSG, parents are able to pack their bags and leave their children unattended for a period of a week or two weeks, they go and meet other parents to spend the CSG on gambling (playing cards). If the parents did not go for gambling, you will find them at shebeens or taverns. In this area, Thursdays are normally called ladies night, Friday the weekend begins, the mothers will go for the whole weekend and come back on Mondays, and that time the children will be left alone. These places the children in danger, unattended children are at risk of experiencing more than type of abuse, and in most cases are found roaming the streets at midnight.
Participant F	*0 to 18 years, the cause of this neglect includes *lack of discipline by parents, *unemployment of parents, alcohol and *substance abuse by parents, *relationships between parents especially breakups where parents are fighting and end up forgetting the needs of the children, in such situations, children are the ones who are suffering.
Participant G	*0 to 10 years, and both girls and boys are experiencing the same challenge. I am saying this because sometimes the perpetrators do not have one child as they are always giving birth. *Most of the parents are still young and they lack insight about parenting. *Most of these young parents still entertain their boyfriends and friends, and in most cases, they choose them over their children. *Poverty is also associated with the child neglect that is happening within my area of practice.
Participant H	*0 to 15 years, because their parents are still teenagers, some are still finding themselves, and also, I think they lack parenting skills. *Majority of the parents are still youth or teenagers and you find that both the child and parents are still below the age of 18 years.
Participant I	*0 to 14 years, for people from this area, caring for their children is something that they do not take seriously. They don't even see that they are neglecting their children, let me give an example, they are working in the farms, so their lifestyle is that of people in the farms, they can even leave a child to look after his/her siblings while the mother goes to the clubs or taverns to drink and come back the following day. *Here is just deliberate neglect that we often experience. Poverty is ruled out because majority of the community members are working in farms.

	*Neglect is just a norm around this area, you can even see their reactions when you talk with them about neglecting their children, they look surprised.
Participant J	*Children of school going age and the ones with special needs. *Special needs, parents deprive these children the right to go to special schools because they think they will no longer have access to the Disability Grant, they believe that the children will go with their money, hence they do not want them to go to school. *School going age, it is just that the parents don't care about their children, this can be seen when parents decide to use the CSG on themselves, buying things like alcohol but failing to buy the things that are needed by the children.
Participant K	*0 to 05 years is the most affected group in this area. *Teenagers and youth up to 35 years are the parents and caregivers age groups that are known for neglecting their children. *In most cases they are neglecting the children because they are not ready for parenting, they were not ready for the pregnancy and you find that they don't even know what parenting is.
Participant L	*0 to 12 years, because these are the most vulnerable group that still need their parents' care and support on full time basis. *I would say the cause of their neglect are as follows: their parents are still young themselves; they still need support from their own parents, they lack and need to be capacitated on parenting skills, some of them did not receive love from their own parents as a result they transfer that to their own children. *The other thing that led these parents and caregivers to neglect their children intentionally, is that some of these children come from broken families, others are being neglected because of divorce of parents or domestic violence.
Participant M	0 to 10 years are the most neglected age group within this area, and young parents/youth aged 18 to 33 years are the most reported perpetrators. The children are experiencing neglect because they are being raised by young mothers whom I think don't have parental skills, and they lack information about parenting. These mothers are still young and are easily influenced, they are still having fun and exploring. Remember some of them were teenage pregnancies, and they were still enjoying life, so when they have babies, they will still want to continue with those lifestyles, and they haven't reached maturity age.
Participant N	02 to 10 years, both genders, I think the cause of this neglect is lack of parenting skills, childhood experiences of parents, parents tend to raise their children the way they were raised/treated as children. Poverty as well, you find that a parent with 02 to 10 years or 0 to 10 years children is unemployed, and the CSG is not enough to cater for the needs of every family member, in most cases these parents intentionally leave their children under the care of their frail grandparents who

	cannot take care of themselves, or sometimes with teenagers just to go and fend for the children. They do it intentionally knowing that they will bring something home but then the children will be left neglected.
Participant O	0 to 10 years, usually with the children below 01 year is when the mother has just given birth and does not want the child, instead of giving the child up for adoption or foster care where they can get someone to look after and provide for them, they choose to stay with the children knowing very well that they are not going to be able to connect with them as a result they end up neglecting them. I haven't had cases of older children, usually is the younger ones because you can easily spot them from the way they dress or their appearances.
Participant P	*Newborns to 13 years, and those in primary school are the most affected, we don't have cases of children who are in high school. *Mostly their mothers are still young themselves, they don't know much about taking care of children and they lack parenting skills, and also the lifestyle that is lived here, most of them go to shebeens and tavern for alcohol and substances. *Others are sex workers and when it is their time to go to work, they don't compromise, they don't care who is staying behind with the children, they go and make money to provide for their children. *It is very rare to receive cases of mothers who are in their early or late adulthood, and if we get them, you find that she left the children with the older sibling when she goes to work or looking for a job, and with this one, I cannot say it is neglect because she has to work and provide for the children.
4. In your views, what lead parents and caregivers to neglect their children intentionally?	
Participant A	I believe substance abuse makes them to no longer care for their children
Participant B	*I think family disputes where parents are fighting and end up getting caught up in their issues and neglect their children. *Affluent parents being there, but not really there in a sense that they only focus on the most visible issues leaving out the invisible ones such as emotional and psychological needs. *Lack of understanding of a parent to their children' stages of development, e.g. adolescents in their attempts to find themselves. *Family conflicts, where parents are not allowing children contact with their paternal side because the father did not pay damages or was never in the picture that alone is emotional neglect.
Participant C	I think neglect stems from people lacking understanding of the responsibilities that comes with parenthood. I think it is easy for a lot of people to conceive and make babies, but the responsibility that comes with it is something that people don't take into consideration. Also, understand that it is a fulltime job that one cannot get a breather from, so I think they get fed up and start neglecting some of their responsibilities. Some of the mothers were never orientated on how to be parents and execute their parental roles.

Participant D	*I think the issue of readiness plays a part, as some of the parents are able to make babies without being ready, and they will start to realize that it is difficult for them when the babies are already there. They are not ready to carry out their parental responsibilities. *Most of the mothers lack of support from their partners, especially our Pedi tribe. There is a saying that “<i>Ngwana ke wa mosadi</i>” which can be translated as it is the woman’s responsibility to raise and nurture the children. *Unemployment also lead to parents leaving their children with the older children when they go and look for jobs as CSG is not enough to cater for the needs of the whole family. In most cases these older children fail to cope or attend school as they will be looking after their siblings. That’s where you will see teachers stepping in and reporting such behaviour or problem.
Participant E	As I have said, some of these parents neglect their children because of peer pressure, easy access to alcohol and substances, some of them leave the children alone due to labour migration where they leave the children without supervision of an adult when they go for job searching in other provinces, and this labour migration is associated with unemployment.
Participant F	*I think parents neglect their children due to alcohol and substance abuse, depression, and other health factors, for example you find that the mother is HIV positive and starts to distance herself from the child/ren with the purpose of preparing them to live without her even after her death. * Cultural factors also play a role, where parents fail to step up and shift their responsibilities to others, in most cases they do not see anything wrong with their behaviour because it is in their culture to raise children collectively.
Participant G	*Majority of the perpetrators are still young, and trying to figure out life, so they can easily be influenced by their peers. *Some of the parents still enjoy the life of going out for clubbing, and some of them abuse alcohol and other substances. *Poverty and unemployment also place children at risk of being neglected as parents leave their children alone and go to other towns or villages or even provinces in search for jobs so that they can change their home situations. *Lack of knowledge, where parents neglect their children and find themselves in the wrong side of the law without knowing it. *Lack of unity in relatives, families in most cases, fails to support one of their own, sometimes they can see that the parent is struggling but they will fail to assist her or remain with the child while she goes to look for a job
Participant H	*One of the cases that I have handled, there was a lady who will neglect her child intentionally knowing very well that SW will come, remove the child and place him/her at CYCC, and that child will get proper care and education. The main intention is for the parent to be free knowing very well that the state will take over. *Sometimes we experience unintentional child neglect, especially where caregivers are grandparents. For instance, the medical neglect, you find that the grandparents are too old, the child/ren are HIV positive, and the grandparents do not understand the treatment and sometimes even the instructions that are given

	to them at the clinics are hard for them to understand, as a result the child end up defaulting, so with this one we cannot say it is intentional, and it is very eminent in this area.
Participant I	Mostly is entertainment such as gambling, clubbing, and pleasing their boyfriends while leaving the children alone, and they don't see anything wrong with that. Some will even leave the children for days or weeks with relatives or older sibling without any care, and in most cases there will be no mutual agreement between the parent and the person who remains with the child/ren. Weekends are the days where we experience high cases of child neglect. Since we are not working on weekends, we get these cases on Monday when we report for work, we are no longer surprised, it is a norm.
Participant J	*I think parents neglect their children due to lack of parenting skills and responsibilities. *Separated or divorced parents are competing or trying to punish or hurt each other through the children, you find the other parent with means to provide for the children but choosing not to provide because he/she wants to hurt the other parent.
Participant K	*Divorce and separation of parents lead to children to stay with one parent, and the other parent might neglect his/her roles and responsibilities of nurturing and providing for the children. *Lack of income and unemployment contributes to parents failing to meet the basic needs of their children *Some of the parents neglect their children due to alcohol and substance abuse. *Family conflicts like not being in good terms with other family members such as aunts and uncles, parents tend to neglect their responsibilities.
Participant L	*I think the causes are the same as the ones that I have already mentioned, like parents' past experience, parents not being loved by their own parents (children's grandparents) which led them to think that they are parenting or doing things right based on their own upbringing. *Divorce is also associated with the other parent neglecting his/her roles and responsibilities.
Participant M	*I think lack of parenting skills is one of the causes. Financial constraints could also be the cause because immediately they experience financial burden, they develop stress which leads to certain behaviour. Sometimes when they look at their children, they regret having them, they lose hope to say "I shouldn't have had the child/ren because now I am failing to provide for them". They tend to deliberately neglect the children because of that. *Some parents neglect their children after getting in new relationships or marriages, they focus more on their boyfriends or spouses while forgetting that they left their children back at home.
Participant N	*Lack of parenting skills is still the main cause, I think I need to emphasize more on this one, most parents do not know how to deal with teenagers, more especially young mothers with teenage children they end up neglecting their children physically.

	*Alcohol and substance abuse, the very same grant that I mentioned, they go and receive it on behalf of the children, and they use it to consume alcohol and other substances while neglecting the needs of the children. *Gambling, there are many gambling sites these days, parents use the CSG to buy vouchers and gamble with the intention of getting more money but at the end of the day you find that they lose everything remember not every day is a lucky day. Most parents lack financial management skills, because they will go for the wants before they can address the needs. * Mothers have partners who demands a share from the CSG, sometimes mothers instead of buying school uniforms for the children, they will buy clothes for their boyfriends. Sometimes this behaviour or relationships has an element of abuse, where mothers are afraid of the boyfriends as a result, they compromise the needs of their children to cover for the needs of the boyfriend. * Most of our cases of neglect falls under family preservation services due to insufficient evidence, and I think it is one of the reasons why these cases are not reported. Community members lack insight on what child neglect is, and their role in preventing child neglect from happening.
Participant O	Cultural factors in a way that you find a caregiver, or a parent married to a man who is a stepfather to the child/ren, she is not lacking anything, but she chooses to be submissive to the husband/spouse while neglecting the needs of the children. Cultural can also be in a form of when a parent or caregiver goes to initiation school to attend to her ancestral calling leaving the children alone to spend months at the traditional healer's compound. *Sometimes, alcohol and substance abuse, the person would rather go out and entertain him/herself at a club or tavern while leaving the children behind for the whole night and come back at dawn. Or they will be at drinking at home but fail to look after and cook for the children due to being intoxicated. *Health factors, where parents see that the children are not well but because they are overwhelmed about everything that is happening, they fail to take care of the children's medical needs such as adherence. *Work commitments, in most cases parents try to combat poverty where you find the mother working overtime or far away from home while the children have no one to ensure that they are well, in terms of cleanliness, eating, taking treatment, schoolwork, etc.
Participant P	*In my views, I think young mothers' neglect is influenced by peer pressure, lifestyle of their peers within the community. *Mostly go to their boyfriends while neglecting their children. Some of the neglect can be associated with poverty, and other just leave their children without supervision of an adult because they want to make plans to provide for their children. *Also, there are mothers who have quite a number of children, and their parental responsibilities are challenged as sometimes they fail to meet these children's basic needs (number of children in the family).
5. In your views, how does child neglect affect the relationship between children, their parents and caregivers?	

Participant A	*Mothers shifting their roles of taking care of the child to the grandparents just to go to the shebeens and taverns, or attend to their boyfriends. *I think it will negatively affect the relationship because grandparents will be feeling the burden of taking care of the children while their mothers are still alive. It affects the caregivers' schedules and plans when parents are shifting responsibilities. *It affects the parent-child relationship negatively and the success of our interventions depends on the affected parties because others are able to forgive and re-build their relationships.
Participant B	*Definitely negatively, it has negative impact on the child's upbringing in the future there will be another way of showing that the child was once neglected. *It is not a nice thing, and others are resorting to behavioural problems such as bullying other children at school, substance abuse, anger issues, talk back to their teachers. *They tend to be rebellious because they have too much anger that they do not know what to do with it. *Child neglect does not create anything beautiful. Hence, we are fighting it. *It has a bad or negative impact of parent-child relationship. *I saw a lot falling into drugs such as nyaope, heroin as a coping strategy.
Participant C	*The most alarming one has to be resentment from both ends. Parents tend to resent having children because when the child is already born it is impossible to take them back. In most cases children require a lot of things such as professional help, basic needs, and sometimes parents do not have means to provide due to financial constraints as a result they constantly have to prove themselves to the authorities that they are good parents. * Children will also resent their parents because they are exposed to the environments that they are not familiar with, they are exposed to traumatic experiences at the hands of parents, sometimes due to children being exposed to chronic conditions that they have to live with for the rest of their lives because of the parents' mistakes that could have been easily avoided. I will give an example of a pregnant mother lining with HIV who does not take her ART medication to protect the unborn baby even when advised to do so. Automatically the child is exposed to the virus, and also fail to give the child the treatment as prescribed, it is things like this that harbour resentment. Children gets angry and this anger can lead to bullying and being placed in institutions.
Participant D	*This one is very bad because for instance, we are dealing with teenagers where you find that in the long run the child loose the respect that he/she has for the parent, and the parent obviously will find it difficult to discipline the child because of his/her behaviour of neglecting the children and failing to provide support care, and guidance. It affects the relationship negatively. *With toddlers, because children, more especially younger children, adjust very quickly, they lose bonds and attachments, and they may not talk, but you can see through actions that the child is affected.
Participant E	*The relationship tends to be awkward as children develop hatred towards their parents,

	*I can say it affects the parent-child relationship in a negative manner.
Participant F	*It affects the children and the parents in a bad way, because where there are cases of INTENTIONAL CHILD NEGLECT as social workers we end up removing the children from their homes and place them at place of safety for a certain period. When they come back, some of them have a lot of questions that requires the parents to answer, sometimes they do not get the answers that they are looking for. *It affects the parent-child bond in a negative manner to the extent that some of the children resent their parents.
Participant G	*Child neglect affects the parent-child relationship in a negative manner because there is no bond, no guidance, no nurturing, and the children loose trust towards their parents. * The neglected children might be affected educationally, for instance they isolate themselves at school, they are not coping and some of them end up bullying other children at school.
Participant H	*From the ones below the age of 10 years, it does not show any relationship breakdown as they don't understand, and they consider everything to be normal. *From 11 years and above, it affects their parent-child relationship negatively, remember that the views of the child need to be considered when we deal with CN cases. *Children especially the ones from 10 years and above we are able to interview them, and they tell us the truth. There is a loss of trust between the children and their parents or caregivers, CN affects the relationships in a negative way.
Participant I	It affects the relationship in a negative manner, in most cases children are not attached to their mothers but attached to their grandmothers because most of the times their mothers are not there. The parent-child relationship is not there because the children are not experiencing love and nurturing from their parents. Children tend to be rebellious towards their parents because they feel like the parents are not supporting them, and they are just there to receive and enjoy their CSG. Mostly CSG is the contributory factor because the children will say "our parents enjoy our grants while neglecting our needs". Most families here are extended, you find uncles, aunts, grandparents, and cousins. The grandmothers are always at the receiving end because they are afraid that the children will end up on streets or CYCC or even foster homes.
Participant J	*From the children, some of them become rebellious, they withdraw from others, they develop low self-esteem, and they see themselves as less important beings. *It affects the parent-child relationship in a negative manner because the child can develop disrespectful behaviour towards the parents or caregiver. *Sometimes it becomes difficult for the child to follow the rules set by the parents because they never had a bond and guidance.
Participant K	*In cases of child neglect, the parent-child relationship is affected, you find that the children are no longer respecting their parents and caregivers. *It affects their relationship in a negative way, sometimes children feel unloved by their parents.

Participant L	Children that experience neglect do not have a good relationship with their parents, they have low self-esteem, they become stubborn and rebellious at a later stage. As they grow up, some of them becomes bully towards other children, and they can also be violent to their parents as well. They have negative emotions towards their parents, there is no parent-child relationship. The relationship needs to start when the child is still young for it to be stronger.
Participant M	Firstly, the children loose love, and bond with their parents because there is no love where there is neglect. They lose touch, in fact they lose everything. It affects the parent-child relationship in a negative manner.
Participant N	It affects them in a negative way, because CN is the one that make us see children on the streets, unaccompanied minors, younger children on the streets alone because they cannot go and face their parents at home. They choose to be in the wilderness than being at home. Most of them think that no one cares.
Participant O	Usually, the older children are made to look after the younger children, you find that the parent is present at home, but they decide to shift their responsibilities to older children as a result the older children end up not having time to actually grow themselves because now, they have to act or take role of being a parent to the younger ones. This is overburdening the children. The children do not have time to be children and act like other ordinary children, this for the older children can build resentment to the younger children because they tend to feel that they did not have this and that as they were busy raising them. *If the marriage is not going well for both parents, chances are, they might neglect the children because there will be stress factors in the relationship or one parent walks away when the other parent needs assistance. Due to the strained relationships, it becomes difficult for the other parent to ask for assistance. *With caregivers, already the children are not theirs biologically, so you find that they start feeling that they were not ready for taking care of them, and sometimes you find that they do not have children of their own, they take care of their late sisters, uncles, or aunts' children, and you find that their whole lifestyles change. With that they might find it hard to cope under certain circumstances, or sometimes the caregiver is old and is unable to take care of the children due to old age. * Basically, child neglect does not affect the children only, all these people's lives will be altered. It has negative impact on everyone.
Participant P	*It affects the relationship because the children struggle to bond with their parents, they become withdrawn because you find other children at school talking about their parents "my mom this" my mom that" and then you find the neglected or abandoned child failing to relate, they don't have relationships or bonds with their mother. *It also affects the children's upbringing because children need to emotionally connect with their parents. *It also contributes to conflicts in the families as family members don't get along, they fight a lot because mothers are leaving the children behind without talking to them. *It affects family bonds in a negative way.
6. Do you see any similarities between your experiences and the summary that was provided to you?	
<i>Yes, (Please see the attached table)</i>	

7. What do you suggest can be done to alleviate intentional child neglect?	
Participant A	*Parents need to understand the importance of family planning *Boy child needs to be taught the importance of education and good interpersonal relationships. They need to be shaped in good direction so that they are able to differentiate between right and wrong. some of their behaviours are influenced by peer pressure; *Parents need to be provided with proper parenting programs so that they understand how to parent, discipline their children because others spoil their children; *Holistic challenge to families needs ongoing interventions *Collaboration with other stakeholders, like Department of Education, Department of Justice, Department of Health, etc. is needed; *Cases needs to be attended using Multidisciplinary approach *Amending the law can also assist alleviating cases of neglect *The law needs to mandate the girl child to on birth control at a particular age or when they start to menstruate, this will also alleviate the killings of the newborn babies by their mothers *The law should also be strict on the involvement of the fathers because some of the grandparents deny fathers access to the children because they did not marry their mothers *If we can have such laws, South Africa will be a better place.
Participant B	*Parents need to pay attention to their children's needs *There should be a collaboration between social workers and other stakeholders in conducting community awareness campaigns *Parents and communities need to be capacitated on the rights of children and consequences of putting the children in a compromised position or danger *Parents need to be equipped with parenting skills to help improving their parenting *Utilisation of Multidisciplinary approach, if it means conducting dialogues or door-to-door campaigns, so be it.
Participant C	*More awareness should be raised on the responsibilities that comes with being a parent, because to me it is a pattern that people want to enjoy the pleasures of having unprotected sexual intercourse, but are not ready to carry the responsibilities that comes with conceiving a child. They should know that the responsibilities start from conception, e.g. when we work in adoption and say the biological father abandoned the child, the abandonment starts from the conception. * Cultural proverbs should also be taken into consideration, e.g. in Pedi culture we have a misconception like “<i>ngwana o tla gola se re se jang</i>” which is translated as the child

	will eat whatever that we are eating and he/she will grow up. These kinds of misconceptions might not apply to every child because we have children that are allergic to other food, other have special needs that requires more financial support from parents. * Also, an acceptance that it is ok to cry out for help, there is no shame in asking for assistance, e.g. when parents realise that they cannot give the child the kind of life that she/he needs, there is no shame in releasing him/her into foster care or adoption. * Prioritising the children's health needs from the onset, but I don't know how because the nurses and social workers are trying. Parents need to take responsibility in ensuring that their children are immunized, those with chronic conditions are given medication as prescribed, and the children are taken to professionals immediately they discover that the child has some sort of condition, it can be occupational therapists, optometrists, speech therapists that can help the child to develop to their full capacity. *Citizens should meet our government half way because government itself is dealing with limited resources issues.
Participant D	*Only if our justice system can start taking these cases serious and stop being lenient on the perpetrators, maybe we can start seeing a decline in child neglect cases. Some parents know that our justice system is not harsh, they will even tell us that they are not afraid of going to jail, and this makes me feel like we are not solving anything. * Look at it like this, you remove a child, place him/her in place of safety, and before you know it, the mother is pregnant again, and after giving birth she neglects the child, then the social worker intervenes, the circle continues. Honestly, the justice system is making our work to be difficult. *Limpopo lacks facilities that cater for children with uncontrollable behaviour, if we can have such facilities, our work will be very much easy because if the child failed to change after a series of interventions, we will be able to place her/him at these facilities. These lack of resources and facilities frustrates us because we end up not knowing what to do.
Participant E	*We used to handle and deal with intentional child neglect cases on the ground without involving the courts or reporting them somewhere, but now we have seen that they are mushrooming and coming in large numbers, and we need to act. *Even though we are doing capacity building awareness campaigns, these cases, are still high, so we realised that to alleviate these cases we need to involve the justice system rather than handling it alone as a social worker. We sit with these parents and capacitate them, but I don't see the impact of our interventions because they repeat the same behaviour even after a series of interventions. Some of the parents don't see anything wrong with how they raise their children, but when we do campaigns it helps because they gain knowledge, and some of them are able to change their ways of parenting, so ongoing and intensified campaigns are needed.
Participant F	*I think we need to conduct more campaigns on child protection. *We need to educate parents on parenting skills

	*We need to conduct and render parenting programs to parents *We are experiencing challenges with our justice system because every time when we report cases of intentional child neglect, normally we start with the police, they will arrest the perpetrator and she/he will appear in court for bail hearing, in most cases Department of Justice releases them without even informing us. It is demoralising to be honest. Sometimes you find that the perpetrator is released while the social worker is still busy investigating the case, we only see them roaming around the streets without update from Department of Justice. *We don't have resources, we have only one car and all social workers in this office and other neighbouring offices are using it, so sometimes it becomes difficult to intervene in time. *Only if the department can provide us with resources so that we can be able to do our work.
Participant G	*We need more awareness campaigns; *Parents need to be equipped with parenting skills; *The state can assist with job creation because parents go out to search for jobs that will change their family lives for the better while leaving the children alone. Some of them even prostitute themselves for money.
Participant H	Preventative measures in a form of campaigns: as social workers we need to conduct awareness campaigns, child protection campaigns should never be done during child protection week only, because right now we are going to have a child protection week in two weeks time, we will be only be focusing on children, children, children, after the child protection week you will never hear anything about children. Awareness campaigns should be done at communities, schools, and wherever people are gathered. People need to be capacitated about intentional child neglect, and also be taught about consequences because some will even tell you that cases are reported to social workers, then the social workers will just talk to the parents, and close the case. They should know that we report and register these cases to Child Protection Register (CPR) and once your name is on CPR it's an offence and difficult to get it removed, as a result you will never be able to work with children. *We have a serious shortage of resources, and this restricts us to reach to the communities. It's us who should reach out to the marginalised communities, but we find ourselves in difficult position to do so. We don't have resources to go to the communities to intervene after receiving reports of intentional child neglect, and these makes the communities to lose their trust on us. The resources that I am talking about include phones, airtime, vehicles. maybe if they can do hotlines at provincial and local level, not like now where the hotlines are at national level (Gauteng) and when people call, their calls are directed to the national level, sometimes they reach us early, sometimes late so it is just not working. Having local and provincial hotlines will help our communities to reach us in time and anytime.

Participant I	*People need to work together, especially stakeholders. We need a collaborative way of dealing with these cases, everyone needs to do his/her part. For example, we have a chief who should conduct meetings and invite several stakeholders to come and capacitate the community about intentional child neglect and how to handle it. *Multidisciplinary approach, social workers, police, and everyone who is responsible for protecting children should work together in addressing CN cases. Because really it is not helping, for instance, as a social worker I report the parent for child neglect, the parent gets arrested, and they are released without updating us, as a social worker I will just see them gallivanting the streets, and the likelihood of repeating this behaviour is very high because they know that they won't be punished. People need to see example so that they can stop their behaviour and live accordingly. *Government, there should be a unit that will consist of police officers, social workers, magistrates, and the community that will be dealing with these cases, and these cases only. The professionals need to take pride and accountability of their work.
Participant J	*Social workers need to increase in empowering parents with parenting skills; *With children, social workers need to increase number of awareness campaigns, and empowering them with skills so that whenever they experience neglect, they can be aware, know what to do, and know how to protect themselves. *Government needs to deploy social workers because most clinics have social workers, so maybe people are lacking knowledge about our services or they are just ignorant. *The department should provide us with resources such as telephones, cars, airtime or data. *There is also a need for the system that will be user friendly for everyone who needs to report cases because at the moment we only have ChildLine, the system I am referring to hotlines.
Participant K	*I think we need to capacitate the teenagers with parenting skills. *The parents need to be capacitated as well, and if the parenting skills are not working, I think the best way to deal with this issue is to report it to the police. *Due to lack of resources, we are unable to attend to cases of intentional child neglect in time. You find that the case has been reported and we are taking too long to attend to it, and at the end of the day it becomes difficult to intervene. Government should look deeper into this issue. *I think the Department should provide us with sufficient and adequate tools, and also provide us with training and workshops on how to deal with child neglect cases.
Participant L	*I think people, including pregnant mothers need education about how to raise their children, and they also need support.

	*The programs (e.g. NICRO) could come with their skills and expertise and join us, in collaboration we can alleviate CN. *Hotlines facilities should be made easily accessible and available for everyone so that people can be able to report CN cases, and these hotlines should be free and not require airtime. If we can have these services it will be easier to our communities to engage social workers because sometimes, they are not reporting due to lack of transport money to visit our offices, or lack of airtime to call us. Sometimes is difficult for people to report in time because some of these abuses happen on weekends when we are not working, so it means they will have to wait until Mondays to report, but if we have these hotlines with readily available and accessible attendants we can win, and the neglect can be dealt with properly. *Police stations are very far from the communities, maybe if we can have satellites police stations in the villages it will make the communities and our work very easier,
Participant M	*I think as social workers and other professionals should work together in doing continuous awareness campaigns to the community members, to share information and protect children. * Community members need to be capacitated on how to report such cases when they see or experience them because there are those people that will just keep quiet until teachers or other professional recognize that there is something that is not right with the children. Community members need to learn or be capacitated on child neglect and the issues surrounding it, so that they stay informed. * I think we also need to strengthen parenting programs whereby we form groups of parents and capacitate them about parenting skills, and also check their challenges in parenting so that we can discuss and have a way forward or a solution to their problem because obviously they are experiencing a lot and as a result, they neglect their children. So having them on these programs we will be able to identify the causes, and that will lead to formulation of intervention strategies. *Police should be involved because child neglect is a statutory work, so police officers should be hands on in tackling such cases. * Psychologists should also be on board, as much as we talked about the impacts of CN, some children end up developing low self-esteem or cognitive behaviours so it needs psychologists to be hands on. *The government should also be involved in terms of assisting with resources that will enable us to conduct the campaigns, the resources include pamphlets, billboards, stationery, banners to assist in providing information so that people can have a privilege to read wherever they are, we also need cars to reach the communities more especially the ones that are staying far from our facilities.
Participant N	*From my experience I feel like justice system is not taking neglect cases seriously, maybe if they are detaining people for neglecting their children we wouldn't have such high rates of neglected children. People lack insight, and need to face harsh realities from our justice systems. Justice systems should punish the neglectful parents so that they learn, instead of releasing them to us for parenting skills. Hence the parents do not see a need to comply. *We need to conduct more awareness campaigns because at some point we need to have a consensus of what child neglect is so that we are on the same page. In most cases communities do not see child neglect as a problem or violation of the children's rights. *DSD should provide us with resources, and working tools that will enable us to carry out our duties effectively so.

Participant O	Country, as a country we can have more awareness campaigns and, in these campaigns, we need pamphlets to give people so that they can read on their own at their time. Not much have been said about intentional child neglect on media, this can be TVs, newspapers, radios, and majority focuses on unintentional child neglect, I think we need sufficient media coverage. *Social work fraternity, if we can have more trainings on issues surrounding intentional child neglect, we will know how to deal with these cases in a way that every child that enters our offices will be assisted in a most professional manner because currently everyone is handling it based on their own discretion. We need more workshops and stakeholders' meetings so that other professionals can understand on what to look out for, the signs, and the impact of intentional child neglect. * Parents, more parenting skills programs are needed, we can use media to reach mor parents, we can also do information sharing at their workplaces, basically we need to make them aware of intentional child neglect and its impact on the children. *Children, we can do more life skills programs so that these children find it easy to speak up when they feel that their needs are not being met. It will help them know where to go, what to do, who to trust etc. some are quite because they do not know. * Supervisory support, it will also assist in alleviating intentional child neglect, let's say I am doing a case alone without the supervisor's support, it might be difficult for me to intervene accordingly because if I stuck, I would have to see what to do on my own, Training on standardized risk assessment tools is needed so that we can all assess these cases uniformly. *Department of Social Development has 1 Employee Assistance Practitioner for the whole District, but it is as good as not having it because cases are not attended accordingly due to high caseloads. We never receive any counselling nor debriefing unless you go out and seek for private practitioners' services at your cost. It's always one traumatic after the other, we just have to be big girls and continue working as if nothing is happening, it seems like nobody really cares about what is happening.
Participant P	*I think we need to work together as stakeholders because as social workers we feel that all the responsibilities are placed on us as other stakeholders do not address child abuse including the neglect, instead they report to us even when there is something that they can do. For example, we have community leaders who will report the cases to us, but I feel like if he/she can intervene upon realising it maybe the perpetrator can understand and stop instead of making it a social work issue. *Teachers are mandated to report cases of child neglect and abuse as per the Children's Act 38 of 2005, yet they are our biggest problem in this area, they are refusing to report or attend such cases, instead they bring them to us and when we engage parents, they complain that since the case was reported by the school personnel why they were informed by the school but not the social worker. We end up looking like we are busy following other people's lives and causing problems even where there is none. All the stakeholders are aware of this issue but they are not doing anything about it. *Apart from the government's efforts, us as stakeholders and communities need to learn to support parents, maybe they will see that neglecting children is wrong because when it comes from one department it does not have a lot of weight, it needs multidisciplinary efforts.

ADDENDUM 21: DECLARATION BY LANGUAGE EDITOR



ZEE EDITING AND PROOFREADING SERVICES

PO BOX 663 THOLONGWE 0734

LANGUAGE MATTERS

22 November 2024

TO WHOM IT MAY CONCERN

This is to certify that the dissertation titled **“Indicators of intentional child neglect by parents and caregivers: A social work perspective”** by **EP Mkhondo (37745816)** has been edited and proofread for grammar, spelling, punctuation, overall style and logical flow. The edits were carried out using the “Track changes” feature in MS Word, giving the author final control over whether to accept or reject effected changes prior to submission, provided the changes I recommended are effected to the text, the language is of an acceptable standard.

Please don't hesitate to contact me for any enquiry.

Kind regards

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