



Empowerment and Accountability and Multi-layered Contexts of Influences: Parenting and the Avoidance of Harm in Harare, Zimbabwe

Noreen Kudzanai Wini Dari¹, Obdiah Mawodza², Ericka Mingo,³ and Bradley D. Olson³

¹ Midlands State University, Gweru

² Boston City Campus & Business College, Cape Town, Stellenbosch

³ National Louis University, Chicago

In this paper, the authors discuss multi-level systems for parenting in Harare, Zimbabwe. At the micro-system level, the Tirere Pamwe parenting program is a supportive, empowering prototype, designed to educate parents on child development, with a special focus on socio-emotional development, from birth to age 18 years. The program has been delivered to a diverse group of parents, in diverse settings, which has helped to bring a greater contextual relevance to parenting practices, and seems thereby to have increased the mental well-being of children. At the macro-system level, international law and Zimbabwean laws emphasise the need to protect children from both physical and psychological harm. These different layers are examined through the varying theoretical perspectives of community psychologist Julian Rappaport (1977, 1981, 1987, 2000, 2005), such as his emphasis on paradox, empowerment, second-order change, and narrative.

Keywords: parenting, empowerment, child protection

Key Points

- 1 Non-physical harm of children by parents is often minimised and may go unnoticed.
- 2 Some cultural practices and values perpetrate child abuse.
- 3 Parents and children shape their formative narratives, which are inseparable from their broader ecology.
- 4 Exclusive focus on problems and deficits undermines the humanity of the human relationship.
- 5 The Tirere Pamwe parent training program actively gathered the narratives and living experiences of its participants.

Introduction

Violence against children (VAC) has emerged as a public health threat of the 21st century, in both developed and developing countries (Thompson, Sanders, & Hibbard, 2016). Violence against children takes many forms: psychological, physical, and sexual (Ravi & Ahluwalia, 2017). While violence is often understood as physical harm, Coore Desai, Reece, and Shakespeare-Pellington (2017) emphasise that the common interpretation of violence should in no way minimise the need to address

Address for correspondence: Bradley D. Olson, National Louis University, Chicago, USA.
bradley.olson@nl.edu

non-physical harm such as neglect and psychological maltreatment. Guedes, Bott, Garcia-Moreno, and Colombini (2016) note that violence against children occurs in homes, and parents can be perpetrators. Socio-economic status does not grant immunity to VAC (Letourneau et al., 2011) as it happens among the rich and the poor at both individual and country levels. However, stunted nations such as Zimbabwe are affected as well (Masinda & Muhesi, 2004). All forms of violence against children are preventable, and parent training is indicated as of major importance in helping prevent violence against children in the home (Coore Desai et al., 2017).

Despite the many empowering assets of the African culture, there exists myths of unknown source and nature, which dwell deep in the psyche of families (Chireshe, Chireshe, & Mudhovozi, 2009). One such common myth is the idea that leaving infants alone to cry helps them to become strong and induces a kind of self-care at a young age. These myths have a deep hold, and a strong cultural resilience, which may require nuanced methods beyond the scientific to dispel (Biko, 1998; Ogbu, 1981; Phasha et al., 2009). There also exists a myth in Zimbabwe that detachment, as well as violent discipline strategies, are effective, which causes intergenerational harm (Baumrind, Larzelere, & Cowan, 2002; Gershoff & Grogan-Kaylor, 2016; Lachman et al., 2016).

The most prominent originator of community psychology, Rappaport (1977, 1981, 1987, 2000, 2005) introduced a variety of key principles to community action. In addition to a process of empowerment through narratives and tales transformed from terror to joy, he also embraces ecological thinking and paradox. Sometimes the paradox reflects a problem to be resolved and sometimes just an equilibrium to be maintained. Using these and other Rappaportian notions, this paper discusses parenting education and the ecology of the parent/child dyad through their own empowerment processes. The focus here is on an effort in Harare, Zimbabwe, a program that embraces community and family science, as well as traditional and socio-emotional learning, inseparable from Zimbabwe's cultural context.

Tirere Pamwe Parent Training Program

The parent training program ran under the title 'Tirere Pamwe,' a Shona sentence, literally translated as, 'Let's raise them together.' This was meant to help reduce the stigma associated with having children with behavioural or socio-emotional maladjustment (Parra-Cardona et al., 2016; Sawrikar & Dadds, 2018; Webster-Stratton, Reid, & Hammond, 2004). As such, the idea is that helping parents become aware of their parenting practices, without a stigma of failure, doubt, or a bad parent tag, will help them gravitate towards positive parenting (Sanders, Burke, Prinz, & Morawska, 2017), and help reduce the incidence and prevalence of child maltreatment (Barth, 2009; Gewirtz, Lee, August, & He, 2018), and its associated maladjustments in childhood (Mason et al., 2003; Reyno & McGrath, 2006; Richardson & Joughin, 2002). The program aimed to achieve the following goals:

1. *Help parents acquire and use improved parenting skills.* This helps promote family harmony and reduce conflict as parents develop a safe and nurturing environment. It promotes positive caring relationships and non-violent management strategies, for dealing with a variety of childhood behaviour problems and common developmental issues.

2. *Ensure parents increase knowledge of child development.* Based on the principle of sufficiency, the program provided the minimally sufficient information and intervention a parent requires in order to successfully move a child away from a riskier trajectory.
3. *Help parents learn new ways to discipline and nurture.* The self-regulation of parental skill is a central construct in the program. Apart from improving parenting skills, the program also aimed to increase parents' sense of competence (empowerment) in their parenting abilities, and to change the ecological context of parenting by validating parenting experiences, increasing social and emotional support, and normalising parent education.

The Tirere Pamwe program is built on the integration of life course development research, community epidemiology, and preventive intervention (Schiavo, 2013; Trickett et al., 2011). Child maltreatment is a pressing problem that co-occurs in individuals and neighbourhoods (L. Cluver, Meinck et al., 2016; Ravi & Ahluwalia, 2017), and can sometimes be predicted by common precursors, and prevented through protective factors that mediate or moderate exposure to risky situations (Dawes & Ward, 2011; Finkelhor, Turner, Ormrod, & Hamby, 2009; Masinda & Muhesi, 2004). There is much overlap in these risk and protective factors. Research indicates that different risk factors are particularly salient at different developmental stages (Mash & Wolfe, 2012; Thompson et al., 2014). The parenting domain can serve both as a risk and protective factor (Santrock, 2012). The program seeks to ensure sensitive and competent care of children according to age group, so as to prevent more severe problems as adults.

Importantly, the intervention is informed by narratives of the parenting community (Rappaport, 2000a) within Harare North. Harare North is a residential area situated north of the capital, and is generally associated with affluence, which has long been considered a protective factor against child abuse (Luthar, 2003). A cross-section of 636 participants aged between 20 and 56 with children aged between 0 months and 18 years participated in the program over a two-year period.

The parent's willingness to accept the program is a key component for the success of any intervention program (Lachman et al., 2016). However, members of this community can have closed boundaries, and are not always keen to discuss their parenting challenges openly in focus group discussions. A couple of participants clearly articulated that maintenance of social status led them to maintain secrecy around their children's challenging behaviours. An essential part of the program was to establish the normality of improving one's parenting style and comfort, and always hearing the voice of the parents. Before commencing a session, parents were given plain papers where they could write anything they wanted to ask but felt they could not ask publicly. Finding a path back to the kinds of nurturing practices, which were more the norm in the pre-colonial region now known as Zimbabwe, can be a significant tool in acclimatising parents to the practices introduced by the program.

Multiple modalities of intervention were used: group as well as individual discussions. The basis of each interaction was guided by the Tirere Pamwe parent training, and the stories which emerged during any given session. The interventions were delivered in the community, with a few exceptions in a clinical setting. Informal teaching is a core component in the transference of knowledge within African communities; as such, the delivery of the program was semi-formal. Interactions with

parents, in places other than clinical settings, were conversation-based, and noted the practical challenges which parents faced prior to the delivery of the Tirere Pamwe prototype. The program was delivered at women's church meetings, primary school inductions, baby welcome parties, and other informal groupings. The program managed to reach a high number of parents, as it was tailored into their daily programs, thereby raising awareness of child development as well as parenting, ensuring that parents could be involved in future, more intense, training programs.

The Microsystem and Tirere Pamwe

The microsystem consists of the parent – child dyad's most immediate environment, where the initial and most intimate learning context always remains a primary reference point (Wachs, 2010). A primary goal is to target parenting practices to reduce risk and enhance protective factors, those that are the key to better development of the child (Barth, 2009; Ward et al., 2014; Wessels et al., 2013).

Most of what is learned about parenting is learned in one's childhood, as no formal training takes place to prepare parents (Parra-Cardona et al., 2017). Such practices can promote intergenerational negative as well as positive parenting practices (Lachman et al., 2016). The growing child's psychological development is largely veiled and unknown, with the physical development of children taking centre stage (Wessels & Ward, 2015). From the day a mother falls pregnant, the system will offer plenty of tips and advice on the child's physical growth, development, and wellbeing. Empowering parenting can help children become more self-sufficient (Mason et al., 2003; Reyno & McGrath, 2006). The formative years are truly important for establishing patterns of emotional, cognitive, and social wellbeing (Barth, 2009; Rappaport, 2000).

Seventy-seven percent of Zimbabwean adults report that corporal punishment is commonly used in the home (Zimbabwe Statistics, 2014). Sixty-three percent of Zimbabwean children under 14 years reported experiencing violent discipline, including psychological aggression (Multiple Index Cluster Survey, 2014). The parent – child microsystem immediately brings a critical paradox: despite the breadth of humanising kindness as a great resource in the culture of Zimbabwe, there is an equally deep strain of hierarchy (Masinda & Muhesi, 2004). The culture insists that elders are revered, leaving children to have little voice. For instance, children are often prohibited from answering an adult's question without being granted the authority to answer. In such settings any notion of empowerment (Rappaport, 1981), or liberation, of children faces severe challenges. However, it is important to note that traditional practices, when part of a more loving environment, can protect the child and family against colonial harms. Reverence for the elder, and customs which value their wisdom and guidance, are not singularly harmful. They can in fact act as a protection against harmful colonial impositions, which have caused tremendous harm to both child and family long term. The ultimate goal of the program has been the reintroduction of more compassionate relationships with children to Zimbabwean parents, alongside tradition, not in place of it.

Adulthood, however, perhaps connected to the detachment myth, can create a gradient, an emotional detachment in youth, that self-replicates (Thoresen et al., 2015). Such myths are not exclusive to Zimbabwe, nor Africa, and are likely to be present in places where hierarchy is strong. The emotional detachment myth can be said to

characterise many parent – child relationships (Ogbu, 1981) of African ancestry. The practice of detachment, which begins early with the notion that children are best left crying and self-soothing, permeates a multitude of parental decision making. Prematurely picking an infant up is seen as weakening them, as making the child become too needy and not allowing children to grow up on their own. The decision to let a child be, in order to help them grow, can bring a sense of ‘terror’ to the infant and child raised in this way (Baumrind, 1991). Rappaport (2000a) reaffirms that one primary mission of community psychologists is to help people (including children) move away from deficits and problems or harm (terror) to well-being (joy). In this process he points out the important role of the creation of new, empowering settings that legitimate personal and community narratives. The dynamic, cross-ecological, intergenerational interconnections of myth drive emotional detachment and political hierarchy (Ogbu, 2013). These are tales of terror. Community psychology can help shape these narratives into greater tales of joy.

One of the fundamental tenets of Erickson’s psychosocial stages (trust versus mistrust) emphasises the need for positive parenting behaviours (Berk, 2017). Infants grow socially and emotionally when they obtain the warmth and nurturing to enable them to attain the virtue of trust (Berk & Meyers, 2015). Such a virtue becomes even more vital when seen in its impact on intergenerational cycles of hierarchy and emotional distance. Such a virtue drives future child interactions with their parents and caregivers, and, when they become adults, with their own children (Santrock, 2012). Kohlberg’s stages of moral reasoning also critique settings that rob children of their chance to achieve, preventing future moral acts through fear of reprisal (Berk & Meyers, 2015). Such defaults of fear and distance hamper the growing adolescent who, with greater freedom from parental influence, can find themselves in higher-risk settings with networks of other youth who are persistently defiant of societal norms (Mash & Wolfe, 2012).

The Macrosystem, Multi-levels of Law, Preventing Psychological Harm

The superordinate system comprising of community cultural, and political practices (Darling, 2007) are influenced by and influence all other ecological levels. Rappaport (1977) argued that problems should be solved by intervening at ecological levels consistent with the level at which the problem resides, pointing out that second-order solutions are superior. Second-order solutions go beyond wornout, more obvious symptom reduction measures, by addressing all components of a broader, more complex system. Yet in later thinking, embracing paradox, he emphasised that the more solutions the better even if those solutions seem contradictory (Rappaport, 1981, 1987). So what does all of this mean for the many Zimbabwe children who ‘need’ protection from the proximal harm of abusive parents, who are themselves nested within a larger system which can itself be seen as abusive, and certainly as an actor in the shaping of the harm suffered by the children?

As flawed as any legal system may be, community psychologists recognise the importance of definitions afforded by law, and build on those definitions. In the macro-legal landscape there is a global, regional, and local consistency in protecting children against harm (Bhaiseni, 2016). There is a consistent legal narrative as international law, represented by the Convention on the Rights of the Child (CRC),

African Charter on the Rights and Welfare of the Child, and domesticated largely by The Constitution of Zimbabwe, shows consensus on the protection of children.

Zimbabwe's legal framework, particularly the new Constitution Act 20 of 2013, and the Children's Act Chapter 5: 06 of 2001, promotes and protects the mental well-being of children. These pieces of legislation domesticate international standards on the promotion and protection of children's rights. The Constitution Act 20 of 2013 has included socioeconomic rights as justiciable rights for the first time since the inception of a constitutional dispensation in Zimbabwe (Banda, 2014; Durojaye, 2016). More importantly, the Constitution has a stand-alone provision that expressly recognises children as constitutional rights-bearers, who must enjoy, among other things, the right to health (see Section 81 of the Constitution).

Zimbabwe is a state party to the CRC and the African Charter on the Rights and Welfare of the Child (African Children's Charter). These international treaties contain provisions that are relevant for measuring a member country's compliance in addressing practices, attitudes, and perceptions that lead to child abuse (Mwambene & Mawodza, 2017). In Africa there is literally an emphasis on it taking a village culture to bring up children. Articles 18(1) of the CRC and 20(1) of the African Children's Charter recognise the fact that 'extended families and other de facto care-givers play a role' in the upbringing of children in Africa (Memzur, 2008: 25).

Thus, international law has enjoined caregivers with the primary duty of ensuring the upbringing and development the child. The African Children's Charter further obligates caregivers to the following: '(a) the best interests of the child, at all times; (b) to secure conditions of living necessary to the child's development; (c) to ensure caregivers administer domestic discipline with humanity, in a manner consistent with the inherent dignity of the child.'

Article 24(3) of the CRC states that parties take 'all effective and appropriate measures, with the view to abolishing traditional practices prejudicial to the health of children.' In addition, the African Children's Charter (Article 20(1)(c)) requires parents 'to ensure that domestic discipline is administered with humanity and in a manner consistent with the inherent dignity of the child.' Governments, in other words, must recognise any parental discipline inconsistent with the inherent dignity of the child as a violation of the health of the child. To ensure safer environments for children, harm should be addressed at every source (Desai, 2010).

The Constitution, giving effect to the CRC, reaffirms protection of children against any form of abuse, thereby prohibiting mental or psychological abuse. The Constitution also guarantees the right to personal integrity, which is instrumental in addressing problematic familial and cultural norms that may escalate child mental abuse in Zimbabwe. The practice of leaving a child to cry and soothe themselves, violates the psychological integrity of children, causing separation, anxiety, and ultimately affecting the physical, social, and cognitive development of affected children. These myths need to be addressed at all ecological levels, including deep understandings of the ways in which historical colonial harm may have created, amongst Zimbabweans, the desire to protect children against inevitable colonial harm, through enacting the myth of self-soothing, and other harmful behaviours.

The Children's Act, which is the principal child protection legislation in Zimbabwe, also has provisions that deal with the issue of child psychological health. For example, section 7(1) of the Children's Act provides: 'if any parent or guardian of a child or young person ... ill-treats, neglects, abandons or exposes him or allows,

causes or procures him to be ... ill-treated, neglected, abandoned or exposed in a manner likely to cause him unnecessary suffering or to injure or detrimentally to affect his health or morals or any part or function of his mind or body, he shall be guilty of an offence.'

This provision is consistent with the African Charter, the CRC, and the African Children's Charter, each of which respectively obliges state parties to protect children from any form of abuse, including mental harm (Sloth-Nielsen & Gallinetti, 2004).

The Children's Act places a duty on parents and guardians to ensure they give their children adequate care and protection, enjoining parents and guardians to prevent physical or mental neglect, ill-treatment and exploitation of infants. Psychological programming can better help parents understand the extent of these duties, and how they might better carry them out. The Children's Act does give a specific provision to protect and promote the mental wellbeing of infants (persons under the age of 7 years). These legal documents focus not only on harm but also on wellbeing. The Children's Act does, for instance, focus on strengths, that children should grow in a healthy manner.

Community psychologists believe in supportive programs while equally giving a critical appreciation of context (Trickett et al., 2011), in this case Zimbabwe's compliance with all international human rights legal standards guidelines. More preventive approaches and greater understandings of harm will contribute to the reduction of harm at all levels in all its multifarious manifestations (Albee & Gullotta, 1997; Albee & Ryan-Finn, 1993).

Rappaportian Empowerment Theory and the Tirere Pamwe Program

Rappaportian theory can shed light on the important dynamics of play within the Tirere Pamwe program, particularly with parent – child dynamics that might appear culturally traditional in one sense, but might have a sense of 'terror' for the child involved. The unhealthy family interactions of past generations inform current parenting practices (Lachman et al., 2016) The Tirere Pamwe prototype focuses on the gap in understanding the ways unhealthy intergenerational interactions exist within a broader cultural ecology (Forehand & Kotchick, 1996) so that the parent – child dyad can thrive through communication and warm, nurturing attention (Cummins, 2018).

Recognising a problem as a challenge, for what it is, while resources may be unravelling, is not easy to do (Dickerson, Lindner, Scurich, & Quas, 2017; Gilbert et al., 2018). The program therefore addressed issues such as problem recognition, orientation toward the problem, time demands, and help-seeking. Rappaport (1981) pointed out that prevention could be a very hierarchical process. What was therefore more important than the prevention vs. intervention distinction was that the Tirere Pamwe program developers were committed to addressing the challenges faced by parents, as the parents saw them. Developers ensured parents participated, mutually sharing knowledge (Prilleltensky & Nelson, 1997), identifying vulnerabilities, and creating more empowering and affection-based parenting practices (Prilleltensky & Nelson, 2002; Wiley & Rappaport, 2000).

Parent training programs often focus on so-called behaviour modification techniques in preventive mental health in children (Dretzke et al., 2005), and ineffective child management practices may cause so-called behavioural and emotional

maladjustments in children (Chireshe et al., 2009). Yet the way these interventions play out must also be intentionally balanced with settings that foster less diagnosis and more empowerment (Zimmerman, 2000), where collaborative approaches are used and where the parents and children lead efforts, rather than just being led (Rappaport, 1981, 1987). This therefore creates multiple paradoxes (Rappaport, 1981). One paradox is between the extra-scientific language of ‘risk factors,’ ‘externalizing behaviours,’ and ‘psychopathology’ in contrast to the more humanising relationships among the professionals and the parents and their children.

Prevention programs can be potentially hierarchical or colonising in nature (Rappaport, 1981, 1987). Prevention as colonisation is particularly relevant when the programs are not developed in dialogue and collaboration with the recipients of the services (Irvin & Stansbury, 2004; Shier, 2001), thereby creating a paradox between prevention and true empowerment (Rappaport, 1981). From a community psychology perspective, prevention programs should be prioritised in the African context to prevent unnecessary psychosocial struggles later in life (Sanders, 2008). The programs should be created collaboratively with parents, toward holistic models that take advantage of cultural assets (Chireshe et al., 2009; Ogbu, 2013; Parra-Cardona et al., 2016; Phasha et al., 2009).

Evidence-based parenting interventions recognised by international agencies and public health systems can be too exclusively developed and implemented in high-income countries (Cluver, et al., 2016; Mikton et al., 2013). While there is a need for these programs in low- and middle-income countries (Borden, Schultz, Herman, & Brooks, 2010; Dretzke et al., 2005; Knerr, Gardner, & Cluver, 2013; Mejia, Calam, & Sanders, 2012) they need to be indigenously adapted. Such programs should not simply be transplanted in whole from high-income countries, particularly places with very different cultures and contexts (Knerr et al., 2013; Mejia, Leijten, Lachman, & Parra-Cardona, 2017; Mikton et al., 2013). The scientific nature of these interventions is invaluable (Michelson et al., 2013), particularly in Zimbabwe, and yet there is also the appreciation that human relationships cannot entirely be understood through the lens of science; community psychology is more than a science (Rappaport, 2005).

It is the science but also the philosophy and wisdom of community psychology that enables the opportunity for transformative delivery of psychological service (Duncan, Naidoo, Pillay, & Bowman, 2007; Kelly, 1987, 2004) for parents in Harare, Zimbabwe. The often scientific focus on problems and deficits can help us identify and understand some of the clinical problems (Austin et al., 2010; Sue, Sue, Sue, & Sue, 2015), but an exclusive focus on problems undercuts the humanity of the mother, the child, and their relationship (Prilleltensky, 2001).

Further, the relationship of the mother and child must be contextualised by social circumstance (Bronfenbrenner, 1995; Maguire-Jack & Font, 2017; Ogbu, 2013; Sanders et al., 2017). Culture can be viewed through the lens of liberation, offering that, a people’s innovation, or parenting practices in this paper, must take form without succumbing to western values (Agrawal, 1995; Biko, 1978; Hook, 2004; Mejia et al., 2017). The idea is that innovation and other cultural progression is part of the natural development of any culture – the people’s composite answer to the varied problems of life (Biko, 1973; Ogbu, 1981). It is important to remember that the evolution of parenting styles in Zimbabwe might be a form of a solution to a kind of problem that more liberal and western-based theory alone cannot solve (Ogbu, 1981,

2013), thus reinforcing the need for program syntheses informed by the lives and lived experiences of the participating parents (Parra-Cardona et al., 2016).

Parents and children in Harare North live within an intricate ecology, integral to their personal, relational, and collective being (Bronfenbrenner, 1995; Darling, 2007). Programs that focus on social ecology transactions, and power and inclusion exemplify the vitality of community psychology and its science, ethics, and practice (Duncan et al., 2007). Ecological depth allows parents and children to shape their formative narratives inseparable from the broader cultural context (Ratele et al., 2004). A sole focus on fixing children or parents, at least implicitly, blames the 'victims' or 'survivors' of larger systems (Austin et al., 2010; Corey, 2015), but community psychologists focus on the broader systems (Albee, 1982; Albee & Gullotta, 1997).

References

- Agrawal, A. (1995). Indigenous and scientific knowledge: Some critical comments. *Development and Change*, 26(3), 413–439.
- Albee, G.W. (1982). Preventing psychopathology and promoting human potential. *American Psychologist*, 37(9), 1043.
- Albee, G.W., & Gullotta, T.P. (1997). *Primary Prevention Works* (Vol. 6). Thousand Oaks, CA: Sage.
- Albee, G.W., & Ryan-Finn, K.D. (1993). An overview of primary prevention. *Journal of Counseling & Development*, 72(2), 115–123.
- Austin, T., Bezuidenhout, C., Du Plessis, L., Jordaan, E., Lake, M., Nel, J., . . . von Krosigk, B. (2010). *Abnormal Psychology: A South African Perspective*. Cape Town: ABC Press.
- Banda, F. (2014). The Constitution of Zimbabwe 2013: A constitutional curate's egg, in B. Atkin (Ed.), *International Survey of Family Law*, (2014th ed.) (pp. 491–503). Bristol: Jordan Publishing.
- Barth, R.P. (2009). Preventing child abuse and neglect with parent training: Evidence and opportunities. *The Future of Children*, 19(2), 95–118.
- Baumrind, D. (1991). Parenting styles and adolescent development. *The Encyclopedia of Adolescence*, 2, 746–758.
- Baumrind, D., Larzelere, R.E., & Cowan, P.A. (2002). Ordinary physical punishment: Is it harmful? Comment on Gershoff *Psychological Bulletin*, 128(4), 580–589.
- Berk, L.E. (2017). *Exploring Lifespan Development*. Boston, MA: Pearson.
- Berk, L.E., & Meyers, A.B. (2015). *Infants, Children, and Adolescents*. Boston, MA: Pearson.
- Bhaiseni, B. (2016). Zimbabwe Children's Act alignment with international and domestic legal instruments: Unravelling the gaps. *African Journal of Social Work*, 6(1), 3–6.
- Biko, S. (1973). *Black Consciousness and the Quest for True Humanity*. Reading, UK: Cox & Wyman Ltd.
- Biko, S. (1978). *I Write What I Like: Selected Writings by Steve Biko*. Reading, UK: Cox & Wyman Ltd.
- Biko, S. (1998). *Some African Cultural Concepts. The African Philosophy Reader*. Reading, UK: Cox & Wyman Ltd.
- Borden, L.A., Schultz, T.R., Herman, K.C., & Brooks, C.M. (2010). The Incredible Years Parent Training Program: Promoting resilience through evidence-based prevention groups. *Group Dynamics: Theory, Research, and Practice*, 14(3), 230.
- Bronfenbrenner, U. (1995). Developmental ecology through space and time: A future perspective, in P. Moen, G.H. Elder Jr & K. Lüscher (Eds.), *Examining Lives in Context:*

- Perspectives on the Ecology of Human Development* (pp. 619–647). Washington, D.C.: American Psychological Association.
- Chireshe, R., Chireshe, E., & Mudhovozi, P. (2009). Child abuse: Psychosocial and religious intervention strategies in Zimbabwe. *Journal of Psychology in Africa, 19*(2), 261–263.
- Cluver, L., Meinck, F., Yakubovich, A., Doubt, J., Redfern, A., Ward, C., ... Gardner, F. (2016). Reducing child abuse amongst adolescents in low- and middle-income countries: A pre post trial in South Africa. *BMC Public Health, 16*(1), 567. <https://doi.org/10.1186/s12889-016-3262-z>.
- Cluver, L.D., Lachman, J.M., Ward, C.L., Gardner, F., Peterson, T., Hutchings, J.M., ... Redfern, A.A. (2016). Development of a parenting support program to prevent abuse of adolescents in South Africa. *Research on Social Work Practice, 27*(7), 758–766. <https://doi.org/10.1177/1049731516628647>.
- Coore Desai, C., Reece, J.A., & Shakespeare-Pellington, S. (2017). The prevention of violence in childhood through parenting programmes: A global review. *Psychology, Health & Medicine, 22*(sup1), 166–186. <https://doi.org/10.1080/13548506.2016.1271952>.
- Corey, G. (2015). *Theory and Practice of Counseling and Psychotherapy*. New York: Nelson Education.
- Cummings, J.A. (2018). Transformational change in parenting practices after child interpersonal trauma: A grounded theory examination of parental response. *Child Abuse and Neglect, 76*, 117–128. <https://doi.org/10.1016/j.chiabu.2017.10.005>.
- Darling, N. (2007). Ecological systems theory: The person in the center of the circles. *Research in Human Development, 4*(3–4), 203–217.
- Dawes, A., & Ward, C. (2011). Violence and violence prevention: New roles for child and adolescent health practitioners. *Journal of Child & Adolescent Mental Health, 23*(1), 1–4. <https://doi.org/10.2989/17280583.2011.594242>.
- Desai, M. (2010). *A Rights-based Preventative Approach for Psychosocial Well-Being in Childhood*. Dordrecht: Springer Science & Business Media.
- Dickerson, K.L., Lindner, S., Scurich, N., & Quas, J.A. (2017). When is neglect, neglect?: It depends on who you ask. *Child Maltreatment, 22*(3), 256–264. <https://doi.org/10.1177/1077559517709558>.
- Dretzke, J., Frew, E., Davenport, C., Barlow, J., Stewart-Brown, S., Sandercock, J., & Taylor, R. (2005). The effectiveness and cost-effectiveness of parent training/education programmes for the treatment of conduct disorder, including oppositional defiant disorder, in children. *Health Technology Assessment, 9*(50), 1–233.
- Duncan, N., Naidoo, A., Pillay, J., & Bowman, B. (2007). *Community Psychology*. Cape Town: UCT Press.
- Durojaye, E. (2016). A gendered analysis of Section 48 (2)(d) of the Zimbabwean Constitution of 2013. *Statute Law Review, 38*(2), 240–251.
- Finkelhor, D., Turner, H., Ormrod, R., & Hamby, S.L. (2009). Violence, abuse, and crime exposure in a national sample of children and youth. *Pediatrics, 124*(5), 1411–1423. <https://doi.org/10.1542/peds.2009-0467>.
- Forehand, R., & Kotchick, B.A. (1996). Cultural diversity: A wake-up call for parent training. *Behavior Therapy, 27*(2), 187–206.
- Gershoff, E.T., & Grogan-Kaylor, A. (2016). Spanking and child outcomes: Old controversies and new meta-analyses. *Journal of Family Psychology, 30*(4), 453–469. <https://doi.org/10.1037/fam0000191>.
- Gewirtz, A.H., Lee, S.S., August, G.J., & He, Y. (2018). Does giving parents their choice of interventions for child behavior problems improve child Outcomes? *Prevention Science, 19*(1), 1–11. <https://doi.org/10.1007/s11121-018-0865-x>.

- Gilbert, L., Reza, A., Mercy, J., Lea, V., Lee, J., Xu, L., & Domercant, J.W. (2018). The experience of violence against children in domestic servitude in Haiti: Results from the Violence Against Children Survey, Haiti 2012. *Child Abuse and Neglect*, 76, 184–193. <https://doi.org/10.1016/j.chiabu.2017.10.014>.
- Guedes, A., Bott, S., Garcia-Moreno, C., & Colombini, M. (2016). Bridging the gaps: A global review of intersections of violence against women and violence against children. *Global Health Action*, 9, 31516. <https://doi.org/10.3402/gha.v9.31516>.
- Hook, D. (2004). *Frantz Fanon, Steve Biko, 'Psychopolitics', and Critical Psychology*. Landsdown: Juta Publishing.
- Irvin, R.A., & Stansbury, J. (2004). Citizen participation in decision making: Is it worth the effort? *Public Administration Review*, 64(1), 55–65.
- Kelly, J.G. (1987). Some reflections on the Swampscott conference. *American Journal of Community Psychology*, 15(5), 515–517.
- Kelly, J.G., & Lyndall, G.S. (2004). Communities coping with change: A conceptual model. *Journal of Community Psychology*, 32, 201–216.
- Knerr, W., Gardner, F., & Cluver, L. (2013). Improving positive parenting skills and reducing harsh and abusive parenting in low- and middle-income countries: A systematic review. *Prevention Science*, 14(4), 352–363. <https://doi.org/10.1007/s11121-012-0314-1>.
- Lachman, J.M., Sherr, L.T., Cluver, L., Ward, C.L., Hutchings, J., & Gardner, F. (2016). Integrating evidence and context to develop a parenting program for low-income families in South Africa. *Journal of Child and Family Studies*, 25(7), 2337–2352. <https://doi.org/10.1007/s10826-016-0389-6>.
- Letourneau, N.L., Duffett-Leger, L., Levac, L., Watson, B., & Young-Morris, C. (2011). Socioeconomic status and child development. *Journal of Emotional and Behavioral Disorders*, 21(3), 211–224. <https://doi.org/10.1177/1063426611421007>.
- Luthar, S.S. (2003). The culture of affluence: Psychological costs of material wealth. *Child Development*, 74(6), 1581–1593.
- Maguire-Jack, K., & Font, S.A. (2017). Community and individual risk factors for physical child abuse and child neglect: Variations by poverty status. *Child Maltreatment*, 22(3), 215–226. <https://doi.org/10.1177/1077559517711806>.
- Mash, E., & Wolfe, D. (2012). *Abnormal Child Psychology*. Boston, MA: Cengage Learning.
- Masinda, M.T., & Muhesi, M. (2004). Trauma in children/adolescents: A special focus on Third World countries. *Journal of Child & Adolescent Mental Health*, 16(2), 69–76. <https://doi.org/10.2989/17280580409486572>.
- Mason, W.A., Kosterman, R., Hawkins, J.D., Haggerty, K.P., & Spoth, R.L. (2003). Reducing adolescents' growth in substance use and delinquency: Randomized trial effects of a parent training prevention intervention. *Prevention Science*, 4(3), 203–212.
- Mejia, A., Calam, R., & Sanders, M.R. (2012). A review of parenting programs in developing countries: Opportunities and challenges for preventing emotional and behavioral difficulties in children. *Clinical Child and Family Psychology Review*, 15(2), 163–175. <https://doi.org/10.1007/s10567-012-0116-9>.
- Mejia, A., Leijten, P., Lachman, J.M., & Parra-Cardona, J.R. (2017). Different strokes for different folks? Contrasting approaches to cultural adaptation of parenting interventions. *Prevention Science*, 18(6), 630–639. <https://doi.org/10.1007/s11121-016-0671-2>.
- Memzur, B.D. (2008). The African Children's Charter versus the UN Convention on the Rights of the Child: A zero-sum game? *SA Publiekreg/SA Public Law*, 23(1), 1–29.
- Michelson, D., Davenport, C., Dretzke, J., Barlow, J., & Day, C. (2013). Do evidence-based interventions work when tested in the "real world?" A systematic review and meta-analysis of parent management training for the treatment of child disruptive behavior. *Clinical*

- Child and Family Psychology Review*, 16(1), 18–34. <https://doi.org/10.1007/s10567-013-0128-0>.
- Mikton, C., Power, M., Raleva, M., Makoae, M., Al Eissa, M., Cheah, I., . . . Almunef, M. (2013). The assessment of the readiness of five countries to implement child maltreatment prevention programs on a large scale. *Child Abuse & Neglect*, 37(12), 1237–1251.
- Mwambene, L., & Mawodza, O. (2017). Children's rights standards and child marriage in Malawi. *African Studies Quarterly*, 17(3), 21–43.
- Ogbu, J.U. (1981). Origins of human competence: A cultural-ecological perspective. *Child Development*, 52, 413–429.
- Ogbu, N.O. (2013). *Human Rights Law and Practice in Nigeria*. Enugu: Snaap Press Ltd.
- Parra-Cardona, J.R., Lopez-Zeron, G., Domenech Rodriguez, M.M., Escobar-Chew, A.R., Whitehead, M.R., Sullivan, C.M., & Bernal, G. (2016). A balancing act: Integrating evidence based knowledge and cultural relevance in a program of prevention parenting research with Latino/a immigrants. *Family Process*, 55(2), 321–337. <https://doi.org/10.1111/famp.12190>.
- Parra-Cardona, J.R., Bybee, D., Sullivan, C.M., Rodriguez, M.M., Dates, B., Tams, L., & Bernal, G. (2017). Examining the impact of differential cultural adaptation with Latina/o immigrants exposed to adapted parent training interventions. *Journal of Consulting and Clinical Psychology*, 85(1), 58–71. <https://doi.org/10.1037/ccp0000160>.
- Phasha, N., Shumba, A., Okose, N., Mudhovozi, P., & Siziya, S. (2009). Child abuse and neglect: Counseling and healing practices with people of African ancestry. *Journal of Psychology in Africa*, 19(4), 491–496.
- Prilleltensky, I. (2001). Value-based praxis in community psychology: Moving toward social justice and social action. *American Journal of Community Psychology*, 29(5), 747–778.
- Prilleltensky, I., & Nelson, G. (1997). Community psychology: Reclaiming social justice, in D. Fox & I. Prilleltensky (Eds.), *Critical Psychology: An Introduction* (pp. 166–184). Thousand Oaks, CA: Sage Publications Inc.
- Prilleltensky, I., & Nelson, G. (2002). *Doing Psychology Critically: Making a Difference in Diverse Settings*. London: Palgrave Macmillan.
- Rappaport, J. (1977). *Community Psychology: Values, Research, and Action*. New York: Holt.
- Rappaport, J. (1981). In praise of paradox: A social policy of empowerment over prevention. *American Journal of Community Psychology*, 9(1), 1–25.
- Rappaport, J. (1987). Terms of empowerment/exemplars of prevention: Toward a theory for community psychology. *American Journal of Community Psychology*, 15(2), 121–148.
- Rappaport, J. (2000). Community narratives: Tales of terror and joy. *American Journal of Community Psychology*, 28(1), 1–24.
- Rappaport, J. (2005). Community psychology is (thank God) more than science. *American Journal of Community Psychology*, 35(3–4), 231–238.
- Ratele, K., Duncan, N., Hook, D., Mkhize, N., Kiguwa, P., & Collins, A. (2004). *Self, Community and Psychology*. Cape Town: University of Cape Town Press.
- Ravi, S., & Ahluwalia, R. (2017). What explains childhood violence? Micro correlates from VACS surveys. *Psychol Health Med*, 22(sup1), 17–30. <https://doi.org/10.1080/13548506.2017.1282162>.
- Reyno, S., & McGrath, P. (2006). Predictors of parent training efficacy for child externalizing behavior problems – A meta-analytic review. *Journal of Child Psychology and Psychiatry*, 47, 99–111. <https://doi.org/10.1111/j.1469-7610.2005.01544.x>.
- Richardson, J., & Joughin, C. (2002). *Parent-Training Programmes for the Management of Young Children with Conduct Disorders Findings from Research*. London: The Royal College of Psychiatrists, Gaskell.

- Sanders, M.R. (2008). Triple P-Positive Parenting Program as a public health approach to strengthening parenting. *Journal of Family Psychology, 22*(4), 506–517. <https://doi.org/10.1037/0893-3200.22.3.506>.
- Sanders, M.R., Burke, K., Prinz, R.J., & Morawska, A. (2017). Achieving population-level change through a system-contextual approach to supporting competent parenting. *Clinical Child and Family Psychology Review, 20*(1), 36–44. <https://doi.org/10.1007/s10567-017-0227-4>.
- Santrock, J. (2012). *Lifespan Development Psychology*. London: McGraw-Hill Education.
- Sawrikar, V., & Dadds, M. (2018). What role for parental attributions in parenting interventions for child conduct problems? Advances from research into practice. *Clinical Child and Family Psychology Review, 21*(1), 41–56. <https://doi.org/10.1007/s10567-017-0243-4>.
- Schiavo, R. (2013). *Health Communication: From Theory to Practice*. London: John Wiley & Sons.
- Shier, H. (2001). Pathways to participation: Openings, opportunities and obligations. *Children & Society, 15*(2), 107–117.
- Sloth-Nielsen, J., & Gallinetti, J. (2004). *Child Justice in Africa: A Guide to Good Practice*. Capetown: Community Law Centre.
- Sue, D., Sue, D.W., Sue, S., & Sue, D.M. (2015). *Understanding Abnormal Behavior*. Boston, MA: Cengage Learning.
- Thompson, R., Jones, D.J., Litrownik, A.J., English, D.J., Kotch, J.B., Lewis, T., & Dubowitz, H. (2014). Linking mother and youth parenting attitudes: Indirect effects via maltreatment, parent involvement, and youth functioning. *Child Maltreatment, 19*(3–4), 233–246. <https://doi.org/10.1177/1077559514547263>.
- Thompson, S., Sanders, B.J., & Hibbard, R.A. (2016). *McDonald and Avery's Dentistry for the Child and Adolescent* (10th ed.). New York: Elsevier.
- Thoresen, S., Myhre, M., Wentzel-Larsen, T., Aakvaag, H.F., & Hjemdal, O.K. (2015). Violence against children, later victimisation, and mental health: A cross-sectional study of the general Norwegian population. *European Journal of Psychotraumatology, 6*, 26259. <https://doi.org/10.3402/ejpt.v6.26259>.
- Trickett, E.J., Beehler, S., Deusch, C., Green, L.W., Hawe, P., McLeroy, K., . . . Schulz, A.J. (2011). Advancing the science of community-level interventions. *American Journal of Public Health, 101*(8), 1410–1419.
- Wachs, T.D. (2010). Viewing microsystem chaos through a Bronfenbrenner bioecological lens, in G.W. Evans & T.D. Wachs (Eds.), *Chaos and Its Influence on Children's Development: An Ecological Perspective* (pp. 97–112). Washington, D.C.: American Psychological Association.
- Ward, C., Mikton, C., Cluver, L., Cooper, P., Gardner, F., Hutchings, J., . . . Wessels, I. (2014). Parenting for lifelong health: From South Africa to other low-and middle-income countries. *Early Childhood Matters, 122*, 49–53.
- Webster-Stratton, C., Reid, M.J., & Hammond, M. (2004). Treating children with early-onset conduct problems: Intervention outcomes for parent, child, and teacher training. *Journal of Clinical Child and Adolescent Psychology, 33*, 105–124. https://doi.org/10.1207/s15374424jccp3301_11.
- Wessels, I., & Ward, C.L. (2015). A 'best buy' for violence prevention: Evaluating parenting skills programmes. *SA Crime Quarterly, 2015*(54), 17–28.
- Wessels, I., Mikton, C., Ward, C., Kilbane, T., & Alves, R. (2013). Preventing violence: Evaluating outcomes of parenting programmes. Technical Report. World Health Organization, Geneva. Retrieved from <http://eprints.uwe.ac.uk/30118>

- Wiley, A., & Rappaport, J. (2000). Empowerment, wellness, and the politics of development, in D. Cicchetti, J. Rappaport, I. Sandler, & R.P. Weissberg (Eds.), *The Promotion of Wellness in Children and Adolescents* (pp. 59–99). Washington: Wiley.
- Zimmerman, M.A. (2000). Empowerment theory: Psychological, organizational, and community levels of analysis, in J. Rappaport & E. Seidman (Eds.), *Handbook of Community Psychology* (pp. 43–63). Dordrecht, Netherlands: Kluwer Academic Publishers.