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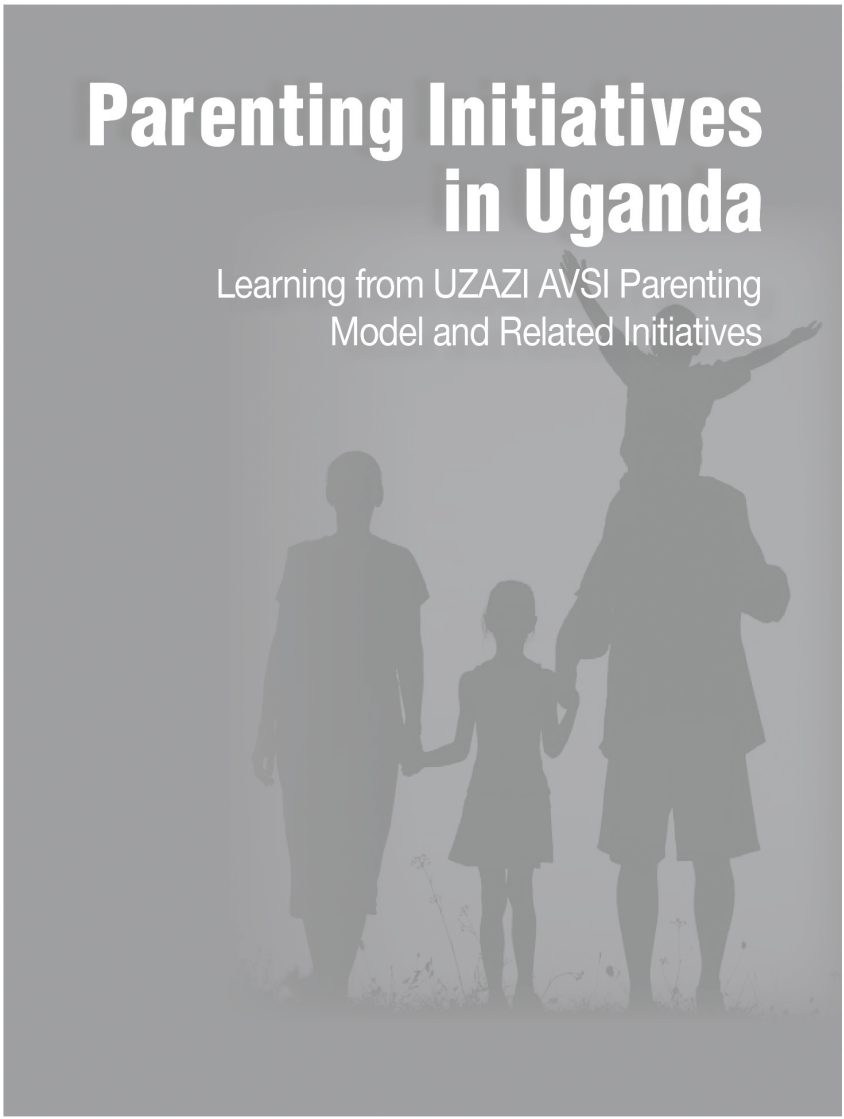

Parenting Initiatives in Uganda

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Dedication

This book is dedicated to Michelle Ell and her family for her dedication and support towards improving the well being of children and young people in Uganda and Africa.

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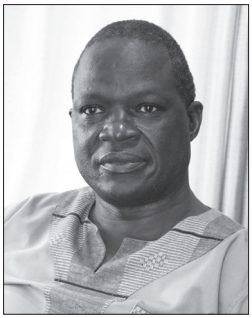
Foreword



Parenting for many years was considered a domain that would be learned through experience and support from immediate relatives, peers and friends. Today, with the changing context, urbanisation and the various changes in culture, exposure to the media and other experiences, we can no longer assume that a good parent will always emerge.

At AVSI Foundation, we have taken a bold step to directly intervene in developing and building true protagonist parents. Over the years, AVSI has developed, packaged and tested materials with parents in both the humanitarian and development context and has been able to deliver strong programmes.

Through a collaboration with Makerere University, AVSI has been able to package all the years of learning into this publication which I hope will inspire you to start looking at parenting differently. While reading through this publication, I hope you will discover like I did, that a true parent is that who is a true protagonist not to his/her spouse or children but rather first to themselves. This is demonstrated in the many change stories shared in this publication.

Thanks to all the program participants, AVSI staff, Makerere University Research team, collaborating partners and the Government of Uganda for creating such an enabling platform to further reflect on the power of authentic Parenting.

John Makoha
AVSI Country Representative

Acknowledgement

The authors wish to acknowledge experts in the field of parenting, institutions and other individuals that have made this publication possible. We would like to express our gratitude to AVSI Foundation Uganda for providing the Department of Social Work and Social Administration of Makerere University with an opportunity to transform research evidence on parenting based on the UZAZI AVSI Parenting Model and the personal experiences of various stakeholders into a book volume that informs both theory and practice.

We extend our sincere gratitude to the other consortium partners namely, FHI 360, TPO Uganda and CARE International for being part and parcel of introducing a parenting programme under the Sustainable Comprehensive Responses (SCORE) for vulnerable children and their families. We also thank the United States Agency for International Development (USAID) for supporting the programme.

Further, we would like to more profoundly appreciate Michelle Ell (Catholic Relief Services) for her dedication and support towards children and young people in Uganda, which in part inspired us to work on this volume. She also extended support in various ways to the authors from Makerere which enabled them to dedicate time to this volume. In the same spirit, we recognise the invaluable support from research participants, both individuals and institutions for taking off their precious time to share experiences and knowledge in the area of parenting.

We are also grateful to our research assistants who participated in the processes involving data collection and analysis of findings.

Finally, we are optimistic that social service workers in the field of family and children will make good use of this book. We hope that you will find this publication useful and insightful especially on issues ranging from awareness of effective parenting practices, or behaviours and key skills, designing and implementing good parenting programmes and working to ensure that governments work towards the promotion of better experience of childhood by strengthening the role of the family in child care and development.

About the Authors

Eddy J. Walakira is an Associate Professor of Children and Youth Studies at Makerere University (Mak). He holds a PhD in Social and Cultural Anthropology from the University of Vienna, Austria. He has served as the Head of the Department of Social Work and Social Administration (Mak), since 2012. He teaches and researches widely on the wellbeing of children and youth placing particular emphasis on subject areas such as; prevention of violence against children and young people, alternative care for children, livelihoods for youth and families, child labour and youth employment, sexual and reproductive health of the young people, capacity building for social service workers and systems strengthening for effective delivery of services for vulnerable children and families. Dr Walakira's work has been instrumental in building an evidence base in the field of children and youth, shaping the development of policies and programmes related to children's welfare, and building the capacity of social service workers through development and delivery of curricula for in-service workers and early career professionals. He offers advisory services to governments and civil society organisations locally and internationally. He sits on many governing boards of social services agencies and professional networks. He is also very instrumental in working towards the professionalisation of Social Work in Africa.

Fred Matovu is a Senior Lecturer of Health Economics at the School of Economics, Makerere University with over 15 years of experience and a track record of research in the areas of cost and cost-effectiveness, impact evaluations, equity analysis, poverty and welfare analysis. He holds a PhD in Economics from University of London. His recent research has focused on parenting and child welfare, saving schemes and women economic empowerment, economics of malaria, cost and cost-effectiveness of interventions. He has served in a number of professional capacities including coordinator of research and outreach at the Makerere University College of Business and Management Sciences, Social Policy Advisor to the Ugandan Ministry of Finance, Planning and Economic Development and member of the Uganda Taskforce on Social Protection. He has conducted research and consultancies for governments, NGOs and UN agencies including UNDP, UNICEF, USAID, MVI/PATH, WHO, DfID and the World Bank and conducted collaborative research in Burundi, Kenya, Tanzania and Uganda. He has published in peer-reviewed journals including *Malaria Journal, Bulletin of the WHO, PlosOne, Health Policy and Planning, Parasites and Vectors,* and authored book chapters. He is a current member of the RBM Partnership in Uganda, the African Economic Research consortium (AERC), International Health Economics Association (iHEA), Uganda Economics Association and the scientific committee and editorial board of the Journal of African Health Economics and Policy.

Agnes Kyamulabi is a Research Fellow at the Department of Social Work and Social Administration, Makerere University. She holds an MA in Development Studies with a major in Children and Youth Studies from the International Institute of Social Studies, Erasmus University of Rotterdam. Her research focus is on parenting and child development, alternative care for children, child poverty and violence against children. She is a child protection and adolescent health expert focusing on research, policy and programming. She is also a ToT of Sexual and Reproductive Health Rights. Agnes is committed to advancing girls/women's rights and gender equality. She was also part of the consultants hired by SOS Children's Villages International in 2019 to develop a regional training curriculum and manual on Alternative Care for Children. She assisted to coordinate the *"Keeping Children in Health and Protective Families (KCHPF) Project" (2017-2019)*, a randomised control trial that assessed the effects of a household-based parenting programme on reintegration of children into family-based care in Uganda. This was funded by Displaced Children & Orphans Fund (DCOF) under USAID. In 2016, she participated in "Implementing Alternative Care in East Africa: Policy Trends and Best Practices for Children Deprived of Parental Care" training project. She is currently coordinating a qualitative component of a research study "*Promoting Inclusion in Decent Work for Ugandan Young People: Will Reducing Violence Help?" (2018-2021)*. This research study is funded by Economic & Social Research Council (ESRC). During off-work hours, she offers voluntary counselling and life skills building for children in and out of school in Uganda. Agnes has keen interest in using research to inform practice as well as documenting learnings from practice to make progress.

Rita Larok is a public health specialist with a social work background.

She has specialised in training and has over 14 years programming experience in both development and humanitarian settings. This experience cuts across fields including; youth and adolescent programmes, early childhood development and care giver programmes like parenting, quality improvement, orphans and other vulnerable children (OVC), HIV/AIDS, education in emergencies, protection and livelihoods and monitoring and evaluation programmes. Rita served as the Chief of Party of the seven year USAID funded SCORE project where the Furaha Graduation and Resilience Model was premiered. Rita is currently the Director of Programmes at AVSI where she oversees over 25 different projects with an annual budget size of 12 $ million.

Alfred Biribonwa Agaba is a Child protection, Education and Family Strengthening specialist currently working as the Programme Manager–Education Cannot Wait & Ending Violence Against Children projects with AVSI Foundation in Uganda. In the last 17 years, Alfred has specialised in the delivery of training and programming for children and youth development. Within this domain, he has supported continuous professional development for teachers, parenting skills improvement for care-takers of orphans and other vulnerable children (OVC), capacity building for social workers, education programming in emergency contexts and project monitoring and evaluation. Alfred served as the Technical Advisor-Child Protection and Family Strengthening of the seven year USAID funded SCORE project implemented in a consortium led by AVSI Foundation. He holds a Bachelor of Arts with Education Honours, a Master of Arts in Economics with a bias in Managerial Economics,

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John Paul Nyeko is a Monitoring and Evaluation specialist, with a computer science background. He has experience in OVC programming, early childhood development, protection, livelihoods, youth and adolescent programmes, and graduation programming for the most poor members of the society. He holds a Bachelor of Science degree in computer science (Makerere University), Masters in Business Administration-Project Planning (Makerere University Business school), and a postgraduate diploma in Monitoring and Evaluation from Uganda Management Institute. John Paul most recently served as a Strategic Information Advisor for the seven years USAID funded SCORE project. He currently works for AVSI foundation Uganda as a Monitoring and Evaluation Advisor for another seven year USAID/FFP funded Activity "Graduating to Resilience Activity," targeting extremely poor refugees and host community in Kamwenge district, Uganda.

Ronald Luwangula is a Lecturer in the Department of Social Work and Social Administration, Makerere University. He holds a PhD in Children's Social Protection Rights from Alpen Adria University Klagenfurt, Austria, Master's Degree in Social Work and Human Rights from University of Gothenburg, Sweden and a Bachelor of Social Work and Social Administration from Makerere University. His specialisation is child protection and social protection with a gender and disability lens. He has supported the development of the Child Protection Training Curriculum and Alternative Care for Children Curriculum. He is a child rights researcher and child protection trainer in Uganda and the region at large.

List of Abbreviations and Acronyms

ACF	Alternative Care Framework
ACRWC	African Charter on the Rights and Welfare of the Child
AIDS	Acquired Immune Deficiency Syndrome
ALM	Active Learning Methods
CCI	Child Care Institutions
CCGs	Cooperative Childcare Groups
CEDOVIP	Centre for Domestic Violence Prevention
CPRS	Child-Parent Relationship Scale
DCR	Dutch Consortium for Rehabilitation
ECD	Early Childhood Development
ESP	Early Steps Programme
FDMS	Family Decision-Making Scale
FGDs	Focus Group Discussions
HIV	Human Immune Virus
IPs	Implementing Partners
IRC	International Rescue Committee
ISPCAN	International Society for the Prevention of Child Abuse and Neglect
KEPS	Knowledge of Effective Parenting Scale
KIIs	Key Informant Interviews
LC	Local Council
MES	Ministry of Education and Sports
MGLSD	Ministry of Gender, Labour and Social Development
NGOs	Non-Governmental Organisations

NPA	National Planning Authority
PBI	Parent Behaviour Inventory
PDT	Parent Development Theory
PSDQ	Parenting Styles and Dimension Questionnaire
PSFU	Private Sector Foundation Uganda
REAL	Responsible Engaged and Loving
SACCOs	Saving Groups and Loans Associations
SCORE	Sustainable Comprehensive Responses for vulnerable children and their families
SDGs	Sustainable Development Goals
SDT	Self-Determination Theory
TPO	Transcultural Psychosocial Organisation
TV	Television
UBOS	Uganda Bureau of Statistics
UCHL	Uganda Child Help Line
UDHS	Uganda Demographic and Health Survey
UK	United Kingdom
UNICEF	United Nations Children's Fund
UNCRC	United Nations Convention on the Rights of the Child
UPE	Universal Primary Education
USAID	United States Agency for International Development
USE	Universal Secondary Education
VC	Vulnerable Children
VSLAs	Village Savings and Loans Associations
WHO	World Health Organisation

CHAPTER 1

Introduction

↑ This couple was once involved in domestic violence. They now live as a happy family.

This book provides a national context and state of parenting in Uganda. It introduces the concept of parenting and helps the reader to gain an understanding of the attributes and dimensions that make parenting either successful on one hand or ineffective on the other. The book further sheds light on the evolving role of parents in the Ugandan context, identifies selected parenting interventions and in particular, pays greater attention to the UZAZI AVSI Parenting Model. UZAZI is positive parenting emphasizing authoritative nurturing of children. The presentation of the

UZAZI AVSI Parenting Model gives the reader an opportunity to understand the effectiveness of the model based on its evaluation using rigorous scientific methods. The book concludes by making recommendations to improve research, policy and programming in the field of parenting within the context of families and children.

The national context of parenting

The Uganda government and civil society actors are working together to improve the wellbeing of children and young people. This is in line with the nation's commitment to various legal and policy frameworks namely; the United Nations Convention on the Rights of the Child (UNCRC), the Sustainable Development Goals (SDGs), in particular goal 4, 5 and 16 on education, gender equality and elimination of violence (United Nations, 2015), the 1995 Uganda Constitution (as amended) and other subordinate laws including the Children (Amendment) Act, 2016, the Prevention of Trafficking in Persons Act, 2009, and the Local Government Act among others. *The National Development Plan II (2015/16-2019/20)* (National Planning Authourity, 2015a) recognised the importance of protecting vulnerable children and promoting appropriate parental care for children in Uganda. Furthermore, both documents accord special priority to access quality education for all age groups.

Government earlier in 2007 established a department responsible for Culture and Family Affairs. Further building on these efforts, the government developed an Alternative Care Framework in 2012 to promote family-based care for children and facilitate access to suitable alternative care options for children deprived of parental care in Uganda. In partnership with development partners and civil society organisations, the Uganda government in January 2014 established the Uganda Child Helpline (UCHL) with a toll free line (116) as a mechanism to increase the reporting of cases of

child abuse, and linking children and families to necessary forms of support.

The country continues to implement other programmes that cut across the various domains of the child's wellbeing for example; increasing access to health, child protection, increasing access to education through the Universal Primary Education (UPE) and Universal Secondary Education (USE) and elimination of poverty through multiple interventions such as expanding access to social protection schemes for the most vulnerable families including children and the elderly, enabling increased access to cheaper credit through the Village Savings and Loans Associations (VSLAs), and making agricultural inputs more accessible to the needy. Notwithstanding, many of these efforts will not yield sustainable achievements if they do not focus on empowering the family to function and fulfil its obligations towards its members who include among others, children, youth and the elderly. These are often more disadvantaged because of their age, and lack of effective representation in the decision-making process.

In as much as the government has a unit in the Ministry of Gender Labour and Social Development (MGLSD) to cater for culture and family affairs, the work of this unit is barely visible in the communities. Thus, government and its structures rely mostly on non-governmental actors to implement programmes that strengthen the parenting component within the family. Cultural and religious institutions have had more influence in engaging with the family thereby helping to fill some of the existing gaps in formal interventions from government and civil society agencies. The cultural institutions in particular rely on cultural norms, beliefs and practices, to influence the structure of the family, its composition, and shaping the values of the family members including nurturing the traditionally accepted ways of raising children in any given community.

Parenting is one of the major areas for consideration in enacting social policies given its association with the child's wellbeing. The child's wellbeing is directly affected by parenting practices and other conditions within the family. Violence against children within the home setting as a case in point is widely associated with the role of parents in enforcing discipline. As it turns out, prevalence rates are therefore high in the family and such settings as schools where children spend most of their time. In parts of northern and north-eastern Uganda for example, violence against children linked to harsh disciplinary practices stood at 65 per cent in Otuke and 75 per cent in Alebtong (districts in northern Uganda) (Walakira, Ddumba-Nyanzi, Bukenya, Baale & Byamugisha, 2014). In areas such as Kumi, Apac and Moroto, violence against children stood at 45 per cent in 2014 before reducing to 38 per cent in 2017 (Walakira, Musinguzi, Bukenya & Byawaka, 2017). Earlier studies revealed a high level of prevalence of physical punishment — at home and school — ranging between 52 per cent and 98 per cent (Naker, 2005; Devries et al., 2014; UNICEF, 2013).

Within the school settings, results from a countrywide study revealed that violence was at 74 per cent (Ministry of Education and Sports and UNICEF, 2012). However, prevalence reduced to 48.7 per cent in control versus 31per cent in intervention schools (N= 42 primary schools in Luweero) when 'past week' violence is perpetrated by staff against children (Karen et al., 2015) and reduced further when violence is directly perpetrated by children against children (29 % n = 3706) (Wandera et al., 2017). Studies focusing on violence within the home setting indicate that it is widely perpetrated by parents. Findings from a national survey on violence against children in Uganda revealed that the major perpetrators of physical violence during childhood among those aged 18-24 years were the biological parents or 'adult relatives.' The survey notes that among the young people sampled, six in ten females (59%) and seven in ten males (68%) reported to have

experienced physical violence during childhood. In the same vein, among the young people aged 18-24 years, one in three reported to have suffered emotional violence during childhood. Up to 41 per cent mentioned biological mothers or step mothers as the most common perpetrators (MGLSD, 2018).

When children grow up in abusive families, they tend to internalise the abuse and often reproduce it in form of externalising behaviour against their peers in homes and in schools. Peer to peer violence whether at school, home and other settings remains high as already revealed. In poorly parented families, other forms of violence such as sexual, emotional and economic violence are likely to be identified. As such, preventing or ending violence against children and providing services such as parenting skills for the benefit of survivors can have a positive impact on the health and well-being of children.

Violence has far reaching consequences on the health of children with some effects lasting the child's entire lifetime. In some instances, children who have suffered various forms of violence are likely to have higher prevalence of mental distress (MGLSD, 2018) and in other instances, it affects the academic performance of students (Devries et al., 2013). Violence is also contagious in such a way that it can spread to the wider society. In worst case scenarios, it can be linked to civil conflict and terrorism. Violence could be drastically reduced if its occurrence in the home setting is reduced. Its reduction will be directly linked to the pursuit of positive parenting approaches that increase parents' knowledge and awareness of the consequences of violence. We will see in this volume that the failure of parents to perform their roles creates family dysfunction. This in turn undermines effective performance of roles and exposes children to a cycle of inadequate parenting and contributes to children's negative development outcomes. In particular, children will be affected in relation to the

development of social, emotional, spiritual, psychological, and physical competences.

Besides harsh disciplinary practices meted against children, there are also acts of child abandonment and child neglect in Uganda which are linked to failure in parenting. In 2010, child abandonment and neglect accounted for 82 per cent of the children who reported the reason for admission in childcare homes (MGLSD, 2010). In majority of the cases, the children who are abandoned on the streets, or thrown in pits or garbage skips, often lack the means to look after themselves. Mothers experience neglect by husbands and many lack any viable social support system. In other cases, the mothers are very young and find it very difficult to look after the children on their own. Many girls get pregnant and thus become mothers at an early age. While teenage pregnancies have declined over the years — from 43 per cent in 1995 to 23.8 per cent (UBOS, 2012), the rate remains unacceptably high. Child mothers are associated with the prevalence of child marriages which is high. Up to 40 per cent of women aged 20–24 were married or in union before they turned age 18 (UBOS, 2012).

The concern in relation to the scourge of child neglect and abandonment is the start-up of Child Care Institutions (CCIs), which provide another setting for parenting. CCIs play a key role in providing care for children without any other care options. However, while this form of care is recommended as a last resort, it is increasingly being used as a first line of response without exploring other care options. Majority of the children in the child care institutions (64%) have a living parent (Walakira, Ddumba-Nyanzi and Bukenya, 2014) and the primary reason for admission to the facility is poverty (ibid) which according to the United Nations Alternative Care Resolutions, should never be used as a justification for the admission of children to CCI (United Nations, 2010). It is estimated that over 50,000 children are resident in Uganda's CCIs many of which are not registered (Riley, 2012).

A survey of CCIs in Uganda shows that only 31 per cent (n=27) had obtained formal registration (Walakira, Ddumba-Nyanzi and Bukenya, 2014). The institutions are largely dependent on donor funding and few are able to recruit professional social workers to offer the needed care. In addition, owing to lack of government supervision, some facilities expose children to various forms of abuse — physical, sexual, emotional and in other cases economic exploitation. Keeping children long within residential care facilities is associated with negative development outcomes for children in a number of cases. The constrained space for play activities, limited socialisation with family members, and lack of adequate provision of basic needs are some of the challenges that CCIs experience. These in turn could undermine the cognitive, physical, social and emotional development of children (Cater, 2005; van IJzendoorn et al., 2012; Walakira, Ddumba-Nyanzi and Bukenya, 2014).

Other child wellbeing indicators such as child malnutrition, infant and child mortality and maternal fatalities are all intricately linked to the care environment within the family, and in a number of situations, the quality of parenting or in this case child care, is still wanting. While poverty in the homes cannot be divorced from conditions of food insecurity, and poor feeding practices which lead to child malnutrition, it is also understood that child care practices have a big role to play. Actors involved in public health efforts put emphasis among others, on educating parents about proper child feeding practices of which child breast feeding is one. Child malnutrition indicators are not good with 33 out of 100 children below five years stunted, 14 per cent underweight and 5 per cent severely emaciated (UBOS, 2012). The Demographic and Health Survey of 2016 shows a reduction of those stunted to 29 per cent, underweight to 11 per cent and severely emaciated (wasting) to 4 per cent (UBOS & ICF, 2017). The prevalence rate could still be drastically reduced where care givers are knowledgeable on issues of proper feeding practices. Similarly, reduction of infant and child

mortality, and maternal mortality is being realised where parents adopt positive health seeking behaviours of which pre-natal and post-natal care, have deliveries in health facilities, and promptly seek medical assistance from qualified health care providers. The positive trend in the above indicators is confirmed by the 2016 Uganda Demographic and Health Survey which shows a positive outcome where parents adopt positive health seeking behaviour. All positive behaviour represents signs of positive parenting of the unborn child, the newly born and taking appropriate care of children as they grow up.

Another key factor why parenting as a subject of policy and programming cannot be ignored concerns the government's desire to turn the huge population of children and young people into a demographic dividend. Currently, children and young people below 25 years of age comprise 68.5 per cent of the population (UBOS and ICF, 2017). Increasingly, more youth enter the labour market and thus need jobs. While the structure of the economy may not be able to fully absorb all the unemployed youth, it is quite clear that a lot of youth unemployment is linked to their attitude towards work — which is also linked to the way they have been raised and parented. Adequate parenting is expected to impart values of hard work, including a long-term view of the future. In essence, many young people desire to earn quick income which does not require toiling. Thus, parenting once done the right way, would offer a sense of direction to the growing population of youth and prepare them adequately for entry into the world of work that rewards hard work, innovation and values of honesty and persistence. The recurring social disease of children dropping out of school, would also be tamed if parents placed value in encouraging and supporting the learning of their children. So, while there are several factors that account for children's dropping out of school — including hunger at school, poor learning environments, violence in school settings and lack of tuition among others — it is also apparent that parents'

involvement in dealing with those factors provides the most realistic panacea. Thus, effective parenting provides a leveraged ground for dealing with many of the above issues and would help the nation reap from the anticipated demographic dividend.

Finally, Uganda in general stands to suffer an identity crisis if the shaping of values at the family level is no longer effective due to poor parenting. While Uganda has multiple cultures (over 52), with diverse parenting practices, in general, there are attributes that these cultures share in common. For example, they espouse values that place emphasis on the collective achievement and the good of society which attribute, is also common among countries in the south and Asia (Crosson-Tower, 2007).

AVSI Foundation and its UZAZI model of parenting

AVSI is an international non-governmental not for profit organisation, founded in Italy in 1972. AVSI is a prominent provider of development and humanitarian assistance around the world and brings strong management and innovative strategies to programmes in education, food security and livelihoods, health and nutrition, social protection, HIV/AIDS, emergency preparedness and response, and disaster risk reduction. AVSI's mission is to create lasting, positive change in the lives of persons, families and communities following the teachings of the Catholic social doctrines. Active in 42 countries and in Uganda since 1984, AVSI is recognised for its capacity to mobilise communities, reach disadvantaged populations, and build bridges for effective communication among communities, local organisations and host country government authorities at all levels. From emergency relief to long-term development, AVSI has been working in Africa, Middle East, Latin America and eastern Europe to improve the lives of communities and persons living in very difficult circumstances.

As reflected in their mission, AVSI works towards development that is sustainable and capable of responding to the real needs of people.

In 2014, AVSI working with government institutions at the national and local level, and more specifically, consortium partners namely, FHI 360, TPO Uganda and CARE International introduced a parenting programme under the Sustainable Comprehensive Responses (SCORE) for Vulnerable Children and their Families (SCORE). This activity was supported by a grant from the United States Agency for International Development (USAID). The parenting programme was underpinned by five caregiver standpoints namely, understanding the concept of parenting, addressing the child's needs, parent-parent relationships, addressing child discipline and the application of an authoritative parenting style towards positive parenting. The parenting intervention was implemented in 35 districts and focused on building the capacities of parents including other care givers to raise their children better within the family setting.

The programme's integration of the parenting skills training (focusing on the individual) with other interventions (within the child's care environment) made it quite unique. The programme targeted economic strengthening within the family and strengthening of social networks or the mobilisation of social and economic capital using a network of families. The families eventually joined together in pursuit of an economic goal and formed village savings and loans associations. The parenting skills trainings paid attention to a set of parenting behaviours and skills within a social cultural context that were deemed to improve expression of empathy to children, use of positive disciplinary practices, building children's social competencies, developing children's physical and cognitive abilities and improving communication and unity amongst parents and their children. This would in turn facilitate the building of positive long lasting and loving relationships within families. The interventions focusing on economic strengthening aimed to address

the key factors in the care environment that result into child neglect, family separation, child malnutrition, infant and child morbidity and mortalities.

AVSI's interaction with communities over several decades has established that simply improving the knowledge of parents and their skills to offer care can not result into improved parenting if parents still face conditions of destitution. There was careful consideration of the desire to ensure that families graduated from conditions of critical vulnerability, to moderate vulnerability, and subsequently to non vulnerability. This focus required building robust evidence to establish that the interventions including improvements in the care capacities of parents would ultimately improve the wellbeing of children and other family members. Upscale interventions in the area of economic strengthening paid attention to enabling families and groups of families have access to extension services including agricultural support where needed, building synergies with formal banking institutions and support with marketing of the products from the income generating activities implemented by families.

The UZAZI AVSI Parenting Model as defined in this book is extensively discussed in chapter five and six of this volume. The model has been contextualised and presented in light of the broader parenting challenges that Uganda as well as other Sub-Saharan countries face on a continuous basis. We hope that the reader will find the book useful in a variety of ways.

Target audience

This book is intended for a variety of individuals including social service workers in the field of family and children who would like to learn about parenting challenges that the country faces and what we can learn from the intervention by the AVSI Foundation and partners. The learning lessons in turn should inspire other actors

to innovate new approaches or improve the planned or on-going interventions in the field. We also hope that the voice of social service actors and particularly professional social workers involved in the implementation of the UZAZI AVSI Model is heard and taken into account by those involved in enacting policies at the national and sub-national levels. The key line ministries working closely with the family — the Ministry of Gender Labour and Social Development, the Ministry of Education and Sports, Ministry of Justice and Constitutional Affairs, Ministry of Local Government, and the Ministry of Internal Affairs — should all be able to pick lessons in regard to taking into account critical issues necessary for preventing family separation and supporting parents to effectively perform their parenting responsibility. Finally, we hope that educators including teaching faculty and researchers in the field of family and child wellbeing benefit from the volume of evidence presented that tests the UZAZI AVSI Parenting Model and would be in position to use it as a case study. At the same time, students and academic institutions ought to use the volume for teaching and learning purposes.

Methodological approaches

This book is a result of collaborative engagement between the academia, represented by the Department of Social Work and Social Administration of Makerere University and the development practitioners, represented by AVSI Foundation. The two agencies aim to narrow the gap between researchers and practitioners and to ensure that through a collaborative arrangement, researchers and educationalists are able to enrich their teaching and research using and learning from practice interventions conducted by collaborating partners; while at the same time; the practitioners are able to rely on scientific evidence based on rigorous collaborative learning methodology to learn from their work and there by improve

programming. By documenting the evidence, the practitioners also hope to strengthen their advocacy efforts in relation to policy and programming in the area of families and children.

Thus, following the rigorous evaluation of the UZAZI AVSI Parenting Model, the collaborating partners saw the need to publish the findings and make the information available to a wider audience. At the same time, there was need to make the book more responsive to the broader needs of parenting in resource constrained settings. This, as a result, necessitated gathering additional data on other themes of parenting that were beyond the scope of the UZAZI AVSI Parenting Model.

The themes for the book as well as the need for additional data collection were collaboratively discussed with AVSI staff, management and technical team, as well as the research team from Makerere University. Further feedback was received from a cross section of stakeholders during the additional data collection exercise which followed the initial evaluation of the UZAZI AVSI parenting training programme.

Some chapters within this volume are based on qualitative data collected from experts and other knowledgeable persons in the field who were consulted as part of the steps to make the book more exhaustive in the coverage of the key themes concerning parenting. Verbal consent was sought for photos used in this publication. The chapters in this category also benefit from the knowledge and experiences of parenting by the authors during their childhood and youthful period. The introductory chapters make extensive use of secondary sources that were approached through a document search and sorting process, followed by a review of the selected articles, reports and other relevant documents. Those considered relevant to the various themes of the book were reviewed and referenced after use. The chapter that presents the UZAZI AVSI model of parenting is based on a rigorous evaluative methodology that used a mixed methods design within a post-test design involving a treatment

group and control group. The details of the methodology are elaborated within the chapter that covers the subject in the volume.

Once the manuscript had been developed, there were a series of internal review processes and meetings to review the drafts before sharing them with AVSI technical teams and the editors from the publishing house.

The book chapters

The introduction (Chapter 1): Within this chapter, we introduce the book by providing the national context of parenting. We enumerate a number of factors why parenting in relation to children and within the context of families cannot continue to be placed at the margins of policy making and programming. The chapter further identifies the audience for which the book is intended. In this chapter we also discuss the methodology used to write the book and the specific contents of each of the chapters.

Exploring the concept of parenting (Chapter 2): In this chapter, the authors provide an understanding of the concept of parenting using a variety of authoritative sources from an international perspective of parenting. They add to this perspective, their own interpretation of parenting. As such, they identify the major parenting behaviours that shape the practice of parenting and show how these could be linked to positive or negative child development outcomes. The presentation further enumerates some of the parenting skills needed for effective parenting. Bearing in mind that skills alone are not enough in determining positive parenting outcomes, we identify a set of factors within the family setting including profiles of care givers among other factors, that have an influence on the outcomes of parenting, an aspect which is important for consideration in programming interventions.

The evolving role of parenting (Chapter three): This chapter explores the evolving role of parenting from a local perspective.

It makes use of the views of key actors in the field most of whom are parents. These help to explore key themes under parenting, by relating them to the historical and contemporary practice — mostly within the family setting in Uganda. We hope that at the end of this chapter the reader gains an insight into what an average present-day parent does or does not do in relation to the fulfilment of the parenting responsibility, and what key issues underlie each of these situations and circumstances.

Selected parenting initiatives in Uganda (Chapter four): In this chapter, we briefly discuss a few parenting initiatives in Uganda. These brief discussions serve as a precursor to the detailed discussion of the UZAZI AVSI Parenting Model and the lessons we draw from it.

The UZAZI AVSI Parenting Model (Chapter five and six): These chapters document the UZAZI AVSI Parenting Model in greater detail which enables the reader to get to know the processes involved in designing and rolling out the parenting training programme. The chapter explains in detail, the focus of parenting training, the modules developed and the expected training outcomes. While the methodology used to evaluate the training effectiveness pays greater attention to the training intervention, an effort is made to shed light on the potential contribution of other complementary interventions including livelihoods strengthening, strengthening social networks for child care, life skills training for youth and the overall effort geared at improving the care environment for children. The methodology used to implement as well as rigorously evaluate the effectiveness of the parenting training programme is described. The key outcomes in relation to the evaluation of the programme are also presented.

Conclusions and learning lessons (Chapter seven): This chapter presents the key learning lessons and conclusions which are relevant for both research and practice. The readers, depending on their area of speciality, will be challenged to explore a range of core themes

for research, advocacy and to consider innovative interventions that could help promote family unity and for parents to fulfil their parenting responsibilities.

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CHAPTER TWO

Exploring Parenting

(extreme right)Technical staff of the Family Strengthening Programme meeting Community Based Trainers of Rwekitoma Tukwatanise Parenting Group.

Introduction

In this chapter, we explore the concept of parenting making use of relevant authoritative sources and the authors' interpretation of the concept. We hope that the reader will be able to identify and pay particular attention to issues that researchers and programmers consider important in designing and implementing parenting interventions.

The concept of parenting

In this volume, we define parenting as an ongoing protective, nurturing, caring and mentoring relationship involving the parent or carer on one hand, and the child on the other. Parenting should ideally begin whenever an adult gets into contact with a child and assumes a care responsibility whether temporally or long-term over the child. The care responsibility could be performed at home, school or at a work place. Parenting particularly in the home setting, tends to be long term and involves a multidirectional transmission of expectations, intentions and pursuit of actions concerning the child's wellbeing and developmental needs. In the context of positive parenting, parents work towards realising positive development outcomes related to the physical, emotional, mental, social, and spiritual development of the child. Within this definition, key aspects emerge which we discuss briefly.

One–that parenting is a positive goal-directed activity, which is consciously pursued with a particular end in mind. Two, in as far as its aim is to ensure the overall positive development of the child; it has to prioritise provision (meeting the child's basic needs including, food, shelter, health, education and training), protection (safeguarding the child against all forms of harmful practices and situations), and children's participation (to ensure the best interests of the child, develop children's abilities and build a sense of self-worth). These elements are enshrined in the United Nations Convention on the Rights of the Child, the African Charter on the Rights and Welfare of the Child, and the Uganda Constitution. Three – parenting bestows upon the parent, an inherent duty or responsibility. Thus, the failure to fulfil this duty amounts to violation of the rights of the child and undermines the child's positive development outcomes. This in turn could have a ripple effect on the family, the community and the nation. Four–the personal qualities of the parent and the socio-economic

conditions within the family setting will shape the context of parenting and could in some cases have an effect on the parenting outcomes. Five–the relationship between the child and the parent is not unidirectional. While the parent seeks to influence the overall growth and development of the child, the child also influences the parent, through the processes of learning and adopting different methods and skills to cope with the child's needs at various stages of growth. Six–there is a strong element of power relations which is largely skewed in favour of the parent. However, the development needs of the child redefine the power relations and direct the behaviour of the parent or caregiver, in the direction of fulfilling the needs. Seven–parenting is never done by one person or even one family. However, there is always a dominant or continuous figure in the parenting relationship which in turn should serve as the role model for the child, and enable the development of attachment between the child and parent.

Focus on parental behaviours that influence child outcomes

Efforts to understand the concept of parenting increasingly place emphasis on specific parental behaviours that are linked to child outcomes. These include; parental warmth, hostility, control, structure, and expressivity (Maccoby and Martin, 1983; Rollins and Thomas, 1979; Chen et al., 2011; Slater and Power, 1987). These behaviours are explained below;

Parental warmth – basically involves parental behaviours that make the child happy, calm and accepted as a person. Verhoeven and colleagues explain that for parents to exhibit parental warmth or support, they should engage in positive parent-child relationships, be receptive and cautious (Verhoeven et al., 2007). It is linked to empathy which according to Bavolek (1984) is an "awareness of a child's needs [and] entails the ability of the parent to understand

the condition or state of mind of the child without actually experiencing the feelings of the child" (p.6). This kind of parental behaviour is common among parents but often not given much attention in several cultural communities in Uganda and other countries in Africa.

Hostility – it is a form of behaviour that is characterised by unfriendliness, oppositional behaviour and aggression. Hostility towards the child is expressed through psychological and physical abuse of the child. Psychological abuse refers to "a concerted attack by an adult on a child's development of self and social competence" and comprises "a pattern of psychologically destructive behaviour" which can take five forms: rejecting, isolating, terrorising, ignoring, and or corrupting the child (Garbarino et al., 1986: p.8). Physical abuse on the other hand is defined as "the intentional use of physical force against a child that results in or has a high likelihood of resulting in harm for the child's health, survival, development or dignity. This includes hitting, beating, kicking, shaking, biting, strangling, scalding, burning, poisoning and suffocating. Much physical violence against children in the home is inflicted with the object of punishing" (WHO & ISPCAN, 2006, p.10). A negative childhood upbringing characterised by punitive, uncaring and over controlling behaviour could partly account for hostile parenting behaviour.

Control – generally involves the use of parental power to influence the child's behaviour mainly to conform to the desired expectations. Aspects of behaviour control may include enforcement of rules, establishment of boundaries, monitoring children's movements, and granting levels of autonomy for children (Grolnick, Deci, & Ryan, 1997; Grolnick, 2003); albeit better applied in relation to children's growing abilities. High levels of control of autonomy for example, could undermine positive child development outcomes. However, a positive application of this could result into better child outcomes including positive psychosocial development

(Lee et al., 2006; Salem, Zimmerman, & Natoro, 1998; Soenens & Vansteenkiste, 2009; Jang, Deci & Reeve, 2010). Yet the consideration of control has cultural dimensions and critiques. In the global south, it is argued, that societies place greater value on interdependence and compliance to collective notions. As such, the emphasis placed on autonomy is more of a western notion and reflects western norms of parenting that place greater emphasis on individualism (Griffith & Grolnick, 2013, p.169). Individualism may conflict with societal values of interdependence espoused in the global south (e.g., Markus & Kitayama, 1991; Uicho, 1995).

Notwithstanding, Slater and Power (1987) explain that under parental control, it is very critical to understand that parents use different tools to punish their children and that these tools are uniquely linked to children's conduct. Verhoeven et al., (2007) specified three aspects of parental control that have previously received substantial attention in research i.e., positive discipline, psychological control, and physical punishment (p.369). In relation to positive discipline, Feldman and Klein's study indicated that "adults' warm control" characterised by inductive reasoning, dialoguing with children, respecting children's privacy and reinforcing good conduct was related to child acquiescence in all interactions (Feldman & Klein, 2003, p.689). On the other hand, too much of psychological control where parents control and manipulate children's mental and emotional experiences through punitive disciplining such as nagging, yelling, withdrawal of love and threatening; and physical punishment that involves hitting, beating and slapping to punish children are often associated with increased behaviour hitches (Deklyen et al., 1998; Stormshak et al., 2000). The Self-Determination model stresses that children feel incompetent and not in control due to parental control that limits their autonomy (Deci & Ryan, 1985).

Structure relates to creating a care environment with a fairly stable routine, rules and application of consistent positive

disciplinary practices. Slaters and Power (1987) point out that structure is a key dimension of parenting which consists of parental behaviours that create a foreseeable and planned environment for children i.e. by living as an example in relation to discipline and by being responsive to the child's behaviour. Research has shown that high levels of adult warmth, control and structure are associated with positive child growth outcomes (Feldman & Klein, 2003; Frankel & Bates, 1990; Stormshak, Bierman, McMahon, & Lengua, 2000).

Parental Expressivity is identified by Chen et al (2011) as another dimension of parenting. Chen and colleagues cite the definition of expressivity by Halberstadt et al (1999) as a "parent's persistent pattern or style of exhibiting facial, body, vocal, and verbal expressions that are often but not exclusively emotional in nature" (Chen et al., 2011, p.288). Parental expressivity within the family context is conceived to comprise of two sub-dimensions on the basis of the type and valence of emotions expressed. It involves both positive and negative expressions where the former refers to the display of positive emotions such as gratitude, laughing, and smiling while the latter refers to the display of negative emotions such as anger, sadness, unhappiness etc. (Valiente et al., 2004).

Parenting skills

Particular attention has also been paid to specific parenting skills (behaviours or aspects of parenting) which scholars consider to be central in determining young people's development outcomes. Hillaker, Brophy-Herb, Villarruel, and Haas (2008) examined the contribution of three parenting aspects namely; i) positive family communication, ii) facilitation of supportive family relationships, and ii) maintenance of standards in the family. Their study established that these facets are positively linked to acquisition of social competencies and positive values among youth (children)

within their 6th, 7th and 8th grades. Earlier evidence (Steinberg, 2001) has shown that positive change among the youth can result from an environment with positive parenting behaviour including constructive communication, encouraging family relationships and family standards. Constructive family communication would in particular suggest that there is a positive relationship between the parents, and between parents and children. Similarly, cultivating supportive family relationships enables children to grow emotionally, socially and mentally, while the maintenance of standards cautions children from negative influences and focuses them positively.

Specific attributes of parenting and expectations

Within her Parent Development Theory (PDT), Mowder (2005) as cited by Respler-Herman and others explains that child rearing primarily comprises of six dimensions which include; bonding, discipline, education, general welfare and protection, responsivity and sensitivity (Respler-Herman et al., 2011, 190). Bonding is basically developing a close relationship between a parent and the child and it is usually through bonding that attachment is developed. The attachment between a parent and the child plays an important role in improving a child's mental and emotional growth. Discipline entails an application of rewards and sanctions and if done positively will be beneficial to the child. It is often done within the context of the families' set of rules and regulations that suggest a code of conduct expected within the family. Education will normally involve stimulating the child, shaping values and imparting skills and knowledge in light of the child's development needs. During this process, children learn and unlearn certain beliefs, develop their cognitive abilities and show progress in relation to their social and emotional competencies. Responsivity entails reacting in a timely manner to the child's behaviour through suggestions,

and other forms of reactions or actions that will influence the child in a positive manner. Sensitivity is an ability to understand the child's needs and respond to them in the most effective way. These dimensions can be applied meaningfully and differently in accordance to children's different developmental stages (Respler-Herman et al., 2011).

The attributes of parenting may also be considered more broadly in terms of parenting styles, an aggregate of parenting behaviour, so to say, that are identified with different categories of parents and also linked to different parenting outcomes. Baumrind (1971) suggested four categories of parenting attributes. They include; authoritative, authoritarian, permissive and neglectful parents. Authoritative, parenting is where parents show warm control over their children, apply appropriate demands, are approachable, loving and communicate effectively with their children. The parent exercises power but in a more democratic manner. In authoritarian parenting, the parent follows strict traditional instructions, is highly demanding, exerts much control, shows little love and communication with the child is not usually effective (Henderson, 2012, p.546; Alegre, 2011, p.57). Walker (2008) provides evidence in relation to permissive parenting after conducting a study that examined teachers' practices towards students' performance. It was revealed that the use of permissive parenting among young people involves demanding less from children, exercising little control or no control at all and parents are very approachable and loving. In addition, permissive parents allow children to set their own limits (Henderson, 2012, p.546). Neglectful parents however, demand less, exercise little or no control, show little love, and their communication is not effective (ibid).

Parenting behaviour and child development outcomes

Supportive behaviours

A study by Tung and Lee on negative parenting behaviour and childhood oppositional defiant disorder revealed that supportive settings, including peer acceptance, may guard children from undesirable behaviours associated with inconsistent discipline and cruel punishment (Tung & Lee, 2013, p.86). This implies that children who are much more supported are more likely to exhibit positive behaviours compared to those who are not supported. Using the social support approach, Ceballo and McLoyd argue that "mothers with higher levels of social support are generally more nurturing and consistent in their parenting and less likely to use punitive strategies such as scolding and ridiculing" (2002, p.1311) on their children. Although their study focused on addressing how stressful environmental conditions influence the relationship between mothers' social support and parenting strategies, they demonstrated that there is a close connection between social support and parental warmth, affection, satisfaction and reduction in abusive tendencies.

Earlier studies, McLoyd (1990), Weinraub and Wolf (1983) revealed that when the psychological well-being of mothers is heightened, there is a possibility of support systems to help healthy child development to happen. Social support can be emotional, instrumental, informational, tangible aid, affection and esteem support (Armstrong et al., 2005, p.271; Lee & Woo, 2004; Sherbourne & Stewart, 1991). Therefore, if children and their parents are socially isolated, chances are very high that the parents will be psychologically distressed and will resort to abusive mechanisms while dealing with their children.

Responsiveness and demandingness

These are particular parenting behaviours that are linked to varied child outcomes. Similar to parental warmth, responsiveness is looked at as a combination of parental warmth, nurturance and support to children (Alegre, 2011, p.57). Responsive parenting practices are linked to positive parenting (Jouriles et al., 2008; Tildesley and Andrews, 2008) because they are said to be associated with positive results in children's growth. These positive results may include higher child self-control and improved behaviour (Eiden, Edwards & Leonard, 2007), positive attitude towards criticism, self-respect and constructive communication with parents. Parents who demonstrate parental practices such as listening to their children, monitoring and supervision, influence over children's behaviour, autonomy granting, and appropriate maturity demands and expectations, and inductive discipline could be considered to be positively responsive (see De Clercq et al., 2008). These dimensions have a great impact on the positive development of the child.

The theory of self-determination (SDT) has provided a hypothetical thought on how parental structure, independent support, and parental control may impact on child development. This theory suggests that parental control weakens feelings of independence in the sense that children feel intimidated and not in position to make important decisions concerning their lives. This makes them feel incompetent as they lack control over their own lives. Griffith & Grolnick's study in Barbados among the Caribbean children suggested that parenting that is controlled and responsive is mainly associated with better outcomes (2013). However, they noted that due to cultural diversity, advocating for independent decision making among children may not be considered as an aspect of positive parenting as it was the case in Caribbean families.

However, a study conducted among American middle school youth revealed that during early adolescence, keeping

or maintaining quality and positive communication moderate parental supportiveness, functions best in combination with the other parenting practices (Hillaker et al., 2008). This is because maintaining quality and positive communication can work as procedures for early adolescents to appreciate their parents' expectations which may lead to attainment of pro-social values among early adolescents (Padilla-Walker & Carlo, 2007).

Sangawi et al. (2015) also revealed that parenting styles have a direct influence on children's behavioural problems. Precisely, children from families or with parents that get involved with the child, monitor the child and also apply other positive parenting attributes, tended to have low levels of behavioural problems. It is possible that parents put in place tracking mechanisms to know what their children can or are involved in so that they find starting points in cases of danger. How this is conducted to shape children's behaviour, growth and their development provides entry points to appropriateness of parenting styles, behaviours and practices.

The universalisation of parenting styles has attracted attention in the contemporary global debates, where some scholars have argued that both authoritative and authoritarian types of parenting are limiting when it gets to other cultures. These particular types of parenting often "do not fully capture the indigenous dimensions of parenting" (Chen et al., 2011, p.292) in other cultures. For example, in China, parenting is considered to be more of training. The training element seems to be missing from Baumrind's typology of parenting which makes her categorisation less significant in some contexts.

Among the Yoruba people in Nigeria, the first unit of analysing parenting is the community which is socially single and unified. Their parenting style is based on the intention of socialisation (Babatunde & Setiloane, 2014, p.248). The authors posit that Yoruba parenting style, is grounded on three principles: 'hard work ethics', 'maintenance of discipline', and 'social etiquette'

"built on respect for elders and their views about how to tackle life experiences" (Ibid). Their understanding is informed by religious teachings of valuing the existence and remembrance after death. This reasoning provides room to explore parenting from a cultural point of view.

Factors that affect parenting success

Socio-economic factors

There is a large body of research which has examined the association between socio-economic factors and child well-being mainly analysing the effects of economic resources and family structure on a child's health, cognitive and behavioural development (Manning and Lichter, 1996; Duncan and Brooks-Gunn, 1997; Mayer 1997; Amato & Gilbreth, 1999; Carlson & Corcoran, 2001; Acs & Nelson 2002; Dunifon & Kowaleski-Jones, 2002; Ram and Hou, 2003; Brown, 2004; Amato, 2005; & Berger, 2007). The socio-economic factors which influence the quality of parenting include: family income (or poverty levels), family structure and maternal employment status. Research has examined how these factors impact on positive parenting and child well-being. This wide body of literature notes that the quality of the parenting that children receive is one of the mechanisms through which income, family structure, and maternal employment affect child well-being.

Level of family income

The level of income or poverty status of the household affects the behaviour of the parents, which in turn influences parenting. Studies show that due to limited access to financial resources, low-income parents tend to lack the resources to adequately provide the material needs of their children. Such materials may include the physical conditions of the home including sleeping rooms, adequate beddings and clothing, scholastic materials and tuition

fees. The lack of sufficient financial resources to adequately provide for the children's needs is associated with sub-standard parenting and results in poor child development outcomes. Studies on how family income and family structure affect parenting have shown that children who grow up in low-income families, as well as those who grow up without their biological parents tend to perform worse on a range of child developmental outcomes than children from higher-income and those who spend their entire childhood with both biological parents.

Poverty may also result in increased parental stress associated with the inability to provide for children's welfare needs — including food, healthcare, and education — which affects the ability to provide emotional support or physical discipline. Literature shows that due to lack of financial resources through which to offer their children pecuniary incentives (e.g., allowance) to alter their behaviours, low-income parents are more likely to utilise physical discipline (such as spanking) as a form of behavioural control (Weinberg, 2001). Thus, higher income parents, by being less likely to experience parental stress associated with inability to meet the financial/material needs of the family and having more disciplinary options than using physical punishment, exhibit more positive parenting than their low-income counterparts. Indeed, when a parent is not able to provide for the basic needs of the child, such a parent may withdraw from freely associating with the child and may lose respect before the child — resulting in poor child-parent outcomes.

It is not uncommon for children to undermine the authority of the parent, especially the father (and even mock them) if the parents are (were) unable to provide for the child adequately. For example, when children cannot realise their full economic potential because of their parent's failure to finance their education, such children may tend to neglect their parents and society may regard such parents as not being good parents. The extensive literature documenting

the associations between income and optimal parenting concludes that family income is a strong predictor of the quality of parenting and in turn influences child development outcomes (Klebanov, Brooks-Gunn, & Duncan, 1994; Miller and Davis, 1997; Smith and Brooks-Gunn, 1997).

Family structure

Another key factor which determines parenting success or failure is the family structure within which the child lives. Family structure may be defined in terms of whether the child lives with both biological parents, with one biological and one non-biological parent, with a single parent (usually the mother), or with neither parent. Family structure may have direct and indirect effects on parenting behaviours and child well-being through three dimensions; namely: (i) financial resources; (ii) the amount of time caregivers devote to parenting activities and (iii) the willingness of caregivers to invest in the child.

Children who live with both biological parents are more likely to experience better parenting because in a such a case, the parents typically tend to devote more time and money towards the welfare of the child (Manning and Lichter, 1996; Acs & Nelson, 2002) and they jointly tend to have the greatest will to invest their resources in their children regardless of their income levels (Daly & Wilson, 1985, 1998; Bergstrom, 1997; Case et al., 2000; Berger, 2007). Empirical evidence suggests that children who live with a non-biological caregiver receive fewer parental investments than those living with caregivers to whom they are biologically related (Daly and Wilson, 1985; Amato 1987; Case et al., 2000; Case and Paxson, 2001; Radhakrishna et al., 2001; Thomson et al., 2001). For example, where a spouse is not the biological parent of a child, such a parent will be less motivated to fully provide for the child's needs and may even display unfair treatment towards the child including using harsher disciplinary options like physical punishment (e.g.

spanking and canning). The tendency for a non-biological parent being less enthusiastic about providing for the well-being of the child and even to display poor/unacceptable parenting behaviour increases with poverty. There is anecdotal evidence to suggest that children who live in families where one of the spouses is not their biological parent experience sub-standard parenting in terms of provision of material needs and psychosocial and emotional support. By and large, non-biological caregivers tend to have fewer incentives to invest in children and display positive parenting.

A large body of literature suggests that parenting quality children receive is positively related to income and to living in families with both biological parents (Miller & Davis, 1997; Hanson, McLanahan, and Thomson, 1998; Case, Lin, and McLanahan, 2000; Case and Paxson, 2001; Currie and Hotz, 2001; Thomson et al., 2001; Amato, 2005; Berger, 2007). Children in low-income, single mother and mother-partner families tend to receive parenting that is, on average, of lower quality than that received by children in higher income and mother-father families. In turn, those children who receive very poor parenting are likely to be at a higher risk of experiencing adverse developmental outcomes (Berger, 2007). Thus, the family structure within which children live has a great influence on the quality of parenting they experience and the parenting styles and behaviour of parents and subsequently, the children's welfare.

Employment status of the mother

Maternal employment is associated with both positive and negative effects to child upbringing and welfare. Studies on the associations between maternal work and parenting quality produce inconsistent results. Working mothers could benefit children by bringing increased financial resources into their homes (Berger, 2007). With increased resources, the parents are in a better position to provide for their children and less likely to experience parental stress associated

with financial demands for child upbringing and, therefore, exhibit good (positive) parenting styles.

On the downside however, working parents, and particularly working single mothers, may have limited time and energy to commit to good parenting. In their study of maternal employment and parenting, Currie & Hotz (2001), found that black children with working mothers had a higher probability of accidental injuries than those whose mothers were not working. Similarly, Phillips (2002) found that low-income single parents working full-time tended to be less involved in parenting younger children below the age of six years, but this did not necessarily result into negative outcomes for older children.

In traditional family settings where mothers mostly work from home, they tend to have more time for parenting and nurturing good behaviour among the children at the different stages of child development. In modern societies, where mothers mostly work away from home and children are left under the care of housemaids (or nannies and grandparents), balancing work and parenting roles of the mother becomes difficult with negative consequences in terms of children behaviours and general well-being. It is becoming common for children from high-income families (where mothers work in professional jobs with limited time for the children) to display undesirable behaviour because they were not exposed to proper upbringing acceptable within the society the children grow up and live. Left on their own or with limited supervision and nurturing, children will resort to peers, television programmes or other forms of media for information about their physiological transformation as they grow up which exposes them to adopting undesirable behaviours. Thus, maternal employment may result in poor parenting.

Since parents have to divide their time between acquiring financial resources and caring for children, parents have designed innovative ways for balancing work and parenting. For example,

the mother may work part-time, or establish a home-based family business enterprise in order to have more parenting time. Overall, maternal work particularly plays a big role in determining the types and amounts of parenting that children receive and eventually their well-being. The more time a mother spends working, the less time she is able to devote to good parenting in terms of providing for the nutritional, health and other material needs as well as instilling good manners and behaviour among the children.

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CHAPTER THREE

Evolving Role of Parenting in Uganda

Fifty-seven year old mother of 11, narrates how her husband changed his mind towards pushing their daughter into early marriage in return for cows.

Introduction

In this chapter, we provide the landscape of parenting in Uganda and place particular attention on the evolving nature and role of parenting. The factors and circumstances contributing to this change and the attending consequences on the child and the family are expounded. Some traditional parenting practices are

also itemised along with observations on those that are fading out and those that are still practiced. The data used in this chapter has been collected from a cross section of participants using in-depth key informant interviews. The participants include among others, parenting experts, ordinary parents, religious leaders, researchers and the authors' own experience. Primary data is complemented with secondary sources on selected topical issues. At the end of the chapter, the reader will have gained a clear picture on the nature of parenting in Uganda and how the parenting role is constantly changing due to the changing nature of the family setting and related work responsibilities and other factors over which parents have limited control.

Evolving roles of parents in Uganda

Parenting is a way of promoting and supporting the physical, emotional, social and intellectual wellbeing and development of a child from infancy to adulthood. This can be informed by a combination of factors including culture, personality, family background, socio-economic status, education level and religion (SCORE, 2014). Traditionally, a parent was the person who performed parenting roles. These roles involved caring and providing for children, passing on cultural norms, guiding children through the expected societal behaviour and ensuring that societal values were cherished, maintained and enforced (Evans, Matola & Nyeko, 2008, p.269). Some of the knowledgeable persons consulted on the subject through in-depth interviews, shared their understanding of the concept of parenting as indicated below:

> It is the care that an adult provides to a child [as the child grows]. The care could involve meeting [the child's] basic needs – fortunately which many parents focus on but it can also involve protection, love or care beyond the basic needs (Key Format Interview [KII] with Staff I, SCORE programme AVSI).

> Parenting in a lay man's language is where we have an adult person, a caretaker or biological parent with the responsibility of taking care or providing for young ones. So, we are looking at a child-adult caring relationship as the centre stage of parenting (KII with staff II, SCORE Programme AVSI).

> It is certainly not easy to use one single word or sentence to define parenting, but I will look at it as all those actions and processes that parents undertake to ensure that they address, raise their children up in the way they best believe in. It involves efforts to address different issues relating to child-parent relationship, provision, managing difficult behaviour and ensuring that children's wellbeing is addressed (KII with lecturer/researcher, Child Health and Development Centre, Makerere University).

Others consulted conceptualised parenting in relation to the child's stages of development:

> Children go through four stages of parenting and all these stages are very vital to child development. They include; commanding stage where a parent is supposed to command the children, coaching stage which deals more with training children social and economic skills. Women have tried to coach especially coaching the daughters unlike the boys. We have also the counselling stage – this one is considered wastage but very important especially for the adolescents. And finally, there is the consultancy stage which has been highly messed up. Children stopped consulting parents instead they consult social media, TVs, peers and sometimes their teachers (KII with Religious Leader III).

Parenting in the distant past was largely facilitated by extended family members or by religious and cultural traditions. Although some of these traditions remain, many have been weakened in contemporary Africa (Evans, Matola & Nyeko, 2008; Evans et al., 2004). This has been in particular due to increased urbanisation, displacement due to war and the outbreak of diseases that leave

many young children unattended to as a result of the death of their parents.

The world over, people from different backgrounds have different ways of performing their parenting roles (Wadende, Fite & Lasser, 2014, p.267) which may probably differ according to age, gender, education, class, etc. Parenting practices have been influenced by changing epochs and developments. Due to the advancements in technology, it has become very easy to share information of various parenting styles. In the distant past in Uganda, communities had distinct parental roles for mothers and fathers or female and male guardians. Mothers/female guardians were primarily responsible for nurturing the girl child in relation to the roles particularly ascribed to the female gender including food preparation and serving, and maternal roles. Many of the experts consulted on the subject felt that the mothers continue to play the leading role in nurturing the child and that many attributes relating to culture including language are linked to the female gender:

> We even talk about mother tongue and not father tongue. When you happen to see a child, who does not connect with his/her mother, this child is most likely to have behavioural deficiencies (KII with Social Worker Retrak).

> Women are too much of nurturers by their nature and men are providers for their families (Paediatrician/Snr. Lecturer Mulago/Makerere University)

Although the role of the woman was more highlighted, men were expected to play a leadership role and induct their sons to the role as well:

> A father is a figure head in the family and takes a bigger responsibility in raising boys (KII with an officer from Uganda Society for Disabled).

Fathers as such prepared the boys to take charge of the roles ascribed to the male gender such as hunting, security of the home, and hard

labour activities. Unfortunately, many men are failing to fulfill their traditionally ascribed roles as observed by one participant:

> Men are no longer trained to lead their families; they fail to put up structures that will guide on how to manage the family. Nobody gives orders, a man is busy doing his work, and a woman is also busy with her work, and children are also busy with their work. There is total lack of order within our families (KII with religious leader I).

The participant categorised issues like provision of all the basic needs including but not limited to food, security and love to all family members as some of the areas where leadership can be demonstrated by men. However, he noted that many families in Uganda especially fail here because leadership is missing.

These gendered roles are increasingly being challenged by feminists even as to a greater degree, the gender division of roles continues to manifest. The disdain for gendering roles was evident in the consultations conducted as reflected below:

> It is society that constructs parenting roles in a gendered manner. However, these roles should not be gendered but often times, age of the child may also contribute to gender differences in parenting roles. For example, when children are still babies, most men prefer not to touch them because they think they 'might break'; and the bathe me, feed me etcetera tend to be done by women. Now the buy me this sets in as a manly thing. But to me this is a reduction of a parenting role. Both parents should be willing to do the parenting roles together because in homes where women do work, you may find these women also contribute to the provision in addition to the caring roles or domestic chores (KII with staff I, SCORE Programme AVSI).

The role of education was also cited as a factor in improving parenting practices and more so in relation to sharing the parenting responsibilities between mothers and fathers, as one participant observed:

> In most cases parents who have gone to school tend to do their parenting roles together; but very hard for most of the uneducated parents to share responsibilities. Many of the uneducated parents still believe that it is the duty of a woman to care for children and do most of the parenting roles. You find most uneducated men even when they have money they are not bothered about certain responsibilities that are directly related to their children (KII with Hon. Member of Parliament, Uganda).

Parenting ultimately, should be a collective responsibility. Over the years however, parenting in Uganda has changed, culminating into the alteration of the roles of mothers and fathers. This is particularly evident with the emergence of alternative providers of parenting services such as day childcare providers, early childhood learning centers, residential child care institutions, teachers, and the use of hired care providers often referred to as 'housemaids' or 'house helps' within home settings. Others in addition point to the television as another parent especially in the urban areas where permissive and neglectful parenting practices allow children unregulated access to television. At the same time, some more affluent families are able to make telephones and computers available to children not only as a tool of learning and play, but also as an alternate parent to the child.

> Today, more than ever before there seems to be more access to any information by the children. Easy access; I mean the parent is not in so much control of what the child consumes in terms of information. So you find that children are able to access the internet, put on television at moments where parents are not. So it is very easy for them to follow their whims than what would be the recommendation of the parents (KII with Staff II, SCORE Programme AVSI).

Additionally, both internal and external societal dynamics continue to impact and redefine the traditional practices of parenthood among Ugandans. Modernisation in particular has in some cases

culminated into the disentanglement of traditional family structures (Wadende, Fite, & Lasser, 2014: p.267) through globalisation processes. A more specific outcome is the fusion of cultures, and introduction of practices some of which contradict with the traditional parenting practices that espouse the value placed on aspects of sexuality like virginity; value placed on marriage, provisioning for the family, the extended family, the respect and care for the elderly, the pursuit of achievement for the collective good and the peaceful resolution of conflict. These are being replaced by values that espouse unregulated freedoms for every individual in every aspect of human life including sexuality, marriage and safeguarding ones' freedoms in judicial institutions sometimes at the expense of the collective good.

Yet globalisation could also be seen through positive lenses in particular where it has contributed to positive parenting practices for example where emphasis is placed on the use of positive discipline among children, on institutionalised education, and valuing the views of children.

Wadende and others have provided insights on how other "factors that pre-date modernity such as disease, poverty, and parental strife have also influenced how parents rear their children" (Wadende, Fite & Lasser, 2014, p.267). In agreement with these and other views, those consulted while developing this volume pointed out factors including culture and parental behaviour, as key factors that have influenced parenting in Uganda. One participant pointed out that one's culture determines the way someone brings up their children. Referring to the Baganda' culture, he noted:

> [For me growing up as a] Muganda child, I was raised to respect people, not to bark and shout at people: You present your concerns in a more respectful manner. Therefore, it becomes hard for me to raise my children in a different way (KII with teacher, Namirembe Parents Primary School).

However, another participant looked at culture from a different perspective, citing hybridisation:

> "Our [present day] culture creates a new culture of parenting: Parenting on televisions and radios due to the 'busy' culture we have adopted. If a child happens to ask a busy mother about some issue, the mother is likely to refer the child to watch cartoon – this is like telling the child to go and sort out himself from the television" (KII with conflict resolution specialist).

The idea expressed above points to the unravelling changes being experienced in the domain of parenting particularly among busy parents in more urban settings where televisions and other digital technologies are more accessible.

Stability among parenting partners has been disrupted by the changing patterns of work among men and women. Traditionally both men and women would work but at the end of the day, both would interact with their children. The quest for paid work today among both men and women has reduced the availability of parents to their children. This is a trend that nonetheless seems to be irreversible except if government and other actors avail resources to extend benefits such as maternity and paternity leaves to parents. Yet these schemes are less affordable to developing countries like Uganda. In several interactions with experts and parents whom we interviewed, economic hardship is emphasised as one of the key reasons parents seek paid work and thus become less available to play their parenting roles. One participant noted:

> Parents are looking for money to be able to survive. In the process, they sacrifice their children by not attending to them more often (KII with the Early Childhood Learning Expert, UNICEF).

Other participants added:

> Due to chasing of money, we have parents who see their day schooling children only after they are back from school. We have also parents who even fail to find out whether their

> children were able to come back from school. It has happened here where a mother forgot to pick her daughter from school but what shocked us more was that she couldn't even recognise her daughter never spent a night at home. Therefore, in pursuit of economic gains, parents are failing to know the behaviour of their children and this is the major reason for not even being able to correct and realign their children (KII with teacher, Namirembe Parents Primary School).

> […] many of us are working so we leave our parenting to maids or nannies and the work unfortunately in most cases is not in Kampala; its upcountry. I left a very good job to accept this one because I wanted to be with my family. I was in the north for three years, I was losing contact with my children, I would come and they look at me like a visitor, discussion, communication was not flowing, I imagine many parents are having the same thing. Till I came back, we are able to talk and chat, they know what makes me sad or stressed (KII with staff at Save the Children in Uganda)

At the same time, people feel helpless and have more urgent priorities to address, especially within hard economic conditions. They are therefore genuinely preoccupied with looking for and maintaining jobs without which, they become extremely distressed. This despairing condition, culminates into loss of interest for both men and women in many aspects of life including their own children. In a context where the subject of parenting is discussed a lot but without corresponding effort among parents to match the rhetoric, we are at a very high risk of losing our battle in terms of parenting.

> If you look at different kinds of parents that we have now especially in urban settings, you have parents who are still young; they have gone into parenting in challenging economic circumstances. There are those who are working and probably not living together as husband and wife because of work related commitments. There is also lots of demand from work as well,

> school is becoming more of a demanding undertaking for children and parent's time is required. So we have challenges that parents are not prepared to undertake. All these are things which make us worried about the future of parenting (KII with lecturer/researcher, Child Health and Development Centre).
>
> I have also seen more women are learned and taken up managerial posts, and don't have time for the children in the urban compared to women in the rural. They are taken up with their work and children are just left there. You find them now that the best place to take a child is kindergarten and boarding school to get rid of children at home. And yet when children come back for holidays, they do not have time for children, they are taken up by their work. They have gotten married to their work. They have forgotten their role (KII with officer at Uganda Society for Disabled).

It is important to note that "the transition to wage-earning households has taken place without a corresponding shift in the power relations between the sexes, producing tensions that further destabilise the family" (Evans, Matola & Nyeko, 2008, 268). This is one of the causes of tensions in families and violence as some participants noted:

> The work context where you cannot stay with your children and the changing role of the woman: initially the woman would stay at home to teach the children moral values and guide them. The fact that the woman is now changing her role from being a domestic servant to now being a formal person in an office leaves a great gap in the lives of these children; she no longer has time to stay with the children to support them, guide them like she would have done if she is fully with them (KII with an officer working at Bantwana).
>
> Family life has faced a lot of challenges; you find that husband and wife are not as united as it used to be, when there is discord between the parents, children suffer and there is too much discord. And there is another list of issues as to why there is

> discord in marriage life which is affecting children seriously. You find that many men have extra marital relations and have left their homes, so you find children raised by mothers. There are more children today raised by mother than father. May be your research could also go that side; who is raising children right now? (Religious leader IV)

As a result, single and female headed households are growing in size and becoming a significant part of family life in contemporary Uganda. (UBOS, 2014, 18). Other experts also noted that:

> The rate of divorce is too high, for you to raise a child; the child must have two parents. But today, the woman thinks she's educated and takes her education to the family, I would think that work is work when you enter your home, you drop everything outside and have to take up your responsibility as a mother. The rate of divorce is really high because the woman is able to support herself so she doesn't need a man to support, she has money, even if we divorce, I can take care of my children (KII with an officer at Uganda Society for Disabled Children).

Yet single parents do not necessarily find parenting any easier. Participants suggested that many get overwhelmed with responsibilities and become abusive to their children:

> They get overwhelmed with the parenting roles, sometimes they tend to ignore or become abusive to their children (KII with Religious Leader II).

> The parents in this category become the breadwinner, the carer, the aunt, the uncle and everything to the child. And usually, single parents do not know much about the family of the man or woman: background knowledge is zero. Or maybe they get to know about the families when it is too late and probably this could be the reason for not continuing the relationship. In the process, the children miss out on love from both sides (Principal Social Development Officer).

Therefore, considering the above, we can observe that parenting keeps evolving both in nature and the roles depending on the circumstances of parents. It is not uncommon to find that grandmothers who are sometimes widows, increasingly play the role of primary caregivers to support their daughters or granddaughters or sons, just because one of the partners or both are not available, or are not simply able to provide the care the children need. Some mothers are often abandoned by their partners and thus have to bear the burden of bringing up the child single handedly. Many of these mothers turn to their own mothers for support. Maids, boda boda cyclists, teachers and televisions have also been entrusted with child care responsibilities. Some parents use boda bodas to take and pick children from school. By interacting more closely with the child, these boda boda cyclists become role models to the children. Many of these cyclists often display poor behaviour. They are in many cases poorly disciplined on the road and are sometimes involved in criminal activity. While therefore, it is inevitable to rely on their services, entrusting boda boda cyclists with especially young children places the children at risk.

Some traditional parenting practices

Traditional Practices	Comment	Contemporary Practice
Use of boiled mixed herbs (*kyogero*) mostly among the Baganda to protect the baby from skin infections, and also smoothening the baby's skin. The herbs are also used to clean the baby. They also ensure that the baby becomes resistant to other diseases.	This is traditionally considered to be a positive practice. It is believed that *kyogero* protects children from skin diseases and also helps in cleansing the baby's body. However, it could also be associated with spread of infections if not used in hygienic conditions.	The practice is still common especially in rural Buganda. However, it appears to be fading out especially in urban settings due to modernisation and limited time among mothers who have joined the employment sector. Some are resorting to use of the herbs mixed with babies' vaseline or oil. They believe it is a better and easier way of applying natural herbs to their children. The practice also faces onslaught from religious beliefs especially where its use is associated to invocation of blessings.

Traditional Practices	Comment	Contemporary Practice
Prompt breastfeeding to ensure good and proper child health and development.	This is considered to be a good practice on account that breast milk is suggested to be safe, fresh and of the right temperature for a child. It also contains valuable antibodies that prevent diseases and may reduce the risk of the child developing allergies. Breastfeeding also strengthens the bond/attachment between a mother and the baby.	It is still widely practiced in Buganda and other communities despite the threat from various socio-economic forces such as women employment, peer pressure on fashion, fear for breasts losing shape etc. To a small extent, some women/mothers consider breastfeeding less important.
Circumcision – mainly done on adolescents (teenagers) during initiation rites to adulthood. It is also a compulsory practice among Muslims.	Circumcision among the male youth has health benefits if done properly. It could reduce the risks of acquiring infections –including sexually transmitted infections and could also prevent penile cancer. It also helps in the prevention of inflammation of the glands.	Circumcision of the male child is becoming common especially among Christians, given its benefits. However, emphasis is being placed on clinical circumcision.

Traditional Practices	Comment	Contemporary Practice
Among the Sabiny and some communities in the Karamoja region, girl child circumcision is carried out as an initiation rite in to adulthood. Initially it was more of an Islamic culture but has recently spread country wide.	The practice has widely been condemned because of its consequences on the sexual health of the young girls. Often, circumcision is done in unsafe ways using tools that are not sterilised which leads to severe spread of infections among the victims. Secondly, it also inflicts pain to the child.	Traditional circumcision has been associated with increased sexual activity among male and female youth, and is partly blamed for girl child marriages among communities in eastern Uganda. Also, male circumcision in some communities, results into untold suffering among the boys. In some communities among the Karamojong, for instance, the circumcised male youth is left in the forest for days. If the boy survives, he is accepted as a brave member of the community. Some children lose their lives in the process.

Traditional Practices	Comment	Contemporary Practice
Story telling. This is a social and cultural activity of sharing stories with children to educate them about their culture and instill moral values in children.	Storytelling improves the child's vocabulary and enhances his/her listening skills. It teaches a child about life, the self and others; and helps a child develop an understanding, respect and appreciation for other cultures. Storytelling is also used to impart moral values to children.	Few parents still have time to tell stories to their children. Many are constrained by time due to work demands.
Pregnant women drinking calabash chalk – a mixture of clay and other herbs.	Believed to help pregnant women in softening the birth canal and increases the flexibility of bones during delivery. Science nonetheless reveals that some calabash chalk in some communities contains high levels of lead which can damage the brains of children.	Very common among many communities in Uganda, especially among the rural expectant mothers. Given the fact that it is a mixture of clay and herbs, chances are very high that the health of the pregnant woman might be in danger.

Traditional Practices	Comment	Contemporary Practice
Caretakers believe that infants should smile and laugh frequently since there is nothing much to worry them unless they fall sick.	Smiling with babies improves on the social interaction between the baby and parents or other adults. It is a form of communication amongst infants. In fact, an adult can be able to tell whether a child is sick or not through this practice.	It is still widely practiced in Buganda. Too much laughing can cause stomach pain.

Sources: *Walakira et al., (2008), Kilbride & Kilbride (1975) and Public Health Agency of Canada (2009) and experiences of the authors of this volume*

Advanced technology has improved the way we acquire information and has made it easy for information exchange to happen. This is increasingly having an effect on parenting roles in Uganda. A research conducted in Kenya revealed that parents are now able to read findings from different studies on parenting children and borrow some elements that they consider good in their context (Wadende, Fite & Lasser, 2014, p.274). However, easy access to information has not only simplified work for parents but it has also posed a great challenge to parenting children. Exposure of children to pornography and other forms of sexual exploitation including online sexual exploitation are common threats. Consultations suggested that there are several challenges associated with advanced technology towards children. One participant pointed out that:

> Social media is a good tool for providing information however, it has been misused. Children have been exposed

to pornography and other unexplainable things that have placed their parents in a very difficult situation to raise their children. Children of today do not have time to sit and share school experiences with their parents. The moment they get back home; they look for their phones – there is no room for traditional interactions (KII with religious leader II).

I have a friend who complained about his wife wanting to be loved like the way men love women in the "soaps" [movie series on TV]. We copy things that are outside our culture. We have started seeing men plaiting hair. Eventually children get lost in there. Parents are copying things that are not applicable to our context. There is a way the 'whites' bond with their children and by the time they buy phones for their children, they have already taught them how to use them and what to use the phones for, why and when to use them. But we are here in Uganda exposing our children to what we ourselves do not understand. This takes us back to guidance – we lack the skills to guide our children using technology (KII with a Social Worker Retrak).

For instance, recently, I was talking to a mother; she complained to me, she has two daughters who have gotten married and she was trying to pass on what she knows about how to feed their children and care for their children. The daughters said no, we are getting the information from YouTube. In the course, the mother found out that the children were not well fed because the clip on YouTube, was particularly about the weight so the children had gotten malnourished. And then she noticed one of them was not giving a child of one-year water because in the clip on YouTube, they did not talk about that. She told them this child gets thirsty and needs a little amount of drinking water but the girl was protesting (Religious leader IV).

Our children are much smarter than us, this is destroying our families, the high-tech phones we have, children are able to buy MBs (megabytes of data) on your phone and read anything they want on the internet. Our children know how to use our

> phones better than us and they can actually lock you out of your own phone; you look a fool at the end of the day, they can operate my computer. Access to technology is making life very difficult so modern parents have to do the catching up all the time. You can't sit back, sometimes I sit down and watch cartoon with my children because I have realised that some cartoons we have today have adult themes maybe apart from Disney, Jim Jam but Nickelodeon is just a mess, for example watch Loud House, Game Shakers, Thunderman; it's adult theme, I watch all these channels because I do not want my children to watch something and when it's getting to that level, I know that this channel is not the best (KII with staff at Save the Children in Uganda)

Ultimately, the evolving parenting roles have also been influenced by the existing international, regional and national legal frameworks.

Families have widely been recognised as the best place where quality child development may occur. They are identified as the central node for child protection, development and as the first line of defence from and response to protection failures (SCORE, 2014). The relevance of the family to the wellbeing of children has been illuminated by international conventions and declarations. The UNCRC for example guarantees children's rights to provision, protection and participation and regards the family as partially responsible for guaranteeing these rights. The convention also obliges states parties in article 18.2 to render appropriate assistance to parents and legal guardians in performing child bearing responsibilities and ensure the development of institutions, facilities and services for the care of children. Parents (both mother and father) are recognised as having equal responsibility in the nurturing of children. The convention reads: "States parties shall use their best efforts to ensure recognition of the principle that both parents have common responsibilities for the upbringing and development of the child" (1989, Art. 18.1). By becoming a

signatory to the UNCRC, the Ugandan government committed itself to promoting these global standards. Many provisions of the convention have since been implemented at the family level. For example, the 1995 Constitution provides that "it is the right and duty of parents to care and bring up their children" (Art. 31.4). It further states in article 34(1) that "subject to laws enacted in their best interests, children shall have the right to know and be cared for by their parents or those entitled by law to bring them up." Clause two states that children are entitled to basic education which is a responsibility of the state and the parents of the children. In general, the African Charter on the Rights and Welfare of the Child (ACRWC, 1999) and other global legal mechanisms have become part of the local legislation—being reflected in the 1995 Uganda Constitution as amended.

Whereas globalisation has resulted into "double marginalisation" across the African continent (Bigombe and Khadiagala, 2003), such legal instruments as highlighted above have tried to improve the relations between parents and their children. For instance, in Uganda, the Ministry of Education, Sports, Science and Technology (MoES) abolished corporal punishment from all schools and family structures and replaced it with positive disciplining (MoES & UNICEF, 2008). While corporal punishment still exists in school settings, the practice has greatly reduced. Countrywide, parents are beginning to appreciate positive parenting where a parent and a child can sit and discuss any worrying situation. Child participation is being witnessed in both family and national affairs. In recent times, children are increasingly being sensitised about their rights to food, education, life, religion, immunisation, clothing, shelter and medical attention. Children especially from middle class families have started asking their parents about child health cards and can now even suggest which schools they want to go to. All these have influenced parenting roles and parents are beginning to adjust and conform to the current approaches to child rearing. Nonetheless,

there are challenges in the implementation of the existing legal provisions, partly due to capacity gaps, as one participant expressly observed;

> … in terms of child protection, vaccination is an important child protection intervention and we have a policy that [implicates] any parent who doesn't vaccinate a child. But can we achieve it to completion? If a parent came here for some services and I notice that she never immunised his/her child, will I call 116 Sauti or Child Protection Unit that come and arrest this parent for not vaccinating his or her child? No, I will not because it is really hard. Also take an example of defilement; to what extent can this defiled child achieve justice? If you take an example of UK, when you leave a child in the house alone, within just a period of 4 hours, the Child Protection Unit will be at the door asking where the adults are. So here in Uganda, we still have a challenge of proper implementation of policies (KII with paediatrician/snr. lecturer Mulago Hospital/ Makerere University)

In conclusion, the parenting roles are changing and being challenged by a number of factors many of which, parents have limited control over. However, the sensitivity and awareness of parents, and their availability in the lives of children, will ultimately make a difference in determining the fulfilment of the roles and contributing to children's positive development outcomes. There are attributes in the distant past that we need to reclaim and build upon in child upbringing while, there are those that need to be discarded. Parents are being challenged to step up and reclaim their children in the rapidly changing world or else to lose them to the world.

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CHAPTER FOUR

The Initiatives in Support of Positive Parenting in Uganda

Karagwe Twihaneyo group participating in a parenting skills training.

Introduction

Parenting initiatives are organised because parenting is a challenging responsibility in many aspects. It does not happen in a vacuum and many parents, world over face various challenges that include but are not limited to poverty or economic hardships, and psychological distress which makes parenting much more difficult. Parenting programmes play a greater role in facilitating ways in

which parenting support is developed within and across countries (Daly et al., 2015). Parenting has a direct impact on children's behaviour, which affects their ability to realise their potential. Inconsistent parenting and exposure to violence in homes, schools and community increase the risk of children growing up to use violence, or to be the victims of violence themselves. Basing on that background, parenting initiatives become critical in supporting parents to raise their children in a more positive manner.

In this chapter, we identify a few initiatives in support of positive parenting in Uganda. The discussion of the initiatives is very brief. It is intended to serve as a precursor to the discussion of the UZAZI AVSI Parenting Model which is the major focus of this volume. The illumination on the initiatives helps the reader to see the variety of innovative approaches used by mostly non-governmental organisations to address the major parenting issues facing Uganda's families. A majority of the initiatives target the elimination of harsh disciplinary practices by parents — a practice rooted within the cultural practices and mostly considered appropriate or normalised. Others prioritise child care practices including paying attention to early child stimulation and learning, child feeding practices and the involvement of fathers in the parenting role. Apart from highlighting the initiatives, we scarcely go into details to discuss the efficacy of the interventions only mentioning a few outcomes where possible. The data used to develop this chapter is based on in-depth interviews with officials in the agencies that were visited and in some cases, use of secondary sources. The reader could find some of the initiatives more appropriate for youth.

Responsible, Engaged and Loving (Real) Fathers Initiative

The REAL Fathers Initiative was a 12-session father mentoring programme implemented by Save the Children in northern

Uganda. It was specifically implemented in eight parishes of Atiak Sub-county, in Amuru District. The initiative aimed at reducing child exposure to violence at home and breaking the cycle of inter-generational violence. It targeted young fathers aged 16 to 25 years who had children aged 1-3 years and were married or cohabitating with their wives or partners. The initiative used a mentoring programme and a community poster campaign by modelling alternative approaches to non-violent discipline and conflict resolution. This would help in improving the fathers' parenting and communication skills and confidence in adjusting to non-violent approaches. The programme assisted young fathers to learn new roles as parents and partners so as to promote non-violence in parenting and partner relationships. The hypothesis was that improved knowledge and skills in positive parenting and exposure to other non-violent discipline strategies enables fathers to adapt positive parenting and improve parent-child relationships (Ashburn et al., 2016).

The programme recruited 64 mentors altogether and each had a duty of guiding four mentees. They were paired up and each pair had to meet twice a month for six months, once in an individual session and once in a group session of three or four mentors and their mentees. Two of the individual sessions and one group session included the young father's wife or partner. Each session followed a standard format and took approximately 40 to 90 minutes. During each session, mentors gave the young fathers assignments to practice new skills and discuss their experiences in completing the assignments. The programme had a curriculum which used a "yellow card" strategy adapted from soccer's yellow card warning system. This was developed basically to avoid the escalation of disagreements into physical violence. The yellow cards could be used by either a man to communicate to his partner that an important issue needed to be discussed or to pause a discussion that had the potential to turn violent. In addition to mentoring sessions, a

series of six posters were displayed on sign boards at locations in the community frequented by the young fathers. Posters changed monthly and corresponded with the themes and messages presented during the mentoring sessions. Posters included a photograph of a local father performing one of the desired activities, such as reading to his child, and a statement indicating that others approve of that action. After the final mentoring session, an open community meeting took place in each study community and was attended by LC1s, programme participants, their wives and families. These meetings supported norm change at the community level by providing fathers with a public forum to commit to continue practicing the acquired skills and for the LC1s and family members to commit their support for the men's adoption of positive change (Ashburn et al., 2016). As a result, the intervention has increased positive parenting practices, enhanced the participants' confidence in using non-violent discipline and lowered the odds of use of physical punishment and use of psychological and verbal intimate partner violence. Physical violence declined over time among the entire sample from 38 per cent at baseline to 12 per cent at long-term follow-up. Exposure to the intervention was significantly associated with attitudes that reject use of physical punishment and intimate partner violence. The intervention had significant positive effects on couple communication but more limited effects on gender norms.

The Early Steps Programme

The Early Steps Programme (ESP) was implemented in three districts namely; Apac, Kumi, and Nakapiripirit between 2014–2016, by a coalition of partner agencies including Private Sector Foundation Uganda (PSFU), Health Child (Uganda) and Centre for Domestic Violence Prevention (CEDOVIP). The project comprised of three core interventions that complemented each

other. They included economic strengthening at household level through Village Savings and Loan Associations (VSLAs) (spear headed by PSFU), improving early learning and child care through Cooperative Child Care Groups (CCGs) (spear headed by Health Child), and using community activists to address violence against children (spearheaded by CEDOVIP). These core programme areas were implemented in an integrated manner to ensure that children and household members receive the minimum package of interventions necessary to bring about the desired change in the welfare of children and care givers.

The Early Steps Programme mainly targeted households organised within groups living in rural post-conflict communities and covered two sub counties in each district. The ESP aimed at having a positive impact on the behaviour of adult caregivers mostly women aged 18 years and above. It aimed at creating a supportive environment where caregivers would provide children's basic needs while at the same time exercising positive parenting. The project also sought to strengthen family unity by targeting the elimination of intimate partner violence, including violence against children. The intervention used local government structures right from the village level to the district to provide the necessary technical and political support needed by various actors involved in the implementation of the intervention. In particular, the ESP model relied on local council chairpersons to identify the most-needy households for support in their provision of good care to the children. Technical support was also received from the parish and sub-county officials responsible for child protection, health and implementation of income support activities.

The intervention benefited about 24,251 people of which 7451 were children below 8 years, 6,575 children aged 9-17 years, and 10,225 adults aged 18 and above.

The component on child care implemented by Health Child basically focused on improving early learning and child care by

increasing enrolment in community Early Child Development (ECD) centres, child stimulation practices, involvement of mothers in early learning, use of home grown play materials, child care practices, nutritional practices (such as women health seeking behaviour, improving maternal and child health). This was possible through creating Cooperative Childcare Groups (CCGs) with each consisting of 15-30 members. CCGs consisted of members of VSLAs who had children attending the community-based child care centres. The community-based child care centres acted as convergence points for safe child care, learning, play, simulation and primary school readiness. Among the members, two caregivers were selected and trained to teach children at these centres and help manage the activities at the centre. Child learning was stimulated using local materials which included; balls made from banana fibres, ropes made from sisal, dolls made from banana fibres and old torn clothes, old bicycle and car tyres, toy cars made from wires, old bottle tops and old slippers, items moulded from clay and mud such as animals, sound pianos made from sorghum stems, swings made from ropes, sticks and poles and counting sticks and stones (Walakira et al., 2016).

Violence prevention (led by CEDOVIP) underlined the mobilisation and training of care givers in positive parenting practices notably, encouraging parents to use positive disciplinary practices when handling children involved in undesirable behaviour and also promoting dialogue in resolution of conflicts within families — most especially among couples. Men played a key role in the sensitisation and mobilisation of other men to treat their female partners with dignity. The activities under this component in addition made use of a model called SASA. SASA is a Swahili word which means "now." SASA is a community mobilisation approach to prevent violence against women and the spread of HIV and AIDS. It is an activist-led intervention that uses a few individual activists to reach out and mobilise their neighbours, friends and

people within their vicinity. Through SASA CEDOVIP aimed to create a safer environment to prevent four types of violence; physical violence, sexual violence, economic violence and emotional abuse. Within the SASA model, the change agents (CAs) conducted community conversations and stimulated discussions on violence against children and women, conducted and facilitated discussions using Ludo (board) games, community murals and soap operas or radio dramas. The SASA model is based on the critical mass theory where a few individuals are trained and given the tools to use, and the effect of their work spreads through the ripple effect to other community members (Walakira et al., 2016).

Parenting for respectability programme

This programme was initiated and implemented by Child Health and Development Centre, Makerere University. The programme aimed to modify risk factors for child maltreatment. It was a manualised programme with inbuilt sessions that were delivered by local facilitators. The facilitators followed a training manual. Initially, a 21-session programme was developed and a session delivered on a weekly basis. The sessions were later reduced to 16. The programme was developed to appeal not only to mothers, but also to fathers. Thus, the first ten sessions were for both mothers and fathers but attending separately. Then drawing on the "stepping stones" methodology, the two sexes were brought together for sessions 11-16 and encouraged to address conflicting gendered perceptions of parenting problems.

The methodology harnessed pre-existing motivations [regarding good parenting] amongst parents especially fathers whose main motivation was to ensure family respectability. The concern amongst parents was to ensure that the outcomes of their children in terms of behaviour, education or health in some way bring or earn respect to the family. Parents talked about good behaviour such

that if a child was not behaving well, the reputation of the family would be at stake. Therefore, the programme engaged parents to identify their main motivations. During the sessions, parents were encouraged to reflect on how and what methods could work, and what methods in particular could be applied to achieve the desired behaviour. In many ways, it is not teaching parents what to do but reflecting on how they could achieve parenting for respectability. There was in addition, a session on positive discipline where parents were encouraged to reflect on how else they could discipline children without using corporal punishments (Primary Data Principal Investigator Parenting Programme, Child Health).

The intervention further paid attention to the involvement of couples. This was aimed at addressing conflicting perspectives about parenting as well as spousal relationships. In brief, the initiative focused on positive disciplining, respectability, attachment, and bonding. However, it also addressed gender socialisation and spousal relationships and conflict. It was implemented in Wakiso District, Kajjansi, Kigungu and Bweya parishes along Entebbe Road. The initiative was a community based parenting programme in Uganda for the early prevention of violence against children and gender based violence.

Community based parenting intervention implemented by Plan Uganda

This intervention was implemented between February and August 2013 in Lira District in northern Uganda. It promoted child development and maternal wellbeing in rural Uganda. Particular attention was placed on child care within the five topics covered namely; play, hygiene, diet, love and respect. The intervention further aimed to improve child nutrition, stimulation, mother care and increase father involvement. Mothers and fathers were engaged in 12 sessions which lasted 60–90 minutes. These were carried

out fortnightly and delivered by trained community volunteers. The volunteers, both men and women, were equipped by Plan International staff with communication skills and were identified to be role models in the community. They had a minimum of sixth grade education. An activity book was designed and used in the delivery of the training. The book contained coloured posters depicting selected messages for young children (less than three years, and mothers) (see Singla et al., 2015).

The child care sessions provided home based play materials, used stories and pictures to address the hygiene practice of hand washing with soap after using the latrine and before eating. They also depicted dietary practices in particular having a balanced diet. Parents through role plays and discussion covered topics including showing love to couples and children, showing respect for self and others and dealing with inter-personal conflict through improved communication. The training was delivered in Luo, although the materials were produced in both English and Luo. Other methods including parent-child interactions, games and group-based problem solving were employed.

Parents learnt and enacted taught practices based on the Bandura's social cognitive learning theory with their children. They were assigned homework to practice after each session. Two home visits were carried out to review the parenting messages and resolve the barriers to enacting these messages. These visits lasting 40–50 minutes were carried out between group sessions. The intervention was monitored weekly by four staff of Plan Uganda who initially trained the community volunteers.

In an evaluation carried out in 2015, it was found that three year old children had higher cognitive and receptive language scores. The mothers had lower symptoms of depression when they received more spousal support. They also had active ways of coping and improving maternal psychosocial wellbeing. Mothers got more knowledge on preventative health practices, dietary diversity and

psychosocial stimulation for their children targeted towards child development.

Better outcomes for youth and children

At the time of developing this volume, World Education Bantwana was running this programme in eastern and northern Uganda aimed at supporting caregivers and parents to offer effective parenting to children and orphans. The programme was being implemented in Gulu, Kitgum, Amuru (Acholi sub-region), Lira, Oyam and Apac (Lango sub region), Arua (West Nile) and in Jinja, Kamuli, Mayuge, Bugiri, Iganga, Mbale and Tororo (eastern region). The programme uses the Sinovuyo curriculum. Sinovuyo is a Zulu word meaning joy. The curriculum aims to equip parents with skills to bring joy and happiness, communicate effectively and also build good relationships between parents and their children at the household level. Fourteen sessions are delivered in 14 weeks. Each session lasts for two hours. Through the programme, up to 914 parents were trained in 2016 by para social workers. One topic is covered under each session. The topics include among others; building a positive relationship through spending time together, praising each other, talking about emotions, what do we do when we are angry, problem solving, motivation to save and making a budget with money, dealing with problems without generating conflict, establishing rules and routines, ways of saving money and making a family saving plan, keeping safe in the community, responding to crisis and widening the circle of support.

A total of 27 Sinovuyo groups were formed in seven districts. Each group had at least 30 members. The groups were trained by 104 facilitators. Based on the interview with an officer from Bantwana, the programme has registered positive outcomes with children who had dropped out of school now going back to school. Girls are desisting from involvement in sexually risky behaviour by

participating in formal and non-formal sources of livelihoods, while communication at the household level had improved.

Conclusion

The programmes reviewed had common features among them. Firstly, they all aimed at reducing child exposure to abuse and violence within the home. They also aimed at improving child welfare by enabling parents provide for the basic needs of the children. The initiatives mostly used a mentoring programme approach involving both parents, with emphasis on improving communication between parents and children, and educating parents about positive parenting and parent-roles, especially for fathers/male caregivers. The initiatives mostly relied on community-based volunteers (facilitators) who were trained and worked with existing community structures — local councils or organised community-based groups such as savings and credit associations, women and men clubs during implementation.

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CHAPTER FIVE

Implementing a UZAZI Parenting Skills Training Programme by AVSI Foundation

Father and daughter harvesting cotton

Introduction

This chapter provides a description of the UZAZI AVSI Foundation parenting skills training programme. It provides background information on the development of the programme, the theory of change, the activities involved and the targeted beneficiaries. The chapter further describes in greater detail the content of the

parenting skills programme, the delivery methodology and the implementation process. The lessons learned and recommendations for rolling out a similar programme in future are also pointed out. Information sources for this chapter include information from the programme managers and field staff, programme reports and manuals.

Description of the UZAZI parenting programme and theory of change

In 2014, AVSI Foundation developed the UZAZI Parenting Skills Training Programme targeting both young and older parents within the Sustainable Comprehensive Responses for Vulnerable Children and their families (UZAZI) programme households. SCORE was a seven year USD 38,322,700 USAID funded (USD 34,326,470 USAID and 3,996,230 cost share) project implemented by a consortium led by AVSI Foundation with CARE, TPO and FHI360 as implementing partners in 35 districts of Uganda (2011-2018). The project goal was to reduce vulnerability of more than 125,000 critically and moderately vulnerable children (VC) and their family members.

SCORE targeted vulnerable households that were affected by; HIV/AIDS, poverty, chronic illness, disability, orphanhood and child or elderly headed.[1] The parenting programme was

1 AVSI Foundation through the USAID SCORE activity had by July, 2017 reached 31,943 HHs and 178,974 people (of the planned 25,000 by year 2018) out of whom at least 40 per cent were eligible for parenting skills trainings. Beneficiaries have been reached with a mix of activities including socio-economic strengthening, food security and nutrition, child protection and legal services and strengthening families to acquire, provide and access critical services. AVSI utilised a case management approach in which beneficiary households' needs were mapped along with their resources and documented into a household development plan. It is on the basis of this plan that programme staff articulated the relevant

implemented in all the regions and districts where SCORE was implemented. The SCORE direct beneficiary households were those in need on account of the households needs mapping exercises. The mapping exercises covered child protection, education, household incomes and health among other considerations. The identification of individuals (households) with parenting skills gaps was followed by clustering or grouping of families within their geographical locality (usually a parish and sometimes a village). Each group comprised between 25–30 members. Enrolment of couples (male and female parents) was given special consideration even though women's participation was often higher than men's[2]. The groups of parents were then trained following a systematic curriculum delivered within their communities. The intention of conducting the training involving a specific group among their own peers was to cultivate peer support as well as tapping into other buddy networks that would continue beyond the completion of the training. Parenting skills trainers were selected from among the Family Strengthening Social Workers recruited by the implementing partner organisations (AVSI, CARE, TPO). They were equipped with appropriate training (Training of Trainers) to enable them cover the different modules including case management, which would later be applied in following up families in need of additional support. Trainers were thus equipped not only with facilitation skills, but also case management skills including being able to

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interventions for a household allowing for each household to take on tailored pathways unique to their own needs. Through this approach, about 7,308 people in need of parenting skills trainings were trained.

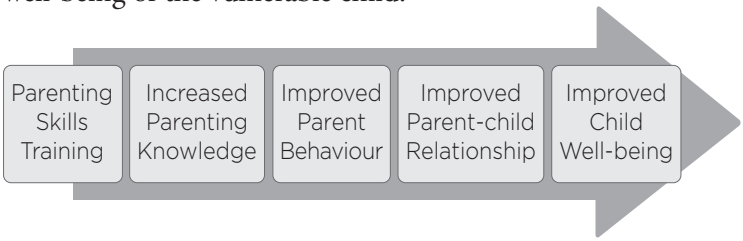
2 This is similar for all SCORE related interventions. Despite the use of a household approach that encourages both female and male participation in different activities, men often offered approval for their wives to participate and sent them alone as opposed to joining activities together. Activities where men were often involved were largely agriculture especially as connected to business.

offer psychosocial support to the beneficiary households. By so doing, they were able to deliver training in a professional manner using the broader knowledge on child upbringing and applying interactive approaches.

The development and delivery of the parenting skills training was in part a result of the concerns raised by social workers regarding the poor parenting behaviour of participating SCORE households. The social workers had observed that parents offered limited support and guidance to children. This often manifested through child neglect and use of violent (negative and harsh) disciplinary techniques and the visible normalisation of irrational and delinquent behaviour of older children. Parents were also at logger heads with the youth, particularly those that had received life skills training — questioning their assertiveness and often perceiving it as disrespect towards them. AVSI, therefore, found it critical to develop the UZAZI parenting skills training as a way of helping parents better understand as well as cope with their growing children in addition to enabling them support the youth particularly those who had received mentoring in life skills.

Summary of theory of change

The UZAZI parenting skills training set was built on the hypothesis that parenting skills training increases parenting knowledge among participants, which translates into improved parenting behaviour and ultimately resulting into improved well-being of the vulnerable child.



The training comprised of five modules which sought to equip parents with parenting skills in order to help the parents understand who they are, appreciate their children as they are and consequently adopt good parenting behaviour, values, skills and attitudes that will enable them to guide their children to maturity.

The training was expected to:

- Improve the attitude and behaviour of caregivers towards children.
- Improve the confidence of caregivers in caring for and dealing with children.
- Reduce caregivers' stress and anxiety while relating and engaging with children.
- Improve the relationships between caregivers and their children.
- Eliminate the use of corporal punishment and any other unfair means of dealing with children's misconduct.
- Improve on the overall wellbeing of children under the care of each of their parents/care-givers.

Recognising that parenting skills training would be insufficient in eliciting desirable behaviour change among parents (on account that knowledge and attitudes alone were not the only causes of poor parenting) if applied singularly, the SCORE design provided complementary activities to address the multiplicity of factors that presented as risk factors to good parenting. In addition, integrating a range of other complementary activities to parenting was seen to serve as an incentive in attracting regular attendance to parenting classes. In general, the UZAZI parenting intervention was tied to other services or activities including; savings groups as a measure to bring together different households to participate in socio-economic activities, modern farming skills, market intelligence and value

addition. In addition, activities including financial literacy and enterprise selection, and planning skills related to empowering the family economically towards enhancing their capacity to provide for the family needs like shelter, education, health care and food, were also introduced to the clustered parenting groups. Additional social asset building skills including psychosocial support, referrals for other critical services, home visits and counselling, were also provided along with the parenting skills training intervention. The complementary interventions were deemed to support the family which in turn would facilitate better outcomes from the parenting skills trainings.

Thus in general, the parenting programme paid attention to the knowledge and skills deficits that parents exhibited in raising children, as well as addressing factors in the care environment that undermined positive parenting outcomes. In relation to the personal factors, it was conceived that within the intervention areas, parents lacked skills to build warm relationships with their children, had difficulties communicating with their children, and exhibited role play deficits in areas including child communication, application of discipline and expressing love to their children among others. Yet factors including poverty, negative cultural practices, and lack of building positive support systems in the community served as risk factors within the general environment for raising the child.

The parenting programme modules

The "UZAZI Parenting Skills Education" manual contained five important modules that did not stand-alone but complemented each other with each module lasting approximately 8 hours. These included:

Module 1: Appreciating the Parenting Responsibility.

Module 2: Appreciating your Child.

Module 3: Parent-child Relationship.

Module 4: Raising your Children with Positive Discipline.

Module 5: Authoritative Parenting: A Positive Approach.

This UZAZI parenting skills training model was developed by the project technical and programme team, majorly building on experiences they went through both as children and parents. Once the manual was drafted, it was edited by a number of AVSI staff within and outside Uganda. The first two years (2014 and 2015) were years of testing the effectiveness of the model in shaping parenting knowledge, practices and attitudes. Indeed, the findings articulated in this publication reveal how helpful the model turned out to be to many of the trainees.

Description of the modules

***Module 1- Appreciating the parenting responsibility*:** The module places emphasis on helping the caregivers to understand better who they really are in terms of their behaviour, character and manner. It highlights the caregivers' strong points and their areas of strength needed for better parenting. This module directs participants towards self-awareness. The module creates ample room for discussion and allows parents to identify parenting challenges they are facing and the necessary responses they ought to pursue. In this module, parents examine their attitudes and beliefs about parenting, while at the same time being encouraged to identify and learn how to build on their strengths in dealing with parenting challenges.

This participant overcame substance abuse. She now lives in a happy marriage.

This module helps parents learn about the kind of self-care to help them better cope with the challenges of parenting. They are enabled to discover that parents who take care of themselves are in a better position to provide the care and support needed for raising children.

***Module 2 - Appreciating your child*:** The module aims to help parents understand their children better. The parents learn about normal, age-appropriate behaviour, and build realistic expectations concerning the child. Parents learn how to observe and listen to their children so that they are able to understand the importance of what children do and say.

↑ A participant raises two children infected with HIV. Through parenting skills, she is now a child rights defender and mentor to parents.

Module 3 - Parent-child relationship: The module is designed to teach parents the importance of building good relationships with their children. The module underlines parents' acquisition of effective communication skills, the parent-teen relationship, and handling of sibling rivalry.

↑ This participant in Mukono District loves her child with a mental illness.

***Module 4 - Raising your children with positive discipline*:** Under this module, parents learn the difference between discipline and punishment. Parents learn appropriate correction techniques and how to avoid parent-child power struggles. Facilitators work with parents in exploring and practicing alternative positive discipline methods. The parents are encouraged to utilise their peer support networks built through the group training to report back on alternatives tried and how these have worked or otherwise, and forging a way forward.

This participant is a promoter of parenting skills in families in Karagwe Village, Ntungamo District.

Module 5 - Authoritative parenting: A positive approach: The module ushers the trainees to what is defined as authentic parenting. It brings to light the fact that the parenting responsibility requires parents to live as role models to their children. It is emphasised that parenting, is a call to love and care; a value system that serves as a key ingredient in the overarching parenting responsibility. In this module, parents learn how to balance the use of their authority, building dialogue with children and yet not compromising on correcting children in a positive way when they go wrong. Parents under the module demonstrate how they get actively involved in supporting their children in learning and other aspects of life.

The Imam and Chairman Local Council 1 of Kiruggu village in Buikwe District is building a strong family with his wife.

Principles for delivery of the parenting programme

The following standards were applied with respect to the enrolment and delivery of the parenting skills training intervention:

1. Participation in parenting skills training was voluntary even though a majority of the households were encouraged to enroll and participate in the trainings.
2. Two trainers were deployed to handle every parenting skills training session, preferably male and female.
3. Training groups of 25-30 people were formed with at least 75 per cent preferably from SCORE beneficiary households.
4. Couples from beneficiary households were encouraged to attend together.
5. Men were especially encouraged and individually mobilised to enroll.

6. Overall, the training was planned for a period of 40 hours with practice breaks in between the training. It was estimated that if a group met twice a week for two and a half hours each time, the training would take about eight weeks on average. A social worker was therefore expected to complete training at least a group per quarter. The training was divided into five modules with each module covering eight hours.
7. Upon training completion and administration of the post training assessment tool, a graduation exercise was convened for trainees to share change story testimonies. In addition, SCORE partners were to choose UZAZI parenting skills peer educators to sustain the activity in the locality, even after completion of the project life.

Monitoring and evaluation tools

Each parenting skills trainer was required to develop and maintain an updated parenting skills inventory and database at implementing partner level for all parenting skills groups enrolled. Data for all groups that had completed the training was sorted. The database captured information on each trainee's knowledge, behaviour and attitudes before and after the intervention as measured using a pre-training and post-training parenting skills assessment tool. Every trainer maintained an attendance register, which made it possible to track attendance and assess performance of participants. It also helped to instil discipline among the participants.

Enrolling parents into training

Prior to enrollment of parents into the training, a pre-training parenting assessment was undertaken by facilitators in the homes of targeted beneficiaries. The home visits made it possible to assess

the home care environment, thereby giving trainers a better sense of how they could help participants during the training.

Getting started

The "Getting Started" session was to build rapport between the facilitators and the participants and among the participants themselves. As a means of working well with each other, orderliness was laid down as a key principle. Other ground rules were collectively set up and expectations generated by participants. Helpers were also identified for the proper governance of the group. Following an introduction, a knowing each other session, the facilitator then introduced the contents of the training, outlining the entire path of the manual.

Post-training activities

After the completion of the training, the facilitators administered the post-training test. They engaged the group on the best ways to ensure that the group kept together and continued to interact even after the training. An assessment of the effects of the training was administered after three months.

Delivery methodology

Initially, the training was offered as a five-day Training of Trainers (ToT) for key staff within SCORE at a consortium level, followed by a roll out to the relevant Implementing partners (IPs) social workers — also working as programme officers — who then engaged with the parents directly. The trained facilitators who were the staff at IP level rolled out the training to the selected participants. Training sessions were conducted within community settings such as schools, homes of individual members and religious facilities like churches. Besides the actual training, trainers were encouraged to visit

individual participants at home to help mentor and support them with the expected behaviour. In some cases, it was important to visit the home and interact with the children, relatives, the spouse and other family members on the support mechanisms needed to model learned positive behaviour.

The sessions used different Active Learning Methods (ALM) such as role-plays, discussions, surveys, games, quizzes, movies and other activities. The use of these methods demanded that facilitators are comfortable using interactive methodologies and encourage participants to participate. Some practice and preparation on the part of the facilitators was always required for effective delivery. The ALM as outlined in the manual did not demand writing and reading to the greatest extent possible. The methods, though enjoyable, were not to be viewed as just games or entertainment. Discussion and review of thoughts, experiences and learning with the participants followed each session. The broad review questions that were provided were meant to remind the facilitator of issues that should be discussed by the group.

Selected works of writers, philosophers, film makers, visual artists and even actual biographies of famous people were suggested as tools to help participants further reflect on the parenting skills that they were learning. These tools while used as a guide were not entirely exhaustive. Thus facilitators were encouraged to supplement these tools with any other works that they believed could help participants realise the parenting skills goals, more so looking for materials that would be easier to access in the communities where participants come from.

Most sessions required that participants sit in a circle or semi-circle so that they could easily interact with each other. The facilitator sat inside or just outside the circle. If the participants chose to sit on the floor, it was recommended that the facilitator did the same. Facilitators were encouraged to adapt and vary approaches during training to suit changing needs as well as different local

conditions including variations in languages. Suggestions, tips and experiences were provided in some of the sessions to allow for variations in the activities. Several energisers and warm-ups were integrated and recommended for use while engaging participants in order to keep them attentive and interested.

Monitoring and evaluating training outcomes

The UZAZI parenting skills training begun with a pre-training questionnaire administered to each individual parent which included a group of themes that are covered in the modules. Results from the evaluation enabled the social worker/facilitator to tailor training to specific areas of focus that relate to areas of need. In addition, it enabled the programme to register benchmarks for each individual parent. At the end of the training, the same questionnaire was filled out by each of the trainees to assess the changes in caregiver's knowledge, attitudes, skills and most importantly, behaviour over a three-month period.

Majority of the trainees were female, however, given the pivotal role of men in decision-making regarding family welfare, future trainings should consider including more men to maximise impact.

Experience from this parenting skills intervention suggests that future parenting skills training interventions should incorporate clear facilitation strategies such as pre-testing trainees during home visits, integrating psychosocial support activities into training sessions to improve activity and attention and formation of parent support groups to continue the effect of the intervention to the wider community.

In future, this kind of parenting intervention should end with a session that equips trainees with facilitation skills to enable them effectively continue the sharing of the contents with the other community members as a sustainability strategy.

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CHAPTER SIX

Impact of the UZAZI AVSI Parenting Programme on Parents and Children

A happy family

Introduction

UZAZI AVSI parenting skills training centred on promoting the authoritative parenting style as conceptualised by Baumrind (1971). This style of parenting is characterised by warm nurturance, firm discipline, and respect for child autonomy. Throughout the training,

parents were taught and encouraged to adopt authoritative parenting practices: listen to their children, place limits, consequences, and expectations on their children's behaviour, encourage independence, allow children to express opinions, encourage children to discuss options, and administer fair and consistent discipline.

The UZAZI AVSI parenting skills training was conducted in three cohorts over a period of three years (May 2013 to May 2016). Approximately 4,032 caregivers were trained in 35 districts. The group-based trainings were conducted at a community level in the 35 districts with approximately 20-25 caregivers per group. Facilitators were fully trained in the use of the UZAZI Parenting Skills Facilitators' Manual, which outlines the training modules and the activities which should take place in each session. This training manual draws heavily from Nancy Van Pelt's "Train up a Child; A Guide to Successful Parenting" (1984), and Better Parenting Manual for caregivers and highly vulnerable children developed by FHI 360 and PACT as part of USAID's Yekokeb Berhan Programme in Ethiopia (FHI 360 et al., 2010). As mentioned earlier, rather than simply lecturing to caregivers about correct parenting practices, the training was based on the use of Active Learning Methods (ALM) such as role-plays, discussions, surveys, and quizzes in order to engage them in a more interactive way.

The evaluation of UZAZI parenting skills training programme examined the impact of the programme on four main outcomes, namely; knowledge of effective parenting by caregivers, the parenting behaviour, the parent-child relationship and the effect of the training on child wellbeing. The five modules covered in the training were expected to contribute to the four main outcomes that were evaluated.

Methodology

The evaluation assessed whether the parenting skills training led to increased knowledge of correct parenting practices; improved parenting behaviour, parent-child relationship, and ultimately child wellbeing.

The evaluation utilised a comparison-group design to compare the parenting knowledge behaviour and practices of parents that participated in the UZAZI parenting skills training programme (intervention group) versus those that never received the training (control group). In addition, the evaluation compared the parent-child relationship and the wellbeing of children between the two groups. Primary data were collected from a randomly selected household-based sample of caregivers who received training in ten UZAZI AVSI (also known as SCORE) intervention sub-counties in ten districts. The districts selected for the survey included Buikwe, Kampala, Luweero and Wakiso in central region, Bududa and Mayuge in eastern, Bushenyi and Rukungiri in western and Amuru and Nwoya in northern Uganda. In each of the selected households, a child aged 10-17 years was also randomly selected for the interview. In each of the ten study districts, a comparable sample of caregivers and children from sub-counties where there was no UZAZI AVSI intervention were interviewed. Face-to-face interviews were conducted among 697 caregivers (337 in the intervention group and 360 in the control group) for the survey.

Eighteen FGDs (eight with males and 10 with females) involving 6-10 participants were conducted with caregivers who attended the UZAZI parenting skills training programme. In each district, 2-4 FGDs were held. The aim of conducting the FGDs was to elicit in-depth information relating to parenting knowledge and practices, parent-child relationships and how these have contributed to the well-being of children. The FGDs were conducted in local languages and audio recorded. In addition, 17 key informant

interviews (KIIs) were conducted with stakeholders (implementing partners and local leaders) who were involved in organising and conducting the trainings to gain a deeper understanding of the impact of the training on parenting behaviour and parenting styles and on child welfare among other performance indicators. The data collection was conducted between June and September 2016. Written and verbal consent was obtained from survey and FGDs/KIIs participants, respectively.

Caregiver's knowledge of effective parenting

Caregivers' knowledge of effective parenting was assessed using five items adapted from the Knowledge of Effective Parenting Scale (KEPS) (Morawska, et al, 2007). These included: caregivers' knowledge of the appropriate ways of disciplining a child, dealing with troublesome children, approaches to child upbringing, and expressing love and care towards children. The evaluation assessed whether caregivers who had received the training were more likely to give the correct responses to a set of questions corresponding to five items adapted from the Knowledge of Effective Parenting Scale.

Figure 1 shows differences in knowledge of effective parenting between the caregivers who participated in the UZAZI training (intervention group) and those who did not (the control group). Overall, caregivers who were trained were significantly more knowledgeable about effective parenting practices. Caregivers who were trained (intervention group) were more likely to provide correct parenting practices responses, thereby depicting better knowledge of 'correct' parenting practices.

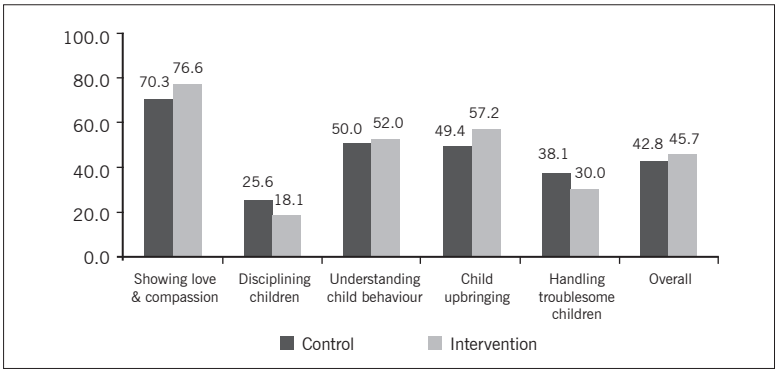

Figure 1: Caregivers' knowledge of effective parenting (N=697)

Source: *Computations from evaluation survey data*

Differences in knowledge of expected ('correct') parenting practices were significant with regard to Qn.1 regarding cuddling and hugging to express love and compassion towards children (p=0.061); Qn. 4 about approaches to child upbringing (p=0.038) and Qn.5 on how to appropriately deal with a troublesome child (p=0.021) (even though this was in favour of the control area and for which the explanation is not clear). The difference overall, in knowledge of expected parenting between the intervention and control area could be attributed to the knowledge gained during the UZAZI AVSI parenting training programme.

Participants in FGDs with caregivers who were trained gave views on what constitutes proper parenting. These included not being so tough on children, even when disciplining them, showing children love without spoiling them and creating time for children and engaging children in various plays to build the child-parent relationship. These caregivers reported that the training had changed their approach to parenting in various ways compared to what they were practicing before the training. Views and comments from the

FGDs which depict change of parenting behaviour towards more supportive parenting included:

> … we are calm and not tough on them [children] like before. I talk with them and we even make conversation. We are actually becoming friends with them (FGD with female caregivers, Wakiso District)

> ... First, the most important thing I learnt was how to handle children at home. I did not know that it was possible for a father to play with his children. But they taught me that and I have applied it and it has worked for me (FGD with male caregivers, Mayuge District).

However, there were some differences between what is considered 'correct' parenting practice and what the caregivers thought was appropriate regarding disciplining a child, and in dealing with troublesome children. While Morawska et al., (2007) argue that the effective way to discipline a child is for the parent to be consistent in their reaction to their child's misbehaviour, a majority of those interviewed argued instead that it was important to make sure the child felt a bit of pain or discomfort so that they would remember that they had done wrong. So, even though they had received training, some care givers still believed that using a 'stick' in addition to talking was still part of their approach to 'correct' parenting practices. This was expressed by female care givers in Wakiso (Entebbe) when asked what they still do in relation to disciplining their children:

> … I talk to my children, and teach them the gospel and where need be, I punish them. Sometimes I have to spank them.

> … Yes… Mine are still young and stubborn. … I make sure when they come back from school, … I make sure they do the home work, no joking because I always have my stick hidden somewhere. Then they also know they have to clean their shoes, be hygienic and take baths, and make their beds properly. And every Sunday they have to go to church to pray. (FGD with Female care givers, Entebbe, Wakiso District).

These contrasting views are partly a reflection of the cultural and social norms and values towards parenting and disciplining children which may not be consistent with the expected correct parenting practices emphasised under positive parenting.

Effect of UZAZI AVSI parenting skills training programme on parenting styles and parent behaviour

The assessment of parenting practices was based on 15 items from the Parenting Styles and Dimension Questionnaire (PSDQ) which was developed to measure parent's adherence to the parenting styles (Robinson et al., 2001; Baumrind 1966). The PSDQ includes measures of authoritative, authoritarian, and permissive parenting. The caregivers rated responses to each item on a three-point scale from "never" (0) sometimes (1) to "always" (2). The total scores for the respective subscales of this measure were calculated. Higher scores indicate better forms of parenting for authoritative parenting behaviours and worst forms for authoritarian or permissive types of parenting behaviours.

In addition, parenting behaviour was assessed using 20 items from the Parent Behaviour Inventory (PBI). The PBI measure reflects two dimensions of parenting behaviour. On one hand, the parent/caregiver either displays hostile/coercive behaviour which expresses negative effect or indifference toward the child and could include using physical punishment, threat or coercion to influence child behaviour. For example, statements like "I grab or handle my child roughly" depict a caregiver with negative parenting behaviour (Lovejoy et al., 1999). The second dimension is supportive parenting which reflects parental acceptance of a child through signs of affection, instrumental and emotional support and shared activities. Caregivers who practice supportive parenting would use such expressions like "I have pleasant conversations with my child"

(Lovejoy et al., 1999). The third dimension which is permissive parenting relates to parents who tend to be very loving yet provide only a few guidelines and rules to the child. Such parents believe children have to be true to their own nature and do not expect mature behaviour from the child. This kind of a parent is generally afraid of or reluctant to set limits on the child and rather than playing a parental figure, behaves more like a friend of the child. Caregivers who practice permissive parenting would use phrases like "I give my children whatever they want… or I can never beat my child." With permissive parenting, children do not have many responsibilities and are allowed to regulate their behaviour and the majority of their choices. Permissive parenting commonly results in a lack of discipline and responsibility in the child. Studies have found links between permissive parenting and increased alcohol use among teenagers as well as higher rates of school misconduct and lower levels of academic achievement (Attiya et al., 2016; Shakya et al., 2012, & Benchaya et al., 2011).

Controlling for socio-demographic characteristics such as gender, location, and income levels, the likelihood of practicing supportive, coercive or permissive parenting styles for caregivers who were trained (intervention group) and those who did not train in UZAZI AVSI parenting skills (control group) was estimated and results are shown in Table 6.1.

Variables	Supportive Parenting	Coercive Parenting	Permissive Parenting
Age of caretaker	0.0205***	-0.00576	-0.00224
Income	-2.02e-07	-3.36e-07	-1.28e-07
Primary (Ref = no education)	-0.00594	0.0490	0.241
Secondary	0.201	0.0874	0.538**
Post-secondary	-0.485	-0.160	0.286
Number of children	0.114**	0.0607	-0.00705
Unmarried (Ref = Married)	0.111	-0.227	0.165
Northern (Ref = central)	1.052***	-1.117***	0.110
Eastern	-0.658**	-1.564***	0.668***
Western	-0.957***	1.416***	0.665***
Male caregiver	-0.0612	-0.112	-0.0245
Intervention	0.540***	-0.652***	0.0471
Constant	6.836***	4.640***	1.859***
Observations	697	697	697
R-squared	0.101	0.163	0.033

Table 6.1: Effect of UZAZI parenting skills training on parenting style and parent behaviour

Source: *Computations from evaluation survey data*

Note: *** and *** denote the variable is statistically significant at 5% and 1% respectively.*

The results in Table 6.1 show that caregivers in the intervention group were almost two times more likely to practice supportive parenting (p=0.001) and 1.5 times less likely to practice coercive parenting behaviour (p=0.002) than those who did not participate in the training.

The influence of socio-demographic characteristics of the caregiver on parenting styles was also assessed. Besides education level and age of caregiver, other factors such as gender, location and income did not significantly influence parenting styles and parent behaviour. Caregivers with secondary school level of education were

more likely to display supportive parenting behaviour compared to those with no formal education. Older parents were more likely to report practicing supportive parenting than younger parents/caregivers. This is perhaps a reflection of accumulated experience in dealing with children which tends to be lacking among young caregivers. Similarly, caregivers with more children were more likely to exhibit supportive parenting styles. Other studies have found that parents with higher incomes are more likely to provide material and emotional support for their children, are less likely to suffer parenting stress themselves and hence tend to practice more supportive parenting styles (Berger, 2007). The results in Table 6.1 also suggest that there are regional differences in parenting styles regarding whether caretakers were more likely to be supportive, coercive or permissive in their approaches to parenting. Relative to the central region, caretakers in the eastern and western regions were less likely to display supportive parenting. Perhaps, this is associated with cultural and community values and norms but these were not specifically explored in detail in the study.

These findings suggest that the UZAZI training impacted positively in encouraging caregivers to practice more supportive parenting. Overall however, there was no evidence as to whether caregivers in the control group were more likely to practice permissive parenting.

Physical punishment of children at home and at school

The mode of disciplinary actions taken by caregivers was specifically explored in the evaluation. The way caregivers/parents discipline their children reflects in part their parenting behaviour, their love and care for the children and perceptions about effective parenting. In addition, child abuse by parents/caregivers is often manifested in the use of harsh/corporal punishment as a disciplinary measure.

Interestingly, caregivers who participated in the training were less likely to recommend use of corporal punishment as a disciplinary measure, both in the home and at school as shown in Figure 2. However, caregivers seemed to suggest that beating a child at school may be necessary to instill discipline. This could reflect the common tradition of disciplining troublesome children in schools. By and large use of physical punishment is considered appropriate in this regard, by a sizable segment of parents.

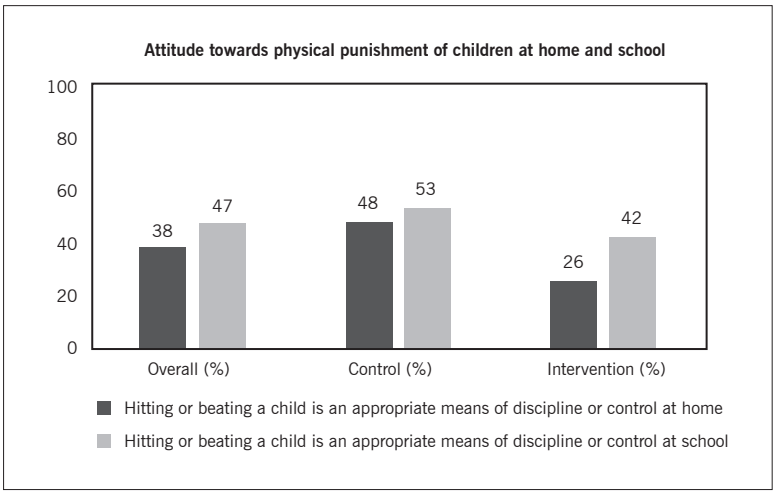

Figure 2: Caregivers' perception on use of physical punishment as a disciplinary measure

Source: *Computations based on evaluation survey data*

During the training, caregivers were exposed to different ways of disciplining children (such as withdrawal of certain benefits/ incentives) without resorting to harsh punishments like spanking or caning children. It can, therefore, be argued that the significant differences regarding the use of physical punishment between the control and intervention group is a reflection of the effect of training.

The qualitative analysis of the evaluation supports the finding that the training impacted positively on caregivers and influenced them to practice more supportive parenting. Caregivers who participated in UZAZI AVSI parenting skills training programme reported their parenting styles had changed in several ways as a result of the training. The reported changes include not being so tough on children even when disciplining them; showing their children love without spoiling them and creating time for children and engaging children in various plays to build the child-parent relationships.

> Some of us were so rude and harsh, we did not know how to care for children, we would not listen to the child, never had time to chat with the child, you do your own things and she (the child) also does her own things … ok**…** You don't [would not care to ask to] know whether the child would eat, … but now we learnt how to take care of children, and also the children listen to us, they are free to ask us … they are good people they no longer fear us, we cooperate with them well; be it be boys or girls. (Female care givers, Luweero District).

> For me before I joined the parenting skills training programme, I knew that for you to discipline a child you must get a cane and beat up that child for him/her to understand. But according to what we were taught in SCORE it is not good to beat a child because when you do, that child will not understand what you tell him/her. It is better to give counsel to the child and since I learnt that, now there is a very big change in my home. (FGD with Male caregiver, Mayuge District).

> I am proud of SCORE [UZAZI AVSI programme], they taught me how to interact well with my children and nowadays I even play with my children. When I return home, my children run towards me and welcome me home which was not the case before SCORE. And sometimes children bring a ball and say, father let us play. I also oblige… go and play with them for some time unlike before the [UZAZI AVSI] parenting skills training. (FGD with male care giver, Mayuge District).

Other comments such as "we are calmer and not tough on them [children] like before. I talk with them and we even make conversation" from caregivers who took part in the training, depict a change of parenting styles towards more supportive parenting. While the training was mostly attended by female caregivers, male parents who took part also appreciated the ways in which the training had influenced their parenting styles and practices. Commenting on the usefulness of the training, one male participant observed: "I learnt how to handle children at home. I didn't know that it was possible for a father to play with his children, but I now do." Caregivers who were trained in parenting skills gave many testimonies which reflected adaptation of positive parenting practices. There was a recognition that following the completion of the training programme, both male and female parents had learned better ways to communicate and interact with children and instilling discipline without being harsh.

These findings are consistent with those from parenting programmes elsewhere. For example, a randomised impact evaluation of a parenting programme in rural Liberia found that caregivers who participated in the programme reported an average decrease of 56 per cent in the use of harsh punishment. Caregivers who reported using beating, whipping, or spanking their child as a disciplinary measure decreased by 64 per cent, 62 per cent, and 56 per cent respectively. The use of psychological punishment (e.g., yelling) also decreased by 29 per cent. The evaluation showed that only 9 per cent of caregivers in the treatment group reported using beating to discipline their children compared to 45 per cent in the control group. (IRC, 2014).

A study comparing different forms of child abuse across 28 countries found high prevalence of abuse for children in the African region in the order of 83 per cent for psychological abuse, 64 per cent for moderate physical abuse, and 43 per cent for severe physical abuse (Akmatov, 2011). Child abuse has been associated

with a range of negative emotional and behavioural outcomes, including depression, anxiety, aggression, and anti-social behaviour (Gershoff 2002; Butchart et al., 2006). Yet, these outcomes have been shown to persist into adolescence and adulthood such that children who experienced any form of abuse are more likely to become perpetrators as well as victims of other forms of violence later in life (Bender et al., 2007; Fang & Corso, 2007).

Contrary to the general notion that use of physical and psychological punishment is socially and culturally entrenched, evidence from the UZAZI AVSI parenting skills programme and the Parents Make the Difference programme shows that parenting interventions even for short periods of training are effective at changing how caregivers discipline their children. Since most of the violence against young children occurs in the context of discipline, the findings suggest that targeted parenting interventions can be effective in changing disciplinary practices and, in particular, reducing the use of violence as a form of punishment, even in contexts where such forms of punishment are highly normative. Leading agencies in fighting violence against children (and women) such as UNICEF, Save the Children, among others appreciate the need to shift from focusing only on awareness raising through sensitisation programmes to including skills building interventions that equip parents and caregivers with concrete techniques that they can use to nurture their children's behaviour without using physical or psychological violence.

Parent-child relationships

Module 3 of UZAZI's parenting skills training programme focused on improving parent-child relationships. During the training, caregivers were exposed to the best techniques of parent-child communication and how to deal with sibling rivalry. Thus, an improved parent-child relationship was another expected outcome

of the parenting skills training programme. In the evaluation, the parent-child relationship was assessed on 15 items from the Child-Parent Relationship Scale (CPRS) (Pianta, 1992). The CPRS assesses parent's perceptions of the relationships they have with their children. The CPRS measure has two sub-scales; a conflict sub-scale (assesses the extent to which a parent feels that the relationship with their child is characterised by negativity), and a closeness sub-scale which measures the degree to which a parent feels that the relationship with their child is characterised by open communication, warmth and affection (Driscoll & Pianta, 2011).

Indicator Variable	**Control Group (%)**	**Intervention Group (%)**	**p-value**
Closeness CPRS Sub-scale			
Affection and warm relationship with child	318 (94.6)	278 (92.1)	0.0929
Provide comfort to child	294 (87.5)	282 (93.4)	0.047
Child values child-parent relations	302 (89.9)	279 (92.4)	0.2434
Child freely shares information with parent	298 (88.7)	264 (87.4)	0.4827
Child openly shares feelings and experiences	290 (86.3)	268 (88.7)	0.8799
Conflict CPRS Sub-scale			
Parent has constrained relationship with child	86 (25.6)	61(20.2)	0.0701
Child remains angry when disciplined	52 (15.5)	37 (12.3)	0.0918
Very draining dealing with children	44 (13.1)	30 (9.9)	0.0869
Manipulative child	94 (28.0)	71 (23.5)	0.0524

Indicator Variable	Control Group (%)	Intervention Group (%)	p-value
Child uncomfortable with physical affection	99 (29.5)	98 (32.5)	0.1323
Child easily becomes angry at parents	307 (91.4)	128 (42.4)	0.0312

Table 6.2: Effect of parenting skills training on parent-child relationship

Source: *Computations based on evaluation survey data*

The results in Table 6.2 show the proportion of caregivers who responded 'definitely true' to questions relating to the CPRS measure. For some subscales, the intervention group was statistically different from the control group – the caregivers who did not take part in the training. Caregivers in the intervention group scored better on the closeness CPRS subscales such as 'providing comfort to children' but had lower scores on the conflict sub-scale.

The children's perception of the parent-child relationships was also assessed using six items from a modified version of Epstein and McPartland's (1977) Family Decision-Making Scale (FDM). The measure included three items to assess children perceptions of parental control and power assertion in their relationships. It should be noted that this construct does not represent the positive aspects of parental control, such as monitoring and supervision. Rather, it measures the amount of parental autocratic domination of the relationship. It also included three items to measure the perceived opportunities available for children to participate in decision making in the home together with the parents. Surprisingly, there were no statistically significant differences between how children in the control and the intervention group perceived their relationships with their parents/caregivers (Table 6.3).

Indicator Variable	Control (n=141) (%)	Intervention (n=189) (%)	p-value
My parents want me to follow their directions even if I disagree with their reasons.	115 (81.6)	159 (84.1)	0.2702
I have to ask my parents' permission to do most things.	128 (90.8)	172 (91.0)	0.4721
My parents get upset if I disagree with them when their friends are around.	109 (77.3)	155 (82.0)	0.1459
My parents trust me to do what they expect without checking up on me.	108 (76.6)	151 (79.9)	0.2361
My parents encourage me to give my ideas and opinions even if we might disagree.	101 (71.6)	143 (75.7)	0.2054
I take part in making family decisions about me.	38 (26.9)	59 (31.2)	0.1039

Table 6.3: Effect of parenting skills training on child's perceived relationship with parents

Source: *Own computations based on survey data*

The expectation was that because of the training caregivers had gone through, children in the intervention group would perceive their relationship with their parents to be better than their counterparts in the control group, but the differences between the two groups were not statistically significant. This implies that the training had not significantly affected the way children perceived their relationship with parents with regard to aspects of family decision-making processes.

Nonetheless, a slightly high proportion of children in the intervention group reported having better relationship with their

parents/guardians. This is further supported by a few of the voices from some FGDs:

> Our relationships with our children have drastically changed; children share with us, obey us and trust us more. They now love us more. Before [the training], we used to cane them extensively but now we cane them like three canes and they can easily understand their mistakes. When children are extreme, we involve aunties and uncles. If a child is to be good, he will be good, if he wants to go bad, he will. We even no longer deny them food, even after caning them, we have to make sure that they have eaten. (FGD with Female caregivers Bushenyi District).

> Friendship with my kids has improved, they listen to me more than before, they respect me and brag about me with their friends, now when I tell them not to do something, … they trust me more than before. For example, one of my kids had refused school, but I talked to him, he got peaceful and went back to school SCORE [the UZAZI AVSI training] has benefited us so much. (FGD with Female caregivers Bushenyi District).

There is evidence from the impact evaluation of the parenting skills training programme to suggest that such training improves the relationship between parents/caregivers and the child. In part, through such trainings, caregivers are exposed to effective communication, which helps them to interact with and understand better the needs, feelings and experiences of the child.

Evidence from a parenting programme in rural Liberia showed that parents in the intervention group had developed a closer relationship with their children following participation in the training programme (International Rescue Committee, 2014). The caregivers who were trained had developed more positive relationships with their children, including spending more time talking and playing together. The increased interactions with their

children stemmed from the caregivers' improved communication skills and decrease in harsh parenting behaviours, which in turn resulted in children being less fearful of and more comfortable with their caregivers. The International Rescue Committee's study in Burundi, also found a significant decrease in the use of harsh punishment among participants who received parenting skills training in addition to an economic intervention (Annan et al., 2013).

Parenting interventions which are grounded in behavioural theory provide caregivers with techniques to nurturing caregiver–child interactions which in turn promote positive developmental outcomes. Parenting skills development interventions have been shown to reduce abusive parenting and neglect, and promote positive caregiver–child relationships (Chaffin et al., 2004; Prinz et al., 2009).

Effect of parenting skills training on child welfare

The ultimate goal of the UZAZI AVSI training programme was to improve child welfare through positive parenting. The training aimed at creating awareness about positive parenting by the participating caregivers, making them more responsive to child welfare needs. In the evaluation, child welfare was defined from three perspectives: child protection, education, health and dietary intake.

The parenting skills training programme was expected to lead to caregivers being more concerned and in position to allocate more resources to provide for these welfare dimensions. Module 1 of the training focused on appreciating the parenting roles and knowing the child's needs. Caregivers reflected on the material needs (food, shelter, education, health, etc), social needs (family, friends, culture, religion, etc) as well as psychological needs (parental love and care, values and beliefs, spiritual guidance, recognition, respect, freedom,

etc). Given this exposure, caregivers in the training were expected to be more likely to provide for the needs of their children.

During the evaluation of the training programme, caregivers in the control and intervention group were asked a set of questions on how they felt they were providing for the material, social and emotional well-being of children under their care. The set of questions focused on among other things, adequate food provision, provision of education to all children equitably, healthcare services and child protection. The responses were ranked from 1 to 3, with score 1 denoting that a caregiver did not care at all to provide for the child score 2 that a caregiver only provided occasionally and score 3 that the caregiver always provided for the child. Sample questions on nutrition included: "Do you provide enough food for the family?" and "Do you always give sufficient amount of food to all children in the home?." It should be noted that the questions were subjective in nature and therefore the responses reflected the perceptions of the caregiver and depended on the different socio-economic circumstances.

Table 6.4 shows the proportion of caregivers reporting always providing for their children for a range of welfare indicators. With the exception of food provision, caregivers who attended the training were significantly more likely to provide for their children in terms of education, emotional support and considering the opinions of the child in decision making within the home.

Welfare indicator	**Caregivers in the control group**		**Caregivers in the intervention group**		**p value**
	Number	**%**	**Number**	**%**	
Provides enough food for the family	303	84.2	245	72.7	0.001

Welfare indicator	Caregivers in the control group		Caregivers in the intervention group		p value
	Number	%	Number	%	
Gives sufficient food to all children in family	305	84.7	254	75.4	0.002
All school-going children being enrolled	310	86.4	303	89.3	0.013
All children going to equally good schools	275	76.4	275	81.6	0.019
Checks on children's performance in school	206	58.9	197	58.5	0.151
Believes education is an important investment for all children in the family	350	97.5	329	97.6	0.279
Believe education is important for all children in the home	346	97.4	334	99.1	0.016
Provides adequate beddings for all children	265	93.6	233	69.1	0.007
Provides emotional support to all family members	285	79.2	273	81	0.753
Considers children's opinions in decision making	165	54.2	231	68.6	0.001
Seeks prompt treatment for all family members	327	91.1	299	88.9	0.541

Table 6.4: Caregivers' reported responsiveness to child welfare

Source: *Computations based on evaluation survey data*

Cases where the caregivers who had trained were performing relatively poorly or not differently from those who had not participated in the training may be associated with the impact of

the training on caregivers' perceptions. For example, relatively fewer caregivers who participated in the training perceived themselves as providing adequate food to their children. This could reflect their realisation following the training that the number of meals per day and/or amount and type of food the children were receiving is below that recommended for proper nutrition.

Impact of parenting skills training on child welfare: children's perceptive

A selected number of children from the intervention and control group were asked to give their views on how they felt their material, social and emotional/psychological needs were being met by their caregivers. The welfare measures were similar to those assessed with the caregivers; namely: dietary intake, education, and health and child protection. Interestingly, the perceptions of the children were very similar to those of the caregivers as shown in Figure 3. Relatively fewer children from the intervention group (where caregivers had trained) felt they were receiving adequate food as compared to those in the control group. This implies that children whose caregivers had participated in the training reported significantly lower levels of satisfaction with their current experiences of food and nutrition intake.

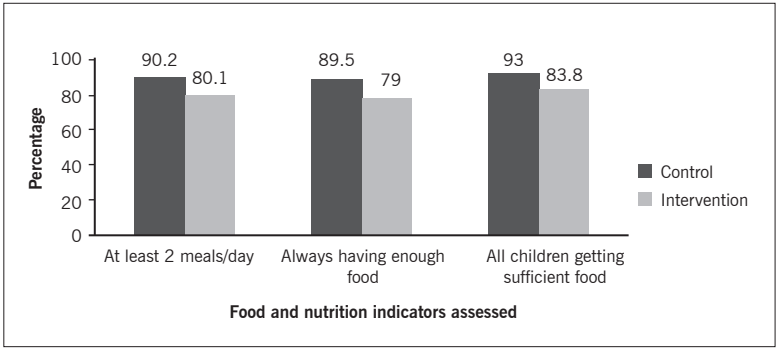

Figure 3: Children's perception of nutrition wellbeing

Source: *Computations based on evaluation survey data*

It may not be entirely surprising that children in the intervention group expressed a lower level of satisfaction with current food and dietary intake. During the training, caregivers were encouraged to give an opportunity to children to express their needs and how they felt emotionally. Through this process of child-parent interaction, children would get empowered to identify their needs, rights, roles and responsibilities. Therefore, the findings of the evaluation could reflect differences in awareness of rights and needs by children in the control and intervention group.

There was no significant difference between the two groups with respect to other welfare indicators (child protection, education and health). It is worth noting that majority of the children felt secure and loved in their homes and there were very minimal levels of sexual abuse (<2%), but one in five children reported experiencing physical abuse. However, the reported levels for most of the child welfare indicators explored in the evaluation was in the range of 70-95 percentage points from both the caregiver and child perspective.

It is worth noting that the quantitative assessment of the self-reported responses from the children regarding their welfare reflect that the intervention made minimal changes on especially food and nutrition. However, from the focus group discussion and change stories from caregivers who participated in the training, some reported sufficiently providing for their children's needs following the training:

> The training has really impacted us. Initially we had bad situations and because of poverty we got frustrated and at times we shouted at a child over something very small. Sometimes they (children) came asking for food yet it wasn't available and so they met a shout so that they would back off. But now, the situation has changed, food is available and we live in harmony. From school they find food and they do their chores and

> their homework. There is peace at home now, it's a changed situation. (FGD participants from Entebbe Town).
>
> For me I just thank the SCORE project for the great work they have done. Many things have changed as a result of the (UZAZI AVSI training) project. Initially parents didn't want to pack school lunch for their children. But when SCORE came, they (parents) became aware that they would be prosecuted for failing to feed their children at school. So, as a result most of them started paying for their children's school feeding program. (FGD with caregivers, Mayuge District).

These contrasting views underscore the importance of assessing programme effects from the view point of all key stakeholders before firm conclusions can be drawn. It also shows that children's views about the level and quality of their own welfare may be different from what their caretakers' perceive.

Conclusion

This chapter presented the outcomes of the UZAZI AVSI parenting programme on parents and children. It highlights the results of an evaluation study of the impact of the parenting skills training programme on caregivers' knowledge of generally acceptable parenting styles, the behaviour of caregivers following the training, and ultimately the effect on child welfare. The parenting training programme theory of change presupposes that parenting skills training leads to increased parenting knowledge, which in turn results in improved parent behaviour and improved parent-child relationship and ultimately improved child-wellbeing.

The evidence from the evaluation and a review of studies in other settings shows that parenting skills training interventions do improve caregivers' parenting knowledge, which is also reflected in improved parent behaviours. This study and studies in Liberia and Burundi have showed that caregivers who took part in parenting

programmes were more likely to display positive parenting than their counterparts who did not receive the training. Those who trained were also less likely to use physical and psychological abuse while disciplining their children but instead adopt other more positive ways of instilling and enforcing discipline without reverting to physical harm.

Overall, parenting skills training programmes have been shown to result in positive outcomes in terms of improving parenting behaviour, with caregivers adopting more authoritative and supportive parenting styles. They also encourage caregivers to use alternative ways of dealing with child misbehaviour other than physical or psychological harm of beating spanking or yelling which affect the self-esteem, cognitive function and childhood development outcomes overall. The parenting interventions also do result in improved welfare of children since caregivers become more aware and take greater responsibility in their parenting roles to provide for the material, psychological and social needs of the children and the family more generally. It should also be noted that the interventions may be affected by factors which may be beyond the control of the programme implementers such as seasonal changes in the communities that could affect food production, other on-going programmes that could positively impact parenting in control areas and the social cultural belief systems in the areas. Continued implementation of parenting interventions and their measurement in the long term would provide a clear picture concerning the sustainability and the long term impact of the interventions.

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CHAPTER SEVEN

Lessons and Conclusions for Improving Parenting in Uganda

Mother and daughter preparing vegetables for a meal

Lessons and conclusions

This chapter presents the key learning lessons and conclusions which are relevant for both research and practice. The reader, depending on the area of speciality, is challenged to explore a range of core themes for research, advocacy and to consider innovative interventions

that could help promote family unity and for parents to fulfil their parenting responsibilities.

The book has provided a national context and state of parenting in Uganda. It has introduced the concept of parenting to help readers understand the dimensions that make parenting successful or unsuccessful. Despite increased attention on the subject, policy and programming commitments are still limited at the national level. The government's contribution towards the family unit is still minimal thereby relying mostly on non-government organisations, cultural and religious institutions to implement programmes that strengthen the parenting component within the family. While the country works towards implementing multiple programmes that cut across the various domains of the child's well-being; it has become clear that many of these efforts will not yield sustainable achievements without focusing on the family unit and more so, pursuing efforts that empower the households to be able to function and fulfil its obligations towards the members of the family.

This book carries a number of implications for policy and practice in the field of parenting. Various studies and primary data have revealed issues that either directly or indirectly affect parenting behaviour in Uganda which ought to be prioritised and have socio-economic, cultural and legal implications. Such implications provide an opportunity for governments and key stakeholders to learn from and align family focussed policies and programmes. First, it was revealed that many parents in contemporary Uganda give birth without thinking critically about what it entails to give someone a fulfilling childhood. In other words, many parents are usually not ready to face the challenges and opportunities that come along with giving birth to children. As a result, children are abandoned, neglected, abused and others lose their lives. This indicates that parenting is not an obvious and easy activity or responsibility. Thus, parents need support including training tailored to prepare them even before giving birth. The support and

trainings should target various stages of child development. There are multiple phases for engaging with children which requires parents to know when to apply instruction, coaching, counselling, and dialogue etc. However, few parents understand what is involved in engaging with children at various stages.

The lady participant is now a counselor of couples in Itojo village.

Second, Uganda in general stands to suffer an identity crisis if the shaping of values at the family level is no longer effective due to poor parenting. It was revealed that many parents place more emphasis on the element of provision while ignoring other elements of parenting such as teaching the core values within the family, effective communication between the child and the parent and strengthening child-parent relationship. Primary data indicated that parents have delegated their parenting roles to televisions, domestic workers and teachers which poses further concerns to the country. As such, the cultural heritage is easily eroded with many children not knowing who exactly they are, and not able to communicate in

their mother tongue and adopting cultures that are in conflict with their social-cultural and economic settings. Government should strengthen the enforcement of particular teaching guidelines that allow children to study and communicate in their mother tongue at an early age. In line with this, education shouldn't erode the cultural heritage, instead, it should preserve as well as enhance it.

The authors also identified some few initiatives in support of positive parenting in Uganda. These initiatives intended to serve as a precursor to the discussion of the UZAZI AVSI Parenting Model which was the major focus of this volume. The illumination on the initiatives made it possible to explore although not in so much detail, the variety of innovative approaches used by mostly non-governmental organisations to address the major parenting issues facing Uganda's families. It also made it possible to identify which components or areas of parenting are given much attention in programming. A majority of the initiatives target the elimination of harsh disciplinary practices by parents – a practice rooted within the cultural practices and mostly considered appropriate or normalised. Others prioritise child care practices including paying attention to early child stimulation and learning, child feeding practices and the involvement of fathers in the parenting role. We scarcely discussed the efficacy of these parenting interventions albeit where possible mentioned a few outcomes. We noted that parenting initiatives have not been replicated or scaled up yet there were indications that they can greatly improve on parenting practices and child welfare. The limited resources to support such initiatives calls for government direct involvement in taking interest and generating evidence where it is missing on some initiatives and supporting the scale up of those that seem to be effective.

The evidence adduced on the UZAZI AVSI Parenting Model shows that the intervention resulted into positive outcomes for parents and children particularly in terms of improving parenting behaviour, with caregivers adopting more authoritative and

supportive parenting styles. The intervention further impacted care givers' practices leading to use of alternative ways in dealing with child misbehaviour other than resorting to physical or psychological harm, beating, spanking or yelling which affect the self-esteem, cognitive function and childhood development outcomes for children. The parenting intervention also resulted into improved welfare of the children since caregivers became more aware and took greater responsibility in their parenting roles to provide for the material, psychological and social needs of the child and the family more generally.

The evidence from the evaluation and a review of studies in other settings showed that parenting skills training interventions do improve caregivers' parenting knowledge, which is also reflected in improved parent behaviours. UZAZI AVSI programme and studies in Liberia, and Burundi showed that caregivers who took part in parenting programmes were more likely to display positive parenting than their counterparts who did not receive such training. They were also less likely to use physical and psychological abuse while disciplining their children but instead adopted other more positive ways of instilling and enforcing discipline without reverting to physical harm. However, experience from the UZAZI AVSI programme suggests that future parenting skills training interventions should be made more systematic and include more stages such as pre-testing of tools, facilitators engaging trainees during home visits, integrating psychosocial support activities into training sessions to improve activity and attention and formation of parent support groups to continue the effect of the intervention to the wider community. The parenting interventions should also integrate sessions that equips trainees with facilitation skills to enable them effectively continue the sharing of the contents with other community members as a sustainability strategy.

From an evaluation point of view, the seemingly contrasting views between caregivers and children regarding how child welfare

is being addressed shows the importance of assessing programme effect/impacts from the view points of the key stakeholder before making firm conclusions about the level of impact achieved. In addition, understanding the local context within which the programme was implemented is important in interpreting and generalising the results of the programme evaluation.

Recommendations

The UZAZI AVSI parenting skills training programme should be replicated in other areas given the wide evidence on the impact of the training on improving parenting practices and child welfare. The evaluation relied on a control-intervention design approach due to lack of a comprehensive baseline survey. The design of similar training programmes in future should include a baseline survey to avoid the potential bias of using a control group in evaluation of programme impact. Many of the trainees were female, however, given the pivotal role of men in decision-making regarding family welfare, future trainings should consider including more men to maximise impact.

A reflection of the UZAZI AVSI parenting programme, brings out some areas where the difference between intervention and control areas was not significant. The evaluation could not ascertain whether this was a result of limitation in the training content on those aspects or a result of other intervening variables. However, for purposes of improving the training programme and delivering it again, it is important to reflect on those areas and consider improving the content as well as training delivery. Issues like relationship building between the child and the parent and improving children's overall welfare are still critical.

There should be deliberate government programmes that reflect on parenting. Parenting is discussed as a subject of concern but not as a topic of for serious programming interventions in the case of

Uganda. It is discussed more profoundly when children experience abuse. There is need to have parenting considered in different contexts including conflict settings, urban or rural setting, peaceful settings and resource constrained settings. Underlining positive parenting as one of the priority programmes will help build a stable, peaceful and loving family and nation. It promises minimising negative practices including domestic violence, fraud, child abuse, corruption, and other practices that result into emotional and sexual abuse of children.

Wider sensitisation of parents on the need to commit more time to parenting is needed. Parents ought to give in more valuable time to their children and take into account the interests of the children. They should not throw away their responsibilities to schools. Instead they should be in position to carry their cross with full support from family, community and government systems. This is possible if parents are motivated to gain more knowledge about parenting even before they become parents. Parents need to appreciate that situations have changed; what might have worked for some parents previously might not work for them today. Thus, there is need to acquaint themselves with new parenting knowledge to understand the prevailing dynamics.

Religious leaders should be vigilant in preparing and helping young people to learn parenting skills e.g. during marriage counselling sessions for partners preparing to get married, focus is very much put on bedroom issues forgetting that children are a product of bedroom activities. Therefore, religious leaders shouldn't only focus on bedroom matters while preparing a couple for marriage, instead they should also guide the couple on parenting skills.

We shouldn't assume that anybody can be a parent. There should be compulsory parenting classes. The government should wake up and ensure all parents in Uganda undergo parenting training. Institutions should begin training their staff about parenting.

Worth noting is the economic status of parents in Uganda today. Various participants and even existing literature pointed to the relationship between poverty and poor parenting. There is need to focus more broadly on structural factors perpetrating poverty because when you talk to most parents or witness what is happening in families, poverty is one of the main challenges. This is not to suggest that if you are poor you definitely have to be a poor parent as well, but the reality is that parents are struggling to provide and yet provision is one of the parenting responsibilities. In the course of struggling to provide, other elements of parenting are neglected. A household which is economically distressed is likely to have parenting deficits because even if you want to improve the moral and cultural aspects, often this will involve some financial demands. Therefore, there is need to improve household incomes to reduce household poverty. It is our belief that if poverty can be reduced, then parenting will improve a great deal for many families.

The field of parenting should be explored more. There is need to understand how positive parenting can be achieved in a more structured way for it to have an impact. In addition, to make effective initiatives adaptable, if one organisation comes up with an initiative that is proven and tested, efforts should be put in place for such an initiative to be taken up. By doing so, the parenting field will be supported to grow and also see where synergies can be built within programmes and among actors.

Future research

Although mothers play the dominant role in the whole domain of parenting, it is always important to capture as well as secure the involvement of men. This is because in most African societies, men/fathers still play a major role in making key decisions. To build a balanced family, the involvement of men in child care activities is critical. Yet men are also increasingly taking on the role

of child care especially where fathers are looking after children and where men are living alone with their children. However, from a research and programme point of view, it is important to find out if increasing the number of men in parenting classes, and men's parenting responsibilities could improve the parenting outcomes more drastically.

Besides involving more men, future research should include more children especially the older ones, and find out how best the children can participate in creating a conducive parenting environment.

Parenting champions in Uganda should also consider conducting a study on the impact of spousal disagreements to parenting.

In conclusion, the parenting role is changing and being challenged by a number of factors many of which, parents have limited control over. However, the sensitivity and awareness of parents, and their availability in the lives of children, will ultimately make a difference in determining the fulfilment of the roles and contributing to children's positive development outcomes. There are attributes in the distant past that we need to reclaim and build upon in child upbringing while, there are those that need to be discarded. Parents are being challenged to step up and reclaim their children in a rapidly changing world or else to lose them to the world.

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Parenting Initiatives in Uganda provides the state of affairs of parenting in Uganda. It explains the conceptual and theoretical underpinnings of good parenting practices and highlights the changing role of parents and suggests ways to improve research, policy and programming regarding parenting and children's wellbeing in Uganda.

It is based on research and scholarship on parenting. It draws attention to key approaches in the practice of parenting and demonstrates their relationship with child development. It presents parenting skills crucial for successful parenting, points out factors influencing parenting and gives examples of practices in Uganda.

This book is intended for researchers and educators on issues of parenting, social work practitioners and government ministries responsible for children and the family institution, and other stakeholders.

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