Community's Perceptions and Strategies to Prevent Violence Against Children in the Home, in Kampong Cham Province, Cambodia

Munin Neang

Supervisor: Sari Andajani, PhD

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Attestation of Authorship

"I hereby declare that this submission is my own work and that, to the best of my knowledge and belief, it contains no material previously published or written by another person (except where explicitly defined in the acknowledgements), nor material which to a substantial extent has been submitted for the award of any other degree or diploma of a university or other institution of higher learning."

Signature ....   Date: September 31, 2020

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Acronyms:

- CNCC   Cambodia National Council for Children
- CCWC   Commune Committee for Women and Children
- DALY   Disability-Adjusted Life Years
- FGDs   Focus Group Discussion
- MPI   Multidimensional Poverty Index
- MoWA   Ministry of Women's Affairs
- MoSVY   Ministry of Social Affairs, Veterans and Youth Rehabilitation
- NGO   Non-Governmental Organization
- OHCHR   Office of the High Commissioner for Human Rights
- PTSD   Post-Traumatic Stress Disorder
- RGC   Royal Government of Cambodia
- SDGs   Sustainable Development Goals
- SEM   Social-ecological Model
- UN   United Nations
- UNCRC   UN Conventional on the Right of the Child
- UNICEF   United Nations International Children's Emergency Fund
- VSNP   Village Safety Net Program
- WHO   World Health Organization
- WCCC   Women and Children Consultative Committee

Abstract

Violence against children is a serious human rights and social and public health issue. According to World Health Organization (WHO), violence against children is "all forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child's health, survival, development or dignity in the context of a relationship of responsibility, trust or power" (Krug, Mercy, Dahlberg & Zwi, 2002, p.5). In Cambodia, violence against children is highly prevalent. Over half of Cambodian children experience violence against children and home is the most commonly place where violence against children occurs.

This study utilizes a participatory research methodology to explore community's perceptions and strategies to prevent violence against children in the home setting. Thirty participants, ten fathers, ten mothers and ten grandparents participated in Focus Group Discussions (FDGs) to share their perceptions, beliefs and practices relating to child discipline with respect to violence against children in home setting and discuss what the community can do to prevent violence against children in the home setting. The research used thematic analysis, and three themes were generated.

The results show that child discipline is core to help children walk on the right path. To encourage good behaviors, many participants use positive reinforcement methods while a few participants use deception, manipulation and physical punishment. However, to stop bad behavior, participants commonly give children advice accompanied with physical, and emotional punishment. Study participants were aware that using physical and emotional punishment are forms of violence against children and were keen to learn about positive and non-abusive parenting. Parents/caregivers wanted to learn some problem-solving skills and gained knowledge on child development and temperament. Parents/caregivers were concerned about the influence of alcohol abuse in violence in the home.

Three community-based strategies to prevent violence against children in the home setting were recommended by the participants. They were 1) raising community awareness about violence against children, regulations on alcohol consumption and community-based interventions.

CHAPTER 1: INTRODUCTION

1.1 Introduction

This chapter includes six sections. This chapter begins with introducing the problems with violence against children followed by the study's aim and scope. Section four discusses potential contribution of this research to the public health policies and programmes. Section five section includes terminologies and definitions. Section six summarizes the structure of the chapter.

1.2 Statement of Problem

After the genocide of the Khmer Rouge, between 1975 and 1979, Cambodia experienced a baby boom in which the population increased from six million to about 16 million in 2019 (Worldometers, 2019). Thirty five percent of the population are comprised of children aged between 0 and 15 (Child Fund, 2016). Violence against children happens every day and everywhere (World Health Organisation 2002). About half of Cambodian children aged below 18 experience violence against children (UNICEF, 2013). Violence against children cause many adverse immediate and long term ill/health issues in children.

This study explores concerns and solutions that parents/caregivers put forward to prevent violence against children in the home setting and communities.

1.3 Aim and scope of the study

This study aimed to explore perceptions, understandings, and strategies put-forward by parents/caregivers to prevent violence against children in home-setting in Cambodia. Fathers, mothers, and grandparents were invited to participate in this study. The participants answered four main research questions including:

1. What are the community's perceptions, beliefs and practices relating to child discipline and/ violence against children in the home setting?
2. What factors contribute to the practice of violence against children in the home?
3. How can communities play a significant role in preventing violence against children in the home?
4. What commitments and short (and long) term resources do communities have (or need) to prevent violence against children in the home?

1.4 The study's contribution to public health

The United Nations Convention on the Rights of the Child (CRC) in 1989 (Assembly, 2014) guaranteed the right for children to grow up in a safe and positive environment free from violence. Violence prevention is mandated in the recent 2016-2030 Sustainable Development Goals (SDGs). Violence links to various Sustainable Development Goals (SDG1): – no poverty; SDG3 – good health; SDG4 – equal education; SDG5 – gender equality; SDG10 – reduce inequality; SDG11 – sustainable cities and communities; and SDG16 – Peace and justice (WHO, 2016). In particular SDG16.2 was relevant to the global agenda in halting violence against children: "promotes peaceful and inclusive societies is to end abuse, exploitation, trafficking and all forms of violence against and torture of children" (UN, 2015).

A proverb states: "it is easier to build strong children than to repair broken men." (Frederick Douglass, 1817-1895). Prevention of violence at a very early age is a much more cost-effective strategy than dealing with troubled adults later in life (Grieshaber, 2017). Violence against children and trauma at home affects children's physical and mental development including children's normal brain development. Adverse Childhood Experience (ACE) is associated with disease and disability hence it is essential to provide children opportunities to grow to their best potential in their families and communities (Goldstein, 1976).

Figure 1.1: Adverse Childhood Experience Pyramid

https://drandrewrowland.files.wordpress.com/2014/04/ace-pyramid.gif
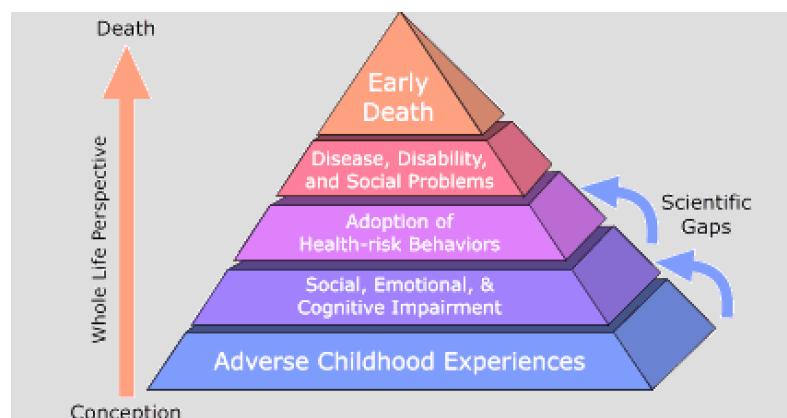
What occurs during childhood impacts on them across the lifespan. Here I argue for violence against children during childhood to follow this visualisation of the ACE. Violence against children will influence the children-adults whole life perspective and may affect their social, emotional, and cognitive development (Andrew, 2014). An adult

with early-age experiences of violence, is more likely to experience depression, be dependent on alcohol, experience sexual assault, drugs, and attempt suicide (Briere and Elliot, 1994; Feltitti, 1991; Kendall, 2002).

Andrews (2104) argues "It takes a community to protect a child from violence against children". My research sought to give parents/caregivers opportunities to discuss violence against children in the home and to provide strategies to prevent it.

1.5 Definition of terminology

- "Violence is the intentional use of physical force or power, threatened or actual, against oneself, another person or against a group or community that either results in, or has a high likelihood or resulting in, injury, death, psychological harm, maldevelopment or deprivation" (WHO, 2002, p. 5).
- "Physical violence is acts of violence such as being slapped, pushed, punched, kicked, whipped, or beat with an object, choked, smothered, tried to drown, burned, scalded intentionally, or used or threatened with weapon such as a knife or other weapon" (UNICEF, 2013, p. 17).
- "Emotional violence is defined as a pattern of verbal behaviour over time or an isolated incident that is not developmentally appropriate and supportive and that has a high probability of damaging a child's mental health, or his/her physical, mental, spiritual, moral or social development. Emotional acts of violence such as being told you were not loved, someone wished you had never been born or being ridiculed or put down" (UNICEF, 2013, p. 18).
- "A child" is referred to all human beings aged under 18 years old as stated in the UNCRC in article 1.
- Community-based strategies indicate the give and take between people and community health and to influence the politics and institutions that can impact the conditions causing poor health results for community level. In other word, this approach at local level engage community members to determine health risks and health outcomes for individuals (Cytron, 2010).

1.6 Structure of the thesis

This thesis is divided into six chapters. Chapter one is the introduction, which discusses the statement of the problem, the aims and scope of the study, the study's contribution to public health, definition of terminologies and the structure of the thesis. Chapter two is the literature review consisting of several sub-topics including the status of violence against children in the home, the distinction between violence against children and child discipline, impacts and risks violence against children, theories on violence prevention,

parenting styles, the status and context of violence against children in Cambodia, its major determinants and prevention; existing programs and policies. Chapter three is the research methodology. Participatory research framework is used guide the development of the research questions and data collection. Focus group discussions are used as the main data collection method. Section four discusses the study findings, evolving in three themes: participants' understanding, and perception of child discipline and common methods used; discrepancies between awareness and practice of violence against children, and intergenerational practice of violence against children. Participants' recommendation of strategies is discussed in chapter five, namely raising awareness about violence against children; regulation on reducing alcohol consumption and community-based intervention on violence against children. The final chapter is the discussion and recommendation chapter. The three main recommendation themes are discussed in this final chapter considering recent programmes and policies on violence against children in Cambodia and countries of similar contexts.

1.7 Summary

This chapter introduces the problem statement and the study aim. I decided to choose the topic of violence against children due to my personal belief that all children deserve a safe and happy life and to kindly care for and supported. All children should be free from all forms of violence and they should feel safe in their own homes. Parents/ caregivers who spend most of their time with children play important roles in providing good care and safe environments for their children. This study captures parents/caregivers subjective understanding and perceptions on violence against children and ask them to participate in the effort to stop violence against children in their homes and communities. The study is significant to Cambodia's public health policies and programmes, noting the high prevalence of violence against children in the country. This study supports the recent Sustainable Development Goals agenda ending violence against children. With the commitment of Cambodia to the Sustainable Development Goals (SDGs), the Royal Government of Cambodia in partnering with global societies, is committed to end violence against children. Finally, the chapter shows the structure of the whole thesis covering each of the six chapters.

CHAPTER 2: VIOLENCE AGAINST CHILDREN IN HOME SETTING

2.1 Introduction

Violence against children is a serious human right, social and public health issue in developed and developing countries (UNICEF, 2013a). Since 1989 (OHCHR, 2017) children are entitled to be protected from all forms of violence, as stated in the Convention on the Rights of the Child (CRC). The term violence against children is often used interchangeably with 'child abuse' or 'child maltreatment' in relation to children under 18 years old (UNICEF, 2010). The definition of violence against children varies, however, two definitions are commonly used. First, the World Health Organization (WHO) defined violence against children in its 2002 World Report on Violence and Health as "all forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child's health, survival, development or dignity in the context of a relationship of responsibility, trust or power" (Krug, Mercy, Dahlberg & Zwi, 2002, p.5). Second, another widely used definition of violence against children can be found in the UN Convention of the Rights of Children (UNCRC, 2018), defined in article 19 as all forms of physical or mental violence, injury and abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse. Further, within the global agenda, the prevention of violence against children, is a path toward more peaceful and inclusive societies, as set out in the 2030 Agenda for Sustainable Development Goal 16.2 (SDG 16.2) (UN, 2015).

The definition of violence against children is not accepted universally. Societies of different cultural and social norms define violence differently (Weisner, 2010). For example, in the East Asia and the Pacific region, the word "violence against children" be misunderstood and have an issue in translation. In this region, "violence against children" is often associated with the police, army and penal system (Nogami, Ennew, & Plateau, 2005). People do not commonly associate violence against children in home and/ school settings.

The World Health Organization (2014) reported that worldwide, one-fourth of all adults were abuse in the past, and physical and corporal punishment was the highest prevalence. Global data on violence against children is likely to be underestimated, due to poor reporting systems and varied definitions across cultures and nations. The estimates significantly rise as more information around the globe is obtained. A study involving 96 countries was reviewed systematically by Hillis, Mercy, Amobi, and Kress

(2016) and it was found that over half of children aged between 2 and 17 years old had experienced some types of violence. Children in least developed countries were five times more likely to be abused than those in developed countries (Mock, Peden, Hyder, Butchart & Krug, 2008). Globally, a home setting is the most common place where violence against children occurs than other settings (WHO, 2014). Studies showed that physical punishment against children is usually used with psychological or emotional abuse (UNICEF, 2010).

Cambodia is among those developing countries with a high incidence of violence against children. The most recent national survey in Cambodia showed that more than half of Cambodian children experienced physical violence, one-fourth of them were abused emotionally, and at least five percent of them experienced sexual abuse (UNICEF, 2013b). The home setting was the most common place where violence against children occurred (Fordham, 2005; Tearfund, 2006; UNICEF, 2013b). Factors contributing to violence against children in Cambodia are complex, and ranges from poverty, the nation's histories, including war, local cultural practices, and Cambodian laws and regulations (Miles & Thomas, 2009). The Ministry of Women's Affairs (MoWA) and the Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY) of Cambodia in 2017, launched an Action Plan to Prevent and Respond to violence against children 2017-2021, by drawing clear roles and responsibilities and activities to be handled by governmental and non-governmental organisations across all sectors including health, social welfare, education and justice (MoWA & MoSVY, 2017)., This Action Plan focuses on five key areas, comprising coordination and cooperation, primary prevention, multi-sectoral child protection response, law and policy formulation, and monitoring and evaluation (MoWA & MoSVY, 2017).

Community-based interventions such as strengthening the social cohesiveness of a neighbourhood, or strengthening families' social capital and programmes, implemented directly in the community such as in schools and religious institutions are believed to make a positive contribution to reducing the rates of violence against children (Tomison, 2002; Van Dijken, Stams & Winter, 2016).

This study invites community participation to give meaning and explanation to the practice of child discipline that at some spectrum may be regarded as violence against children in the home and for the community to explore strategies they deem central to address the issue of violence against children. Mothers, fathers and grandparents were invited to participate.

The next section focuses on the definition, context and existing debates on violence against children in the home setting.

2.2 Violence against children in the home setting

Weisner (2010) acknowledged that violence against children happens everywhere, but it is practiced differently across cultures and nations, for example, some argue for the level of violence against children to be different depended on the adults' perception on their toleration of violence. Some cultures may see violence against children in the home as a normal occurrence while other cultures do not tolerate it (Block, Poplin, Wang, Widaman, & Runyan, 2016). Place where children are born, grow and living has strong influence on parenting and childrearing practices and children's socialisation (Weisner, 2010).

Further, the term 'violence against children' can be easily confused with "child discipline" when it is being discussed in the home setting. There is no clear and universal definition of 'child discipline' In many cultures, child discipline is believed to be a way to support children to flourish for future citizens. In Japan, parents use child discipline as a means to teach children the rules of society, not to shame or cause problems for others (Uchida, 2012). A study in Canada defined child discipline as ways caregivers use to help children fit into the real world (Canadian Paediatric Society, 2004).

The child discipline method is believed to be an effective way to discourage unacceptable behaviours (Block et al., 2016) and to give an immediate effect to children's bad behaviours and to discourage children from repeating the same bad behaviours (Gershoff, 2010). However, without a clearly defined understanding of 'child discipline', it is hard to undertake cross cultural comparisons as well as to seek definitions of 'acceptable and unacceptable' child behaviours. At some point, one may argue what is the boundary between child discipline and violence against children (Kendall, 2002; Block et al., 2016).

"Acceptable" child discipline, therefore, is problematic and expressions of what constitutes child discipline varies between and within cultures (Block et al., 2016). In the United States, some parents would consider spanking with their hand as an acceptable discipline; but hitting with objects as being unacceptable (Whipple & Richey, 1997). Some cultures define violence against children based on the frequency of violent assaults and the age of children. In the United States, spanking children, provided it had not occurred for an average of 2.5 times within 24 hours was seen to be acceptable (Whipple & Richey, 1997). The perception that spanking is acceptable has not changed

much in the US. According to the 2016 General Social Survey (2002–2016), conducted by the National Opinion Research Centre at the University of Chicago, 76 percent of men and 66 percent of women aged 18 to 65 agreed that it is acceptable that a child sometimes get spanked. Another study looking into the perception of health and legal professionals in North Carolina suggested that spanking children less than eight months age was unacceptable, but more acceptable in older children (Block et al., 2016).

In other cultures, such as Brazil, Egypt, and Chile, most forms of violent discipline are unacceptable. Instead, they frequently use a non-violent child discipline approach to correct child behaviours, such as making them take "time-out", taking away privileges or rewards, and explaining and discussing with children about what is unacceptable behaviour, and developing learning strategies for children to choose the right behaviour (Mitchell, 2010; UNICEF, 2010; Block et al., 2016).

Children are vulnerable to violence at all settings because they are young and depend on adults, yet home is often reported as the most common place where children experience violence, including physical punishment and psychological aggression from family members, in particular parents or adult guardians (UNICEF, 2013a; World Health Organization, 2014).

In many cultures, caregivers may use a violent approach such as beating, threatening, and intimidating to stop children from performing unwanted behaviours and teach them self-control and acceptable social etiquette, attitudes, and behaviours. According to UNICEF (2017), 25% of caregivers worldwide believe in using physical punishment for raising and educating children. A report on 33 low-income and middle-income countries, including Vietnam showed that three in four children aged between two and 14 received violent discipline. Most often however, children would be given psychological discipline such as threats, intimidating and humiliation followed by physical punishment (UNICEF, 2010). An updated report from UNICEF showed that worldwide, 75% of children aged between 2 and 4 years old got some forms of punishment and/ or emotional punishment from their caregivers on a regular basis (UNICEF, 2017).

As primary caregivers, parents have the strongest influence on children's perceptions about the world. Children who suffered pain and horror of violence in their early life would be very likely to see the world as a painful, stressful, violent place for the rest of their lives (Arnold & Fisch, 2011). Chronic child abuse perpetrated by parents over many years potentially will cause life-long trauma. Research has found that being exposed to violence perpetrated by the people to whom children first become attached (commonly their parents), will hinder children's help-seeking behaviour and trust of others because

of their lack of trust in adults. They may view others as no more trustworthy than their abusive parents (Arnold & Fisch, 2011).

The debates around child discipline as a form of violence against children have been ongoing for several decades. Some cultures see child discipline as an acceptable parenting method, while other cultures are strongly against child discipline especially methods involving corporal punishment and emotional denigration (LeVine, 2010) The next section discusses the impact of violence against children.

2.3 Impacts of violence against children

A lot of evidence shows violence against children causes adverse physical, psychological, social, and cognitive development, and that this will continue into their adulthood. Globally, due to violence perpetrated by adults, millions of children die every year (Devakumar & Osrin, 2016) or experience physical disability and emotional trauma and brain injuries leading to long-term impairments (Hillis, et al., 2017). Adults experiencing childhood abuse are also more likely to participate in risky behaviours such as harmful alcohol consumption, early sexual intercourse, and criminal behaviours (Devakumar & Osrin, 2016; Hillis, et al., 2017). Moreover, they may have poor relationships, poor problem-solving skills and may experience mental health problems (World Health Organisation, 2014; Hillis, et al., 2017). Also, childhood abuse may develop to chronic diseases later in life including cardiovascular disease, cancer, chronic lung illness, diabetes, overweight, and gastric ulcer illness (Hillis, et al., 2017). Each year, the Asia Pacific region loses US$194 billion due to psychological illnesses and common health risk behaviours attributable to child abuse (Dunne, et al., 2017).

2.3.1 Death and Injuries

The impact of violence against children ranges from small to severe injuries and homicide. Worldwide, thousands of children die annually because violence against children. According to Gilbert et al. (2009), violence against children was accounted for 0.6% of all deaths. A third of deaths were due to homicide, and 13% were because of injuries such as skeletal fractures, broken legs, and broken arms (Gilbert et al., 2009).

2.3.2 Behavioural, social, cognitive, and emotional problems

Research in the field of psychology found that violence against children is associated with children behaviours, social, cognitive, and emotional functioning in adulthood. Childhood violence is connected to alcohol abuse and drug abuse in adulthood (Kendall, 2002); smoking and eating disorders (Hillis, Mercy, & Saul, 2017); sexually transmitted diseases, teens pregnancy and unwanted pregnancy; sleeping problems (Kendall, 2002; Norman et al., 2012); and suicidal ideation, and attempted suicide (Gilbert et al., 2009).

Social problems associated with childhood violence may manifest in avoidance and intrusive behaviours and loneliness in adults (Kendall, 2002).

Cognitive development negatively impacted from childhood abuse, may relate to chronic excessive secretion of the stress hormone (cortisol) during growing up, which can weaken a child's immune system even lead to brain damage (Kendall, 2002); which may result in poor problem-solving skills (Hillis, Mercy, & Saul, 2017). Children who were abused are more likely to develop many types of mental illness including depression, anxiety, and post-trauma stress disorder later in their teenage or adult life (Norman et al., 2012; Hillis, Mercy, & Saul, 2017).

2.3.3 Economic Impacts

The amount of money spent on the consequences of violence against children including both short-term and long-term health costs is large (Pereznieto, Montes, Routier, & Langston, 2014). America alone lost an estimated $124 billion in 2008 because of non-fatal and fatal child abuse (Fang, Brown, Florence & Mercy, 2012). The cost of non-fatal child abuse for one victim is $50,000, higher than the cost of stroke, and $30,000 higher than the cost of diabetes (Fang et al., 2012). Fang (2015) in a UNICEF 2015 report, confirmed that the DALY (Disability-Adjusted Life Year) lost to health resulting from violence against children in Cambodia accounted for USD $161 million in 2013. This is regarded as a minimal estimate and excludes the loss of productivity, high levels of healthcare access, costs of the legal and justice system, and costs of welfare service. These and the costs of suicide attempts and illicit drug use resulting from child violence were excluded as these data were yet not available in Cambodia at the time of the analysis.

2.4 Theories on violence prevention

Violence against children is preventable. This section focuses on two different schools of thought: the individual-focus theories and the cultural-specific theories. Psychologists use the following theories: psychodynamic theory, social learning theory, and attachment theory to demonstrate the relationships of parents/ primary care givers and children. Often these theories cannot explain wider social circumstances' roles, including the economic, political, and wider cultural context that may explain the occurrence of violence against children.

The psychodynamic theory views a parental previous history of psychiatric disorder as a major cause of violence against children, suggesting that treating parents with mental illnesses could prevent violence against children in the home (Ammerman, 1990). Four important activities in these treatment programmes, include regular meetings with

parents supported to the child's psychotherapy, parental counselling (guidance), relationship treatment, and family treatment. These programmes are considered appropriate for distressed parents who experience uncertainty or negative thoughts toward their child (Oren, 2012).

Bandura's social learning theory argues that aggressive behaviours are learned across generations through processes of imitation and reinforcement (Bandura, 1977). Promoting non-abusive role models and positive behaviour is important to prevent violence (Bandura, 1977). Effective programmes to address violence against children includes giving praises, creating directives, being clear and reducing hostility to improve parent-child relationship (O'Connor, Matias, Futh, Tantam, & Scott, 2013).

Attachment theory stresses on the importance of the relationship between parents and children within the first few years of children's lives (Ainsworth, 1989). Unlike social learning theory pointing out that violence against children occurs as individuals learn by imitating adults or close kinship relationship, Ainsworth (1989) proposes that adults who use violence on their children are likely to have experienced insecure attachment with their primary caregivers during their own childhood in the first year of life, resulting in difficulties in their parenting skills and psychological functioning later in life. Attachment theory, basing on the nature of the interaction between parents and children, and positive expression of emotions, is applied across cultures in the Western middle class, Africa, and Asia. In the Western middle-class family, a child is given a lot of interaction opportunities to foster mutual understanding and positive ways of expressing emotions. In the non-Western cultures, children are socialized within an extended family and to be cared for by multiple caregivers so that children become familiar with them (Keller, 2018).

Not until 1979 did theorists start to recognize the importance of children and parents' social environment as being relevant in explaining violence agianstt children. Bonfrenbrenner (1979) introduced the socio-ecological model (SEM) to explore factors within a child's and parents' immediate social environment which contribute to violence against children and suggested solutions to prevent it. The SEM incorporated parent-children social, cultural, and developmental contexts in explaining and preventing child abuse. Diverse factors influence the occurrence of child maltreatment, including the individual factors (i.e. beliefs, attitudes, gender), interpersonal factors (i.e. family situation), and social, cultural, and political factors (i.e. law enforcement and regulation). Individuals alone are not solely responsible for the occurrence of violence against children. Wider social, political, and cultural determinants of violence against children beyond simply parenting practices or parent-child relationships are important (Weihe, 1989). For example, focusing only on the characteristics of the violence perpetrators can

be ineffective in stopping violence against children when the family's social environment remains unchanged (Germain & Gitterman, 1980). Some features of the social environment factors contributing to violence against children include living in poverty or experiencing stressful life events (Wiehe, 1989). The SEM acknowledges comprehensive and integrative strategies to prevent and respond to violence against children (Wiehe, 1989).

The other schools of thought on violence against children come from anthropologists. Anthropologists explain a lack of reporting of violence due to economic dependency, a victim-blaming culture, low status, breaking of family unity, fear of repeating violence, privacy and embarrassment, and low belief in the legal system and the police. Legal anthropologists draw attention to the importance of laws as a step forward for change at a deeper socio-cultural level (Bartolomei, 2015). For instance, in 1979, Sweden banned corporal punishment by caregivers. Although it was difficult to determine the impacts of this policy, a study was conducted in 1994 and found a significant shift in public support for corporal punishment; from 53% in 1965 to 11% in 1994. This evidenced the impact of laws and regulations on changing the culture and social norms and practices on violence against children (WHO, 2009).

Within these broad theoretical spectra explained above, parents' behaviour and parenting styles came across as the strongest determinant of violence against children.

2.5 Parenting styles and risks of violence against children

The family considered to be the basic ecology that defines child behaviour through negative and positive examples or reinforcement. Psychologists note that risk of violence against children also depends on parenting styles. Diana Baumrind (1966), a psychologist and a pioneer of parenting styles classified parenting styles into three, comprising authoritative, authoritarian, and permissive styles based on the level of parental demands made and responsiveness.

She argued that each style is explained by different levels of parental responsiveness. Four criteria that define responsiveness include parents' maturity, expectation, disciplinary effort, level of supervision, and willingness to confront a problematic child (Baumrind, 1966). Simons, Simons, and Wallace (2004) define parental demand as monitoring techniques, direct confrontation, and discipline patterns. This means parents demonstrating a high level of demand toward their children are likely to employ a high disciplined approach, be more likely to confront their children for misbehaving, and apply high surveillance to their children's movement and behaviour. Parents with a low level of demands have low levels of confrontation, inconsistent discipline, and monitoring.

Regarding responsiveness, Baumrind (1996) determines its level based on communication, reward, and warmth. Parents who have a high level of responsiveness are those being able to communicate well with their children, provide rewards and a warm environment for them. Parents with a low level of responsiveness have poor communication, do not reward children for positive attributes, and do not see the need to give warm affection to their children.

Based on the level of parents' demands and responsiveness toward children, Baumrind (1996) described authoritative parenting as having a high level of demands on children and responsiveness. Parents with an authoritative style correct misbehaviour and encourage children's good behaviour. They are also able to have good and effective communication with their children. Children with authoritative parents have positive behaviour outcomes, such as having pro-social behaviours, respect, are attentive (Baumrind, 1996; Sarwar, 2016) and are less likely to experience parental abuse (Rodriguez, 2010).

Another parenting style – authoritarian- has a high level of demands on children, but a low level of responsiveness. Authoritarian parents set strict rules and put controls on children's behaviours but have poor communication with them. They put a strict 'no negotiation' rule on children's behaviours (Baumrind, 1996; Sarwar, 2016). As a result of this parenting style, children may experience harsh discipline or abuse as they fail to meet up their parents' expectation (Rodriguez, 2010; Sarwar, 2016).

Another parenting style, permissive, in contrast to authoritarian parenting, has a low level of demands on children, but high responsiveness. Parents with this style do not apply any clear rules to children's behaviour; they do not either give rewards for appropriate behaviour, nor punishment for inappropriate behaviour (Sarwar, 2016). In short, they do not apply any consistent discipline (Rodriguez, 2010). Yet, parent-child aggression often occurs within this parenting style which can result in violence against children (Rodriguez, 2010; Sarwar, 2016).

The parenting styles classified by Baumrind (1966) apply to either Western or non-Western nations (Montoya-Castilla, Prado-Gascó, Villanueva-Badenes, & González-Barrón, 2016; Sarwar, 2016; Rena, Abedalaziz, & Leng, 2018). Certain parenting styles, however, are more pertinent in a certain region due to differences in cultural norms and gender values and the region's social and economic development (Vafaeenejad, Elyasi, Moosazadeh, & Shahhosseini, 2019).

Regarding cultural differences, parents in China are likely to adopt an authoritarian parenting style, while American parents adopt an authoritative parenting style (Ng,

Pomerantz, & Deng, 2014). Chinese parents teach their children to conform to societal norms and expectations while American parents encourage their children to express their uniqueness and thoughts and feelings (Ng, Pomerantz, & Deng, 2014). In Ghana, children are expected to adhere to the values of respect, responsibility, and reciprocity. They have to be respectful and obedient to their elders and to look after their elderly parents. They are also expected to be responsible for collective work and economic activities, and to be observant of social reciprocity and harmony. Most Ghanaian parents practice an authoritarian parenting style (Twum-Danso, 2009).

Globalization also influences changes in the adoption of parenting styles. For example, compared to older generation parenting practice, Salehuddin and Winskel, (2016) found that younger Malaysian parents are adopting responsive, fairness, and consistent child-rearing practice with warmth and compassion. Likewise, the younger generation of parents in Cambodia, have gradually been adopting a hybridization style of parenting, combining authoritative parenting style with the traditional/authoritarian style (Czymoniewicz-Klippel, 2019). Traditional parenting in Cambodia is largely resembled the authoritarian parenting style, and it is likely to be influenced by Buddhism in Cambodia. Buddhism is an official religion of Cambodia. 95% of the population follow Thearavada Bunddism. In Buddhism, parents have five traditional duties to their children such as to protect children from evil doing, lead children on a good path, give good education, arrange marriages for their children and pass their inheritance to their children. Children also have five duties to their parents including supporting their parents when they are old, fulfilling parents' wishes and needs, keeping family traditions, getting their parents' inheritance and honouring their parents after they pass away (BBC, 2020). Czymoniewicz-Klippel (2019) however, failed to clearly explain how the hybridization parenting style differs from other types of previously defined parenting styles.

Different parenting styles can be gendered. For example, Parke and colleagues (2005) noted different parenting approaches used by fathers and mothers. Mothers are more likely than fathers to spend time (65 % - 80 %) with their young children. In Cambodia, fathers tend to endorse traditional/authoritarian parenting styles and traditional values. For example, fathers value boys more than girls. A girl is expected to be submissive and contribute to household chores. A son is given more freedom to explore outside the domestic sphere and are not expected to help with household chores) , norms, and social etiquettes. Mothers are more open to trying new parenting approach. The following section discuss the status and context of violence against children in Cambodian family life.

2.6 The status and context of violence against children in the home in Cambodia

In the Asia-Pacific region, Cambodia was the first country to conduct a nationwide survey on violence against children (UNICEF, 2013b) with 2,376 participants males and females aged 13 to 24 years old. Participants were separated into two groups, those aged between 13 and 17 who were asked about if they used to be abused in the past 12 months and those aged between 18 and 24 who reported the amount of violence they had experienced during their childhood, retrospectively. The survey showed over 50% of Cambodian children reported used to get some types of physical violence; 25% reported getting some form of emotional violence; and 5% had been sexually assaulted (UNICEF, 2013b). Another nationwide study was also conducted in 2006 by an international NGO - Tearfund with 1,314 children from an urban slum community in Phnom Penh city, a rural community in Kampot province, a provincial town community in Kampong Cham province and a border town on the Thai-Cambodia border-Pailin province. Similarly, 50.5% of boys (639 boys) and 36.4% of girls (671 girls) aged 13 to 15 reported experiencing some types of violence at home perpetrated by their parents (Tearfund, 2006). These findings concur with studies carried out in other countries such as Vietnam, Yemen, and Cameroon, where parents, mostly mothers, are the most reported perpetrators of violence against children (Tearfund, 2006; UNICEF, 2010; UNICEF, 2013b).Addressing violence against children in Cambodia, like in many other countries has been challenging, due to the complex interplay of social, cultural and political factors, such as the issues around the country's past history of war and ethnic violence, the level of education of the people of Cambodia, existing local cultures and norms around parenting and child rearing attitudes and practices; and ingrained poverty (Miles & Thomas, 2009).

Cambodia is one of the poorest countries in the ASEAN region. According to Oxford Poverty and Human Development Initiative (2017), 33% of Cambodians are living in poverty and 38% are living in rural areas. This poverty measurement is based on the Multidimensional Poverty Index (MPI) in which three main criteria are included such as education, health, and living standards. Poverty increases the risk of domestic violence, alcohol abuse, and family upheaval which directly or indirectly may affect violence in the home (Jirapramukpitak, et al., 2011; Bywaters, 2016).

One may also wonder how the past Cambodia's prolonged civil war have some influence to parenting styles and childrearing practices. Cambodia experienced a horrid and prolonged civil war with notorious genocide during the Khmer Rouge period (1975-1979). These days, the grave effects of this war are still in evidence; resulting in a large proportion of Cambodian suffering from post-traumatic stress disorder (PTSD), depression and anxiety which are all significant risk factors for violent behaviors. This

has been shown in two studies. A study by Field, Om, Kim and Vorn (2011) on parental styles in second generation effects of genocide stemming from the Khmer Rouge regime in Cambodia included 200 high school students who grew up with parents living in the Khmer Rouge regime. The results showed that their parents often had role-reversing and overprotective parenting styles, at the same time, experiencing depression, anxiety and/ PTSD. Another study by Field, Muong and Sochanvi (2013) investigated parental styles in the intergenerational transmission of trauma stemming from the Khmer Rouge regime, involving 46 high school girls and their mothers in Phnom Penh. Findings noted on these teenage girls having experiencing anxiety from their mothers who had developed PTSD during the Khmer Rouge time.

In 2007 the Cambodian government introduced the Civil Code. Article 1045 of this civil code mentioned a very vague definition of child discipline practiced by parents: " …the parental power holder may personally discipline the child to the extent necessary" (Afrooz, 2015, p. 18). This article reinforces parents' full authority to discipline their children. It however, failed to recognize and safe guard children from experiencing violence in the home. This civil law leaves parents' subjective perceptions of what "kinds of discipline are necessary". While some parents may say corporal punishment is necessary while others may see it as unacceptable act of violence.

Violence against children may fall within Cambodia Domestic Violence Law Number 422, enacted in 2005. According to the Domestic Violence Law (2005), every member in the family including dependents are protected from all kinds of maltreatment (Afrooz, 2015) However no penalty was clearly stated in this law; neither did it have any mention of which authorities are assigned to have the authority to address issues of domestic violence (Save the Children, 2015).

In Cambodia, when violence against children occurs at the home, it is very unlikely to be reported to nor for families to seek formal support. For instance, the Minister of Women's Affairs of Cambodia noted in a press conference in 2013 the absence of reporting of violence and abuse cases by victims to the court despite the existing 2005 Domestic Violence Law (Afrooz, 2015).

Different factors are taken into account when one decides to report violence against children in the home. For example, a decision to prosecute the perpetrators of violence is hampered by many factors; removing the father or mother may jeopardize family harmony, family economic survival and break family ties, especially when the perpetrators are the main source of income (UNHCR, 2001). Likewise, removing the child from his or her family may negatively impact the child's emotional and psychological

wellbeing, as the child might feel it is his or her fault and that he or she is being punished (UNHCR, 2001).

The UNICEF also found that Cambodian children and families are unlikely to seek formal support from authorities following violence against children (UNICEF, 2013b). Children are hesitant to report abuse by parents to outsiders because that are fearful of bringing shame to their parents (UNICEF, 2013b). Children are also lacking in knowledge, let alone, have the confidence in the authorities' ability to stop violence in his or her family (UNICEF, 2013b).

In 2015, Save the Children noted that when violence against children was being reported to authorities, the perpetrators were likely to be someone outside the family circle (Afrooz, 2015). Children were afraid to report violence if the perpetrators were close to them, such as teachers and parents (Afrooz, 2015). Studies also show that children opt for informal support from relatives, such as aunts, uncles and grandparents (UNICEF, 2013b & Afrooz, 2015) and not from outside family circle.

Butchart and Hillis (2016) argue for a safe family and community environment to be the major driver to prevent violence against children. Families, according to Tomison, are capable of preventing violence against children before it becomes serious (Tomison, 2002). In addition, Myers, an educator who studies child disciplinary practice argues that parents who have good problem-solving skills and parenting practices are more likely to use inductive strategies to discipline their children and to protect children and teach them safe practices to prevent them from being harmed by potential abusers (Myers, 2002). Also, grandparents' involvement in preventing domestic violence was noted by Sandberg (2016). For example, adult perpetrators were likely to be able to control their violent behaviour in the presence of grandparents due to their respect for their elders. Grandparents were often reported to intervene in violence directly through separating the victims from the perpetrators, contacting police and social services, or supporting women to leave their abusive and toxic relationships (Sandberg, 2016). Grandparent's support for victims may involve financial, material, and emotional support (Sandberg, 2016).

2.7 Major determinants of violence against children in Cambodia

Solutions for preventing violence against children reported in Western literature have been heavily focused on improving positive an effective parenting styles or approaches. For instance, strategies include addressing parents who are authoritarian or permissive in their parenting approach, as these have been predictive of violence against children

(Baumrind, 1971; Runyan et al., 2002). Details of parenting styles were discussed earlier in section 2.6.

The academic literature, however, clearly argues that the determinants of violence against children are complex, and it is not sufficient to only focus on parenting styles and skills (Kotchick & Forehand, 2002; WHO, 2013). The social context such as poverty, nation's history of wars and depression, culture and social norms, and laws/regulations on violence against children are interlinked and influence the practice of violence against children in the home (Kotchick & Forehand, 2002; World Health Organisation, 2013). The next section discusses the key social determinants of child abuse in the Cambodian context, focusing on poverty, history (war), culture and social norms, and laws and regulations.

2.7.1 Poverty

Cambodia is one of the poorest nations in the ASEAN region. According to Oxford Poverty and Human Development Initiative (2017), 33% of Cambodian people are living in poverty and most are living in rural areas (38.1%). This poverty measurement is based on the Multidimensional Poverty Index (MPI) in which three main criteria are included such as education, health, and living standards. Although violence against children may happen across all families, children from low-income families are more likely to experience violence against children (Runyan et al., 2002; Bywaters, 2016). Jirapramukpitak et al. (2011) found that prolonged stress caused by financial problems, unemployment, and family debts is associated with alcohol abuse and family violence which often lead to violence against children. Drunken parents can be very aggressive toward their children (Krug, Mercy, Dahlberg & Zwi, 2002; Wells, 2009).

Physical and sexual child violence is high among children who live with someone with an alcohol problem (Widom & Hiller-Sturmhofel, 2001). Parents who are alcoholic will easily lose their temper and get agitated by small irrelevant events, such as children spilling water from a glass or crying (Wells, 2009). Living with alcoholic parents may result in a child being neglected and abandoned (Wells, 2009; Jirapramukpitak et al., 2011).

Domestic violence resulting from poverty is another risk factor for child abuse. In the United States, children who are exposed to domestic violence are 15 times more likely to be physically abused and sexually abused compared to those unexposed to domestic violence (Volpe, 1996). In Asia like China, India, and the Philippines, children who live in

families with domestic violence are often maltreated when violence happens (Krug et al., 2002). Children are emotionally vulnerable when witnessing violence at home (UNICEF, 2006). Poverty and violence are often interlinked in explaining violence against children in Cambodia. Due to stress from heavy work, financial struggle, parents often do not have the time to spend quality time with their children. There are also reports of parents who sold their daughters to prostitution due to family poverty (The Asian Post, 2019).

Cambodia's past history of wars may also have an indirect or direct effect on the high prevalence of violence against children today.

2.7.2 The Khmer Rouge ethnic war in Cambodia

Not so long ago, Cambodia was a horrid killing field – when the Pol Pot regime took over Cambodia over three years. The rippling effect of this war continues to be seen today. Pol Pot was once the Prime Minister of a one-party state called Democratic Kampuchea from 1975-1979. It was when the country evolved as a communist country. During the Pol Pot era, urban people were forcefully relocated to countryside to work on collective farms. Following egalitarianism,Pol Pot abolished money and forced everyone to wear black attires. People who were identified as Khmer Rough were assassinated. More than 1.5 million died due to mass killing, malnutrition and poor medical treatment. Eight million people were violently separated from their families. Broken family structures and centuries of self-sustaining local traditions were destroyed by the war and will never return (Chandle, 1992). My mother, who was only five years old during that time, for instance, was forced to leave separately from her parents in Prey Veng province during the day and only return home to her parents at night time.

From 1975- 1979, people and children were living in constant fear; forced to do heavy work in the fields under the threat of a gun pointed at them 24/7. They suffered from malnutrition, malnourishment, and communicable diseases (Chandle, 1992). Children had to leave apart from their families. Adults and children were put to work in groups, categorised by age and sex (Chandle, 1992). Some children were taught as soldiers and spy on adults, creating rampant fears and distrust of each other (Münyas, 2008).

This four years of prolonged severe trauma under the Pol Pot regime resulted in long term damage of family structures and family relationships which continues to this day (Field, Muong & Sochanvi, 2013). Children were made orphans when their parents died due to hard labour and malnourishment, or were murdered (Chandle, 1992).

Today, survivors of the Pol Pot regime continue to report having nightmares and PTSD. Field and his colleagues (2013) conducted two cross-sectional studies, involving 46 high school girls and their mothers in Phnom Penh and another study with 15 clinically diagnosed having mental illness mother-child pairs and 17 non-clinical mother-child pairs (Cambodian-American refugees). The studies show the survivors of the Pol Pot regime have experienced some types of mental disorders such as PTSD, anxiety, and depression. Parents with that mental illness, (Om, Kim, and Vorn, 2011) are highly likely to be abusive to their children.

Wars have influenced how Cambodian parents may be overprotective or too anxious and too worried about the safety of their children (Baider, Goldzweig, Ever-Hadani & Peretz, 2006). Although parents may think that they are acting best for their children and are protecting them from any danger and harm, others, especially in Western culture, may see this as a form of child neglect as this hinders a child's full development and growth (Gere, Villabø, Torgersen & Kendall, 2012). Overprotected children will miss the chance to seek the world and experience new things or challenges, which make them flourish and develop social skills (Baider, et al., 2006). At the same time, overly anxious parents may raise anxious children, as their anxieties may be learned and internalised by their children (Gere, et al., 2012). Various cultural and social norms may protect or support the practice of violence against children.

2.7.3 Cultural and social norms

Cultures and social norms are rules and expectations of behaviours and thoughts that are based on shared beliefs in a specific group. Attitudes and social perceptions about violence against children vary across cultures. In this section, I include a discussion about culturally specific examples of child discipline or child rearing practice.

In some cultures, corporal punishment is regarded as an effective way to shape children's behaviour's; as such having a high prevalence of violence against children (Tran, 2008). When violence against children is seen as an acceptable child discipline practice, children tend to be more abused by members of the family over and over again (Runyan et al., 2002). In this culture, one would expect to find minimal laws and programmes addressing violence against children (Runyan et al., 2002).

In Cambodia, the prevalence of violence against children is amongst the highest in the ASEAN region, followed by Vietnam and Laos (Tran, 2008). In Cambodia, violence against children at home is considered a personal and family matter (Miles & Thomas, 2007). It is no surprise that the prevalence of violence against children in the home in

Cambodia continues to be the highest, compared to violence against children found where else such as schools (UNICEF, 2013).

Cambodian children are not made aware of unacceptable punishment or discipline, unlike children in developed nations like Canada, Denmark and New Zealand. While their peers in Canada learn from primary school some understanding of acceptable and unacceptable child discipline and where to access support when experiencing violence, Cambodian children are afraid of their parents let alone reporting abuse (Miles & Thomas, 2007). A popular Cambodian proverb tells to "do not grind an egg against a stone" (Miles & Thomas, 2007, p. 7), where 'an egg' represent 'a child' and 'a stone' represents 'a parent'; meaning a child should never argue with his or her parent, because he or she will never win. Therefore, children are vulnerable and afraid to disobey their parents.

2.7.4 Laws and Regulations relevant to addressing violence against children

In 1989, the Convention on the Rights of the Child (CRC) was introduced and ratified by 196 countries (OHCHR, 2017). The Cambodian government ratified the CRC in 1992, responding to the strong pressure from international communities and human rights activists (OHCRC, 2014). Article number 2 of the CRC states that "States Parties shall take all appropriate measures to ensure that the child is protected against all forms of discrimination or punishment on the basis of the status, activities, expressed opinions, or beliefs of the child's parents, legal guardians, or family members" (UNICEF, 2009, p. 15).

The Cambodian Civil Code (2007), Article 1045) states that "…parental power holder may personally discipline the child to the extent necessary" (Afrooz, 2015, p.18). Because the scope of discipline in Cambodia has never been clearly defined, this statement is open to multiple interpretation and parents may be allowed apply corporal punishment when parents deem it necessary.

Cases of violence against children may also fall within the jurisdiction of the Cambodian Domestic Law 2005, article number 2, which states that everybody in the family including dependents are protected from all kinds of abuse (Afrooz, 2015). Unfortunately, the law enforcement programme has been lacking and no significant progress has been made to address violence against children in Cambodia.

2.8 Preventing violence against children in Cambodia: existing programs and policies

In 1992, Cambodia ratified the UNCRC to protect children from all forms of violence. Under the Domestic Violence Law 2005 of Cambodia, acts of violence on persons living with the family, including husbands or wives or children, is forbidden (Afrooz, 2015). Article 943 (1) of Civil Code 2007 also states "members of a family shall respect each other's rights and freedom and shall support each other" (Afrooz, 2015, p.18). The 1993 Constitution of Cambodia, article 48 also notes the rights of children to include the right to life, the right to education, and the right to freedom from sexual or economic exploitation.

Following the CRC ratified in 1992, the Royal Government of Cambodia (RGC) has created a number of strategies and mechanisms at all levels for child protection. They include the formulation of the Cambodia National Council for Children (CNCC), Women and Children Consultative Committee (WCCC) and Commune Committee for Women and Children (CCWC) (World Vision, 2017). The Ministry of Women's Affairs (MoWA) and Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY) of Cambodia in 2017 launched a National Action Plan for 2017-2021 on Preventing and Responding to violence against children. This plan of action clearly defines roles and responsibilities and activities carried out by governmental and non-governmental organisations across various sectors including health, social welfare, education and justice at national and regional levels (MoWA & MoSVY, 2017). The action plan and its milestones were to be completed within four years. It focused on five key areas, comprising coordination and cooperation, primary prevention, multi-sectoral child protection response, law and policy formulation, and monitoring and evaluation (MoWA & MoSVY, 2017). Aligned with the action plan, MoWA (2017) introduced guidelines on positive parenting strategies (2017 to 2021) aiming at preventing violence against children perpetrated by parents, guardians, and caregivers. It also aimed to prevent violence against children perpetrated by other people including sexual and economic exploitation. Families who have important roles in children protection, with this knowledge, can therefore provide a safe environment for both physical and emotional well-being.

Another programme developed by NGOs within communities, such as the Village Safety Net Programme (VSNP) developed in 2002 was supported by Save the Children Cambodia. It focused on increasing community capability to support the national child protection system in Cambodia (Save the Children Norway, 2012). It was a community-based child protection program implemented in four out of 25 provinces such as

Battambang province, Siem Reap province, Kampong Thom province and Kampong Cham province. My study was conducted in Kampong Cham province, one of the programme sites.

The program aims at making a positive impact on child growth by preventing children from violence and trafficking. Child protection networks based in communities are an efficiency strategy as they potentially reach a high number of populations, help change social norms, and encourage local and national authorities to fulfil their duties to protect children (Wessells, 2009). VSNP is unique as it calls all adults together such as parents, children, teachers, NGOs, and authorities to distribute experience, worries, and ideas to help prevent violence against children and trafficking.

Four main activities were introduced to promote community empowerment. Adults and children were invited to attend workshops that foster the community's participation and voice. Communities' ideas were followed up and brought to the attention of leaders at the district level. For example, a three-day workshop was run with the communities to build the community's capacities to understand the three main topics of violence against children: sexual abuse/violence and trafficking, labour exploitation, and domestic violence. Children and adults were divided to discuss the topics separately but shared findings, commitments, and recommendations and strategies to make sure children are safe in their communities.

VSNP has been the only key programme addressing violence against children in the communities. This programme invites adults to take an active role in protecting children in the communities and gives a platform for children to have a voice and be involved in violence against children prevention strategies.

2.9 Summary
Violence against children has profound negative impacts on child development and growth, however, the government's efforts to stop violence against children continue to face complex barriers – violence in the home is often considered as a family and private matter. Parenting styles contribute to child-rearing hence the practice of violence against children. Parents with authoritarian and permissive styles tend to discipline their children violently whilst authoritative parents use reason to discipline children. Violence against children may reflect various social, socio-economic, and cultural, and legal contexts. In response to this social issue, child protection programs and policies to enhance caregivers' ability to raise children without violence and empower children's voices to

protect themselves from violence have been developed by both Governments and NGOs in many countries.

CHAPTER 3: RESEARCH METHODOLOGY

3.1 Introduction

This chapter is divided into seven sections. The first and second sections introduce the participatory research approach used in this study. The third focuses on the research preparation carried out in New Zealand prior to the field research in Cambodia. The fourth discusses the procedures undertaken when conducting the field research, including recruiting and training a facilitator, the FGD pilot with local people, community accessibility, participants' recruitment, organization of dates, times and venues for conducting FGDs, conducting FGDs, challenges encountered during the field research, and reflections. The fifth section is about research ethics. The sixth describes the method of data analysis followed by the chapter summary.

3.2. Participatory Research Approach

3.2.1. Overview

Methodology is defined as a contextual framework for conducting a research. It is a coherent and logical scheme based on views, beliefs, and values, that guides the choices researchers [or other users] make" (Kara, 2015, p.4). The research methodology chosen in this study is Participatory Research, which according to Stringer (2007), is a qualitative research aiming to discover how things occur and how research participants perceive, interpret and respond to a phenomenon or problem affecting their lives. This participatory framework has been widely used in social science research since the end of World War II (Brown-Sica, Sobel, & Rogers, 2010) as a way to improve and understand the world through changes (Baum, MacDougall, & Smith, 2006). It is utilized in many disciplines, including agriculture, industry, social work, education and health (MacDonald, 2012). Using participatory research framework, changes can be produced at different modes: such as developing researcher's and participants' critical consciousness, improving participants' lives and transforming structures and relationships in society (MacDonald, 2012). In this research I envisaged to use a "Bottom-up" or "Grassroots" oriented approach whereby it acknowledges the importance of stakeholders' involvement (participants) in a decision-making process or making suggestions for programme improvements. In this research, I believe that research participants are central to the explanations of the social phenomena being studies and they are continuously evolved in their understanding of that phenomena informed by changes in their social, cultural and political environments (Baum, MacDougall, & Smith, 2006; Stringer, 2007). In this research, I brought forward the experiences, views and aspirations of the parents and grandparents to share their life reality, challenges and to critically offer solutions to

problems. Their ideas might be quite distinct from those authorities or people who were in charge of policy and programmes making.

"Approach" in research includes a plan and procedures of data collection and analysis (Priya 2016). The data collection may use a qualitative approach or quantitative approach while analysis of the data can be inductive (qualitative) and deductive (quantitative) (Priya 2016). In participatory research approach, the data may include different individuals or subgroups and discussion of different points of view within communities such as by age, sex, occupation or social status (White, & Pettit, 2007). In this study, three groups of community members were invited to join in group discussions including mothers, fathers and grandparents to discuss their perceptions about child discipline and strategies to prevent violence against children in home setting.

3.2.2 Research methodology

This research aims at exploring "community's perception and strategies to prevent violence against children in the home". I chose to use participatory research framework for two reasons. Firstly, guided by a social constructivist paradigm, I believe that human knowledge is continuously evolving and influenced by human interactions with their surroundings (Baum, et al., 2006; Amineh, & Asl, 2015). Our understanding of the world, therefore cannot be detached from the cultural and social context of our society or the group where we belong or associate with (Amineh, & Asl, 2015).

Secondly, I endeavour for this research to be a 'strength-based' focus harnessing participants' capacity in critically exploring the problems and the practical and relevant solutions to improve relevant policies and programmes and to mobilize resources appropriate to the needs of communities (Jagosh, et al., 2012). Stakeholders are the drivers in my research (MacDonald, 2012), giving a space to build participants self-confidence, self-awareness and hopes (Baum et al., 2006). To emphasise, local people are regarded as the experts in their lives (Stringer, 2007) because no other people could understand the history, culture and local context influencing the problems better than the local people (Baum et al., 2006; Stringer, 2007; Mantoura, & Potvin, 2012). They, therefore, play a significant role as the actor or agent of change and solutions to problems occurring in their community (Stringer, 2007). Due to the focus of community members' participation in this study, problem-solutions gathered at a community level rather than an individual level are likely to become a cost-effective strategy to reduce violence against children in the home (Minkler, 2005). In contrast, failure to listen and understand

the perspectives of local people may lead to an ineffective intervention resulting in community's frustration and confusion. Children would remain suffer from the violence.

In this research, I focus on facilitating an environment that supports empowerment for community participants to critically reflect on their collective understanding of violence against children and support them - mothers, fathers and grandparents to offer appropriate solutions to address violence against children in their homes and communities. My study aimed to answer the following sub-questions:

1. What is the community's perceptions, beliefs and practices related to child discipline with respect to violence against children in the home setting?

2. What factors influence the practice of violence against children in the home?

3. How can communities play a significant role in preventing violence against children in the home setting?

4. What commitments and short (and long) term resources do communities have (or need) to prevent violence against children in the home setting?

3.2.3 Key principles of participatory research framework

I followed the four principles from Stringer (2013), namely relationship, communication, participation, and inclusion.

1. **Relationship:** the researcher must maintain close connection and build cooperative relationships with the participants to foster a democratic rather than a hierarchical environment. To build such relationships, the researcher should encourage people to get involved equally, try to avoid conflicts as much as possible, solve conflicts when they arise and create dialogues that make people feel accepted and safe to talk openly about their concerns and share their ideas.

2. **Communication:** effective communication is essential in this research. Effective communication makes participants feel self-worth, which in turn will maximize their involvement in group work. The researcher must make sure that information given is understandable, accurate, open, and appropriate. As an effective communicator, it is important for members of the research team to be active listeners, be responsive and use simple language and appropriate manners. He or she needs to keep participants informed with what is going on, and to be trustworthy.

3. **Participation:** Research participants must participate in the research process, including examining the nature and context of the problems, exploring, and making collective decisions about solutions. This will increase their confidence

and sense of ownership. Effective strategies to enhance participation may include: increasing their level of active involvement, providing them tasks to do, supporting participants to act for themselves, supporting them to accomplish tasks themselves, dealing with each individual rather than with representatives or agents.

4. **Inclusion:** This is to ensure that the often marginalized or under-served groups are invited to participate in the research so that their voices are heard, and they can take part in decision-making. Inclusive participation of diverse groups will likely ensure socially and culturally appropriate results that fit the diverse community.

In applying those four principles in this research, the researcher created a friendly and safe environment to make participants feel comfortable to openly share their thoughts and concerns.   Although the researcher and the recruited facilitator were also Cambodian citizens, they considered themselves as outsiders, and tried to communicate with the participants and local people all the time to create and maintain close collaboration, building a research team (between the researchers and local stakeholders) to ensure the relevance of the research and its methodology, data collection method, and interpretation of the data were relevant to the local context and aspirations of the participants (Jagosh, et al., 2012).

It is also important for me to be aware of the limitation of my own knowledge and my subjectivity and the remoteness of my values and life from the actual lived experience of participants in this study (Stringer, 2007). In this regard, as an outsider, I regarded myself as 'not having any expertise in the issue – violence against children discussed. Hence, my role focused on facilitating for the participants to develop their critical lens on the problems and build on their capacities to offer practical solutions to problems. I did not regard myself as the chief of the research. Participants invited are the experts who build their capacities critically explore the problems they face and decide on effective solutions (Given, 2008; Stringer, 2007; Mantoura, & Potvin, 2012).

Ideally, I would have liked my participants to be involved throughout the whole research process (Jagosh et al., 2012; MacDonald, 2012); however, due to the limitations of time, the researcher had taken the liberty to decide on the research topic and bring the topic to the community of interest to receive their input, understand the nature of the problem and provide practical solutions to prevent violence against children in the home.

This study aimed to provide a baseline to understand community's perception, beliefs and practices of child discipline versus violence against children and factors influencing

these beliefs and practices. Another aim of the study was to facilitate critical discussion, share information and experiences at the community level to collectively find practical solutions or strategies to prevent violence against children in families and how to resource those actions.

Only community members, in their roles as mothers, fathers and grandparents of children under age 18 years old living in Chi Bal village were invited to participate in this study.

3.3 Field research preparation

My preparation for the field research included piloting the research instruments and procedures with three Cambodian parents (two mothers and one father), who were temporarily living in Auckland for their postgraduate study. All of them were fluent in the Khmer language. I contacted them through the Cambodian postgraduate and scholarship students' network. They all were happy to support the test-run of my research plan and method. They agreed to meet me for a group discussion at Albert Park, which is central to where they live. They were between 32 and 35 years old, having one or two children aged below eight years old. The following feedback was used to finalise my study procedures and tools.

First, having a safe and private space for the discussion was very important to maintain participant's confidentiality. However, they observed that it would not be appropriate to talk about domestic violence in an open place in Cambodia. I learned that participants' view of the venue was very important, being a place with a relaxed atmosphere yet still allowing for confidentiality.

Secondly, I realized that it was important to check participants' understanding of what was expected from them and their entitlement, as described in the participant information sheet. Sending the participant information sheet prior to the group discussion did not guarantee it being read or clearly understood. Two of the volunteers asked me to explain about the study at the time I met them. Therefore, during the field research, I allowed some time at the beginning of each group discussion to check participants' understanding of the study, and for them to ask questions for clarification.

Thirdly, all the volunteers in the test run suggested the use of simple, shorter question sentences. They found some questions were too long and hard to understand. As I was going to use the questions with the participants, they suggested to me to pilot the questions with local communities once I arrived in Cambodia, prior to data collection. They found that some of the questions were repetitive and that these repetitions should

be removed. They advised me to carefully review my interview guideline and to ask fewer questions but allow for in-depth discussions in the group settings. Therefore, it would be important for the group facilitator to have good skills in taking notes or shorthand and to be an active listener. The facilitator was not to use the question guidelines rigidly, but be flexible, adjusting questions in response to the group's interest and dynamics.

Fourthly, I also learned the topic of violence against children was a hard and sensitive topic to discuss. All volunteers enjoyed the group discussion and were appreciative of the opportunity to discuss about violence against children in the home explore solutions together. They however, felt a bit uneasy and found it hard to come up with a solid solution. They thought it was necessary for parents to use violent discipline with children. Being born and lived in Cambodia most of my life, I was not surprised by this. From this pilot, I saw the need for this research to first understand local Cambodian conceptions as 'acceptable discipline,' 'acceptable corporal punishment' and 'non-acceptable discipline". Another way to encourage parents' participation in discussion about strategies to prevent violence against children in the home was to ask them to think about any disciplinary practice parents used toward children and which practices they considered to be inappropriate and should be prevented.

Fifthly, time management was important to ensure the full engagement of participants, whilst respecting their busy schedule. At the beginning of the pilot discussions, participants actively engaged in the issue and shared their opinion and experiences openly with each other. However, I had forgotten about my role as a facilitator to manage time appropriately. The discussion with those volunteers took more than one and a half hours, which was longer than what was mentioned in the participant information sheet. I was advised to be respectful of participants' time and other commitments, as parents are likely to be very busy with childcare and household chores. I was advised by them to keep the discussion time within the time limits noted in the participant information sheet, since it would be very important to be trustworthy and reliable. I also recognised that the facilitator should also inform participants in advance that if the discussion were to take longer than the agreed time, participants could leave when they wanted.

3.4 Field Research
This section provides a step-by-step description of the procedure of my field research. These included recruiting and training a facilitator, piloting the research instruments in Cambodia, accessing a community or research area (Chi Bal village), the recruitment of

participants, arranging of the schedule and venue to conduct the FGDs, describing the challenges and reflecting on the field research.

3.4.1 Recruiting and training a facilitator

As a novice researcher and having no children of my own nor being a parent, I anticipated the challenge I might have when asking parents about parenting and child discipline. Based on discussions with my research supervisor and those who reviewed my research proposal, I decided to recruit a research assistant/group facilitator to help me with my field research. Through my network, I was then being introduced to a nurse, Chenda (pseudonym), who worked at a local health center at a nearby community where I was going to conduct my study. Chenda is a Cambodian citizen aged 32 years old and a mother of two young children, aged four years and two years old. None of my participants had known Chenda as a nurse before. Chenda was considered as an ideal person to participate as a facilitator in this community-based research because as an outsider (she was not born and did not live in the research area), Chenda could remain objective during the data collection process, while at the same time she could build and maintain good partnership and relationship with the community members, because she shared some common characteristics with the participants and the researched community, including being a mother herself, being born in Cambodia, being fluent in Khmer and having some knowledge about the topic of my interest. I started contacting Chenda prior to my returning to Cambodia for the field research.

Dilemmas came into my mind on how to best train the facilitator to help me with the research in such a short time. On the positive side, I was glad to have her to help me recruiting and facilitating group discussions or community forums. On the other hand, I doubted my ability to train Chenda and share the study procedure and steps with a person new to my research. We decided to meet nearly every day after she finished working at the health center where she was employed, and these discussions took place during the first two weeks of my field research. I introduced the research topic, went through the research methodology and questions, and did group discussion role-play. I explained to Chenda the key principles of being an effective facilitator including relationship, communication, participation, and inclusion (Stringer, 2013).

Following the two weeks training, Chenda and I saw the need to do another piloting of the research instruments with local Cambodian parents living in Cambodia. Chenda was given the opportunity to facilitate a group discussion with this pilot group. Chenda learned very quickly and worked very well as a facilitator in this pilot group. She was very instrumental in helping me recruiting the research participants. I did not want participants

to feel being patronised if they knew Chenda was a nurse, so I only introduced her as my research assistant and described her main role as helping me facilitating the FGDs.

3.4.2 Piloting the research instruments in Cambodia

As noted earlier, I conducted a pilot test of the research instruments with local parents in Cambodia, following the recommendation given during my piloting in New Zealand. I conducted a pilot with two grandparents in the community to test run the research questions, but also to give Chenda an opportunity to try out her facilitation skills.

The most significant comments from the pilot participants in Cambodia were very similar to the comments from New Zealand-that I needed to simplify my questions. Although the questions were already revised and simplified after the pilot test in New Zealand, local volunteers still found the questions to be too long and hard to understand. Well aware of the significant differences in the level of education of my pilot group in New Zealand and local community members, and with Chenda's help, research questions were again revised, using more simple language. I also learnt from this pilot that I had to stop my plan to ask participants to write down all child discipline practices commonly used in their community, because during the pilot we observed participants looked bored, and felt it may be too demanding to write. For some, their handwriting was very slow, whilst some of them could not write. So, instead, the facilitator took the role of writing down the child discipline practices mentioned by participants in order to help her remember them. She then ensured that participants were later asked questions about acceptable and unacceptable child discipline practices, and whether those unacceptable child discipline practices were considered as violence against children.

Chanda was friendly and respectful of the participants who took part in the pilot study. She was able to make participants felt comfortable and willing to openly share their ideas. Chanda, however, found it was challenging to invite quiet participants to answer some questions or to deal with ambiguity or contradictory opinions brought to the discussion by participants. We discussed strategies to solve these issues, including paraphrasing the questions or modifying the questions using simpler language, or prompting to make sure participants understand the questions being asked. For example, there was a heated argument between the participants during the pilot on the definition of child discipline. One believed that beating children with a stick was acceptable, whilst the other believed that it was not acceptable. Chanda was looking confused facing this situation and she looked at me wondering why those participants could not agree with each other. Later, I explained to Chanda that it was okay and normal for participants to give different

views on a thing. But most importantly as a facilitator, she needed to ask people in-depth for the reasons underlying their opinions.

3.4.3 Accessing community

The participants in this study were Khmer people who lived in Chi Bal village. Chi Bal village is one in five villages in Chi Bal Commune, Srei Santhor District, Kampong Cham Province. It takes about two hours and a half to drive from Chi Bal village to the Kampong Cham main city. As noted by the village chief and the villagers there, one part of the village is known locally as an "old village", while another section is called locally a "new village". The villagers started to give these names after the Pol Pot regime (1975 to 1979). The old village where people had settled for generations was fired with bombs and guns during the Lon Nol regime, a regime prior to the Pol Pot regime (1970 to 1975). When the Pol Pot regime started, the old village was used as a large cooking area to supply food for all the villagers who worked as slaves, and the villagers were forced to build new houses in another part of the village, which has been called new village until today.

Although these are two unofficial names of the Chi Bal village, there is no significant difference between these parts, although the new village is officially bigger than the old village. After the end of the Pol Pot regime, more and more villagers returned to the old village because it is set higher than the new village, and so offers protection from flooding during the rainy season, when the new village is often flooded.

Generally, the majority of people who lived in the village were those who were born and raised there, whilst some migrated from their hometown, mainly due to economic reasons. The current population in Chi Bal village is about 400 people. In the past, the villagers heavily relied on rice farming to earn their income. However, in the last several years, the source of income of the villagers has slightly changed due to the growing of garment factories in the area. Many women work in garment factories around their neighbouring provinces, particularly those aged below 45 years. Those who are over 45 years often stay at home, work on rice farms, or migrate to the cities where there are more job opportunities.

There was not any public transportation that reaches the village. Usually the villagers travel using moto taxi or car taxi while some have their own transportation. It was difficult to use a car taxi during rainy season because the roads were slippery and the car taxis usually ran only once or twice daily. Because our meeting schedules were flexible and based on the participants availability, to ensure that I could see my participants any time

they want to see me I often travelled with my facilitator, using her motorbike when going to the village or used a motorcycle taxi when my facilitator was busy.

Upon my arrival in Chi Bal village, I first noted the importance of asking permission for the study to take place from relevant authorities/community leaders. To do this, I visited the commune chief, village chief, and head of the Commune Committee for Women and Children (CCWC). The village chief was key to accessing the community. He was instrumental in giving practical guidelines and reminding the researchers of the appropriate social etiquettes and norms, which would allow us to effectively work with the local communities. The village chief gave two options with respect to recruitment: that he could invite the participants to participate in the study; or I would contact potential participants myself. I was well aware for the possibility that participants might feel pressured to take part in the study if they were invited by the village authority. I therefore decided to invite potential participants directly myself and with my facilitator. The CCWC of Chil Bal commune was contacted to ask for support if participants wanted any help from her regarding violence against children, because one report from World Vision Cambodia, stated that the CCWCs whose ministry of interior initiated in Cambodia in 2004 to be responsible for providing child protection services at the commune level (Jordanwood, 2016). To my surprise, although I was willing to provide details to my participants of the CCWC available in their community, I was advised by the participants that it is not useful to ask for the CCWC assistant if a child is abused, and they added that the CCWC may only collect a report, not make an intervention. The authorities whom the villagers commonly seek for help if any children are abused are often the village chief or the police, and occasionally the commune chief. This is in contrast to my expectations of how the process would work both before I went to conduct field research and during it . Next, I will discuss the methods used to recruit participants.

Figure 3.1: Map of Cambodia and Chi Bal located in Kampong Cham Province

Map P03. Administrative Areas in *Kampong Cham* Province by District and Commune
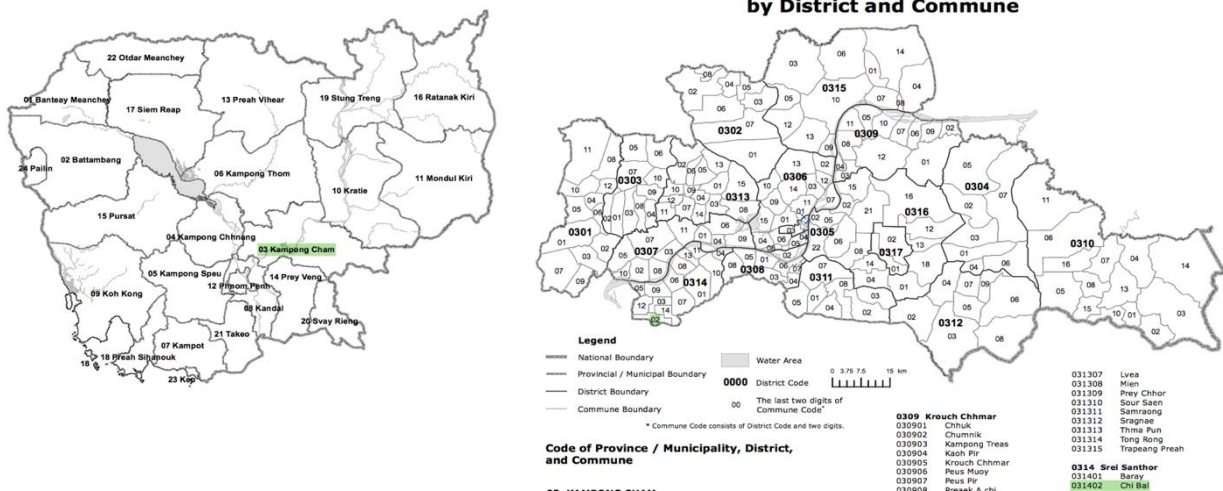
Note: Chi Bal's code area is 031402 (as highlighted with green color)

Source: Ministry of Planning (2013)

3.4.4 Recruiting participants

Participants were included if they were any member of a family whose role was mother or father of children aged under 18 years or a grandparent of grandchildren aged 18 years old living in Chi Bal village, Chi Bal commune, Srey Santhor District, Kampong Cham Province in Cambodia at the time of my field research. It was not essential for the participants to be from the same family kinship group.

Purposive and convenience sampling strategies were used to recruit participants. During the field research, the village chief recommended us to visit and introduce our study to the participants directly by knocking on doors. This was followed by "snowballing sampling". This involved Chenda and I visiting a few families who had children under 18 years old and then asking for members of that family to inform other families who they knew had children under 18 years old about the study. They provided them with my contact telephone number if they would like to participate in the study. The visits to families in the village were not difficult because the houses in the village were built close to one another. During the home visit, I introduced myself, and Chenda and distributed the participant information sheet written in the Khmer language (Appendix 1) to the potential participants. Information written in the participant information sheet had been recorded digitally in Khmer and it was played to those who could not read or need to be read for. Some people agreed to participate in the study immediately during the home visit, whilst some agreed later through phone calls several days after the visit. In total, 10 mothers, 10 fathers and 10 grandparents, a total of 30 participants, were selected

based on a first come, first served basis. As recommended by the village chief, half of the participants lived in the old village and the other half lived in new village of Chi Bal. The table below includes the demographic status of participants:

Table 3.1: List of Participants

Pseudonyms	Age	Gender	Role	Status	Formal General Education (grade)	No of Children/ Grandchildren under 18
Rumdul	63	F	Grandparent	Married	(1)	7
Bopha	63	F	Grandparent	Married	(3)	6
Nakry	45	F	Grandparent	Married	(4)	1
Kao	65	F	Grandparent	Widow	(0)	7
Champa	69	F	Grandparent	Married	(0)	10
Champy	63	F	Grandparent	Married	(0)	12
Prenh	59	M	Grandparent	Widow	(7	4
Angkeabos	47	F	Grandparent	Married	(8)	2
Chhuksor	54	F	Grandparent	Married	(8)	3
Romyol	64	F	Grandparent	Widow	(0)	7
Krovan	56	F	Mother	Married	(0)	1
Orkidel	32	F	Mother	Married	(9)	2
Romjong	42	F	Mother	Married	(4)	1
Bobraek	46	F	Mother	Married	(0)	3
Malis	46	F	Mother	Married	(4)	3
Chanthou	35	F	Mother	Married	(5)	3
Kunthea	31	F	Mother	Married	(6)	2
Daliya	30	F	Mother	Married	(5)	2
Kolab	44	F	Mother	Married	(4)	2
Nuonsrey	28	F	Mother	Married	(5)	2
Makara	40	M	Father	Married	(6)	3
Kompheak	40	M	Father	Married	(4)	2
Minea	32	M	Father	Married	(6)	2
Mesa	43	M	Father	Married	(4)	2
Ousaphea	26	M	Father	Married	(6)	1
Mithona	38	M	Father	Married	(9)	2
Kakada	38	M	Father	Married	(6)	3
Seiha	53	M	Father	Married	(0)	1
Tola	34	M	Father	Married	(5)	2
Vicheka	44	M	Father	Married	(0)	2

Note: F=Female; M=Male

All the participants who participated in this study had children or grandchildren aged below 18 years old during the time of my field research. The number of children aged below 18 years old that parents had were between one and three, and the number of grandchildren aged below 18 years old that grandparents had were between one and 12. Some grandparents did not live with all the grandchildren they mentioned, but they lived in the same village or nearby villages. Among the total of 30 participants, 28 participants were married, one participant was a widow and one participant was a widower. Only one male participated in the grandparent groups.

No participants had attended school above grade nine and eight of them had never attended formal school, among the eight people who had had no formal education, two (Romyol and Seiha) were able to read and write because they had acquired some informal education, being taught in the pagodas in the past. Seventeen participants were farmers, six participants were factory workers, four participants stayed at home and three participants had small businesses in the village. Buddhism was the only religion held by all the participants. The participants shared the same language "Khmer".

3.4.5 Setting up meeting time and venues

The participants who voluntarily agreed to participate in my study consensually decided to conduct the FGDs during the weekends due to their work commitments at the garment factories. Two FGDs were conducted on Saturday and Sunday. The participants requested the group discussion to be held at the houses of one of the members for convenience. They found it was easier to travel within the local area and were comfortable to have the discussion in a house. Participants were very generous in offering their home for the group discussion. I however, had decided to first check and observe the places carefully to ensure that the space was spacious and comfortable and especially if it protected the participants' privacy and confidentiality. After close observation, I decided to choose only two-storey houses for the group discussion. Conducting the group discussion on the ground floor would mean they could potentially face interruptions from the local community as they often received visits from family and friends. For the second phase of community meeting forums, a bigger place was needed and the participants suggested using the local pagoda at the centre of the village. Most participants had to get to this pagoda by motorbike or bicycle.

In short, by the agreement of the participants, all group discussion sessions for phase one were organized during weekends, and at participant's' houses. The second phase of community fora was conducted in the local pagoda, also at the weekend.

3.4.6 Conducting Focus Group Discussions (FGDs)

Focus group discussions and community meeting fora were used as the main data collection tools used in this study. Through group discussions, participants were able to share their knowledge and experiences and discuss opinions and ideas as well as learning about different feelings or perceptions that others had. Members of the group discussion could also change their views once they heard different perspectives from others.

In this study, group discussions were conducted in two phases. Homogenous groups were formed in the first phase to include two mother groups, two father groups, and two grandparent groups. Two community-meeting fora were formed in the second phase to bring together all participants. For all discussions in both phases, two audiotapes were used to record the conversations, with one providing a back up in case the other recorder failed.

Prior to each group discussion session in phase one, the informed consent sheet (Appendix 2) was distributed and read aloud by the facilitator to the participants. Participants were given time to reconsider their participation before signing the consent form. Participants who had low literacy levels were also able to sign the consent form themselves. A copy of the consent form was given to participants for their records. The consent form included an agreement to also participate in phase. All participants who participated in phase one voluntarily agreed to participate in phase two.

Phase One. Three homogenous groups – mother, father, grandparent group – were invited to join a group discussion to share their views, perceptions, and understanding of child discipline and how it differed to violence against children or child abuse. Each group was also asked to come up with some pragmatic actions or strategies to prevent violence against children in the home.

The facilitator used indicative questions (appendix 3) as a guide for participants to verbally discuss their perceptions about child discipline, and strategies to prevent violence against children in the home setting. The following is a summary of the organization of focus groups in phase one.

Table 3.2: Summary information of focus group discussions in phase one

Group's name	Number of participants	Location	Discussion Period
G1-Grandparents	5 grandmothers	Nakry's house	68 minutes

Group's name	Number of participants	Location	Discussion period
G2-Mothers	5 mothers	Krovan's house	46 minutes
G3-Grandparents	4 grandmothers and 1 grandfather	Chhuksor's house	79 minutes
G4-Fathers	5 fathers	Minea's house	86 minutes
G5-Mothers	5 mothers	Daliya's house	54 minute
G6-Fathers	5 fathers	Seiha's house	88 mintues

Note: "G" is referred to "Group".

Phase two comprised two community meeting fora, where all participants in phase one were invited to a community workshop to discuss strategies, activities and people responsible within the home setting for preventing violence against children. They also discussed possible obstacles that may hinder the implementation of those strategies and how to tackle them.

The discussion started with the review of all strategies to prevent violence against children discussed in phase 1 to be put together and grouping. After grouping all strategies into three essential strategies mentioned by the participants, participants were divided into three smaller groups, each given one strategy, and discussing activities and those responsible for successful implementation of the strategy. Possible obstacles that may hinder the implementation of the strategies and possible solutions to tackle the problems were also encouraged to be discussed in these fora. The following is the summary information of fora in phase two.

Table 3.3: Summary information of Forums in phase two

Group's name	Number of participants	Location	Discussion period
F1-Mixed group 1	(13) 5 grandmothers, 3 mothers, 5 fathers	Chi Bal Pagoda	77 minutes
F2-Mixed group 2	(10) 3 grandmothers, 3 mothers, 4 fathers	Chi Bal Pagoda	94 minutes

Note1: F refers to Forum

Note 2: Although all participants in phase one agreed to participate in the discussion in phase two, two did not attend F1 and five did not attend F2.

3.4.7 Challenges faced during the field research

There were many challenges faced during the field research. Three major challenges included: difficulties in accessing the community during the rainy season; finding the right time within the community's busy schedule during a time of political campaigns or social and cultural events; working with participants of mixed educational and literacy levels

Dealing with slippery roads and road works in the rainy season

It was difficult to access Chi Bal village by road. Some parts of the road to Chi Bal were under construction. In some days, there was mud and holes and it was slippery. Accessing Chi Bal village may not have been so difficult during the dry season. Unfortunately, it was the rainy season at the time we conducted the field research. Most of the time when we visited the village by motorbike, we had to walk a long way across mud to get to the houses of the villagers.

Competing time with political, social and cultural events in the community

Another challenge was that the group discussion sessions and discussion for a clashed with many events in the village. Participants once agreed to meet from 7:30am to 9am, however, when the meeting date came, they apologized for not being able to meet during that time.

The fourth 4th FGD (Father's group) in phase one, when they received a phone call from us one day in advance to remind them of their meeting with us, asked us to change the meeting time from 9am to 10:30am because they all had to join an engagement ceremony of their neighbour. However, when we arrived at 9am, the meeting was still not be able to organize because they were still at the engagement ceremony and some were drunk. So, we waited and shifted it to the afternoon.

Another time, the 6th FGD (also Father's group) of phase one, which was supposed to be conducted in the morning also was delayed for about two hours because of the rain the previous night, which meant that all villagers including my participants had to go to the field to check and drain water in their rice field.

The approaching national election, which took place at the end of July 2018 also affected the meeting schedule because participants were attending political rallies which were held in Chi Bal village. Some participants in the 1st forum of phase two had to join another meeting organized in their village until late morning. Thus, the forum had to be changed to the afternoon at the participants' request.

Working with participants of mixed literacy levels

Last but not least, we faced a number of problems trying to encourage participants to participate in the discussion. We were aware of the low level of our participants' literacy, with eight participants never attending formal school at all. Therefore, we had to take care and read slowly when some activities involved writing, particularly during the forums in phase two when participants were divided into three small groups to discuss and write strategies on large paper. We worked to ensure that each small group had people who could read and write and suggested they should work cooperatively with illiterate participants and make sure they were given the chance to share their ideas in the groups. It was not easy to encourage participants to get involved in sharing their ideas on strategies to prevent violence against children in families. When questions asked related to their experiences (child discipline practices), participants were able to share a lot with each other. Despite this, participants seemed to find it hard to share their opinions when strategies to prevent violence against children in families, were sought from them. Furthermore, although the facilitator and I are Cambodian born and fluent in the Khmer language as the participants, because we did not live there, we found it difficult to understand some dialects using by the villagers. We needed to add extra time to the discussion because we needed to clarify their conversations. Also, the level of enthusiasm in participating in the discussion was lower when the discussion passed the first hour, especially for the mother and grandparent groups (grandmothers) as they had house chores to do.

3.4.8 Reflection from the field

During this study I was made aware of the existing gender role differences within parenting or grandparenting, between men and women. Upon my initial contact with a family, the woman - a wife or a grandmother – was firstly and quickly nominated by each family. For instance, of the ten grandparents who participated in the study, only one was a grandfather, the rest were grandmothers. While ten mothers were able to confirm their participation immediately or within a few days, fathers' confirmation came quite late. This may be due to Cambodian culture putting women as the primary caregivers of their children. I was also aware that while it was easy to form the women's discussion groups, women were often the ones who were in a rush to finish the discussion, wanting to go home to look after their children or finish the household chores. The two male groups, however, seemed to have no barriers to finishing the discussion sessions and maintained their active participation and enthusiasm till the end of the session. Future research conducted at the community level should consider this time barriers in planning and conducting meetings or group discussions.

3.5 Research Ethics

The research received ethics approval from Auckland University of Technology Ethics Committee (AUTEC) on March 26, 2018, under reference number 18/103 (Appendix 4). It also received ethics approval from the National Ethics Committee for Health Research of Cambodia (NECHR) dated on April 04, 2018, under reference number 081NECHR (Appendix 5).

3.6 Analysis

Thematic analysis was used in this research for data analysis. Thematic analysis involves the exploration of the important themes emerging from the data collected (Daly, Kellehear, & Gliksman, 1997). The data analysis was initially done within groups (mother groups, father groups and grandparent groups) and then across the three groups. Six steps of thematic analysis were followed, as recommended by Braun and Clark (2006): familiarising with the data; generating initial codes; searching for themes; reviewing themes; defining and naming themes; and producing the report. All data recorded was transcribed in Khmer and then translated into English before being analysed.

3.6.1 Establishing rigour

Rigour is generally based on two key aspects – reliability and validity (Davies, & Dodd, 2002; Cypress, 2017). According to Morse, Barrett, Mayan, Olson, and Spiers (2002), research without rigour is considered unrealistic, untrustworthy, and useless. Despite this, establishing rigour in qualitative research has been a challenge for all researchers because unlike quantitative research in which research design is pre-set and structured, qualitative research design is less likely to be able to set controls and could be changed continuously (Cypress, 2017). Likewise, issues of rigour are also raised in PAR. Since the context of research in PAR is based on a specific group, generalization of its findings may be hard to achieve (Loewenson, Laurell, Hogstedt, D'Ambruoso, & Shroff, 2014). However, researchers who argue for the importance of utilizing PAR claim that data in PAR are more valid because through PAR, community members are highly encouraged to get involved and empowered in the research process, bringing rich data layers (McGarvey, 2007; Langlois, Goudreau, & Lalonde, 2014). Also, like qualitative research, rigour of PAR can be achieved through the selection of appropriate data collection methods for research questions (Carter, Bryant-Lukosius, DiCenso, Blythe, & Neville, 2014; Loewenson et al., 2014; Noble, & Smith, 2015), consistency of interview questions and continuous process check (Loewenson et al., 2014; Forero et al., 2018) and triangulation (Creswell, 2002; Carter et al., 2014).

In this study, FDGs were utilized as the data collection method. The FDGs were arranged with two phases: in phase one made up of homogenous groups while phase two was made up of diverse groups. The participants who formed the diverse groups in phase two were not strangers, but those who had participated in phase one. Through this process, people in the same role (phase one) could share their views on the topic of interest before being mixed with those who had different roles (phase two) to further discuss the issues of interest (Details of the data collection method can be found in section 3.4.6 Conducting FGDs). Therefore, the interaction between the participants was less anxious and more active (Carter et al., 2014).

The rigour of the research may also be assessed on the consistency of the interview questions and continuous follow-up throughout the process (Loewenson et al., 2014; Forero et al., 2018). Forero et al. (2018) points out that the credibility of qualitative research could be increased through testing the interview method and questions. In this study, two pilots of the research instruments were conducted. One was conducted prior to field research with Cambodian parents who were temporarily living in New Zealand for their postgraduate study, and the second was conducted with local parents in Cambodia during the second week of my time with the community (Details of the pilots are written in section 3.3 – Field research preparation and section 3.4.2 Piloting the research instruments in Cambodia). Participants were asked to reflect on each FGDs to provide feedback to the researchers for improvement.

Although there are many types of triangulation such as method triangulation, investigator triangulation, theory triangulation, and data source triangulation (Carter et al., 2014), this study employed data source triangulation to enhance validity of the study. Data source triangulation, according to Creswell (2002) and Carter et al. (2014), occurs when data is collected from different groups of people. This provides a holistic view of the researched issue (Creswell, 2002; Carter, et al., 2014). Three different groups – grandparents, mothers, and fathers who have different roles, but take part in caregiving, were invited to participate in the study.

3.7 Summary

This chapter discussed my research methodology. Participatory Research approach was used to explore community-based strategies to be put in place to prevent violence against children in the home setting, for two main reasons: basing on its social-constructivism paradigm and focus on community empowerment process brining about community participants self-confidence, self-awareness and hope. In this research I observed four key principles: nurturing positive relationship, communication,

participation and inclusion. Before the conduction of FGDs and fora with the study participants, the research instruments and procedures were tested with some volunteer Cambodian parents temporarily living in New Zealand and again in Cambodia. The recruited facilitator had the opportunity to assess her facilitation skills through the pilots carried out in Cambodia.

Thirty participants were recruited in this study in which ten were mothers, ten were fathers and ten were grandparents. The first phase of data collection consisted of six FGDs of homogenous groups while the second phase of data collection was made up of two fora where the participants from phase one were invited to join discussions again in mixed-role groups. Although the data collection finished successfully, there were some challenges including the difficulty in road access to Chi Bal village (the research area), the research schedule competing with community events, and difficulty in dealing with the different literacy levels of participants. Regarding ethical approval, the research received two ethics approvals prior to data collection, one was from AUT university (AUTEC) and one was from the Cambodia (NECHR). Data were analysed using thematic analysis and results were shown in the next chapter.

CHAPTER 4: FINDINGS

4.1 Introduction

This chapter is divided into seven sections. Section one includes the chapter structure. Section two discusses the social-cultural contexts and local situations of the research participants. It also includes the participants' demographic profile such as age, ethnicity, religious affiliation, occupation, and education. Sections three to five focus on specific themes which emerged from the study, including the social-cultural construction of child discipline, the common practice of child discipline and variations on this; and the recognition of personal subjectivity in knowledge versus practice of violence against children. Section five discusses the intergenerational practice of violence against children. A chapter summary concludes this chapter. No real names, only pseudonyms are used in this chapter.

4.2 Context of research participants

This section discusses the research participants' social-cultural contexts and local situations. Participants in this study were caregivers of children under 18 years old, including 10 grandparents aged between 45 and 69, 10 mothers aged between 28 and 56 and 10 fathers aged between 32 and 53. All were of Khmer ethnicity and fluent in speaking Khmer. All were Buddhist. All were recruited from Chi Bal village.

All the participants were born, grew up and spent most of their life in the Chi Bal village. Most of the participants were rice farmers. A few of the mothers and fathers worked full time in nearby garment factories, within about half an hour's travel by motorbike. According to the Chi Bal village chief Sothea (Pseudonym) and my informal meetings with local villagers, many adults from the village had seasonally migrated to urban areas for extra income. Generally, the income generated from the rice farm was inadequate to sustain family life. Chi Bal is located on a low slope, which is prone to landslides and floods during the monsoon season, adding more burden to the rice farmers.

When adults decided to migrate to an urban area, they were likely to leave their children in the village to be raised by their grandparents. Parents of these children would visit their home village once or twice a year. Nearly a third of grandparents in this study were the primary caregivers of their grandchildren. Grandmothers, in general, were given a major responsibility for taking care of their grandchildren, while grandfathers worked in the rice fields. This represents the norms of gender division in labour and domestic spheres, where women were seen as the primary caregivers for the young ones and

were primarily responsible for domestic chores, whilst the men of the house would spend time outside earning some money or working in the farm.

Approximately 10 out of 30 participants had never attended school and were illiterate. Twenty participants had some years of schooling between grade 1 and 9. Table 4.1 describes the demographic profile of the participants.

Table 4.1: Demographic profile of the participants

Pseudonyms	Age	Gender	Role	Status	Formal General Education (grade)	No of Children/ Grandchildren under 18
Rumdul	63	F	Grandparent	Married	(1)	7
Bopha	63	F	Grandparent	Married	(3)	6
Nakry	45	F	Grandparent	Married	(4)	1
Kao	65	F	Grandparent	Widow	(0)	7
Champa	69	F	Grandparent	Married	(0)	10
Champy	63	F	Grandparent	Married	(0)	12
Prenh	59	M	Grandparent	Widow	(7)	4
Angkeabos	47	F	Grandparent	Married	(8)	2
Chhuksor	54	F	Grandparent	Married	(8)	3
Romyol	64	F	Grandparent	Widow	(0)	7
Krovan	56	F	Mother	Married	(0)	1
Orkidel	32	F	Mother	Married	(9)	2
Romjong	42	F	Mother	Married	(4)	1
Bobraek	46	F	Mother	Married	(0)	3
Malis	46	F	Mother	Married	(4)	3
Chanthou	35	F	Mother	Married	(5)	3
Kunthea	31	F	Mother	Married	(6)	2
Daliya	30	F	Mother	Married	(5)	2
Kolab	44	F	Mother	Married	(4)	2
Nuonsrey	28	F	Mother	Married	(5)	2
Makara	40	M	Father	Married	(6)	3
Kompheak	40	M	Father	Married	(4)	2
Minea	32	M	Father	Married	(6)	2
Mesa	43	M	Father	Married	(4)	2
Ousaphea	26	M	Father	Married	(6)	1
Mithona	38	M	Father	Married	(9)	2
Kakada	38	M	Father	Married	(6)	3
Seiha	53	M	Father	Married	(0)	1
Tola	34	M	Father	Married	(5)	2

| Vicheka | 44 | M | Father | Married | (0) | 2 |

Note: F=Female; M=Male

Before discussing the key themes, which emerged from this study, I would like to draw attention to the translation of the terms 'child discipline' and "violence against children' in Khmer. In this study, I used the term child discipline as ka obrom kaun in Khmer language. The term ka obrom means "discipline" while "kaun" means "child or children". The term "child discipline" or ka obrom kon is commonly used as a child-rearing practice to foster good behaviours in children. The term "violence against children" is used interchangeably with "child abuse" or "child maltreatment." In Khmer, the term saying "omper haengsa ler koma".

Three themes emerged from this finding. The first theme (section 4.3) shows the meanings of child discipline and provides the common methods of child discipline mentioned by the participants. The second theme (section 4.4) is about the discrepancy between awareness and the use of violence against children, whilst the third theme (section 4.5) discusses the intergenerational nature of child discipline practices in families. The next section discusses the various definitions of child discipline given by the participants and the strategies that participants, used to promote good behaviors in children. While positive reinforcement was commonly used to encourage children to adopt good behaviors, punishment was used by some to address negative or unexpected behaviors.

4.3 The meanings and common methods of child discipline

Child discipline is a core component in parenting in most societies. The common goal of child discipline is generally to promote the adoption of appropriate behaviours and good morals in children. Children are expected to learn to behave in a way that conform with the social values, etiquette and norms in their given society (UNICEF, 2010). The belief, norms or practice of child discipline varies across cultures (UNICEF, 2010). Caregivers may use violent child discipline and/or non-violent child discipline methods to correct children's behaviour. The practice of child discipline with the use of violent punishment that causes physical pain or emotional pain or both, generally leads to violence against children (UNICEF, 2007). This section starts with participants' subjective definition, articulations and meanings of child discipline practice.

4.3.1 Meaning of child discipline: walking on the right paths

Participants defined child discipline as a means or strategy to introduce or reinforce expected and appropriate behaviors in children. Participants referred to child discipline as a means to show our children "to walk on the right path". Overwhelmingly, participants believed that characteristics of children's good behaviours were measured through academic achievement, being a good student, being diligent and studious. Other criteria of good behaviours also included helping around the home with household chores, however, the latter was secondary in importance to good academic achievement which bring joy and pride to parents. Good schooling was believed to warrant a good job and a financially independent adult life.

Participants also recognized the stage of playfulness in a child's life, they regarded play time as less important to children's development of social skills or academic achievement. Children were expected to obey their grand/parents and follow their advice. Children were generally forbidden from smoking, using recreational drugs or gambling. Interestingly, while nearly all participants had farmland to look after, none of them mentioned that children would be expected to help on the farm. Perhaps the reality of hard farming work, which did not provide adequately for the family, made them believe that being a farmer was not an ideal future vocation for their children.

Grandfather Prenh (age 59), lived with his children and grandchildren in an extended family home. He believed that a child needed to be a hard-working student. Education is believed to be a good insurance for getting a well-paid job in the future, so the child will be financially independent and able to support his or her family:

> As a grandfather, I encourage my grandchildren to walk on the right path, to study and gain knowledge and skills to help them to get some work and later to independently manage their adult life well.

The 'right path' of growing up focusing on academic achievement, was well articulated across different groups of participants, as grandparents, mothers and fathers. For example, in the grandmother group, Romyol, age 64, who also lived in an extended family home with her daughter, son-in-law and three grandchildren, believed that adults should explain clearly to children the consequences of choosing the 'wrong path.' Giving a clear example would enable her grandchildren to make the right judgment of appropriate behaviours:

> …Just tell them the good path, like not to play much with phone, but to study. Meaning that if they made mistakes, we'd tell them that 'grandchild, don't go along this path. It's not good. Don't do like this, grandchild. Don't spend too much time looking at your phone. It will damage your eyes. Studying is better. We should advise like this.

Mother Malis (age 46) who worked as a housewife raising three children said child discipline *'… is about pushing children to study hard, not letting them play too much and asking them to study hard so they will get a good job later".*

Mother Orkidel (age 32), whilst agreeing on the importance of academic success, added important skills needed by a child to survive in his or her adult life. Being a business woman, she believed that that parents should also teach their children to be disciplined and prudent with money, by *'… not letting the children go out too much, but to study hard in order to have a good job in the future and not spending too much money...'*

Father Tola (age 34), from a father group, wanted his two children to come straight home after school. Although it was impossible for parents to monitor their children all the time, Tola always reminded his children to make the right decision: *"…When the child is older, they don't listen to us, I have to let it go because we can't follow up 24h when they go to school. It depends on them. We suppose they go to school, but they may go somewhere else, we don't know. So, just let it be. But before we let it be, we have to persuade them to go to the right path first."*

Arguably, the 'right path' being defined and measured by children's academic achievement is very limited. Schooling and education took priority in children's lives and the parenting approach focused on child discipline in this context rather than focusing on other responsibilities, skills, and talents, such as in sports or arts. Some parents chose to free up their children from helping in the homes, and asked them to only focus on their study. Father Seiha (age 53) decided to do all the household chores himself and never asked his teenage son to help, because his son was top in his class and he wanted him to study hard:

> These days, I give my children chances. I allowed them to study English. After returning from studying English, I sometimes wanted them to help just a bit with some chores at home. But they play football instead. They get good scores for their study, top 4 or 5. That's why I don't ask them to do work at home with our farm animals or something else. I devote myself to doing o all chores by myself

A third of the participants in this study (10 out of 30) were illiterate and had never attended any schools. The majority (20 out of 30 participants), had some years of schooling, yet only four of them had completed the high school level. All of them had relied on their farms for income and seasonally migrated to nearby towns to work in factories and domestic households. I wonder how participants denied the importance of farm work and wanted their children to focus on schoolwork only, whilst many of them had never had any schooling experiences. I wonder, how did they get that ideas or beliefs? It raised questions why the children were raised not to connect with the lived

reality of their parents. I would expect children to take some responsibilities in looking after their younger siblings and help parents a bit on the farm. The focus on children's schooling, rather than following in the footsteps of their parents may be due to farming and working in garment factories being low-paid jobs in Cambodia. Parents believe that children's having a secondary or tertiary education will guarantee a prosperous future and financial security.

There could be a different practice of child discipline depending on the child's gender. Earlier, it was described how a father freed up his son from doing farming work and household chores. Yet a grandma, Champy (63) believed that her granddaughter should help with tidying up her kitchen: *'thank you girl… people usually know you are a good girl by seeing the kitchen"*. This was agreed by other grandmothers in her group as well. Here I was aware that child discipline was practiced as a one-way process, which was unnegotiable, and that parents and grandparents were the ones to determine expectations and rules. Parents and grandparents created 'the right path' – the academic path and overlooked talents and other social skills. I wonder if such practice is learned socially and will continue to define the ways and modes of child discipline practice in this community, and Cambodia, in general, where academic knowledge takes precedence over the reality of a myriad of social skills, resilience and creativity, beyond academic measurement.

Parents were clear about academic success as the key to the 'right path' for children's development, yet the practice of child discipline presented has been subjective, context dependent and unclear. For example, parents were clear about academic achievement as a key to the 'right path' and they were willing to negate children's participation in household chores upon good academic result. Likewise, some parents included prudence and spending money wisely as a 'good path', others would watch over their children closely and not trust their children to make the right judgement. The voice and interest of children has been widely missing in the discourse of parenting or child discipline, and I wonder to what extent parents' heavy reliance on children's academic success, would build resilient, creative adults with sufficient good social and problem-solving skills. It would not be surprising to encounter conflicts between parents or grandparents and children/grandchildren, when messages are not clear and well-articulated, when the needs of parents and children are in conflict.

Next, I will discuss practices of child discipline endorsed by parents and grandparents in this study.

4.3.2 Common methods of child discipline

Some parents or grandparents used positive reinforcement such as praise, gift and words of encouragement to maintain and create good behaviours. A few participants, however, were not comfortable with the idea of giving praise and reward to their children for behaving well. They feared that children would have too much pride in themselves and stop behaving well. Advice, punishment and treats or fear tactics were also used to correct bad behaviours.

Discipline for encouraging good behaviours

Most parents and grandparents used various methods of child discipline to encourage good behaviours including verbal praise, gesture and presents. Deception and manipulation also used by a few parents as a method to encourage good behaviour. However, this method was rejected by other several participants due to the fears of losing respect and trust from children/grandchildren.

<u>Using positive reinforcement: praises and positive gestures</u>

Verbal praise, positive gestures and positive reinforcement were often used to reinforce good behaviours in children as mentioned by all groups of participants. For example, some grandmothers used praise to appreciate the kitchen help they got from their granddaughters. Grandmother Kao (age 65) from another grandmother group also praised her seven grandchildren when they showed a good attitude and told all of them: *"continue do that behaviours … you will be honoured and well accepted by others".*

Mother Kunthea (age 31) loved to praise her children:

> "For me, I like giving praise. Because my children work more when I praise them. They are happy. They do their work on a regular basis. Sometimes, they forget, but when we praise them, they continue to do it."

Mother Orkidel (age 32), from a mothers' group also used praise and liked to spend time with her children to talk about their schoolwork.

> "Praise the children, encourage them by acting like we want to look at their schoolwork. Such as when they want us to look at their schoolwork, we act as if we are looking at it. Then, they are motivated to do well in school."

Father Tola (age 34) also uses praise to reinforce good behaviour: *I praise my children to let them know that they had walked on the right path, the good one and avoided the bad path.*

Although praising is important to reinforce good behaviour, it was not used when children showed bad behaviour. One father from the same group as father Tola stated: *If they stole something from others, we couldn't praise them. We only praise them about their study or if they are being gentle and kind to others…such as using polite words…*

A few participants also gave presents including favourite foods, stationery, clothes, a bike or jewellery to reinforce good behaviours. Mother Kolab (age 44) was very proud of her son for being an outstanding student. She believed that her son deserved a good present: *"you study hard and I'll buy a bicycle for you. But I buy it only if you get in the top 1 or 2".* Her son always came top in his class. Interestingly though, the present came with a high expectation for her son to be the top in his class. Similarly, grandmother Bopha (age 63) would promise buying her grandchildren some gold jewellery for getting top in their class. Mothers Kunthea and Chanthou (age 31 and 35, respectively) bought new clothes for their children: *Buy them nice clothes. It motivates children to study hard when we buy something nice for them… so they study hard [smiling]*. Father Kompheak (age 40) bought nice stationery for his two children when they did well at school: *When they study well, I buy some books, clothes or bags for them. When buying them something new, my children are happy, delighted.*

Next, some participants also used deception, lies and manipulation to get their children to do what they desired from them.

Using deception and manipulation

Father Vicheka (age 44) agreed with the idea of using rewards to promote good behaviour. However, father Phan would set an unachievable expectation for his children. For example, he promised his child a new motorbike if his child got the top rank in his class. He explained that he already knew that it was impossible for his child to achieve that goal.

> "For me, if they get top one in the class, I'd buy them a motorbike. When they passed their grade in the class, just cheat them once and when they study further, continue to tell them a lie. Children can be cheated easily. Children aren't clever. They'll study hard because they trust that their parents will buy a motorbike for them. So, they try hard. Children aren't clever. My children would never have got the top rank anyway."

Such deception was also used by grandmother Kao (age 65) who promised to buy a motorbike for her grandchildren when they passed an exam. She was not sure whether she would be able to afford to buy them the motorbike. Her main aim was to use deception to motivate her grandchildren to study hard.

> "Encourage them and tell them a lie such as if you pass your exam, I will buy a motorbike for you. If I had money, I'd buy it. But if I don't, certainly I would not be able to buy the motorbike [the group laughed]"

Some mothers, like Malis, age 46, also used lies to motivate her children to study, as children can be easily manipulated:

> "Kids only follow our requests when we tell them a lie. Just tell them a lie like 'study hard, and I will buy this and that … ' [laughing]. But how can I buy it when

I don't have any money at all! I just make a fake promise like this to make them study hard."

Clearly there was a strong disagreement from several participants about the use of deception, lies and manipulation against children. For example, father Mithona (age 38) was determined that parents were not to lie to their children. Parents ought to be a good role model for children. If parents expect children to be honest, then parents themselves should be honest to their children too. Children will learn how to lie from their parents and later they may use lies and deception to get what they want from others, including their own parents.

Father Mithona disagreed with Vicheka, noted earlier: *"Let me interrupt you, brother Phan. As a father, you shouldn't lie to your children. If you do, it's like telling your children that it is okay to lie"*.

Grandmother Angkeabos (age 47) was afraid that she would lose respect from her grandchildren and hurt their feelings if she lied to them. She, therefore, would not make any promises to her grandchildren if she was not sure she could keep it: *I don't want them to say that her grandmother tells a lie. I try to study hard and almost die… grandmother told me she would buy me a present, but nothing…so why should I be studying?*

Three mothers: Chanthou (age 35), Kaolab (age 44) and Daliya (age 30) got into a heated discussion about promises they had made to their children. They agreed that parents should keep their promises and not to forget or break them, as their children would always remember what have been promised, otherwise, parents would lose respect and distrust their parents:

Mother Chanthou: If you promise to buy something for them, buy for them. Don't expect that they forget. Kids remember very well.

To sum up positive reinforcement, including praise, admiration gestures, and presents are believed to be an effective strategy to reinforce children's good behaviour. There was a clear segregation between participants who agreed with the use of deception versus those who were against it. I wondered if deception would be an effective method to reinforce good behaviours in children, as questioned by many participants in this study. A long-term consequence of the use of lies and deception to children may be enduring, and it may lead to poor relationships and distrust between parents and children.

Disciplines for stopping bad behaviors

Participants believed that bad behaviours needed to be stopped. Participants also discussed the use of advice (Khmer: ne norm), physical and or emotional punishment to stop bad behaviour. Examples of physical punishment included beating with incense "vaiy naeng thuk" and pinching "kdech". Others also mentioned using a wooden stick to beat children (vaiy naeng chhuer), pounding (kuok), throwing (boss), and kicking (tord). Examples of emotional punishment included the use of threats (kom ream), scolding (je) and intimidation "som lot".

Giving advice "ne norm"

"Ne norm" refers to any verbal reasoning, explaining why maintaining good behaviour is important and that children need to stop bad behaviour and change it with a good behaviour. Grandmother Bopha, informed she "ne norm" her grandchildren gently and patiently when they made mistakes. She understood peer influence and suggested to her grandchildren to be selective when choosing friends. Moreover, she expressed the love of family members towards children and asked her grandchildren not to continue bad behaviours that bring sorrows to family.

> Grandmother Bopha: Advise them "what you do is wrong." Advise them to change to good. If they continue to do something wrong, we continue to advise. Not to continue the wrongdoing. If we let it go or let them do whatever they want, the wrong doing is going to continue. "If you make relationships with good people, you become good. But if you make relationships with bad people, you become bad." Then, we push our grandchildren not to go on the wrong path causing sadness to parents, and grandparents who protect them and love them. When our grandchildren do something bad, we are depressed and disappointed.

Another grandmother, Romyol (age 64) "ne norm" her grandchildren by sharing her childhood story living in poverty.

> When they don't listen, I also tell them reasons. Example, I tell them that that in my generation, I didn't have anything to eat, not even cold rice. Having nothing to eat! And for one month, 30 days, I had never known 100 riel to go to school with. But in your generation, you just open your hands and you get money….

Grandfather Prenh (age 59) advised his grandchildren when he found out that his grandchild was choosing the wrong path and to return back to the right path. Children need guidance from adults, Prenh said:

> "If they make mistakes, give them some guidance. Tell them that 'this way is wrong. Don't do it like that as it's bad for you and also difficult for me as your grandfather. Let return back to the good path".

In the mother's group, mother Nuonsrey, age 28, and Chanthou, age 35 would advise their children to reflect on their mistakes and avoid repeating it. They did not recommend using physical or emotional violence toward their children.

> Mother Chanthou: "When children make mistakes, we should give advice, discipline them not to make mistakes next time. 'Today you are wrong. You know this and next time don't make mistakes like today."

> Mother Nuonsrey: "For me, when children do something wrong, I'll only speak (advise)to them …t I would never beat them."

Mother Kolap showed the importance of saving children's face by not informing children's mistakes to people outside the family. Talking about bad things children had done with people outside the family would embarrass the children. Mother Kolap believed that she needed discuss children's problems other close family members for support:

> "…As mums, we can't tell others or outsiders 'my child made this mistake or that mistake'. If they are difficult to talk to and don't listen to us, we should just discuss it with our close family members. …Also, we need to talk to children."

Father Mesa (age 43) shared in his father's group that children need to have their mistakes clearly explained to them in private. So, children would respect and listen to their parents.

> "…We call them to explain when they make mistakes. Call them to give advice but say this in front of many other people. They'd feel embarrassed. Explain to them about this and that, and then continue to follow up. By doing this, they also accept and follow us. They won't make the mistakes anymore."

Father Seiha (age 53), from a different father's group would tell his children to copy good behaviours of other children/ their peers.

> "If my child did something wrong, I'd advise them 'let's see people neay you. They are like tidy clothes. I won't do anything even if you do wrong, but you should look at the others. You should do what they do".

Of interest here, although participants emphasised they would talk to their children in a private setting, yet sharing it with family members. Participants claimed that letting other family members know about their children's misbehaviours would help them to get family support. I wonder if this show the filial system of control over children's behaviours in a family context.

Physical and emotional punishment

Harsh discipline such as physical and emotional punishment were also commonly used in discipling children. Parents and grandparents observed the use of scold (je) threaten (kom ream), intimidate (som lot), and beat (vaiy) in child rearing practice. Grandmother Kao (age 65) would scold (je) to her grandchildren they did badly at school. To her, humiliation may mean "harsh words" and would also be appropriate to use to correct children's bad behaviours.

> "…. About scolding, there is some scolding. Scold to be good. Scold to let them know what is right and wrong. That doesn't mean scolding is useless. Scolding because the grandchild is wrong. That's why I scold. Advise to be a good person".

Another grandmother, Chhuksor (age 54), used a high-pitched threatening voice to her grandchildren when they behaved badly.

> "When my grandchildren do something wrong, I blame them. Blame as advice 'next time, be careful when holding something. Don't make mistakes. Before holding something, look ahead of you and behind. Before speaking, look up and down".

Grandmother Romyol, age 64, used threatening words when they refused to help her doing some groceries. She would cook for her grandchildren, let them eat, but then she would remined them that she would not be cooking for them again, if they did not help:

> "Need to snarl at them a bit. Snarl or threaten them a bit. 'If you do this, I won't make a meal for you. I'm so tired. Next time, I can't guarantee if you will have a meal because you're lazy'. Let's threaten them."

In a mother's group group, Mother Orkidel (age 32) would use a scare tactic to make children study otherwise she would stop their schooling and sent them to work in the field.

> "Some parents scold their children and some parents beat their children. Scare them, saying 'if you don't study hard, I'll let you go to work for others like a slave or if you don't study hard, you will go to count eggs for others'. My child, then, says that 'No, I don't want that.'"

Mother Romjong (age 42) said that sometimes parent had not choice rather to use harsh discipline in order to correct children's bad behaviours.

> "All parents are the same. No one wants to see their children walk on the wrong path, do bad thing or become rude. No. We don't want them like that."

Fathers Mesa (age 43) gave guidance and advise to his children, at times, combined with physical punishment and scare-tactics. He however, would not use severe physical punishment and would not injure his children.

> "I've never beaten severely. I only slap (teas) their bottom. Held their hands and slapped their bottom. But I didn't slap strongly. Just slapped a little bit. But we must raise our voice. Intimidate them with our loud voice. Afterwards, when they just hear me roaring, they listen immediately"

Father Vicheka (age 44) believed that beating with a stick would not scare children but he would pretend to throw a brick at his children:

> "If you beat them with a stick, children won't be afraid of it. They would be scared if you were about to throw a brick at them. But don't make it hit them. Later, when they see you carry a brick, they will become frightened…."

Combined of giving advice (Ne Norm) and/ physical and emotional punishment were used by participants. None of the participants ever mentioned giving their children the opportunity to explain their misbehaviours. I was aware of the tension experienced by participants in the use of physical punishment as to what extent it would control children's' behaviour versus causing injuries and other adverse effect.

Participants explained various factors relating to violence against children, which will be discussed in section 4.4 and section 4.5.

4.4 Discrepancy between awareness and practice of violence against children

Participants, in general, were aware that some forms of child discipline such as beating (vaiy), scolding (je), threatening (kom ream) and intimidating (som lot), were violent. However, they said that at times, the use of punishment as a means of child discipline was unavoidable. Some participants argued that they lacked knowledge about good parenting and appropriate child discipline; had poor problem-solving skills, and limited understanding of child development and temperament; parents' concern about child using drugs, committing crimes, alcohol abuse and children having road accidents. Such low awareness may also be influenced by the civil war which ended about 30 years ago, as over a third of participants had spent their childhood and adulthood in the war. They therefore, did not attend school properly or could not attend school, but had seen violence in their surroundings. Regret of using violence against children was often mentioned by the participants.

4.4.1 Lacking knowledge and experience about good child discipline methods

Participants had no other ideas about what best strategies to choose to correct their children and grandchildren's behaviours. They would feel sad, depressed and frustrated with their children misbehaviours. They felt it was their responsibilities to correct their children. They then chose to a harsher form of physical punishment or emotional punishment.

When asked whether scolding (je), beating (vaiy), threatening (kom ream) and intimidating (som lot), were commonly used to discipline children, mother Malis (46) admitted that she, on occasion, had used those methods, especially when she felt hopeless and saw such methods as her last resort.

> "That's violence against children. But it's because I ask them to do this or that again and again, but they don't listen to the request". Only if we use appropriate words with them! But if they still don't listen to us what should we do?"

Father Mesa (age 43) used threatening and intimidating words to correct his children's' negative behaviours, although he understood that those words would hurt chidren's feelings:

> "The intimidating and threatening words are also really wrong. But if we don't do that, they don't listen to us".

Grandmother Romyol (age 64) used tended to use physical punishment toward her grandchildren and admitted that she had limited knowledge about positive child discipline

practice. She beat her grandchildren because she did not want them to repeat the same mistakes. She however, was committed to find effective non-violent discipline strategies if they were offered in her community.

> "In my mind I want to know how to let children follow us. Not meaning that they don't listen to the advice and then let it go. Continue to think what to do to let them listen to us. We think like this too."

4.4.2 Difficulties in managing anger and frustration

Parenting is one of the most difficult tasks that all caregivers face. Children bring joy to a family, but at the same time, they bring challenges. The participants in this study complained about not being able to control their anger as one of the common reasons they became aggressive with children and grandchildren. Poor problem-solving skills that could have possibly resulted from a low level of education led to frequent conflicts between the parents and children. Mother Krovan knew using harsh words were not right, she could not control her anger when her children disobeyed her requests or advice.

> "Not good because when we are angry, we threaten them spontaneously. In fact, I know that using appropriate words may be more likely to make them listen to us. But it's because we are angry with them. […]

On regrets

Parents expressed sadness and regrets when using violence to leash out fits of anger toward their children. They did not even realize how much they hurt their children and grandchildren until after their anger was released.

> "It's unbearable when we're angry. After we beat them, we regret it. We pity children. Because of anger, we slap once or twice and when we realise we beat too much, we ask them where those beaten spots are. […]" Mother Kolab (age 44)

> […] I was very angry at that time and I slapped her bottom with my hand. When we arrived home and relaxed a bit, I saw she was not crying but she looked sad, not happy. I was full of regret at that time. Since they were born, I've never beaten my children. That's because of anger. […]" Father Mithona (age 38)

> "That's violence beating children. We should use sweet words first. But sometimes we are so angry. Sometimes when being angry, we beat them. Not knowing that they are hurt. Then, after we see the spots, we pity the children. All caregivers feel the same. We have the same heart." Grandma Kao (age 65)

4.4.3 Dealing with difficult children

A few parents in this study believed children as a 'blank paper' and behaviours of children merely the product of the influence of his or her environments. Others believed that parents and grandparents believed in the children's natural [characters].

> Grandmother Bopha: "[…] Some children who were born with easy characters haven't been difficult since they were young. But for some children who are difficult to advise, they have been difficult since they were young. I will explain like this. They don't really listen when advised. That's it. Grandmothers and mothers don't want children to look inappropriate. We want them to walk only on

good pathways, to be appropriate, to have knowledge about what is right or wrong. But because their own characters are hard to be advised, they show this character, so just let it go. I can't give them advice at all. Difficult! Not easy! So, they must be disciplined with both good words and bad words. Come along together [laugher]."

Mother Krovan (age 56): "Children are different. One is different than another one. For some children, they behave only when you use harsh words. Some children, you don't need to scold them. Just ask them and they do it. And some children they only do it after being scolded with a few words."

Father Minea (age 32): "Some children, I think, are naughty because of their nature, their personality, they've had it since young"

4.4.4 Concerns around drugs, crimes and traffic accidents

Participants expressed their concerns over children involving in drugs, crimes and traffic accidents.

Mother Romjong (age 42): "Afraid they go out, walk on the wrong path such as using drugs, becoming a gangster and committing crime. It's unsure about children these days. An older child is very difficult. When they are away from home, we, as mums, who stay at home are scared or cannot sleep well because we think about our children. […] When hearing the sound of their motorbike, we start worrying. Also, we worry about their safety on the road. It's difficult in this current society."

Father Vicheka (age 44): "For wrongdoing, I'd tie them in the middle r of the house and beat them until they fall down (laughing). If they could no longer be corrected, I'd use an electric shock on them (everyone laughing). Let them do good things and buy a motorbike for them to ride, but if they turn to drugs, I'd do this. That's me. If they are bad, I'll be bad to them too. […]"

Although using drugs, committing crimes and road accidents was a concern about older children, older children were less likely to be beaten by their caregivers than younger ones. The reason for this may be due to a fear of revenge from older children, as one said: *"[…] But for older children, they will beat us back if we beat them. […]"* Father Minea (age 32).

In contrast to parent groups grandparent believed that parents these days were more tolerance to their children. I wonder if this may relate to grandparents being growing up during the war time and had seen violence a normal daily routine?

Grandpa Prenh (age 59): "Before it was so severe. Now, our society leads us. The current society has changed for us to follow. Follow the society. The current society teaches us. Politics in our country! We see others do good things, then we do so the same."

"That was during the past societies. The current society is different. During Pol Pot regime (civil war between 1975 and 1979), people beat each other not knowing if they are their parents. The current society teaches us." Grandma Chhuksor (age 54).

Violence against children could be prevented if parents and children understand its consequences:

> Grandma Bopha (age 63): "Nowadays, it's better. In my generation, we scolded so often. But not often these days! These days, people understand"

> Grandma Nakry (age 45): "[…] Nowadays1, it's not allowed to beat kids. Let them go to school, the teacher will advise them like this and like that and they will listen to you. Beating makes them naughtier."

A few fathers regarded the use of technology and social media to contributing to a better understanding of violence against children and its consequences.

"In the past, parents beat children severely. Beat with a rolling hook I know from my parents. Was beaten with a rolling hook. But now we can't do this. Can't use violence because these days we watch on TV and so on. They educate us, and we just pick up any good points to explain our children." Father Mesa (age 43)

> Father Kompheak (age 40): "In the past, we didn't t have TV to watch. Nowadays, we all have TV and phones. Not like before."

4.4.5 Violence and the influence of alcohol

Alcohol abused is a major problem in Cambodia. According to the World Health Organization 2015, one-tenth of Cambodian people aged from 8 to 17 reported having had drunk alcohol. Eighty-two percent of adults aged from 18 to 32 consumed alcohol regularly (Khmer Time, February 13, 2018). According to the participants, people, especially men, usually drink alcohol after heavy work they do during the day, and alcohol was consumed to relax their muscles. The high rate of alcohol consumption may be due to poor restrictions on alcohol advertisements, and easy access to buy home-brewed alcohol in the community.

> Father Kompheak (age 40): "In a family, violence also occurs when drinking alcohol. When drinking, they may be aggressive and cause trouble with their wife or children. That's when the alcohol gets into the body. When drinking alcohol and becoming drunk, those people are difficult to be communicated with. They don't listen. Even those who don't drink still can't understand each other. What's about when coming drunk?"

> Grandma Champa (age 69): "Violence is [pause] such as when parents beat children not knowing if the child is right or wrong. When becoming drunk, they beat them [followed by others in the group: yeah, beat without reason]. Such as creating stories to justify beating!"

4.5 Intergenerational practice of violence against children

Participants explained that their parenting styles were very much like to their parents. They disciplined their own children in the ways that their parents disciplined them. Participants said that the past methods of child discipline they witnessed and experienced from their caregivers incorporated violent and non-violent child discipline.

Mother Ruen said that she has experienced herself being yelled at by her parents to make her scared and obeyed them. She believed that some level of violence could be effective to produce fear and have children obeyed parents.

> Mother Bobraek (age 46): "Learn from our parents in the past. We need to yell at them [Laugher]. When our parents yelled at us, we were scared. So we yell at them to make them scared as well."

Another mother had never been beaten by her mother but being blamed.

> Mother Chanthou (age 35): "We have seen what our parents did in the past. What our parents disciplined us, we followed. My mother never beat me. She just blamed me. So, I do the same. I never beat. For the blaming, I blame. And when they made mistakes, I got the hair comb, and they ran away. Never had a chance to beat."

All grandparents who participated in this study also agreed that methods of child disciplines they used were learned from their own parents in the past.

> Grandmother Romyol (64): "Our parents used to [grandfather Prenh follows: from parents] parenting   us like this or like that, discipline us like this or like that. So, we also do the same."

> Grandmother Rumdul (age 63): "If a mum had never beaten her children, how can her children beat their own child? If we are angry and cannot bear it, we cannot avoid beating children."

Some fathers disagreed with this intergenerational child discipline practice, they insisted on parents' in-ability to control angers resulting in violence.

> Father Kakada (age 38): "[…] I mean beating with wire. The wire is in our hand. No one teaches us   to use it. When I tell my child that I am going to beat you, no one taught me this. It depends on us whether we can control ourselves or not. No one teaches us. It's our heart"

> Father Makara (age 40): "All about kicking is because of anger inside oneself. It's from ourselves."

4.6 Summary

Child discipline was utilised when children had good behaviours as well as bad behaviours. The majority participants gave positive reinforcement when children have good behaviour, but punishment when children have bad behaviour. Most participants were aware of the negative consequences of harsh punishment toward children yet were concerned with their inability to control anger, rage and lacking positive parenting skills. Intergeneration practice of child discipline and or violence against children, was explained as a 'learned' behaviour and a self-mechanism to deal with angers. The next chapter illustrates strategies to prevent violence against children in the home setting as recommended by the study participants.

CHAPTER 5: PREVENTING VIOLENCE AGAINST CHILDREN IN THE HOME: RECOMMENDATIONS

5.1 Introduction

This chapter provides recommendations to prevent violence against children in the home setting, as given by the 30 caregivers who participated in this study, 10 mothers, 10 fathers and 10 grandparents. This chapter includes two sections. Section one provides recommendations of strategies to prevent violence against children and section two gives a chapter summary. In this study, participants– were invited to join in six FDGs to come up with strategies and recommendations to prevent violence against children in the home setting. Themes emerging from the discussions focused on the needs to have a community awareness on violence against children; prevent of alcohol abuse; and community-oriented interventions to prevent violence against children.

5.2 Recommendations to prevent violence against children in the home setting

As noted earlier, 20 parents and 10 grandparents were asked to discuss how violence against children in the family could be prevented. As described in chapter three, section 3.4.6. participants participated in two focus group discussion sessions. They were grouped into three homogenous groups of mothers, fathers and grandparents. The first FGD focused on the views and experiences that participants had about violence against children.

The second focus group discussion (phase two) was conducted one week after phase one. All of those participated in the first FGD were invited with 30 of them attending. In this second phase, all attending mothers, fathers and grandparents had an opportunity to meet each other. Each group would first asked to present their recommendations produced in the first FGD to other groups and answer questions.

Participants discussed the significance of each key strategy presented; identified activities, people or organizations responsible for activities; and potential obstacles when implementing the strategy. The mothers' group worked on the community intervention strategy. The fathers' group focused on prevention of alcohol abuse strategy. The grandparents' group focused on raising community awareness about violence against children.

5.2.1 Raising community awareness on violence against children

Participants from the mothers' group would like to have community-based programmes focusing on raising awareness on types of violence against children; how to prevent violence against children; regulations on violence against children and healthy parenting skills and practice. Participants were aware of some information about violence against children given in various media (such as television, radio and Facebook) and through local authorities such the village chief and the police officers. However, the latter had come only after severe incidence occurred.

Two mothers, Kolabthat and Daliya, explained that the local authorities would only come when they heard about a severe case of violence requiring medical attention. The local authorities never offered any preventive strategies to violence against children. Participants saw this approach as ad-hoc and not effective in stopping violence against children in their communities. Local authorities would usually brief the community about relevant laws and regulations relating to violence against children, but often just reinstated what had been presented in the media.

> "If we called the police, they'd come to educate and give advice to the parents. Advice not to beat children because beating children is against the law. These days we are taught not to beat children. It's shown on the TV"

Villagers usually got information on incidence of violence against children in local television programmes. In Cambodia, there are 17 local privately owned TV channels. Topics on violence against children are often aired by a few private channels such as Bayon TV channel and Apsara TV channel. Mother Kunthea and Mother Daliya gave examples of relevant TV programmes showing good parenting focusing on kindness, love and compassion parenting practice. I have observed a few programmes, such as debates about children's rights and on good mothering Channel Apasara . I was aware of some interviews with officials of government or NGOs on child rights and violence against children on the Hang Meas channel (private TV channel).

> Mother Kunthea and Mother Daliya: "Through television or else. It shows parents how to love children, how to take care of them without using violence."

In the fathers' group, Mithona, (age 38) agreed with the effective use of television to reach wide populations. However, as people are spending more time on their mobile phone, these television-based messages might have gone unnoticed.

> "[…] the information sharing through television is really good because it reaches the wider population. Very wide through the television! Now, there are short movies made by both governmental and non-governmental organisations. Some people enjoy watching them. Some may not even know about them."

Importance of raising community awareness on violence against children

Most participants believed that while mass media campaign in local television had been useful in raising community awareness about stopping violence against children, they however, did not believe that such campaigns would guarantee good practice. They argued that a community-based education on healthy and non-violent parenting was needed. The community ought to know that laws and regulation exist to protect children against violence. Father Kakada (age 38) suggested experts with good knowledge about violence against children and non-violent parenting skills could be invited to the village and provide training for the community.

Fathers, Mithona (38), Tola (34) agreed that experts come either from the government or a non-governmental organisation are needed to educate the community on violence against children:

> "I think I want the Government to find ways to provide education, or for other organizational networks to come directly [Mithona added: come to the village or commune]."

This strategy was also supported by other groups.

Non-violent parenting practice

Many participants were interested in having education about violence parenting practices. Granma Romyol (age 64) would like her grandchildren to respect, obey and listen to her, yet did not know how not to use threats.

> "In my mind I want to know how to have children listen to us… we can let our children being ignorant and just let it be, right? I want to know how we can continue to have influence on our children and have them listen to us."

Grandma Royol was not interested to having a dialogue with her grandchildren rather than commanding attitudes.

Mother Kolab (age 44) also saw the need for a workshop or course on non-violent parenting and disciplinary practice to all community members:

> "Educate all. Call for a meeting and teach us how to not use violent discipline."
> The following section focused on raising awareness on laws and regulation preventing violence against children in the community."

Awareness on laws against violence against children

Fathers' group believed that the introduction of laws on violence against children must focus on educating parents and not to impose fear or threats. Father Vicheka believed that imposing penalties and punishment was not an effective way for communities to adopt the laws on violence against children. He believed that parents have full authority to educate and discipline their children.

> "[…] If having this law to protect children, it's good. But this law shouldn't punish the perpetrator because it's about discipline in the family. Can't take them to punish."

Other fathers agreed that parents ought to have full authority to educate their children. Some, however, saw that violence resulting in death and severe injuries were unacceptable and the perpetrators must face imprisonment or serious charges. Father Mithona noted that violence against children in the family setting perpetrated by parents or caregivers would not be as severe as that perpetrated by strangers. He was also in favour for less-severe punishment for parents' perpetrators and opted for counselling and reconciliation programmes. To summarise, Mithona explained:

> "If children are beaten to death, that can be punished. Or if the beating resulted in permanent damage of a hand or a leg or causing disability, that can also be punished, but not for a long time. Take the perpetrator and educate them [Other fathers agreed]. You can't put them in jail for one to three years. Better to just give some advice, take their fingerprints, or made a contract or warn them not to be violent against their children again.

It was very interesting that the level of punishment imposed to perpetrator of violence was differentiated not based on the severity of violence but on the perpetrators. Some participant believed that parents' perpetrator should not be severely punished than strangers, even when the violence against children resulting in severe injuries.

Grandmothers, Chhuksor (54 years) and Chhuksor (54 years) wanted the local authorities to explain about relevant laws and regulations to protect children from violence:

> "…some authorities should come and explain to us any laws or penalties for any acts of violence".

Next participants discussed relevant activities to be included in the community awareness programmes.

Activities and responsible persons

Participants noted that activities to raise awareness should include community education and to be run by experts. Interestingly, most participants believed that neither the village chief nor police officers were experts in this area and they wanted external experts from prominent organisations with good track records in violence prevention.

Some participants saw the value of having teachers in local schools to coordinate the community awareness programmes on violence against children. They however, were not sure about how to implement this recommendation. Participants wanted for such programme to be sustained in the community, as noted by Father Seiha, grandmothers Chhuksor and Champy:

> Father Seiha: …t if we have regular education people will pay attention.

Grandma Chhuksor: If we let it go astray … it will disappear.

Grandma Champy: yes… if you come here for one month to run your workshop then you disappear for the next two years, never come again, people will lose interest.

None of the participants saw the value of educating or training for community members as to form a community committee to prevent violence against children. Participants recognized that individuals could learn for themselves about the consequences of violence against children, as presented in the media (television, radio or social media) for free.

Some participants thought about empowering community members in taking a role as 'a watch dog' or community outreach person in preventing violence against children. Others believed, such responsibility should apply for all community members. Some participants also believed that 'it takes a village' to raise a child. Community therefore needs to be a safe place for children to grow and for their safety to be prioritized. Next section included some potential barriers to programmes implementation.

Possible barriers
<u>Difficulties in getting an expert coming to the village</u>

Participants preferred outside experts to train them about the impacts of violence against children and how to prevent it. They believed that no one in their village was qualified to do such training. Mother Kolap believed that villagers did not have the right background to provide advice on non-violent discipline.

> "For the one person we have in our village who usually tells us about violence against children… I think they realise that they were not qualified for that. So, people doubt their knowledge and, who will listen to them? But forsomeone who comes from elsewhere, we don't know what their histories are. So, when they provide good advice, we listen to them."

Father Seiha (53) argued that those in the villages who provided them with education might have committed violent behaviour themselves, so no one would listen to them.

> "… we live in this small village, we know each other's mistakes… we cannot be expected to educate our village folks   they may say to us that we were not innocent either, so how could we then tell others?"

For father Seiha's view, the villagers would put more value in having outside trainers:
> "In here, it's like this. Like what was mentioned by my friend, people don't believe their own village folk who have received training to educate them. Our folk might not be interested in attending any of those workshops… as our people believe that insiders are not comparable in terms of knowledge to the experts from out of the village … to whom they would listen more".

Through the fora it was revealed that villagers were not confident that those they knew (insiders) could provide them knowledge about violence against children. Such high dependence on outsiders makes it difficult for community sustainability. The villagers themselves could take an active role to community education to sustain the effort to prevent violence against children.

Poor participation and motivation

Lack of personal commitment and motivation of community members were seen as a barrier, especially, when there were no incentives for communities participating in the events.

While knowledge may be provided freely to villagers and this may help them to raise their children better, they felt they should be paid for their participation.

Seiha (age 53) were not surprised by the lack of villagers' motivation to participate in village activities, such as the monthly meeting with the village chief which only a very few people attended. Giving incentives, such as money could motivate the villagers to participate in activities.

> "Often the village administrator needed to use a loudspeaker to remind community about the meeting. But if it was announced that they would be given 50,000 riels (12.5$), they would all come, women and men, young and old", as stated by father Seiha.

Grandma Romyol (64) disagrees with Seiha.

> "[…]. Some people come to listen to information because they want to improve society. But some don't always think like this. They only care about getting money. They only care about self-benefit."

Mother Romyol, if the villagers understood the importance of attending activities they would actively participate, even though there was no incentive.

Lack of time

The media (especially television) was believed to be a good way to raise community awareness about violence against children however, it was felt that people may not have the time to watch it.

> Mother Kolab aged 44: "They have one. But sometimes, they don't' have time to watch."

> Father Mithona aged 38: "Related to watching or listening to the TV, some people could be busy working and didn't have the time to watch television".

5.2.2 Reducing alcohol consumption

The fathers' group discussed strategies for reducing alcohol consumption. They were aware of no activities in place to prevent alcohol abuse. While alcohol consumption increases the risk of violence against children, alcohol can be produced locally and was very cheap to buy. They stated that children and women were likely to be abused by those intoxicated by alcohol. Participants stated that there was a need to address alcohol abuse to promote safety community for children and family.

Importance of reducing alcohol consumption

Some participants believed that under the influence of alcohol people were likely to be aggressive, having poor judgement and self-control. Drinking behaviours were not good examples for children.

Father Kompheak (40):

> "To prevent violence, drinking alcohol must stop. When someone gets drunk he may well commit aggressive or violent behaviours. Violence in the family often occurs when someone was drunk. When drinking, people may get aggressive and cause trouble for their wife or children."

Fathers, Mithona (38) believed strongly that alcohol was the root cause of violence and that severe violence occurred when people become drunk, as people's judgement and decision were severely impacted by alcohol.

> "Because alcohol is the root cause of violence. Other injuries are also caused by alcohol because when we drink too much, we will be unclear mentally and can't control ourselves. Then when we beat children, we may think that we beat them a little bit, but it's actually severe and can cause serious damage".

Grandmas Kao (65) and Nakry (45) added that alcohol had a poor effect on communication causing misunderstandings and poor decision making. Nakry believed that when people stopped drinking they would communicate better: *"we can understand each other, and children will also listen to parents well"*.

Grandma Krovan (56) upon listening to the presentation of the fathers' group stated that:

> "children would lose respect for parents who were regular drinkers and older children might want to beat the drunkard themselves [laughs]"

Activities and responsible persons

Although alcohol consumption may not be able to be totally stopped, some harmful practice can be eliminated. Some participants suggested putting public announcements or campaign against alcohol abuse along the road, pagodas and schools. These activities should be the responsibility of the village chief and the police officers. Some

slogans suggested included "Don't drink alcohol as it damages health", "Drinking too much alcohol causes violence"

Father Mithona, recommended the use of leaflets or programmes in the media describing the negative consequences of drinking alcohol. Mithona was adamant that leaflets showing the real picture of the damage caused by people intoxicated with alcohol would be effective. He believed that any public activities would be effective, as there had been no public awareness messages to reduce problem drinking.

Awareness of the harmful effect of alcohol consumption is important. In Cambodia, there is not enough information disseminated about these negative impacts. On the contrary, advertisements about alcohol brands advertised by the media and television promote drinking cultures. The concern and initiative from this fathers' group was new to authorities and must be supported by local authorities and relevant organisations.

Although valuable recommendations were provided, there were also some obstacles raised by the participants regarding the best strategy to reduce alcohol consumption.

Possible barriers

Many participants saw stress, addiction and poor law reinforcement as key barriers to implementing a strategy to reduce alcohol consumption.

Work stress

With the majority of men working in rice fields, participants complained of heavy work. Gathering with friends and drinking alcohol after work was one activity that could relieve stress. Some participants said that drinking alcohol can heal the pain from work, like Grandma Bopha (63) who said:

> "Too much work, so need to drink. When they work hard, they drink to increase their muscles, to heal sick musclse"

Addiction is a social problem

Alcoholism is hard to beat. When one depends on it, he or she cannot control how much or how often he/she drink (Staff, 2015).

> Grandma Nakry: "If a person is already addicted, how to we do it?? So, I have put here in this box (written paper) that we can't advise them. We can't advise addicts"

<u>No regulation</u>

Currently, in Cambodia, there is no age limit for drinking alcohol, no limitation on selling and advertising alcohol and it is the country with the lowest taxes on alcohol production in the region (VOA Cambodia, 2019).

Poor alcohol consumption and production regulations may be the cause of increasing alcohol consumption or make the activities recommended above unsuccessful. The solution to tackling this obstacle therefore, is use laws to regulate alcohol consumption, such as limiting the age of drinking and reducing production by strictly limiting the number of alcohol producers. In forum two, Mother Nuonsrey aged 28 mentioned that when children were allowed to buy alcohol in the market, they are likely to try drinking it when asked to buy it by an adult, as they would want to know what it tasted.

> Mother Nounsrey: "Ask children to buy alcohol time to time and then they drink it secretly."

Children are like a blank canvas. They will become the colour that it is painted. According to mother Nounsrey, children whose family members drink alcohol are likely to become alcohol drinkers from a young age.

In the Fathers' group, Seiha (53) retold a story of a girl who was asked by her mother to buy alcohol and the girl became a drinker herself.

> "There is the case. For example, Run whose mother asked her to buy alcohol. When she returned from the store she drank a ittle bit. Repeating this again and again, she drank from the time she was a young woman until she got married."

Father Mithona (38) mentioned the same problem of young children who learned to drink alcohol at a very young age because he or she was sent by adults to buy alcohol. According to Mithona, to reduce the harm of alcohol, the village needed a plan. In the village where this study was conducted, home brewed alcohol was produced by households. Thus, people can produce, buy and sell alcohol. Children as young as 3-5 years old could be asked by their parents to get some alcohol from their neighbors.

Mithona added:

> "In other countries, the laws say that you have to be at least 18 years old to buy alcohol or cigarettes… here we are too lenient, not strict, some kids may have money and can buy alcohol because there are no laws to prevent or catch them."

Father Seiha and Mithona believed that there should be law to limit buyers and alcohol production.

5.2.3 Community intervention

Community-based intervention on violence against children may target family members, neighbours and other people of influence in the community, like the commune chief, the village chief or the police.

Importance of community interventions

Many participants believed that community-based prevention on violence against children should include raising community awareness, community training, enforcement of laws and regulation about alcohol use.

Participants saw the roles of local authorities, especially the police force, teachers and NGOs to educate perpetrators of violence as essential. Grandmas, Nakry (45) and Romyol (64) believed in the role of the individuals and to influence change. They would not hesitate to approach a perpetrator to stop using violence on children if they saw one. They would not hesitate to refer the perpetrator to the police for help. Keo (65) suggested that community members should take an active part in stopping violence against children by helping their own family to know what is right and what is wrong.

Community members would require skills to work with perpetrators, like dealing with aggressive behaviours.

Activities and responsible persons

Participants recognised that family members had a role in intervening when violence against children occurred in their own family. Family members are in close proximity to where violence occurs and can take immediate action to stop It.

Mother Romjong aged 42, agreed with the roles of parents to stay vigilant and be the educator in their families. Romjong would tell her husband to not beat their children *"don't do that… you are a man and a man's hand is heavy"*

Grandma Chhuksor (54) was insightful and she metaphorically compared anger to a leaky dam, meaning that anger will produce leaks and therefore a husband and his wife should be able to calm each other. Her group member, Champy added: *"…so that the dam won't leak! If everyone is angry, water will leak [laughing]"*

This practice of family members becoming the primary change agent to fight violence against children was supported by all groups.

When an incident was out of control, participants argued for separating the perpetrators from the victims. Father Mesa gave the following example:

> "For violence against children [pause] if we encountered it, even if they are older than us or younger than us, if we see them beating their children, we stop them. […]. If the perpetrator still can't stop … don't fight him, we must take the child away. […]. Take the child away. Then we calm the father. When the father stops being angry he'll get on well with the child again.

In situations where separation was not effective, neighbours would refer the case to the village chief or commune chief and/ the police.

> "If he can't stop, we have to call the village chief and the police. If they still don't listen to these people, there's no other solutions" Mother Krovan or "we call the authorities" said Mother Kolab.

A few participants also recommended an institution or organisation with skilled people to deal with perpetrators in the village.

> "Importantly only people who have the skills and knowledge are selected to intervene. If there is any organization that works to advise and explain to people who have bad behaviours, or sends them somewhere to change, that's good." said Father Mithona.

Activities for community intervention offered a clear structure for intervention. The one who are closest (family members) must be taking a primary role to stop violence against children followed by neighbours, local authorities and institutions or organisations. This can ensure the child is safe. However, through the discussion, there were also some obstacles mentioned.

Possible barriers

Community intervention is considered as an effective strategy to stop violence against children, however, barriers may include lack of skills and concerns over a breach of a family's privacy.

Lack of skills

Although participants were adamant that everyone in the community should be responsible for preventing violence against children. In most cases however, they believed that local authorities such as the village chief and police officers were those to implement the law: Father Makara (40):

> "… they must listen when the police and the village chief come because they can't run away"

Participants were clear about the roles of family members and neighbours in stopping violence against children and those of authorities. Severe violence needs to involve local authorities, mother Malis: *"The village chief comes only when the violence is severe."*

The family members and neighbours, thus, should be equipped with skills to stop violence against children.

Violence against children is still considered to be a family matter

Most grandparents acknowledged beating children at home to be a family matter that they should not get involved with. Grandma Keo (65): "We can just see it from a distance. Just keep it in our minds", Grandpa Prenh (59): "Stop it just once. If they scold us, next time, we won't talk to them anymore [laughing]." Mother Kolab (44): *"…For example, when we stop them, sometimes they respond with "I beat my own child... don't get involved in this. I beat the child in my family not yours".* We are not very courageous about this. This might be a big barrier to prevent violence against children in the home setting.

5.3 Summary

Thirty participants worked in two stages of group discussions to discuss strategies to prevent violence against children in the home setting. This chapter discusses three recommended strategies recommended by participants: raising awareness about violence against children; needing regulations and laws to prevent violence against children; reducing alcohol abuse.

Raising awareness about violence against children in the home setting includes awareness about non-violent parenting practice and raising community awareness on laws against violence against children. To be able to raise awareness, participants recommended community forum or spaces to deliver knowledge. They expected local authorities and experts from both Governmental organisations and NGOs to train the communities. Barriers to recommended programme may related to lack of qualified persons or experts, communities' low participation and lack of time.

On alcohol consumption, alcohol was believed to be the root cause of family violence. Educations, flyers and posters public areas are recommended activities. Local authorities such as the village chief and police officers were those expected to take a leadership role on this programme. Barriers to programme implementation might relate to personal attitudes and practices around drinking alcohol, non-existing regulation on alcohol in Cambodia.

A community intervention is another choice to prevent violence against children. This strategy was seen as a collective responsibility of the community. Barriers perceived

included community members lacking skills to stop violence in a peaceful manner and fear of the interfering in a family matter.

CHAPTER 6: DISCUSSION AND RECOMMENDATIONS

6.1 Introduction

This chapter begins by discussing the key findings followed by recommendation on actions to prevent violence against children in the home setting. Firstly, I will discuss the caregivers' expectations for children and how such expectation may lead to harsh discipline leading to violence against children. I argue that the following determinants are relevant: caregivers' expectation, family hierarchies, 'saving face' culture (i.e. maintenance of family reputation and harmonious relationship), and intergenerational adoption of parenting styles and skills; to be central to the discourse of violence against children in Cambodia. Alcohol consumption was mentioned as also contributing to domestic violence, including violence against children. I then discuss the participants' recommendations about how to reduce violence against children and how these recommendations fit within current violence against children policies in Cambodia.

6.2 Summary of key findings and discussion

There are three factors s which emerged from the findings: 1) practices of child discipline which at times may lead to violence against children are complex and subjective; 2) cultural and 3) intergenerational.

Chapter 4 described details about the common methods of child discipline practiced by participants, from giving positive feedback and reinforcement of good behaviour to harsh punishment, manipulation and intimidation. Participants also observed the adverse effect of harsh physical punishment and the use of lies and intimidation in parenting. Participants recognized their feelings of frustration and felt they needed good parenting skills. Participants were insightful of the influence of intergenerational practices of child discipline during their own upbringing as a child and that child discipline can be a collective practice.

6.2.1 Practices of child discipline is complex yet subjective

The context of child discipline as explained by participants is complex, and includes the importance of good academic achievement, the notion of 'playing as a waste of time', family hierarchies, and the use of lies and deception.

Academic achievement is important

Children's academic achievement took priority over any other skills and achievements. Achievement in sporting activities or arts were considered inferior to those academic

records. Children's academic records were thought to mirror successful parenting. A study by Steinmayr, Weidinger, Schwinger, and Spinath, (2019) supports   this finding, noting that parents are often trapped in the belief that good academic grades are the key indicator to success in adults' life, beyond non-academic achievement. Yet this belief has been contested by other studies by Tooley and Bornfreund, (2014); Behar-Horenstein, et al., (2016); Brown, and Chabris, (2020); Corazza, and Glăveanu, (2020) where success can also be determined by a positive mindset and "soft" life skills like self-regulation persistence, flexibility, initiative and cooperation, that are acquired in a non-academic environment.

Playing is a waste of time

Play in child's life was seen as not important and it was believed this should be restricted. For most participants, spending time on play or participating in sports was a waste of time and might take away children's time for study. Studies by Kohl and Cook, (2013); and Dubbels, (2016), however contested this attitude, showing that interactive play, physical movements through games or quizzes are associated with children's academic achievement. For example, role playing,playing with soil and sands, water games, building blocks, jigsaws, drawing and painting provide children with opportunities for developing interpersonal skills such as resiliency, creativity, cooperation, and problem-solving skills (Dubbel, 2016; McGinn, 2017). A study in Thailand, which has close cultural norms to   Cambodia also found the benefits of the use of 'play' in an academic curriculum to build students' curiosity, social skills, resilience, and creativity (Pinyoanuntapong, 2013). Studies on the central role of play time in children's education in Cambodia warrants further study.

Family hierarchies: Adults set rules for children

The practice of child discipline is a one-way top-down process, whereby adults have full authority to determine the rules for children and expectations of them. Children's voices and interests were not regarded as of equal importance to their parents. A study by Miles and Thomas (2007) explained that Cambodian hierarchical society considers the rights of children to be inferior to adults. Adults expect full obedience and devotion by children to their parents. Children learn to control their behaviour so as not to offend or challenge their parents. A study on child rearing in Cambodian refugees in the US also showed that in daily life, children have the lowest social status within the family hierarchy and parents had the highest authority (Kelley, 1996). A child's life is to be formulated by their parents/caregivers.

Next, I will discuss how lies and deception, and harsh punishment reinforces the conception of family hierarchy.

Lies and deception

Findings on the use of lies and deception (in Chapter 4) were similar to a study by "Save the Children" which found that lies and deception are also practiced by caregivers in East Asia and the Pacific to get children to obey parents (Nogami, Ennew, & Plateau, 2005). Unfortunately, children also learn from adults about lies and deception which they use in their own adult life (Bandura, & Walters, 1977; Evans, & Lee, 2013; Hays, & Carver, 2014; Setoh, Zhao, Santos, Heyman, & Lee, 2020). Setoh et al. (2020) in their study set in Singapore, suggested that children who learned about lying from their parents would learn to normalise 'lies and deception' to deal with their own problems and life stress, such as cheating during exams.

6.2.2 Using harsh punishment and emotional threats

In Chapter 4, I described how participants had used positive rewards (i.e., praises, gifts) and reinforcement to good behaviours. Studies on the effectiveness of positive rewards to reinforce good behaviors are ample with study by Diedrich, 2010; Adibsereshki, Abkenar, Ashoori, and Mirzamani, 2015; Rumfola, 2017).

A few participants also used harsh physical punishments and emotional threats to their children. There was disagreement amongst participants on the benefits of using this method. Some believed that this method would cause emotional and social problems in children's adult-life. The negative impact of physical and emotional punishment on children's wellbeing is well documented (Katie, 2016; Cuartas & Leventhal, 2020; and Bacchini & Esposito, 2020)

6.2.3 Saving face culture: Maintaining family reputation

The term 'saving face' for family reputation refers to the attempt to raise or protect the family's reputation, regardless of the wrongdoing of family members (Greg, 2019). In Cambodian society, the practice of 'saving face' is widely observed. For example, when premarital pregnancy occurs, the parents of both the girl and the boy get together to arrange for the couple to get married to save the reputation of both families (Jordana, 2016). Having a child born out of wedlock is considered as bringing bad luck and embarrassment to the family (Jordana, 2016).

I argue that the practice of child discipline is largely influenced by the aim to 'save face' to maintain the family's reputation. Parental authority may reflect a controlling

mechanism for the protection of family reputation. No family member is expected to bring disgrace to his or her family. This may also be relevant to the notion of children as 'an ownership' or 'an asset" and therefore children's behaviours need to be modified and controlled to reflect parents' good image. A culture of 'saving face' is also observed in other Asian countries like China and Japan. In China, some children are threatened by parents to show good manners to others (Zhao, Chen, & Li, 2020), while some Japanese children   avoid disagreeing with their parents in front of others for fears of punishment (Merkin, 2017).

6.2.4 Managing anger and alcohol

Of note here, some participants also brought up the effect of alcohol on harsh punishment and violence against children. The World Health Organization (2015) noted over one-tenth of Cambodian people aged between 8 to 17 consumed alcohol and 82 percent of Cambodian people aged between 18 to 32 consumed alcohol regularly (as cited in Khmer Times, February 13, 2018). The detrimental impact of alcohol consumption on individual mental, physical health; alcohol-related traffic accidents; crimes has been reported in Cambodia (Chea & Kim,2015). Evidence about the impact of alcohol abuse and domestic violence and violence against children has been reported in global studies such as those by Priolo-Filho and Williams, (2019) in Brazil and by Romero and Marín, (2020) in Mexico. Participants in this study showed concern about adults drinking, leading to violence in the home. Following concerns over alcohol and aggression toward children, participants gathered strategies to reduce violence against children, which were presented in chapter five.

Participants were clear about wanting to learn good parenting skills and child discipline practices, as noted in the following recommendation section. Lack of parenting knowledge and skills have been key determinants of violence against children (Antai, Braithwaite, & Clerk, 2016).

6.3 Recommendations

This section focuses on how participants' recommendations fits within Cambodia's recent Action Plan on Prevention Violence Against Children 2017-2021 (MoWA & MoSVY, 2017). I argue that my participants' recommendations and strategies to be relevant to three main areas: 1) community education, (2) the formulation of a community-based mechanism to report, prevent, and address violence against children (3) addressing alcohol abuse.

The Cambodian Action Plan on Preventing violence against children 2017-2021, includes five key strategies:

1) Coordination and cooperation between Ministries and Institutions at all levels.

2) Primary prevention.

3) Multi-sectoral child protection response.

4) Laws and policy formulation.

5) Monitoring and evaluation of programmes.

The following table provides a summary of Cambodian Action Plan to Prevent Violence Against Children (APPVAC) 2017-2021 (MoWA & MoSVY, 2017).

Strategy	Objectives	Sub-area	Activities	Lead institution* and supporting institutions	Outcomes
1.Coordination and cooperation	To coordinate multisectoral response on primary prevention.	1a. Multisectoral institutional framework	• Strengthening the roles, duties and responsibilities of CNCC, WCCC • Incorporating activities from action plan into Annual Operation Plans	CNCC, MOI(*) Relevant Ministries and Institutions, WCCC	Better coordination and cooperation.

2.Primary prevention	Multisectoral response on primary prevention.	2a. Media, communication strategy and information	- Developing behaviour change campaign - Using ICT platforms - Putting the topic in education curriculum - Establishing Media Advisory Group and training on Code of Conduct - Formalising a media monitoring protocol and regularly publish an official report	MoWA/MoSVY, MoEYS, MoInf*, MoInf., MoCR, MOH, MoT, MoEYS, Relevant stakeholders	Increased media promotion of gender-equitable, non-violent information and behaviour
		2b.School - based programmes	- Developing and implementing pre-service and in-service training to teachers and school staff - Developing a School Child Protection Policy and School Code of Conduct - Incorporating key child protection indicators into the Child-Friendly School monitoring framework - Training District Training and Monitoring Teams on collecting data and reporting on child protection indicators	MoEYS* MoWA, MoH, MoSY, Relevant ministry institutions, MoI, MoJ, MoH	Girls and boys are increasingly protected from violence in schools by institutional and legislative frameworks

			• Carrying out a review of the compulsory curriculum in kindergarten, primary and secondary schools • Incorporating comprehensive, inclusive sex and safe relationship modules into school curriculum • Developing a youth-oriented positive parenting module and Toolkit. • Developing and promoting peer-to-peer approach in schools		
		2c. Supporting parents, caregivers and families	• Building positive parenting strategies (develop toolkit) • Training social Service providers to use the toolkit. Level 1 is raising awareness to the public, level 2 is developing group parenting interventions for targeted families at risk of violence, and level 3 is providing specialized parenting support as part of the child protection response when children have experienced or witnessed violence	MoWA, MoSVY	Capacity of service providers to support parents and caregivers about gender and non-violent practice will be increased.

		2d. Community-based programmes	• Developing and promoting peer-to-peer approaches • Developingand implementing the Child Protection Pagoda Programme • Incorporating a child protection subject into the Buddhist education programme • Developing and implementings child marriage and teenage pregnancy prevention framework in ethnic minority communities • Outreach services targeting out-of-school children	MoEYS, MoCR, MoWA* Relevant ministry institutions, MoH, MoInf, MoI	Girls and boys are increasingly protected from violence by community programmes and religious institutions
3.Multi-sectoral child protection response services	To response to violence against children through strengthening social service providers' capacity	3a. Effective law enforcement	• Developing Child Protection Code of Ethics • Developing and delivering basic and advanced Child Protection training modules • Recruiting at least one female law enforcement officer trained in child protection in each police station • Developing and providing capacity building about child-friendly Standard Operating Psrocedures/protocol for handling cases of children in contact with the law.	MoI* MoWA, MoT, MoLVT, MoSVY, MoJ, MoEYS, relevant ministry institutions	Increased access to laws for girls and boys

| | | 3b. Access to child-friendly justice | • Making and providing training modules related to child victims, witnesses, and offenders for judges and prosecutors
• Strengthening the conduct of child-friendly practices for cases relating to children contacting the law
• Creating a separate court for cases of minors
• Modellingalternative justice mechanisms for cases of petty offense and misdemeanour violence against children
• Provide para-legal and legal services at sub-national level | MoJ*,

MoSVY, MoI, Relevant ministry institutions, NGOs | Increased capacity of the justice system to treat girls and boys well with international human right standards and based on their needs |
| | | 3c. Social service rehabilitation | • Formulating a clear resource mobilization strategy for child protection service delivery by supporting and collaborating with CSOs
• Makings basic training module on child protection and recruiting trainers to provide the training. | MoSVY*

MoEYS, MoH, MoLVT, MoI, MoT, NGOs, relevant ministry | Built up and enlarged integrated children protection system |

			• Preparing accredited train the trainers curriculula on child protection theory and practice and conduct the training. • Making centralized referral mechanisms • Creating a coordination and mechanism of a hotline • Creating an accreditation system and training for hotline service providers • Creating child-friendly Standard Operating Procedures/protocols and providing capacity building to social workers	institutions, Mo Telecom, MoJ	
		3d. Health services	• Disseminating and implementing the "national guideline for managing violence against women and children in the health sector" in referral hospitals and health centres. • Creating and providing training to health workers on "a clinical handbook: health care for children subjected to violence or sexual abuse"	MoH* Relevant institutions	Increased protection by all health services for girls and boys

			• Creating a Child Protection Code of Conduct for all health workers and itraining modules to incorporate into pre and in-Service training. • Creating training materials on online child sexual exploitation for health workers -Enforcing a Social Security fund programme.		
		3e. Education services	• Draft Prakas to appoint Child Protection workers in primary and lower-secondary schools • Revising the roles, duties and responsibilities of two teachers who act as Child Protection workers • Appointing and training at least one trainer in Child Protection per DTMT to support the schools	MoEYs* Relevant ministry institutions	Increased protection in schools for girl and boys
4. Formulating and amending laws and policies	To reduce violence against children through building up	4a.Corporal punishment and protection from domestic violence	• Advocating for Articles 1045 and 1079 of the Civil Code to be amended for corporal punishment of children to be illegal • Making corporal punishment in schools illegal	MoJ, MoEYs, MoI, MoWA* CNCC, MoWA, Relevant	Increased protection from corporal punishment for girls and boys

	the legislative and policy framework		-Advocating for adoption of a Child Protection policy and implementation in schools • Amending Article 2, paragraph 2, of the law on the prevention of domestic violence and victim protection • Reviewing and adopting the draft sub-degree that empowers Local Authorities to deal with domestic violence	stakeholders, NGOs, relevant ministry institutions, MoI, MoJ	
		4b.Sexual violence against children	• Reviewing draft sub-degree on Child Protection and Chil Protection Code of Conduct and ensuring it is child-friendly • Amending article 239 of the penal code • Adding a new Article to the penal code to make sure that non-physical sexual violence and grooming acts are criminalized. • Amending Article 40 and 41 of the anti-trafficing law • Adding a new Article to Cyber Crime law • Reviewing the Ttelecom law and proposing changes to build up ICT Child Protection on online and mobile platforms	CNCC, MoJ* Relevant Ministries Institutions, MoI, MoWA	Increased protection from sexual violence for girls and boys

		4c. Child neglect	• Advocating to amend Article 321 and 337 of the penal code • Advocating to add a new Article to penal code to make neglect of children aged below 18 a criminal offense.	CNCC*, MoSVY, MoJ	Increased protection from all kinds of neglect for girls and boys
		4d. Policy development	• Reviewing and updating existing laws, policies and provisions related to Child Protection and aligning them with CRC • Making mandatory reporting policies for all professionals • Making and conducting minimum standards for all Child Protection services • Raising awareness on Child Protection laws, policies and regulations to relevant stakeholders and institution. • Reviewing and making comprehensive policies on violence against children prevention and response to develop a institutional response • Creating an advocacy strategy to make a child protection system that meets international standards	MoSVY, CNCC, MoI* MoWA, MoH, MoJ, MoEYS, MOT, MoLVT, MoSVY NAA, All relevant ministries	Increased protection from all kinds of violence for girls and boys through Child Protection legislative and policy frameworks

			• Seeking commitment from District ACdministration to integrate activities of child Protection into their annual budgets and plans		
5. Monitoring and evaluation	To reduce violence against children through development of a comprehensive system for data collection and monitoring, evaluation, and reporting on children experience	5a. Monitoring and evaluation framework	• Creatinga monitoring, evaluation and reporting tool for a violence against children action plan Arranging annual progress reports for violence against children action plan • Conducting mid-term reviews and final review of the violence against children action plan • Arranging final impact report (five year implementation of the violence against children action plan) • Giving training on monitoring and evaluation tools to WCCC • Creating sector-specific procedures for data collection and reporting against core violation and protective environment indicators	CNCC, MoI, NIS, MoP* NIS, MoP, relevant ministry institutions, general directorate of local administration/ MoI, MoWA, MoSVY	Multi-sectoral monitoring and evaluation framework is implemented

	violence in Cambodia		• Creating a harmonised database on violence against children • Publishing a yearly analytical report on core violation and protective surroundings indicators • Conducting mid and final term reviews on violence against children action plan implementation		
		5b. Monitoring violence against children prevention and response evidence base	• Making partnerships with universities and research institutions and encouraging robust prioritized evaluation on particular policies and programmes' impact on core violence against children indicators • Raisings fund for commissioning evaluations of policies and programmes on violence against children • Writing lessons learned and best policies • Disseminating the findings of programmes widely	CNCC* Relevant ministry institutions	Development of an evidence base for strategies to prevent and respond to violence against children in Cambodia

Note:
- CNCC: Cambodian National Council for Children

- MoCR: Ministry of Cult and Religion
- MoEYS: Ministry of Education Youth and Sport
- MoH: Ministry of Health
- MoI: Ministry of the Interior
- MoInf: Ministry of Information
- MoJ: Ministry of Justice
- MoP: Ministry of Planning
- MoLVT: Ministry of Labour and Vocational Training
- MoSVY : Ministry of Social Affairs, Veterans and Youth Rehabilitation
- Mo Telecom: Ministry of Telecommunications
- MoT: Ministry of Tourism
- MoWA: Ministry of Women's Affairs
- NAA: National AIDS Authority
- NIS: National Institute of Statistics
- WCCC: Women and Children's Consultative Committees

According to the summary, strategy 2, primary level of prevention is best matched to the participants' recommendation.

6.3.1 Strengthening the community's knowledge about policies and programmes to prevent violence against children

Policies and commitment of RGC to protect children from being abused have been reflected in several Treaties. For example, in 1992, Cambodia ratified the United Nations Convention on the Rights of Child (UNCRC) to protect children from all forms of violence. The CRC implicitly incorporated into the Constitution of Cambodia on the Rights and Duties of Khmer citizens (1993), Article 48 of this constitution notes the rights of children to include the right to life, the right to education, and the right to freedom from sexual or economic exploitation. The Cambodian Domestic Law 2005 and the Civil Code 2007 are also relevant to child protection (Afrooz, 2015). Article 943 (1) of Civil Code 2007 states "members of a family shall respect each other's rights and freedom and shall support each other" (Afrooz, 2015, p. 18).

Following the ratification of the UNCRC in 1992, the RGC formed the Cambodia National Council for Children (CNCC) in 1995 and the Cambodia Women and Children Consultative Committee (WCCC) and Commune Committee for Women and Children (CCWC) in 2007 (World Vision, 2017) which then central to the effort to prevent and stop violence against children in Cambodia.

Protection of children against violence falls within the jurisdiction of the Ministry of Women Affairs (MoWA) and the Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY). The MoWA, formerly, the Secretariat of State for Women's Affairs was established in 1993. The name was changed in 2004. The MoWA's mandate include the protection of children's rights, girls and women's rights against violence, gender mainstreaming programmes and policies, women's economic empowerment, women's health and development, and women's participation in politics and decision making and climate change. The MoSVY works with vulnerable groups, including children, girls, women, those who are disenfranchised (e.g. the poor and homeless), those with disabilities, sex workers, people living with HIV and other hard to reach populations.

Participants' recommendations about strengthening community knowledge on policies and programmes to prevent violence against children was particularly relevant to the APPVAC key strategy 2 on Primary Prevention, sub-areas 1, 3, 4.

Sub area one focuses on the use of media (i.e. television, radio) and ICT (social media) to prevention of violence against children. Sub area 3 focuses on providing support for parents, caregivers and families and building capacities within service providers to

training on positive parenting. Sub area 4 seeks to formulate community-based programmes through peer education, child protection pagoda programme, prevention of child marriage and teenage pregnancy among indigenous people, and outreach services targeting out-of-school children (Appendix 6).

6.3.2 Community based mechanism to prevent violent child discipline/violence against children

Participants agreed about having a community-based coordinated effort and mechanism to collectively work together to prevent violent child discipline/violence against children. This collective member of the community may include family members, neighbours, schools, village chiefs, and staff and community police personnel. This insight reflects the realization that prevention of violence against children should be a collective effort and that includes all sectors in the local communities and community groups. This recommendation is relevant to the primary prevention key strategy 2 in APPVAC on strengthening community capacities to identify, prevent, provide appropriate violence against children in communities (sub area 4) (Appendix 6).

6.3.3 Policies and regulation on alcohol consumption

The World Health Organization (2015) reported an early drinking age in Cambodian society, with 10% of the population started drinking under the age of 17 years. The youngest reported drinking age was those 8 years of age. As high as 80% of Cambodian people aged between 18 to 32 consumed alcohol regularly (as cited in Khmer Times, February 13, 2018).

Home-brewed alcohol is produced locally by villagers. Drinking home-brewed alcohol is a common phenomenon observed in many social gatherings. The Royal Government of Cambodia, in 2015 started a draft regulation on alcohol purchase, consumption, and age limit. In this draft the age of drinking was limited at 21 years old; the sale of alcohol was prohibited between 12 AM and 6 AM and there were rules to limit media and market advertisement on alcohol products. Yet, the progress of this draft has been stagnant due to powerful business interests (The Voice of America, September 30, 2019).

Participants in this study were concerned about excessive drinking practices in the family setting that may exacerbate violence against children and other domestic violence incidences in their communities. Some Cambodians hold a believe that alcohol can create good moods and heal the body after heavy work (The Voice of America, September 30, 2019). However, it is related to traffic accidents and violence due to the current increase of its use in the country.

Alcohol consumption in Cambodia can be reduced in several ways. Increasing tax on alcohol could be one of the strategies to tackle alcohol consumption (Thavorncharoensap et.al., 2010; Diep, Knibbe, Giang, & De Vries, 2015; Jiang, et. al., 2018). In Vietnam, raising the price and lowering the availability of alcohol in the market dramatically decrease alcohol consumption among young people (Diep et.al., 2015). In Thailand, increasing tax on alcohol drink potentially reduces alcohol consumption and prevents drinking initiation among the young (Thavorncharoensap, 2010). Creating a culture of disapproval of alcohol consumption during gatherings is another way. In South Korea, alcohol is often introduced to young adults by parents, caretakers and peers during family gatherings or celebrations (Asante, Chun, Yun, & Newell, 2014). It is important to change the attitudes of parents, caretakers and peers in introducing alcohol to minors. It is important to limit advertising alcohol on social media because exposure to advertising increases the likelihood of drinking. In some Asian countries like China, Thailand and Vietnam, advertising alcohol consumption has been partially banned by some media (Jiang, et. al., 2018). Furthermore, Cambodia is a country whose official religion is Buddhism and 95% of population are Buddhists. Buddha strongly discouraged his followers from drinking alcohol because it can distort the mind. Strengthening education about alcohol harm in pagodas would reduce the amount of alcohol consumed in Cambodian society.

6.4 Study Limitations

This research had a few limitations, including time, resources, and the number of participants. The research was conducted within three-months of field work, and therefore I was only able to work with one village. Further studies may allow a longer field work period and include more villages to allow for comparisons and in-depth contextualization of the study topic. This study only included adults' participants – parents and grandparents – and there was a possibility of under-reporting or covering up the extension of violence against children in the home setting. The study was conducted in a rural setting and this may limit the generalisation of the study findings to urban communities.

6.5 Future studies

This study provided an in-depth understanding of the context in which violence against children occurs. It also explores community attitudes and perceptions about violence and the community's interest in preventing violence against children. It also showed that reduction of violence against children as a collective responsibility. Future studies may be expanded to include more community groups, both rural and urban communities, and government stakeholders to increase the likelihood of the implementation of the study.

Alcohol consumption is also central to the prevention of domestic violence including violence against children, and programmes and policies on alcohol abuse need to be addressed at the community level too, this warrants further studies. Further, as the Cambodia APPVAC 2017-2021 is only a year away, future research is needed to evaluate the implementation of this action plan and programme achievements across different key strategies and sectors.

6.6 Self-reflection of my research journey

I chose this study topic because I believe that all children, including Cambodian children, deserve a safe place to live and happy childhood. Children who live in secure environments are likely to be successful later in life while children who are abused may grow up as a broken adult and suffer from physical and mental illnesses.

I sought to explore perceptions and solutions to prevent violence against children from parents/caregivers because they spend most of their time with children and are central to the wellbeing of the children. I believe that parents or grandparents will do anything for the best interest of their children. They want to prevent their children from harm and illness and to have a thriving life. I was also aware of the high prevalence of child abuse in Cambodia and I wanted to explore the parents/grandparents' views and solutions to this problem.

From this research journey, I was made aware that parenting is a challenging task. To raise a good child, parents have to dedicate their energy, time, and effort endlessly. They need support from other family members and the communities. I was disheartened when I heard the frustration shared by my participants; they knew that it was not right to use violence to discipline their children, but they felt hopeless and admitted that at times it was unavoidable. The views that participants shared with me, was humbling and at the same time was motivating me to continue my commitment to advocate for children and families for a healthy childhood and family.

From this research journey, I have learned that the community's opinions are central to stop violence against children. Activities and strategies will work when they come from the heart of the people. It is my hope that the findings from my study will inform policymakers and changemakers to closely work with the communities for effective and sustainable programmes in addressing violence against children in Cambodia.

Appendix 1: Consent Form

For use when focus groups are involved.

Project title: Community's perceptions and strategies to prevent violence against children in home setting in Cambodia

Project Supervisor: Dr Sari Andajani

Researcher: Munin Neang

○ I have read and understood the information provided about this research project in the Information Sheet dated ....…

○ I have had an opportunity to ask questions and to have them answered.

○ I understand that identity of my fellow participants and our discussions in the focus group is confidential to the group and I agree to keep this information confidential.

○ I understand that notes will be taken during the focus group and that it will also be audio-taped and transcribed.

○ I understand that notes on flip charts and/or on whiteboard will be photographed.

○ I understand that taking part in this study is voluntary (my choice) and that I may withdraw from the study at any time without being disadvantaged in any way.

○ I understand that if I withdraw from the study then, while it may not be possible to destroy all records of the focus group discussion of which I was part, I will be offered the choice between having any data that is identifiable as belonging to me removed or allowing it to continue to be used. However, once the findings have been published in writing or in a conference d, removal of your data may not be possible.

○ I agree to take part in both focus group discussions (both phases): Yes○ No○

○ I wish to receive a copy of the summary of the findings from the research (please tick one): Yes○   No○

Participant's signature :..……………………..

Participant's name: ....…………………………….

Participant's Contact Details (if appropriate):

…………………………………………………………………………………..

…………………………………………………………………………………..

Date:

Approved by the Auckland University of Technology Ethics Committee on type the date on which the final approval was granted AUTEC Reference number type the AUTEC reference number
Note: The Participant should retain a copy of this form.

Appendix 2: Participant Information Sheet

Date Information Sheet Produced:
March 03, 2018

Project Title
Community's perceptions and strategies to prevent violence against children in home setting in Cambodia

An Invitation

Hello (Jum Reap Sour). I am Munin, a master student in school of Public Health and Psychosocial Studies, Auckland University of Technology, New Zealand. I'm conducting a study about community-based strategies to be put in place to prevent violence against children in home setting in Cambodia. I would like to invite you to participate in my study if you are a mother, a father or a grandparent of children aged 0-18. Would you be willing to help me? You participation in this study is however voluntary.

You will be invited to participate in one to two focus group discussions. Each group discussion will take about 90 minutes. You can withdraw from the study or leave the study at any time without negative consequences. All you contact information and answers will be kept confidential.

You are now given this participant information sheet, which mentioned more detail about the study. You may choose to read it by yourself or I can read it with you. If I read this sheet for you, it will be audio recorded to ensure that I read it correctly. Your participation is important and highly appreciated. Thank you for you kind attention considering this invitation.

What is the purpose of this research?

This study aims to explore community-based strategies that can be put in place to prevent violence against children at home setting. It will increase knowledge about prevention of violence against children in home setting through community-based strategies. It is hoped that it may be used as input of future policy and programme development in Cambodia.

How was I identified and why am I being invited to participate in this research?

Earlier, I was introduced by your village chief. Following this introduction, I would like to invite you to participate in this study. You are chosen because you are a mother, a father or a grandparent of children aged 0-18. As a part of family, you are believed to be part of solutions to prevent violence against children in family spheres. You will be able to voice your ideas regarding how community-based strategies can be put in place to support family and community to prevent violence against children at home setting.

How do I agree to participate in this research?

You can contact me via my mobile phone or facebook or email (detail below) and we can discuss about time and place where you consider comfortable for you. You will be asked to sign a consent form if you agree to participate in this study. If in family, you take roles both as mother and grandmother or as father and grandfather, you can choose which role you prefer to take part in this study. In focus group discussion, you will be provided the consent form to sign before the discussion starts. Your participation in this research is voluntary (it is your choice). You are able to withdraw from the study at any time without any negative consequences. If you choose to

withdraw from the study, then you will be offered the choice between having any data that is identifiable as belonging to you removed or allowing it to continue to be used. However, once the findings have been published in writing or in a conference, removal of your data may not be possible.

What will happen in this research?
Once you accept the invitation, you will be invited to discuss and share your ideas in the group. You may participate in up to two group discussions (phase 1 and phase 2). If you take part in both phases, it will take about 180 minutes (3 hours) in total (about 90 or 1.5 hours of each phase). In the consent form, you can put "Yes" if you agree to take part in both phases or "No" if you only want to take part in phase one. However, it would be great if you take part in both phases.

There is no option for gender group. In phase 1, if you are a mother or father, you will join a group of up to 5 people with the same gender and role as you. If you are grandparent, you are expected to join a group of up to five people who are also grandparents with mix genders (grandmothers and grandfathers). In phase 2, you will join mixed groups of mothers, fathers and grandparents, of up to 15 people.

There will be a facilitator in the focus group discussion. You will be able to choose activities such as drawing and writing on flip chart to present your ideas about community-based strategies to prevent violence against children at home setting. In phase 1, two indicative questions will be discussed including (1) what are the community views on influencing parenting behaviours and child discipline? (2) What commitments and resources do communities have to prevent violence against children in the home setting? In phase 2, the summary of discussion in phase 1 will be presented and one indicative questions will be discussed in this phase "how can communities play a significant role in preventing violence against children in the home setting?". During focus group discussions of both phases, the photography of notes will be taken. Be informed that only the pictures of works you produced during the discussions are taken. The photographs of your identities will not be taken.

What are the discomforts and risks?
There is no risk for the involvement in this study. Some of questions asked may however make you feel uncomfortable. If in any questions asked make you feel uncomfortable, you can choose not to answer those questions. You can also choose to stop your participation in this study without any negative consequences. I want to assure that taking part in this study is voluntary.

How will these discomforts and risks be alleviated?

Khmer language will be used in my study to make you feel free or comfortable to share your ideas. If you are uncomfortable with any question asked during the study, you can choose not to answer that question. During the discussion, you might feel uncomfortable with activities including note-taking, audio recording or taking photos of the notes. If you do feel so, please do not hesitate to ask me to stop and you can leave the discussions any time you want. Be informed that the picture taken will be only the work you do, not your picture and others in the group. You and your group members will decide which pictures of your work can be used for the study.

Please be informed that this study is to gain the perspectives from you about community-based strategies to prevent violence against children in home setting in general. The research is not intended to discover personal issues of violence against children in the family or the perpetrators of the violence. However, the contact of commune committee for women and children will be given and you can find support if you need.

What are the benefits?

As a part of family, you will be able to voice your ideas regarding community-based strategies to prevent violence against children in family sphere. Your communities may understand more the need to support family and do in the community to prevent violence against children in home setting. The information you provide may be also an input for policy and programme development that could benefit to larger communities. Children's health and development will be improved if strategies to prevent violence against children are effectively implemented.

How will my privacy be protected?

All information shared in our group will be kept confidential. Your identities will not be identified in the finding reports. The data collected from you will be kept away from other people in a locked cabinet. Data will be securely store at Auckland University of Technology (AUT) in New Zealand for six years once analysis has been completed. No one will have access to your information except me and the information is used only for the purpose collected for.

What are the costs of participating in this research?

There is no cost in participating in this study except your time. The usual contribution of travel cost will be provided to assist you with your travelling.

What opportunity do I have to consider this invitation?

You have one week to consider this invitation – after that I will contact you to see if you would like to take part or you can contact me through my contact detail below. You are under no obligation to do so at any time.

Will I receive feedback on the results of this research?

The research findings will be summarized and be translated into Khmer language. You will get a hard copy of it.

What do I do if I have concerns about this research?

Any concerns regarding the nature of this project should be notified in the first instance to the Project Supervisor, Dr. Sari Andajani, sari.andajani@aut.ac.nz, work phone number +64 9 921 9999 ext 7738

Concerns regarding the conduct of the research should be notified to the Executive Secretary of AUTEC, Kate O'Connor, *ethics@aut.ac.nz* , 921 9999 ext 6038.

Whom do I contact for further information about this research?

Please keep this Information Sheet and a copy of the Consent Form for your future reference. You are also able to contact the research team as follows:

Researcher Contact Details:
Munin Neang, munin.n07@gmail.com**, +64 22 0844 211 (New Zealand) or +855 17 838 013 (Cambodia), Facebook: Neang Munin**

Project Supervisor Contact Details:
Dr. Sari Andajani, Email: sari.andajani@aut.ac.nz, Work phone number +64 9 921 9999 ext 7738

Approved by the Auckland University of Technology Ethics Committee on *type the date final ethics approval was granted*, AUTEC Reference number *type the reference number*.

Appendix 3: Indicative questions for focus group discussion

Phase1 (85min)

Group………………   Facilitator ☐   Notetaker ☐

Preparation

Bring small table, big paper and A4 paper, small paper with sticker, pencils, rubber, pen, markers, tapes, ruler, sticker, consent forms, demographic data sheet, gifts and travel vouchers, refreshment and water, ground rule paper, evaluation paper, and participant information sheet.

Before conducting the focus group:

- Prepare refreshment and water and create seating as circle or U shape
- Stick group rule in advance where participants can see

Start the focus group

- Welcome participants
- Self-introduction and write down all participants' names and put in front of them
- Inform the purposes of the study and meeting
- Explain about the audio-record and photograph
- Explain there is not right or wrong for their opinions and request all to participate in the discussion
- Read consent forms and ask for their signature. Inform the next focus group meeting.

Questions and Discussion

Call their names before each participant give their opinions (Eg. How do you think, grandpa Tola or Do you have any idea, grandpa Tola) or after each participant give their opinions (Eg. Thank you, grandpa Tola) and mentions what was written or drawing during the discussion so that it doesn't make the transcriber get confused who or what was mentioned.

❖ **Knowledge, attitude and practice of child discipline**
   1. What is child discipline do you think?
   2. What would you do if your children have done something good or have had good behaviors? Is it acceptable or not? Why? Give examples of those good behaviors.
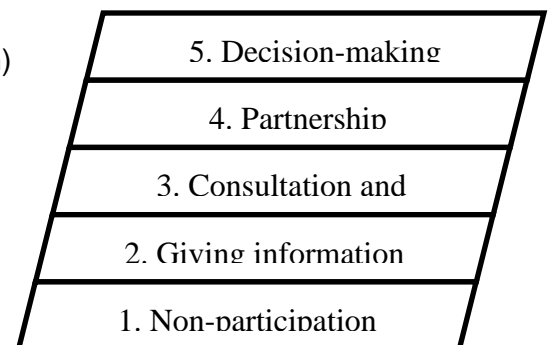
3. What would you do if your children have done something bad or have had bad behaviors? Is it acceptable or not? Why? Give examples of those bad behaviors.

4. Any other child discipline that parents do toward their children and considered as unacceptable child discipline?

5. How did you learn about child discipline? (Include the child discipline that you think unacceptable)

6. Have you ever heard about violence against children? Do you think that the unacceptable child discipline methods mentioned earlier considered as violence against children? Why?

❖ **Strategies to prevent violent child discipline/violence against children (Within group strategies)**

7. What roles do a mother/a father/a grandfather have to prevent "Violence against children" or "unacceptable child discipline?" (Or use a local term given by participants refer to violence against children)

8. How can members of community participate in preventing violence against children or "unacceptable child discipline"?
   - (Existing strategies) Who involved? Any progress? How to improve?
   - (Strategies proposed) Who shall involve? What should they do? Any resources needed?

❖ **Summary**
   - Summary discussion
   - Evaluation (Rate level of participation)
   - Fill demographic data

5. Decision-making
4. Partnership
3. Consultation and
2. Giving information
1. Non-participation

Appendix 4: Indicative questions for focus group

Phase 2 (75min)

Group………………   **Facilitator ☐   Note taker ☐**

Preparation

Bring small table, whiteboard, big paper and A4 paper, small paper with sticker, pencils, rubber, pen, markers, tapes, ruler, sticker, consent forms, demographic data sheet, gifts and travel vouchers, refreshment and water, ground rule paper, evaluation paper, and participant information sheet.

Before conducting the focus group:

- Prepare refreshment and water and create seating as circle or U shape
- Stick group rule in advance where participants can see

Discussion and questions:

- Welcome participants
- Summary phase 1
- ❖ **Community-based strategies to prevent violent child discipline/violence against children (Across group)**
    1. Ask each group about strategies to prevent violent child discipline/violence against children they mentioned in phase 1
    2. Show and stick all strategies and activities mentioned in phase 1 or new strategies and activities on whiteboard
    3. Group strategies and activities with participants
    4. Ask "Why those strategies are essential to prevent violent child discipline/violence against children in their community?"
    5. Divide them into three smaller groups to discussion each strategy they choose to discuss.

Strategy	Activities	Responsible persons	Challenges

6. Present results of the small group discussion and give comments

❖ **Summary and Evaluation**

- Summary discussion
- Evaluation (Rate level of participation)

| 5. Decision-making |
| 4. Partnership |
| 3. Consultation and |
| 2. Giving information |
| 1. Non-participation |

Appendix 5: Ethical Approval at AUT

AUTEC Secretariat

Auckland University of Technology
D-88, WU406 Level 4 WU Building City Campus
T: +64 9 921 9999 ext. 8316
E: ethics@aut.ac.nz
www.aut.ac.nz/researchethics

26 March 2018
Sari Andajani
Faculty of Health and Environmental Sciences

Dear Sari

Re Ethics Application: **18/103 Preventing violence against children in home setting in Cambodia**

Thank you for providing evidence as requested, which satisfies the points raised by the Auckland University of Technology Ethics Committee (AUTEC).

Your ethics application has been approved for three years until 26 March 2021.

Standard Conditions of Approval

1. A progress report is due annually on the anniversary of the approval date, using form EA2, which is available online through http://www.aut.ac.nz/researchethics.
2. A final report is due at the expiration of the approval period, or, upon completion of project, using form EA3, which is available online through http://www.aut.ac.nz/researchethics.
3. Any amendments to the project must be approved by AUTEC prior to being implemented. Amendments can be requested using the EA2 form: http://www.aut.ac.nz/researchethics.
4. Any serious or unexpected adverse events must be reported to AUTEC Secretariat as a matter of priority.
5. Any unforeseen events that might affect continued ethical acceptability of the project should also be reported to the AUTEC Secretariat as a matter of priority.

Please quote the application number and title on all future correspondence related to this project.

AUTEC grants ethical approval only. If you require management approval for access for your research from another institution or organisation then you are responsible for obtaining it. If the research is undertaken outside New Zealand, you need to meet all locality, legal and ethical obligations and requirements. You are reminded that it is your responsibility to ensure that the spelling and grammar of documents being provided to participants or external organisations is of a high standard.

For any enquiries, please contact ethics@aut.ac.nz

Yours sincerely,

Kate O'Connor
Executive Manager
Auckland University of Technology Ethics Committee
Cc: munin.n07@gmail.com; munin.neang@gmail.com

Appendix 6: Ethical approval from NECHR

ព្រះរាជាណាចក្រកម្ពុជា
KINGDOM OF CAMBODIA
ជាតិ សាសនា ព្រះមហាក្សត្រ
NATION RELIGION KING
~ ✽ ~

ក្រសួងសុខាភិបាល
MINISTRY OF HEALTH
គណៈកម្មាធិការជាតិក្រមសីលធម៌
សំរាប់ការស្រាវជ្រាវសុខភាពដែលទាក់ទងនឹងមនុស្ស
National Ethics Committee for Health Research
~ ✽ ~

លេខ.......08 NECHR.........   រាជធានីភ្នំពេញ, ថ្ងៃទី..11....ខែ..04.....ឆ្នាំ201.8.

Miss Munin Neang

Project: Community-based strategies to prevent violent against children in home setting in Cambodia. Version N°01, dated 07th March 2018

Reference: - Your letter on 27th March 2018
                    - Summary report of NECHR's secretaries on 02nd April 2018

Dear Miss Munin Neang,

I would like notify you that your study protocol entitled "Community-based strategies to prevent violent against children in home setting in Cambodia. Version N°01, dated 07th March 2018" has been approved by National Ethic Committee for Health Research (NECHR). This approval is valid for twelve months after the approval date.

The Principal Investigator of the project shall submit following document to the committee's secretariat at the National Institute of Public Health at #80 Samdach Penn Nouth Blvd, Sangkat Boeungkok2, Khan Tuol Kok, Phnom Penh. (Tel: 855-23-880345, Fax: 855-23-881949):
- Annual progress report
- Final scientific report
- Patient/participant feedback (if any)
- Analyzing serious adverse events report (if applicable)

The Principal Investigator should be aware that there might be site monitoring visits at any time from NECHR team during the project implementation and should provide full cooperation to the team

Regards,

Chairman

Prof. ENG HUOT

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