

9-5-2024

## Parental Perceptions of Child Neglect and Triggering Factors

Magaly Jeanty Arthus  
*Walden University*

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# Walden University

College of Psychology and Community Services

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Magaly Jeanty Arthus

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Walden University  
2024

Abstract

Parental Perceptions of Child Neglect and Triggering Factors

by

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MA, Pacific Union College, 2006

BS, Pacific Union College, 2005

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Human Services

Walden University

August 2024

## Abstract

Child neglect is the most widely reported and substantiated form of maltreatment in the United States. Although the federal government establishes the minimal definition, acts, and behaviors that comprise child neglect, there are discrepancies at the national, state, local, and organizational levels in how child neglect is defined. The purpose of this study was to increase the understanding of how parents perceive the definition of child neglect and the factors they believe trigger it. Using the social cognitive theory as the theoretical foundation, the generic qualitative research design was used to explore the perceptions of child neglect and beliefs of factors and triggers of child neglect of 15 parents. The data were collected through semi-structured interviews using open-ended questions. The data were subsequently analyzed using the thematic inductive data analysis process and was recorded, hand-coded, categorized, and compiled into themes. Four central themes emerged from the data in relation to the research questions: perceived definitions of child neglect, inconsistencies in defining child neglect, perceived factors of child neglect, and perceived triggers of child neglect. A total of 10 subthemes were also developed, exploring the perceptions of parents on the definition of child neglect and the factors parents believe trigger child neglect. The findings may contribute to positive social change by being useful for social service providers to gain a better understanding of the perceptions of parents regarding child neglect and what factors they believe contribute to and trigger child neglect so that more effective education, prevention, and intervention programs may be developed.

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## Dedication

This dissertation is dedicated first and foremost to God, without whom I could not and would not have started this journey about 13 years ago and definitely would not have finished it now. He gives chances and blessings beyond measure; this dissertation is proof positive.

This is also dedicated to my family. To my amazing husband Charles, who was my biggest supporter, pushing me to continue when I wanted to quit, motivating me to be the best version of myself, and for being a super-dad to our children, especially through this dissertation process, we did it! To my children, thank you for your patience, understanding, and big hearts in forgiving me when I fall short. Your belief in me and your cheering pushed me to finish when I did not think it was possible because you wanted this me for as much as I did. To my mother, Elisabeth, I have no words to express the love, patience, kindness, and humility you exemplify daily. This dissertation is as much yours as it is mine. You did not get to do yours, so we'll share this.

Finally, to my two dads (Aly-Papi and James-Pops), you never pressured me to do this doctorate, but your periodic inquiries let me know you could not wait for me to finish and that you were proud all along. So, to all, with gratitude and humility, I say thank you!

## Acknowledgments

I want to acknowledge the influences and people who made this journey and dissertation possible. My Savior and Provider, you know the plans you have for me (Jeremiah 29:11), and you make everything beautiful in your time (Ecclesiastes 3:11). I acknowledge that my time is now, and I can not wait to see what you're going to do next.

To my enrollment advisor, Jacqueline Cook-Jones, thank you for taking a chance on me, even though the odds were not in my favor. To my Committee Chair, Dr. Dorothy Seabrook, "Dr. Dee," you inspired, motivated, pushed, and cheered me on, one single step at a time. Thank you for understanding that life happens and for encouraging me to balance life because we only get this one. Thank you for not accepting less than my best and for championing me forward on those days when I wanted to quit; otherwise, this dissertation would not have come to fruition. To my second committee member, Dr. Douglass McCoy, your input, support, extra push, and help during one of my residencies were invaluable to my journey; thank you.

To all the participants, thank you for consenting to participate in this study. Your insights, opinions, and thoughts helped make this dissertation a reality. I hope that what you have shared can be used to develop more effective policies that have a lasting impact on promoting social change.

To Dr. James Previlus for planting the seed to try again, Dr. Rachel Previlus, the Previlus and Saint Juste clans, The Squad, Dr. Barbara Davis, the Loxahatchee Crew, to my students past and present, and to my family, thank you for believing in me and patiently awaiting completion. Finally, to Rose and Lovelee, thank you for 'nagging' me

about school. Once upon a time, we dreamed that the three of us would have Ph.D.  
behind our names someday and set out to do just that. Well, Rose, although yours says  
J.D., we did it!



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## Chapter 1: Introduction to the Study

### **Introduction**

The development of children in society has been a subject of interest and importance in academia and in the health sciences (Shur et al., 2023), as all who mature into adults have, at one point in time, been children. Included in the discussion are the aspects of childhood that negatively impact children and their development (Petruccelli et al., 2019). One such area that has been widely researched is child maltreatment, its various forms, and interests in its causes, factors, and effects (Hunter & Flores, 2021; Pezzoli & Saudino, 2021). The umbrella term, child maltreatment, consists of child neglect and child abuse, including physical, sexual and emotional abuse and neglect [CDC, 2022]. Child neglect occurs more frequently than the various forms of child abuse (Hendaus et al., 2020; Mulder et al., 2018; Robinson, 2019).

Research on the occurrence of child maltreatment, including child abuse and child neglect, abound. The prevalence and frequency of all forms of child maltreatment have been documented and reported globally and nationally. The World Health Organization (WHO) indicated that approximately 75% of children between the ages of 2 and 4 experienced one of the forms of maltreatment at some point (WHO, 2022). The Office for National Statistics in England and Wales (ONS), disclosed that in 2019, aside from other forms of neglect, 481,000 adults between the ages of 18 and 74 were physically neglected between the ages of 0 and 16 (Elkin, 2019; Office for National Statistics, n.d.). In the United States in 2018, for example, the Administration of Children and Families (ACF) reported that 678,000 children were confirmed to have suffered from maltreatment out of

the 3.54 million reported cases (ACF, 2022), accounting for an increase of 4,000 substantiated cases from 2017. Of the 678,000 cases confirmed, 60.8% of them were determined to be cases of neglect. Research suggested that about 4% of children, under the age of 18, were referred or reported to Child Protective Services (Kim & Drake, 2018). In 2019, the cases of reports decreased to 3.47 million, with the percentage of neglected children reported as 61% of the 656,000 children who were determined to be victims of maltreatment; of those, 17.5% were reported as physical abuse and 9.3% as sexual abuse (ACF, 2021).

The more recently published numbers reflected a change in reporting and confirmation. As of the 2022 ACF report on Child Maltreatment for the federal fiscal year of 2020, there were approximately 3.8 million reports of child maltreatment made to authorities. From those reports, authorities concluded that 618,000 children were maltreated, with 76.1% of the cases being attributed to child neglect compared to 16.5% for physical abuse and 9.4% for sexual abuse (ACF, 2022). The number of reported cases of maltreatment steadily increased from 2017 to 2019 but began to decrease in the reporting of 2020. However, the percentage of substantiated cases increased. The statistics confirmed that child neglect was the most prevalent form of child maltreatment. These statistics were alarming because of the effects of child neglect during childhood that could also last into adulthood (Pilkington et al., 2021).

Comparing the data on reported child maltreatment against the cases that were substantiated presented only one facet of this social issue. There was also the occurrence of child deaths as a result of one or more forms of child maltreatment. In 2018, 1,780

deaths were attributed to child maltreatment (ACF, 2021). In 2019, that number rose to 1,830 but decreased to 1,750 by 2020 (ACF, 2022). When analyzing the statistics, 2019 recorded a lower number of reports and confirmed cases, however it also recorded the highest cases of maltreatment related deaths. The fluctuations from one year to the next made it difficult to track a steady increase or decrease in maltreatment related deaths. Nevertheless, Bullinger et al. (2020) called researchers to action, explaining that while the rates of physical and sexual abuse have declined due to prevention strategies, they are not afforded to child neglect. As such, it is necessary to prioritize the prevention of child neglect to reduce its occurrence and potentially harmful effects.

This study centers specifically on child neglect as opposed to child maltreatment or child abuse. This chapter includes an introduction to the study's background and problem statement, discusses its purpose, and lists the research questions developed to address the problem. In addition, the theoretical framework, nature of the study, definitions, assumptions, scope and delimitations, limitations, and significance are also contained in this chapter. The chapter concludes with a summary.

### **Background**

Although researchers have investigated this issue of child neglect, the topic has not been explored solely through the perceptions of parents on the definition of child neglect and the factors they believe trigger child neglect. The lack of substantial literature on the subject of child neglect has been referred to as the neglect of neglect (McSherry, 2007). Literature on child neglect has itself been neglected when compared to other forms of maltreatment (Mulder et al., 2018). While recent research has attempted to close the



knowledge gap, the breadth of discovery has focused on the causes and effects of neglect (Hendaus et al., 2020), the behaviors described as neglectful (Yoo & Abiera, 2020), and the prevention and intervention of child neglect (Elias et al., 2018). Little is known, however, about the perspectives of parents and children on the subject of child neglect (Lafantasia et al., 2019) or how decisions on reporting are made (Dickerson et al., 2020).

The literature on child neglect includes examining the behaviors caregivers identify as maltreatment (Spilsbury, Gross-Manos et al., 2018), the changes in caregivers' view of factors that contributed to maltreatment (Gross-Manos et al., 2019), and a cross-national comparison of caregivers' perceptions of behaviors and contributors of maltreatment (Spilsbury, Nadan, et al., 2018). While these studies focus on perceptions, they were limited to nonparents or caregivers, not parents. In addition, the concept of child maltreatment included neglect but was not limited to child neglect. Dickerson et al. (2020), on the other hand, investigated the perceptions of child neglect but examined nonparents. Other studies have also looked at the perceptions of parents, conducting their investigation on the concept of child abuse and neglect (Hendaus et al., 2020), again, not solely on neglect or focused on child neglect and limited the pool of participants to low-income parents with challenges of meeting their children's needs (Elias et al., 2018).

There was also a lack of research based solely on the perceptions of parents, specifically focusing on their perceived definitions of child neglect, as opposed to the behaviors they labeled as neglect through presented scripted vignettes or leading questions (Dickerson et al., 2020; Spilsbury Nadan, et al., 2018). Limited research existed on how parents defined or perceived child neglect (Elias et al., 2018) and the factors they

believed trigger the occurrence of child neglect. As such, there was a need to understand what parents, themselves, perceived the definition of child neglect to be and what factors they believed trigger child neglect.

### **Problem Statement**

While child abuse and child neglect are two reported forms of child maltreatment, child neglect is the most widely reported and verified form of maltreatment in the United States (The Child Abuse Prevention and Treatment Act [CAPTA], 2018; Dickerson et al., 2020). Within the category of child neglect, physical and emotional neglect accounted for the most prevalent forms (Robinson, 2019). However, child neglect has been least scientifically researched in relation to the other forms of maltreatment (Mulder et al., 2018). According to the CAPTA Reauthorization Act of 2010 (42 U.S.C.A. § 5101), child neglect is described as “any recent act or failure to act on the part of a parent or caretaker, which results in death, serious physical or emotional harm...or an imminent risk of serious harm” (CAPTA, 2018, p. 4). While legislation at the federal level established the minimum acts or behaviors that constituted child neglect, according to the literature, there were discrepancies in how child neglect was defined. For example, the states were afforded the responsibility of fully defining and outlining child neglect (Child Welfare Information Gateway, 2019), resulting in variations from state to state. These inconsistencies in how each of the states defined child neglect (Font & Macguire-Jack, 2020) suggested ambiguity also existed in defining child neglect (Dickerson et al., 2020) across authorities and throughout reporting and assessing agencies (Robinson, 2019) and even practitioners (Yoo & Abiera, 2020). This lack of consensus on the definition of

neglect was also evident in the public perceptions of child neglect (Dickerson et al., 2020). According to the literature, there were varying perceptions of caregivers and laypersons on what behaviors were neglectful (Spilsbury, Gross-Manos, et al., 2018), and the perspectives of parents and children were underrepresented (Lafantasia et al., 2019). These varying perceptions can make observing, reporting, remediating, and preventing child neglect problematic.

Research on laypersons and caregivers' perceptions exists surrounding the topic of child neglect but was not limited to parents (Gross-Manos et al., 2019). On the other hand, research on parents' perceptions existed, but is not limited to child neglect as it combined child abuse and child neglect (Hendaus et al., 2020). Similarly, research exists on behaviors parents classified as neglectful but is limited in labeling the behaviors as opposed to identifying factors that trigger child neglect (Dickerson et al., 2020; Spilsbury, Nadan et al., 2018). As such, there is a lack of research based exclusively on the perceptions of parents that specifically focused on their perceived definitions of child neglect and on the factors they believed trigger the occurrence of child neglect (Elias et al., 2018). Consequently, there was a need to understand what parents, themselves, perceived the definition of child neglect to be and what factors they believed trigger child neglect, such as parental age (Dickerson et al., 2020), substance abuse (Spilsbury, Nadan et al., 2018) and mental health issues (Gross-Manos et al., 2019).

### **Purpose of the Study**

The purpose of this qualitative study was to increase the understanding of how parents perceived the definition of child neglect and the factors they believed trigger

child neglect. Hendaus et al. (2020) argued that there were deficiencies in parents' knowledge of child neglect. To effectively target intervention and prevention programs, however, the perceptions and attitudes of parents must be determined and can be considered indispensable (Hendaus et al., 2020). In addition to investigating the perceptions of parents' definition of child neglect, exploring the perceived triggers of neglect may increase understanding of how to meet the needs (Elias et al., 2018) of families.

### **Research Questions**

The research questions (RQs) addressed in the qualitative study were:

Research Question 1 (RQ1): What are the perceptions of parents on the definition of child neglect?

Research Question 2 (RQ2): What factors do parents believe trigger child neglect?

### **Framework**

In this study, I used the social cognitive theory (SCT) developed by Albert Bandura to support my theoretical framework. The SCT evolved from the social learning theory (SLT) and sought to communicate how individuals' thoughts evolve. According to SCT, the construct of an individual developed not just from observational learning in SLT but from the interaction of three influences: intrapersonal, environmental, and behavioral (Bandura, 2001). Learning, therefore, does not occur through conditioning but from acquiring knowledge through the interaction of the three different influences (Bandura, 2001).

In addition to the three forces that influence people, according to SCT, behavior is shaped by two contributing factors: self-efficacy and self-regulation (Schunk & DiBenedetto, 2020; Schunk & Usher, 2019). Through self-efficacy, beliefs in capabilities could factor into the actions taken; conversely, actions could help formulate beliefs about what was possible (Bandura et al., 1999). These beliefs and actions could be evaluated and monitored through self-regulation (Schunk & DiBenedetto, 2020). What people believe can alter their thoughts or actions and subsequently affect their thoughts and actions, which in turn would influence the way they interact behaviorally, socially, and personally.

Bandura's theoretical work on SCT is a model for focusing on how the construct of human thought and action was determined by a belief system made of social, biological, environmental, and personal influences. Understanding the perceptions of parents in relation to child neglect and the factors they believed trigger child neglect included understanding if and how those influences shaped these perceptions. Just as parents were composed of their personal, biological, and social influences, their children would also grow and develop their constructs from their childhood experiences. Parents with a history of experiencing child abuse (Hendaus et al., 2020) or neglect have a higher chance of neglecting their own children (Yoo & Abiera, 2020). Unfortunately, this could become a cycle. However, since child neglect results in short and long-term detrimental effects on survivors physically, emotionally, socially, and academically (Cabrera et al., 2020; Johnson & James, 2016) to name a few; understanding how parents perceived the definition of child neglect the factors they believed trigger neglect was important to

devising effective intervention strategies to change the social construct of families and even one day prevent child neglect altogether.

### **Nature of the Study**

To address the research questions in this study, I used a generic qualitative research design. According to Teherani et al., (2015), qualitative research is used to question or explore social phenomena in their natural environments. Not simply used for exploring phenomena, generic qualitative research is used by researchers to investigate the beliefs and opinions of participants of the world and their experiences (Caelli et al., 2003; Percy et al., 2015). According to Kennedy (2016), the researcher takes the beliefs through an interpretive lens and from there extracts meaning in order to know and make sense of those beliefs.

The generic or basic qualitative inquiry can also be used when the information desired cannot be garnered using other methodologies (Percy et al., 2015). Just as the generic qualitative approach gives the researcher the room to explore concepts from the beliefs and experiences of the participants, the approach also includes flexibility in how to collect the data and the number of participants required (Kennedy, 2016; Kostere & Kostere, 2021; Percy et al., 2015). As such, the generic qualitative research design was appropriate for this study.

My goal for this study was to explore the perceptions or beliefs of parents about the definition of child neglect and also what factors trigger parents to neglect. The projected point of saturation for this study was 15-20 participants (Creswell & Báez,, 2021). However, using purposeful sampling, 15 participants were recruited through

social media groups, comprised of parents between the ages of 18 and 65 with at least one child, . I conducted semistructured interviews virtually using video-conferencing software. I asked open-ended questions to enable the participants to share their beliefs and experiences more openly. The interviews were recorded, transcribed, and coded for themes to extrapolate meaning.

### **Definition of Terms**

*Child Abuse:* A failure to act or an act against a child that brings harm to the child (DHHS, 2014). The CDC identifies four types of abuse: physical, sexual, emotional, and psychological (Fortson et al., 2016).

*Child Maltreatment:* Any form of ill-treatment, negligent treatment or exploitation, abuse, or neglect, whether physical, emotional, or sexual, that results in actual or potential harm to a child (Krug et al., 2002). There are two forms of child maltreatment: child abuse and child neglect (WHO, 2020).

*Child Neglect:* Failure to provide for or supervise the development of a child (Krug et al., 2002; Arias, et al., 2008). Failure to provide or supervise includes 4 types of neglect: physical neglect, emotional neglect, medical neglect, and educational neglect (Child Welfare Information Gateway, 2019).

*Factors:* The circumstances or risks that contribute to child neglect (Christie et al., 2020; Font & Maguire-Jack, 2020; Morris et al., 2019). These include, but are not limited to, socioeconomic status and age.

*Parents:* Biological or adoptive mothers or fathers of children; including caregivers who act as parents for the child (CDC, 2023). For the purpose of this study,

however, legal guardians not caregivers, were considered parents in addition to biological or adoptive mothers or fathers.

*Perspective*: Viewpoint belief or perception that a person holds on a particular topic or subject (Gross-Manos et al., 2019).

*Self-Efficacy*: Beliefs in one's potential or capabilities that can influence the actions or approach to actions taken (Bandura et al., 1999). What people believe alters their thoughts or actions, can subsequently affect their thoughts and actions, which in turn will influence the way they interact behaviorally, socially, and personally.

*Self-Regulation*: The process of monitoring and evaluating one's beliefs and actions (Schunk & DiBenedetto, 2020).

*Social Cognitive Theory (SCT)*: The theory that describes how individuals learn. The construct of an individual develops, not from mere observation or modeling, but from the interaction of three factors: behaviors, environmental, and interpersonal influences (Bandura, 1990). SCT involves understanding the influences of cognition and how the factors determine behaviors.

*Social Learning Theory (SLT)*: The theory that also describes how learning takes place. People acquire competences through observational learning and social modeling (Bandura, 1999). They manage their behaviors from what they have learned observationally (Bandura, 2001) and the cues (Bandura, 1969).

*Triggers*: The factors that cause parents and caregivers to neglect children (Christie et al., 2020; Font & Maguire-Jack, 2020; Morris et al., 2019). These include, but are not limited to, domestic violence, level of parental coping skills, and stress.



### **Assumptions**

I made several assumptions during this study. Initially, I assumed that parents would not be guarded during the interview but instead would be forthcoming in sharing their definitions of child neglect or discussing the matter in depth, as this study was not tied to any legal entities or government organizations. Similarly, I also assumed that parents would be open to sharing what they perceived the triggers of neglect to be. In addition, I assumed that what the parents would share would be truthful and would reflect their own perceptions and not what they believed to be the right or wrong answer. I assumed that parent participants would have a level of trust during the process. Next, I assumed that participants would feel safe to voice questions or concerns about the study or the process. Finally, I assumed that the participants, in turn, would refer other potential participants to the study.

### **Scope and Delimitations**

The results gathered from this study fill the gap in understanding parents' perceptions of child neglect. As such, my focus was on understanding the beliefs on the definition of child neglect and the triggers of neglect of parents. The parents had to have at least one child, whether or not the child currently resided with the parent and were between 18 and 65 years of age. The delimitations of this study may include parents under investigation for one form of child maltreatment or another. The case's status would have restricted the participation of parents under investigation.

### **Limitations**

Potential limitations of the study may have included the gender of parents. Depending on the interest and availability of parents, participants might not have been a mixture of genders but solely one or the other. In addition, the participants were recruited and invited to join the study from parenting social media groups, which may not have reflected the perceptions of all parents across the country. The perceptions discussed in the study were limited to child neglect and no other forms of child maltreatment or child abuse. Researcher bias might have come through during follow-up questions while conducting the interview. Thus, separating my role as a researcher and not a teacher or social service investigator was a challenge. Possible barriers when collecting the primary data included virtual access to participants and difficulty recruiting parents for interviews, as such access to the preferred number of participants may or may not have been reached. Once the data were collected, other limitations may have included accurately transcribing the data, properly storing the data, and processing the data. Securely and confidentially storing the data on a computer could have also been challenging. Finally, instrumentation fees may have exceeded the allotted amount.

### **Significance**

This study was significant in that it filled a gap in identifying and describing the construct and perceived triggers of child neglect from the parental perspective. Content on causes and effects were found in the literature. However, there was a gap in the literature as it pertained to understanding the perspective of parents (Lafantasia et al., 2019) and how they defined child neglect. There was also a need to understand what

parents believed the triggers of child neglect were. The results of this study should assist social services professionals and providers in better understanding how parents perceive neglect and would be more informed when creating social services and community programs. The information from this study could also be useful for fine-tuning educational programs to re-educate the parents and the public on what child neglect is and is not. Not only would better and more effective programs be formulated and implemented, but policymakers would have more information to draft social policies, regulations, and even laws to protect children and help parents.

### **Summary**

The issue of child neglect is an ongoing social problem. While the number of cases of child maltreatment and abuse fluctuates, the rates of child neglect remain steadily higher than the other forms of child maltreatment. Intervention and prevention programs developed by child protection and/or government agencies aim to support and educate parents on child neglect and abuse by addressing factors that lead to child neglect. However, to effectively design prevention and intervention programs, there must be a clear understanding of parents' perceptions of the definition of child neglect and what they believe are the triggers of neglect. In Chapter 1, the introduction to the social problem of child neglect was described. In Chapter 2, child neglect will be classified and defined. The literature review will demonstrate and support the discrepancy in the definitions of child neglect, the varying perspectives of child neglect, and the short- and long-term effects of child neglect.

## Chapter 2: Literature Review

### **Introduction**

Child maltreatment has been heavily researched as a public health, human rights, and social issue and as an umbrella term for child neglect and child abuse (Slack et al., 2017; Todahl, et al., 2020). Of the two subgroups, child neglect was the most reported and substantiated form of child maltreatment (Dubowitz et al., 2022; Gonzalez et al., 2022). Child neglect was once considered an understudied and neglected social problem when compared to child abuse (Wolock & Horowitz, 1984). While in more recent years, there has been an increase in the knowledge gap on the topics of child neglect from descriptions to triggers and effects (Lafantasie et al., 2019), it continued to receive less public and scientific consideration than the other forms of maltreatment (Mulder et al., 2018).

The current literature on child neglect included an emphasis on identifying or investigating behaviors considered neglectful such as lack of supervision or lack of access to medical treatment (Palmer et al., 2022). In addition to ascertaining what child neglect might be, factors that contributed to neglect, including economic status or maternal age and relationship status (Robinson, 2019; Slack et al., 2017), gave insight into what triggers parents to neglect children. Researchers studying child neglect also considered the consequences of child neglect such as school problems and low adaptive skills (Herruzo et al., 2020), how to prevent and treat child neglect (Swenson & Schaeffer, 2018), and caregivers' perceptions of maltreatment (Spilsbury, Nadan, et al.,

2018). While researchers examining child neglect considered the many facets of the issue, there was a discrepancy in defining it.

The definition of child neglect is not uniform, and varies across the United States, reporting authorities, and assessing agencies (Child Welfare Information Gateway, 2019). As the U.S. Administration for Child and Families concluded in a guide on prevention, assessment, and intervention, this lack of uniformity in defining neglect makes it difficult for the public to have a consensus on the definition of child neglect and response reactions to families that may or may not be suspected of neglect (DePanfilis, 2006; Rebbe, 2018). This lack of consensus on the definition of neglect is also evident in the public perceptions of child neglect (Dickerson et al., 2020). While some researchers focused on the perceptions of adults, the studies were limited to laypersons or caregivers, not parents, and the concept of child maltreatment, which included neglect but was not limited to child neglect. As such, limited research exists on how parents defined or perceived child neglect (Elias et al., 2018) and the factors they believed trigger the occurrence of child neglect.

The purpose of this qualitative study was to increase the understanding of parents' perceptions of the definition of child neglect and the factors they believed trigger child neglect. Hendaus et al. (2020) argued that there were deficiencies, such as the implications and the consequences related to child neglect and the use of other discipline techniques, in the knowledge of parents on child neglect. The perceptions and attitudes of parents must be determined and should be considered indispensable to effectively target intervention and prevention programs (Hendaus et al., 2020). In addition, exploring the

perceptions of parents' regarding the definition of child neglect and exploring the perceived triggers of neglect may increase understanding of how to meet the needs of families. The remainder of the chapter includes a synopsis of the literature search strategy. I conducted a review of the literature relevant to child neglect and used the social cognitive theory as the framework for this study. I also discuss the definition of child neglect, the inconsistencies in defining it, and the perspectives, effects, and triggers of child neglect.

### **Literature Search Strategy**

In conducting the literature review for this study, I searched the SAGE, Academic Search Complete, APA PsycInfo, PubMed, Thoreau, and EBSCO databases accessed through the Walden University Library online. Other databases used were ScienceDirect/Elsevier, National Institutes of Health, Google Scholar, and Springer Link. The search centered on the topic of child neglect and its connection to parents' perceptions or experiences. The key words searched were *child neglect, child maltreatment, parental perceptions of child neglect, effects of child neglect, parental experience with child neglect, parent perspective and child neglect, parent perspective on child neglect, parent attitude and child neglect, types of child neglect, forms of child neglect, parent view, social cognitive theory, social cognitive theory and child neglect, social learning theory, neglect, risk factors for child neglect, triggers of child neglect, and causes of child neglect.*

Another strategy I used was searching for peer-reviewed journal articles and studies based on the keywords relevant to my topic. I used filters that restricted my search

results to peer-reviewed articles published between 2017-2023. Journals, periodicals, and reports were accepted for the results. The searches included singular or combinations of the terms. In addition to my own preliminary searches, I also examined the bibliography section of certain articles to conduct backward searches. I reviewed approximately 175 sources. The following section discusses the social cognitive theory upon which this study is founded.

### **Theoretical Foundation**

The theoretical framework of this study was based on social cognitive theory, which involved understanding how individuals learn behaviors and how those learned behaviors influenced the behaviors they exhibited. I used social cognitive theory for this study because it can be used to develop insight into the construct of human thought and action, how personal, environmental, and biological forces influenced thought and action (see Bandura, 2001), and how they changed. Understanding the perceptions of parents, in relation to child neglect and the factors parents believed trigger child neglect, included understanding if and how those influences shaped these perceptions.

### **Social Cognitive Theory**

Initially called the social learning theory (SLT), the social cognitive theory (SCT) was theorized in 1986, by psychologist Albert Bandura (Bandura, 1986). Bandura explained that social learning theory was conceptualized as a broad framework, addressing how people “acquire cognitive, social, emotional, and behavioral competences but also how they motivate and regulate their lives” (Bandura, 2007, p. 65). With SLT, people acquire these competences through observational learning and social modeling

(Bandura, 1999). Observation is a complex process in which agents, or human beings, manage or direct their behaviors (Bandura, 2001) based on the observed behaviors of others and the consequences that result from them (Bandura, 1979). Social modeling, on the other hand, influences the moral judgments of children as observed behaviors are reinforced through cues, changing the concepts and judgments of children (Bandura, 1969). People learn by observing what is modeled (Bandura, 1991).

SCT builds on SLT's emphasis on observational learning and modeling, however SCT was more fitting to this study as it specifically focused on the dual role of one's social and cognitive influences (Bandura, 2007). SCT adopts observational learning and modeling but goes a step further and postulates that the construct of an individual develops, not from mere observation or modeling, but from the interaction of three factors: behaviors or actions, environmental influences, and the inner personal factors in the form of cognitive, affective, and biological events (Bandura, 1990). Therefore, people learn by observing others acquire this knowledge through cognitive, behavioral, and environmental influences (Bandura, 2001). SCT does not only discuss cognitive, behavioral, and environmental acquisition that takes place in individuals' lives, but also how these factors and influences, in turn, determine their lives and their behaviors. SCT was a suitable framework for the exploration to understand the impact of former exposure to child neglect or negative parenting and demonstrating those same behaviors as a parent in adulthood (see Mulder et al., 2018).

Behavior is also a major component of SCT. Based on SCT, the behaviors people exhibit are determined by four factors: goals, outcome expectations, social structure, and



self-efficacy (Schunk & DiBenedetto, 2020). Bandura explained that these factors enable individuals to “motivate and regulate their behavior and create social systems that organize and structure their lives” (Bandura, 2007, p. 65). The four factors are also reciprocal in that one can influence the other as a result of previous interactions (Bandura, 1986). To motivate and regulate behavior, the human agent must become the manager, making intentional decisions about the learning taking place and what behaviors to enact (Bandura, 1991).

### ***Social Cognitive Theory in Research***

Since its inception, various components of SCT have been used as theoretical foundations for research. Studies on topics ranging from student achievement, implementation of social change drama, and intervention evaluation have all used SCT as their theoretical framework.

In 1990, Fader used this cognitive theory to understand literacy development in school-aged children and the variables involved in acquisition (Fader, 1990). Fader studied 120 parent-child pairs to assess the role cognition, behavior, and environmental factors had on kindergarteners and their achievement. While Fader reported that kindergarten readiness was the best predictor of achievement, it was noted that a child’s interest in reading was related to exposure to reading in the home and modeling of reading (Fader, 1990). Environmental exposure and behaviors/actions in the form of children being exposed to reading and having reading modeled to them, became a predictor of their interest or performance in reading (Fader, 1990). Fader’s study then supported Krcmar’s (2019) assessment of modeling, specifically the concept that learning

through modeling or imitation influenced subsequent behavior. With relevance to this study, just as children who were modeled reading were more likely to become interested in reading, parents who had themselves been exposed to or modeled child neglect might have been influenced to neglect their own children in the future.

In 2012, Bandura published a report on the personal and societal changes that resulted in the development and implementation of one of at least six campaigns using the concepts of SCT. At the invitation of nations seeking help and social change, serial dramas were created and broadcasted, in countries such as Mexico, India, and Kenya with the intention of educating and changing the cognitive processes of the viewers. In 2012 Bandura implemented one such serial drama in Tanzania. The control groups demonstrated an increase in adoptions of both safe-sex methods (Bandura, 2012) by the end of the study. SCT highlights the role that observational learning and reciprocal influences play on an individual's cognition. Just as with Fader's (1990) study exploring the effects of modeling reading, Bandura's study with the serial drama was important to this study as it demonstrated what influences have on observers. While the two studies differed in approach and content, a common theme was noted in that behaviors and environmental influences had a strong impact on people's thoughts, decisions, and subsequent actions, including parents (Bandura, 2012; Fader, 1990; Mulder et al., 2018).

Bandura's social cognitive theory has also been used by researchers in more recent years to explain how behaviors evolve or how factors affect certain behaviors and outcomes. Rhodes et al. (2019) and Stacey et al. (2015) conducted systematic reviews based on SCT. For example, Rhodes et al. (2019) conducted a systematic review of four

theoretical frameworks that shed light on behaviors and sought to understand the factors that influenced them. The dominant theory framework was reported to be the social cognitive theory. Rhodes et al. (2019) explained that SCT offered significant information on how constructs were linked to physical activity in comparison to the other theories. Past constructs or influences affect current and future behaviors. In a similar systematic review and meta-analysis, Stacey et al. (2015) identified factors associated with intervention efficacy to evaluate the effectiveness of nutrition and physical interventions based on SCT among cancer survivors. Of the 18 studies reviewed, 12 resulted in a positive effect for physical interventions and six of eight for nutrition. While the influences were not discussed at length in the second study, both studies corroborated SCT's postulations that behaviors were influenced, in part, by prior experiences.

### ***Self-Efficacy and Self-Regulation***

In addition to behavior changes, SCT has also been used in discussions, such as Schunk's (1989) and Lent et al.'s (1994) studies, on other aspects of SCT like self-efficacy and self-regulation. In 1989 Schunk conducted a systematic review to discuss self-regulated learning and how it impacted students' learning cognitions and behaviors (Schunk, 1989). Using the reciprocal interactions aspect of SCT, Schunk surmised that students' efficacy influenced their behaviors toward achievement. The beliefs the students held about their academic abilities and capabilities impacted the behaviors they exemplified toward their academic learning and achievements (Schunk, 1989). Similarly, Lent et al. (1994), in a meta-analytic review of literature on SCT to determine whether certain aspects of career development could be determined. Upon completion of the

review, the authors concluded that self-efficacy played a significant role in vocational interest, choice goals, and expectations (Lent et al., 1994). These two studies, Schunk's (1989) self-regulated learning and Lent et al.'s (1994) career development, focused on the role self-efficacy played in future behaviors. While the nature and subjects of the studies were different, the results were similar in that both concluded that when the subjects believed they possessed the abilities needed to meet expectations, they were able to do just that. The study on self-regulated learning differed by explaining the influence that meeting expectations had on setting new goals to achieve (Schunk, 1989). The two studies were important to this study as they described the role of self-efficacy and self-regulation in decision-making and subsequent behaviors. Beliefs about abilities could then predict behaviors (Lent et al., 1994; Schunk, 1989), whether acquired personally or through environmental influences (Schunk & DiBenedetto, 2020). Therefore, parents' perceptions and beliefs about child neglect could impact the behaviors they carried out toward their children.

SCT has also been used in studies of nutritional-based intervention programs. Bagherniya et al. (2017) implemented a 7-month intervention program using a cluster randomized sample of adolescent girls who were determined to be overweight or obese. This school-based nutritional education study applied SCT when designing an intervention program to prevent further obesity among girls of the teenage range. At the end of the study, the participants in the intervention group recorded more favorable dietary behaviors and were noted to have improved self-efficacy, social support, and intention (Bagherniya et al., 2017). This study was important because it demonstrated

that behaviors could change. Just like these researchers implemented a program and it worked, so too SCT can be used to bring about behavioral changes in parents. Rolling and Hong (2016), on the other hand, conducted a meta-analysis of studies focusing on the effect of SCT-based interventions on dietary behavior of children, while addressing the factors that influenced dietary choices. Like Bagherniya et al.'s (2017) study that correlated behaviors with self-efficacy and self-regulation, Rolling and Hong concluded that Bandura's three influences of cognition, environment, and behavior worked together to bring about change (Rolling & Hong, 2016).

Although both studies focused on a form of intervention program that was nutrition-based on children and/or teens, the studies had differing perspectives of time. Bagherniya et al.'s (2017) study was implemented over the span of 7 months and behaviors were assessed immediately. However, Rolling and Hong's study assessed the effects of the intervention program after the fact (2016). While there was an emphasis on behavioral changes in both studies, behaviors did not work in isolation. When behaviors changed, self-efficacy and self-regulation were likely to change correlatively (Bagherniya et al., 2017; Rolling & Hong, 2016). Bagherniya et al.'s (2017) research was important to this study as it provided the connection between behavior and self-efficacy and self-regulation. Hong's conclusion that all three influences affect behavior was equally important, as it informed that no factor alone (Rolling & Hong, 2016) was sufficient to bring about change. Yet, Bagherniya et al.'s reporting of correlation was important to this study as it provided a link, not just a suggestion or theory, that what we perceive becomes what we do (Bagherniya et al., 2017)

In a mixed-methods study on teachers' perceptions of creativity, Rubenstein et al. (2018), used SCT to ascertain how teachers would evaluate creativity in their students. The way in which teachers defined creativity affected the attention and instruction they gave to students and their constructs in ascribing creativity to a student or outside factors. Teachers were more likely to link creativity with behavioral and personal factors, such as ability, opportunities for support, resources, et cetera. and hindrances to environmental factors including testing, schedules, and things beyond their control (Rubenstein et al., 2018). In addition, the level of self-efficacy of a teacher correlated to their level of experience. Here, efficacy played a major role in attribution- as the teacher believed, so went the student's self-efficacy, instruction, opportunities for learning, and promotion of student creativity. With respect to SCT, results demonstrated that active role modeling, in addition to offering autonomy, support, and performance-based rewards, was most effective in determining innovation (Rubenstein et al., 2018). In relation to this study, people acted based on what was seen or taught and expectations of others and themselves.

Conducting a literature review, McCormick (2001), reported on self-confidence, self-efficacy, and leadership and even proposed a new leadership approach based on SCT. In the review, McCormick linked people's confidence in their ability to lead to their effectiveness in leading, regulating their behavior and proposed leadership self-efficacy, loosely based on the social cognitive theory of leadership, as a variable in the model. Thommen et al. (2022) conducted a meta-analysis of 86 teachers and 1930 students to find an association between teachers' self-efficacy and student-rating teaching. The

results showed strong associations of task or class specific teacher self-efficacy and student-rated teaching quality. Not only did SCT provide a foundation for understanding the role observational learning/modeling played in influencing individuals, but it also suggested that self-efficacy and behaviors may be linked. Confidence in one's ability and self-regulation affected behaviors which in turn affected how others responded and through reciprocity (Bandura, 1986). The social cognitive theory, then, remained a staple in theoretical discussions throughout the 21<sup>st</sup> century.

### ***Social Cognitive Theory and Child Maltreatment***

While SCT has been used as a theoretical foundation for an array of studies, it can and has also been linked to studies discussing child neglect or maltreatment. Macguire-Jack and Negash (2016) conducted a study on the effect that having available, accessible, and rendered social services had on parents in terms of physical child abuse and child neglect. The study relied on SCT and the stress and coping theory to ascertain the connection of social services to parents in relation to parental stress and levels of maltreatment (Macguire-Jack & Negash, 2016). Using SCT, the researchers were able to argue that individual, social, and environmental factors influence behavior. They also discussed the reciprocal dynamic of the environment influencing individuals and individuals influencing their environments. The reported findings suggested that the more available services were to parents, the lower the rate of abuse or neglect. Conversely, the more services parents receive, the higher the rate of child neglect. Finally, the researchers explained SCT's reliance on how behavior was influenced by one's environmental, social, and individual factors supported the findings of the study (Macguire-Jack &

Negash, 2016). This study was significant in pointing out the relationship between environmental and societal factors in parents with a history of child neglect. Parents did not act arbitrarily, but instead, their behaviors were influenced. These influences could have in turn promoted the reduction or increase of child neglect.

Similarly relying on SCT as a framework, Wang et al. (2019), conducted a longitudinal study in China, exploring parental moral disengagement (MD) as moderators for adolescents who were cyberbully perpetrators with a history of childhood maltreatment. SCT was used to argue the effect that observing the aggression of parents and maltreatment had on adolescents who bullied others (Wang et al., 2019). Using Bandura's MD scale for testing, the researchers reported a significant positive association between adolescents' childhood maltreatment and cyberbullying, with mothers' MD correlating to childhood maltreatment and fathers' MD correlating to both (Wang et al., 2019). Environmental, social, and cognitive factors influenced their behaviors, leading them to become aggressive toward others. In addition, observing parental moral disengagements could have influenced adolescents to take a similar approach when exhibiting aggressive behaviors toward their peers (Wang et al., 2019). In this way, behavior became the result of the interaction and relationship between an individual and their environmental and social factors (Thornberg et al., 2017). As SCT suggested, observed behavior and environmental factors on the part of the proponents of violence, learned from behaviors in the home, influenced the adolescents to bully others. The cyclical process of learning behaviors through models, developing a construct based on those experiences, and eventually acting on those constructs spoke to the importance of



understanding the perceptions of parents as they become the models that will influence today's children and tomorrow's adults.

Albert Bandura's theoretical work on social cognitive theory provided a model focusing on how the construct of human thought and action was determined by a belief system made of social, biological, environmental, and personal influences (Bandura, 1990). The social cognitive theory was relevant to this study to aid in understanding the parents' perceptions of the definition of child neglect and the factors they believed trigger child neglect. Understanding behavior included understanding if and how influences, past and present, shape these perceptions. Just as parents were comprised of their personal, biological, and social experiences, children were also influenced by personal/cognitive, behavioral, and environmental factors and experiences. Parents with a history of experiencing child abuse (Hendaus et al., 2020) or neglect had a higher chance of neglecting their own children (Yoo & Abiera, 2020).

As with reciprocity, behaviors that were modeled to children may be learned and in turn, be replicated in the future. This can become a vicious cycle. Child neglect results in short and long-term detrimental effects on survivors physically, emotionally, socially, and academically (Cabrera et al., 2020; Johnson & James, 2016) to name a few. The social cognitive theory was relevant to my research in understanding the influences that led parents to perceive their definition of child neglect. The factors they believed trigger neglect were important to devising effective intervention strategies to change the social construct of families and even one day prevent child neglect altogether.

## Literature Review Related to Key Variables and Concepts

### Maltreatment

Child abuse and child neglect are two reported forms of child maltreatment (Dickerson et al., 2020). Children who suffered from child maltreatment, including both types, experienced immediate and long-term effects that could have developmentally harmed them emotionally, neurologically, behaviorally, and physically (Cabrera et al., 2020; Negriff et al., 2020). Child abuse and child neglect, though distinct, were often used in conjunction with each other, and according to the APSAC Handbook on Child Maltreatment (2019), were even at times used as synonyms for child maltreatment. However, for the purpose of this study, the two forms of maltreatment will be separated.

To understand the subcategory of child neglect fully, a step must be taken back to define child maltreatment. Child maltreatment was defined by the World Health Organization 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” (Krug et al., 2002, para. 1). WHO estimated from international studies that about 3 out of 4 children, between ages 2 and 4, were subjected to some form of maltreatment, punishment, or violence from caregivers or parents (WHO, 2020). Child maltreatment, and subsequently child abuse and child neglect, were global health issues as much as they were national, social, and educational issues with economic implications (WHO, 2020).

Child maltreatment and its types were also national issues in the United States. For example, as of the Child Maltreatment 2021 report from the Children’s Bureau for

Administration for Children & Families for the fiscal year of 2019, approximately 4.4 million allegations were made of child maltreatment in the U.S with 16.7% of those referrals being substantiated (Child Information Gateway, 2021). Of those 16.7% of substantiated cases, 74.9% were reported as child neglect compared to 17.5% for physical abuse or 9.3% for sexual abuse. In addition to these percentages, 1,840 children died as a result of child abuse or neglect (Child Welfare Gateway, 2021).

### **Child Abuse**

The Federal Child Abuse Prevention and Treatment Act (CAPTA) (42 U.S.C.A. § 5101) CAPTA Reauthorization Act of 2010 defined child abuse and child neglect as: “any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation” (CAPTA, 2018, p. 4) or “an act or failure to act which presents an imminent risk of serious harm” (DHHS, 2014, p. viii). While this definition encompassed both types of maltreatment, it did not separate the two forms from one another. The United States Centers for Disease Control and Prevention, however, did separate them by not only defining child maltreatment and its types but also went further to identify the subtypes as well. The CDC, in its Child Maltreatment Surveillance recommendations (Leeb et al., 2008) outlined child maltreatment as “any act or series of acts of commission or omission by a parent or other caregiver that results in harm, potential for harm, or threat of harm to a child” (Leeb et al., 2008, p. 11). The document then delineated the terms and associations of child maltreatment.

The term child abuse was associated with acts of commission in which a parent or caregiver intentionally and deliberately engaged in harmful behavior toward a child, whether harm was intended or not. Physical abuse, sexual abuse, and psychological abuse were then provided as the subtypes of child abuse as potential acts of commission (Leeb et al., 2008). From the federal government's standpoint, child abuse was an act against a child that brought harm to the child. Motive aside, when a child has been harmed, maltreatment of some kind has taken place. While CAPTA generally discussed the behavior associated with maltreatment, the CDC went further to associate each term with the corresponding acts. Exempt from the definition of CAPTA was the kinds or types of abuse. The CDC categorized 4 types of abuse: physical abuse, sexual abuse, emotional abuse, and neglect (Fortson et al., 2016). Physical and sexual abuse were also accepted by the Child Welfare Information Gateway and differed only in the name for the third kind of abuse. What the CDC identified as psychological abuse, the Child Welfare Information Gateway identified as emotional abuse (Child Welfare Information Gateway, n.d.).

### **Child Neglect**

From a global perspective, the World Health Organization described child neglect as “the failure of a parent to provide for the development of the child” (Krug et al., 2002, 1083). This description focused on child neglect as a failure to provide for a child but did not specify how or what that failure related to or even what happened as a result.

### ***Subgroups of Child Neglect***

Just as there were differing forms of maltreatment and child abuse, child neglect could also be broken down into subgroups and types. In 2008, the CDC (Leeb et al.,

2008), in affiliation with the U.S. DHHS segmented child neglect into two groups: failure to provide and failure to supervise. From these, failure to provide included four types: physical neglect, emotional neglect, medical neglect, and educational neglect (Child Welfare Information Gateway, 2019). Some researchers have gone a step further to include supervisory neglect as a potential fifth type of child neglect (Fortin, 2020; Vanderminden et al., 2019). The Child Welfare Information Gateway (2018) identified three of the four types of neglect and the definitions associated with each. Physical neglect was identified as not fully providing for a child's fundamental physical needs including nutrition, clothing, shelter, and hygiene. Educational neglect referred to a parent or caregiver unsuccessfully providing a child of school age with access to schooling, whether traditional, homeschooled, or special needs. Medical neglect, on the other hand referred to the lack of access to competent health-care professionals to care for medically related illnesses, injuries, conditions, or impairments (Child Welfare Information Gateway, 2018). Of these four subtypes listed by the U.S. DHHS, emotional neglect was believed to have the highest rate of occurrence (Talmon et al., 2019).

**Inconsistencies in Types of Child Neglect.** There were discrepancies and inconsistencies in how the groups and types of child neglect were delineated. English et al. (2005) listed only two types of child neglect that of physical and psychological, while Turner et al. (2019) identified the types of neglect as physical and supervisory. Dubowitz et al. (2004) reported on physical and psychological neglect but included environmental neglect as a third subtype. Fortin (2020), in contrast, discussed five types of child neglect: dental, emotional, medical, physical, and supervisory (Fortin, 2020). The United Nations

Convention on the Rights of the Child divided neglect into five types but identified them as: physical, emotional, mental, educational, and abandonment (Kobulsky et al., 2020).

On the other hand, the DHHS , as aforementioned, suggested four types of physical neglect, emotional neglect, medical/dental neglect, and educational neglect (Child Welfare Information Gateway, 2019).

The inconsistency in determining the types of child neglect presented various authorities, policymakers, healthcare providers, and even researchers with challenges (Proctor & Dubowitz, 2014). For authorities and providers, the lack of standard categorizations made reporting or determining neglect more difficult (Font & Macguire-Jack, 2020). For policymakers and other governmental agencies, inconsistency could threaten or undermine the effectiveness as the scope of neglect may not be clear. This would also affect the public's ability to ascertain or identify neglect (Dickerson et al., 2020). The inconsistencies pertaining to child neglect were not relegated to groups and types but also in defining child neglect.

### ***Definitions of Child Neglect***

The global definition of child neglect outlined by WHO could be more general than individual countries. For example, in England, child neglect was defined as failing to “provide adequate food, clothing and shelter, protect a child from physical and emotional harm or danger, ensure adequate supervision, or ensure access to appropriate medical care or treatment” (NCSCP, n.d., p. 3). According to this English description, child neglect was not general but specific, elaborating on which areas of a child's care could potentially be neglected.

The United States took a broader approach to describing child neglect. For example, the definition of child neglect in the U.S., according to the U.S. DHHS (2014), was taken from the aforementioned Federal Child Abuse Prevention and Treatment Act (CAPTA) (42 U.S.C.A. § 5101) CAPTA Reauthorization Act of 2010. It defined child neglect as: “an act or failure to act which presents an imminent risk of serious harm” (DHHS, 2014, viii). CAPTA revisited this definition. In 2018, the updated definition retained the CAPTA 2010 definition but added that the “term ‘child’ means a person who has not attained the lesser of A. the age of 18; or B. except in the case of sexual abuse, the age specified by the child protection law of the State in which the child resides” (CAPTA, 2018, p. 4). The CDC’s Child Maltreatment Surveillance report not only discussed the definitions and types of child maltreatment and abuse, but it also discussed the term child neglect. According to the recommendation, the term child neglect was associated with the acts of omission or the failure to adequately provide for the needs of a child or adequately supervise a child (Leeb et al., 2008).

These definitions were more specific than that of the WHO in terms of what could happen if a child was neglected by the parent or caretaker, the age of the child, and a time frame. In addition, England's and the WHO’s definitions solely addressed child neglect, while the U.S.’s definition did not, combining child abuse and child neglect together. Nevertheless, in all three definitions, failure of a parent or caregiver to act was attributed to child neglect. In other words, child abuse was the act of commission while child neglect was the act of omission (Child Welfare Information Gateway, 2018; Klika

& Conte, 2017; Leeb et al., 2008). For the purpose of this study, the United States's definition of child neglect will be used.

### ***Inconsistencies in Defining Child Neglect***

Child neglect was the most widely reported and verified form of maltreatment in the U.S. (CAPTA, 2018; Dickerson et al., 2020), with physical and emotional neglect accounting for the most prevalent forms (Robinson, 2019). However, child neglect has been less scientifically researched in relation to the other forms of maltreatment (Mulder et al., 2018). The lack of substantial literature on the subject of child neglect was once referred to as the “neglect of neglect” (McSherry, 2007). While recent research has attempted to close the knowledge gap, it remained understudied (Vanderminden et al., 2019). The breadth of discovery has focused on the causes and effects of neglect (Hendaus et al., 2020), the behaviors described as neglectful (Yoo & Abiera, 2020), and the prevention and intervention of child neglect (Elias et al., 2018). Missing from this list was the parental perspective on child neglect.

**Inconsistencies in Definitions of Child Neglect at the National Level.** Although child neglect was the more commonly reported form of child maltreatment (Hendaus et al., 2020; Mulder et al., 2018; Robinson, 2019), there were discrepancies on how to define it. DHHS provided a definition of child neglect that was used as a form of guidance to the individual States. The States are required to accept this minimum outline of behaviors or acts that constitute child abuse and neglect (Child Welfare Information Gateway, n.d.) but are free to determine the maximum parameters. In approaching the definition of child neglect as a guideline, the federal government falls short of providing



a standard definition of child neglect (Proctor & Dubowitz, 2014). According to the ACF Child Maltreatment Report of 2020, each State was responsible for defining child maltreatment and drafting its own policies and laws accordingly (ACF, 2022). In turn, the applicable responses to substantiated allegations of child maltreatment, in other words child abuse and child neglect, were established on the basis of these definitions by the child welfare agencies of each state (ACF, 2022).

Legislation at the federal level established the minimum acts or behaviors that constitute child neglect, but according to the literature, there were discrepancies in how child neglect is defined. For example, as aforementioned CAPTA (2018) described child neglect as “any recent act or failure to act on the part of a parent or caretaker, which results in death, serious physical or emotional harm...or which presents an imminent risk of serious harm” (p. 4). However, in 2021, the Child Abuse and Neglect Prevention of the CDC condensed its description of child neglect to the “failure to meet a child’s basic physical and emotional needs” (CDC, 2021, para. 2).

Definitions of neglect could also depend on the jurisdictions and counties in question (Mulder et al., 2018). The absence of consensus on the definition of neglect (Rebbe, 2018) at a national level was due to the States being afforded the responsibility of fully defining and outlining child neglect (Child Welfare Information Gateway, 2019), resulting in variations from State to State. According to the US Department of Health and Human Services, variations among states were highlighted in a report on definitions of child neglect using state statutes (Child Welfare Information Gateway, 2022). According to the report, roughly 27 states in the United States identified failure to meet the

educational requirement of children in their definition of child neglect. About 12 states specified that medical neglect included special treatment, while eight states detailed medical neglect as lacking to provide medical treatment or tending to life-threatening conditions. And only 38 states included supervisory neglect among the subgroups (Child Welfare Information Gateway, 2022). As such, neglect was defined and explained differently from one state to another.

**Inconsistencies in Defining Child Neglect at the State Level.** A state-by-state comparison of definitions could also reveal inconsistencies. For instance, according to Florida's Statutes- Title XLVI Chapter 827 Section 03 (e) (2018), child neglect was defined as a "caregiver's failure or omission to provide a child with the care, supervision, and services necessary to maintain the child's physical and mental health, including but not limited to food, nutrition, clothing, shelter, supervision, medicine, and medical services that a prudent person would consider essential for the well-being of the child" (Florida Senate, 2018, para. 5). On the other hand, in the state of Washington, according to the Rev. Code §§ 26.44.020; 9A.42.100 (Washington State Legislature, 2012) identified child neglect was "an act or a failure to act, or the cumulative effects of a pattern of conduct, behavior, or inaction, that evidences a serious disregard of consequences of such magnitude as to constitute a clear and present danger to a child's health, welfare, or safety, including, but not limited to, conduct prohibited under § 9A.42.100" (Washington State Legislature, 2012, para 19). The two states' definitions outlined the basic behaviors that can be considered negligent. Failure to the child's health, according to Florida's definition, was more detailed in describing the areas of

health that can be neglected, whereas Washington included a child's safety in the definition. These inconsistencies in how each of the States defines child neglect (Font & Macguire-Jack, 2020) suggested ambiguity also existed in defining child neglect (Dickerson et al., 2020) across authorities and throughout reporting and assessing agencies (Robinson, 2019) and even practitioners (Yoo & Abiera, 2020) within the states.

### **Perspectives of Child Neglect**

This lack of consensus on the subject or definition of neglect was also evident in the public perceptions of child neglect (Dickerson et al., 2020). Currently, the literature on child neglect included examining the behaviors caregivers identify as maltreatment (Spilsbury, Gross-Manos, et al., 2018), the changes in caregivers' view of factors that contribute to maltreatment (Gross-Manos et al., 2019), and a cross-national comparison of caregivers' perceptions of behaviors and contributors of maltreatment (Spilsbury, Nadan, et al., 2018). According to Zeanah and Humphreys (2020), culture may also account for differing perceptions of parents regarding child neglect, what constitutes it and how to prevent it.

According to the literature, there were varying perceptions of caregivers and laypersons on what behaviors were neglectful (Spilsbury, Gross-Manos et al., 2018). Two longitudinal studies were conducted in order to compare the perspectives of caregivers in reference to child maltreatment. In the first study, Spilsbury, Gross-Manos et al. (2018) discovered that caregivers, neighbors, and other community members were more likely to categorize behaviors as neglectful as opposed to physically abusive after 20 years. Gross-Manos et al. (2019) discovered that over 20 years, religion came to play less of a role in

child neglect, but single parenthood was more of a determining factor for the presence of neglect. In a cross-national study, residents of three different SES neighborhoods from Cleveland, Ohio and Tel-Aviv, Israel reported differing views on child neglect. Tel Aviv residents, in comparison to those from Cleveland were less likely to attribute maltreatment to one's family, religion, or prior history. Cleveland residents were more likely to believe that abuse occurred when presented with different scenarios (Spilsbury, Nadan et al., 2018). Dickerson et al. (2020) also document that decisions on whether child neglect or abuse had occurred were also contingent on one's poverty level. They discovered, in their study on laypersons and perceptions on neglect when making reports, that a person's poverty level was associated with the occurrence of neglect. Interestingly, the lower the SES of the layperson, the less likely they were to perceive neglect or the need to report neglect (Dickerson et al., 2020).

The perspectives of parents and children were underrepresented. Little was known about the perspectives of parents and children on the subject and definition of child neglect (Elias et al., 2018; Lafantasia et al., 2019) or how decisions on reporting are made (Dickerson et al., 2020). As Dickerson et al. (2020) explain, crucial to effectively detecting child neglect was clearly articulating what behaviors are neglectful and when those behaviors should be reported. However, this cannot be achieved without clear definitions or identifiable descriptions of neglect across the board. When these definitions and descriptions were listed with inclusions on behaviors and the span of time associated with the behaviors, prevention, education, and intervention resources and programs (Elias et al., 2018) may be more effective. Until then, these varying perceptions can continue to

make observing, reporting, remediating, and preventing child neglect problematic. As such, there is a need to understand what parents, themselves, perceive the definition of child neglect to be and what factors they believe trigger child neglect, such as parental age (Dickerson et al., 2020), parental substance abuse (Spilsbury, Gross-Manos et al., 2018) and parental mental health issues (Gross-Manos et al., 2019).

### **Effects of Child Neglect**

Although child neglect was less researched than the other forms of child maltreatment, as aforementioned, the information that did exist on child neglect was heavily centered on the causes and effects of child neglect (Hendaus et al., 2020). Neglectful behavior toward children had detrimental effects educationally, socially/emotionally, and medically/physically (WHO, 2020) that can continue through adulthood. These effects were both short and long-term and can lead to a cycle of neglect, as child maltreatment victims were more prone to abuse or neglect children when they become adults (WHO, 2020), thus creating a generational issue.

While researching the effect of neglect on school-aged children, Boughey et al. (2021) found that child neglect was associated with cognitive function affecting their academic performances. According to Horwath (2013), teachers observed that neglected children have lower levels of concentration and attention spans in the classroom and demonstrate a limited capacity in their problem-solving and literacy skills. Victims of child neglect and maltreatment were inclined to perform lower at school (Robinson, 2019) and “have a 13% greater likelihood of not graduating from school” (WHO, 2020, para. 9). In addition to problems with learning, neglected students may be visibly

identified in their classrooms and school (Sharley, 2020). Because of their neglected appearances, these students were subjected to teasing, bullying, and social isolation, which could also lead to absenteeism, dropout, and crime (Children's Bureau, 2020). It was of no surprise, then, that children who were neglected were linked to higher levels of low self-worth and decreased social development skills, including low relationship quality across adolescence (Flynn et al., 2014), impairing them socially as well. Child maltreatment was also linked to depression. Humphreys et al. (2020) explored the association between specific forms of child maltreatment and depression and found that children with higher scores of maltreatment displayed higher depression and symptom scores.

In addition to educational challenges, adolescents and adults who were neglected as children demonstrated impaired social, physical, and cognitive development (Toth & Manly, 2019) with a poor ability to make good lifestyle choices (Shonkoff et al., 2012). Children who suffered from child neglect have a higher risk of mental, behavioral, and physical health problems that included depression, smoking, obesity, being at risk for high sexual behaviors and occurrences of unintended pregnancy, and substance misuse (Chamberlain et al., 2019; WHO, 2020). Behavioral problems could also lead to increased internalizing and externalizing behaviors and a lack of resilience (Robinson, 2019).

Besides behavioral consequences, child neglect had emotional ramifications. The emotional effects of neglect, in some cases, could move a child from depression (Humphreys et al., 2020) to anxiety, aggression, and even to contemplate and carry out

suicide attempts (Fortin, 2020). The emotional reaction of neglect could also lead children to become withdrawn, passive, apathetic, less involved in their physical and social environment, and give them a sense of helplessness when stressed (Avdibegović & Brkic, 2020). Women who were emotionally neglected as children were associated with depression during and post-pregnancy (Talmon et al., 2019) and had a higher rate of negative self-view as a mother. Finally, victims of child neglect were likely to have insecure attachments (Robinson, 2019) and go on to have difficulty forming attachments with their own children when they become parents (Font & Maguire-Jack, 2020). Here we note a recurring theme of depression and related effects affecting the mental health of victims of neglect (Downey & Crummy, 2022), which in turn could lead to behavioral problems. In addition to these, the effects of child neglect could show up in the parenting stage of life, leading parents who were once victims of child neglect to become perpetrators of neglect, thereby continuing a cycle of generational neglect.

In addition to the social/emotional and educational toll child neglect took on the developmental growth and experience of a child, there were also physical effects. Physical effects of neglect could be developmental and neurological. Neglected children had a higher risk for obesity (Chieh, et al., 2020), suffered from abnormal brain development, and were at higher risks for health problems (Kim & Drake, 2018). In more severe cases, child neglect could lead to hospitalizations due to medical issues requiring short- and long-term medical care (Fortin, 2020) and was linked to higher mortality risks from childhood on (Kim & Drake, 2018). Children who had been neglected also experienced cognitive and linguistic delays and difficulties as neglect has

been associated with delays in language development, expression, and receptiveness (Avdibegović & Brkic, 2020). Neuropsychological research had linked neurological impairments, neuropsychological deficits, dysregulations with the hypothalamus, pituitary, and adrenal glands, as well as the amygdala have been observed in individuals showing signs of depression or PTSD as a result of maltreatment (Cabrera et al., 2020).

The effects of neglect were not only short-term but have lasting implications. For example, Johnson and James (2016) focused on identifying the effects and negative consequences of child abuse and neglect on adult survivors. Their study concluded that the level of child abuse had a greater impact and trauma in the life of a child and led to higher rates of psychiatric disorders, substance abuse, and difficulties in relationships. This goes along with the cognitive and emotional developmental delays as well as the difficulties with emotional regulation and the antisocial behavior reported for children who suffer from child neglect (Robinson, 2019). Child neglect had also been linked to continued drug use into adulthood with a high level of relapse after rehabilitation (Wilson & Widom, 2009) and increased risk of involvement in criminal activity (WHO, 2020). Research also explained that victims of neglect were also likely to suffer from chronic diseases (Jaffee & Christian, 2014) throughout adulthood. Even in adulthood, the negative effects on mental health as a result of child neglect could actualize in the lives parents as they interacted with their own infants resulting in raised cortisol and increased stress levels and anxiety (Kern & Laurent, 2019). This only served to make the transition into parenthood even more difficult (Christie et al., 2020) than it was.



### **Triggers of Child Neglect**

In the discussion on child neglect, along with understanding the definition and types of neglect, it was also important to understand what factors could lead to or caused parents and caregivers to neglect children. Research provided several factors that contributed to child neglect, such as socioeconomic status, prior exposure to neglect, age, and stress, parental social or criminal behavior, race, and environment, as well as other factors and triggers. The ability of a parent/caregiver to provide for a child was intricately connected to the parent's socioeconomic status (SES) and, in the case of child neglect, resulted in a negative association (Christie et al., 2017). In other words, parents with economic hardship (Font & Maguire-Jack, 2020) or low SES were more likely, based on research, to neglect their children (Hendaus, et al., 2020; Kim & Drake, 2018). The level of education and family income, as well as relationship status, also contributed to the SES of parents (Smith et al., 2023) and were also linked to child neglect rates (Morris et al., 2019). While child protective agencies were instructed to take the poverty level into account and refrain from labeling a case as negligent if poverty was the issue (Child Welfare Information Gateway, 2018), this was still a point of debate (Font & Maguire-Jack, 2020).

Included in the discussion on triggers of child neglect was prior exposure to neglect. Research suggested that mothers with a history of maltreatment were more likely to perpetuate child maltreatment (Enlow et al., 2018). In a study on intergenerational transmission of child abuse and neglect, Bartlett et al. (2017) reported on mothers who were once victims of maltreatment. According to the results, mothers who reported at

least one report of victimization of child neglect increased their chance of maltreating their children by 72% and 300% when there were multiple reports of child maltreatment in their history (Bartlett et al., 2017). Likewise, Islam et al. (2023) conducted a study on intergenerational childhood maltreatment and its effects on offspring mental health. The researchers discussed that while a history of child maltreatment did not imply a cycle of maltreatment as so parents do choose to break the cycle, said history did heighten the likelihood of negative mental health in their children (Islam et al., 2023). Therefore, the cycle of maltreatment, including neglect, continued as those who have been maltreated or neglected engaged in negative behaviors or parenting toward children (Mulder et al., 2018) they experienced themselves as children.

Najman et al. (2021) also reported that parental age and number of partners were contributing factors of neglect, suggesting that the younger a parent and the more partners the parents have, the more likely a child will be neglected. Liel et al (2020) noted specifically that young maternal age was correlative to an increased risk of child neglect (Liel et al., 2020). WHO (2020) added to the discussion on age and child neglect by informing that not only could the age of the parent be a factor, but also the age of the child may be a triggering factor of child neglect, with the highest risk in the 0-4 age range.

Parental stress had been documented as a potential factor of child neglect. Maguire-Jack and Negash (2016) explain that the pressures parents feel, whether from day-to-day demands of parenting or the combination of a mixture of forces beyond control, could cause parents to withdraw from their children in some instances and could

even lead them to abuse their children in extremes situations (Maguire-Jack & Negash, 2016). One such pressure was crying. Kairys (2020) reported that crying was the most common trigger of child neglect and abuse. Parents with children who cry excessively had a hard time coping and became neglectful or even abusive toward their children, infant or older (Flaherty et al., 2013; Kairys, 2020). Liu and Meritt (2018) also added financial stress, psychological distress, and stress due to child behavior problems to the list of factors. As the demands of life can become overwhelming, parents who were unable to cope could exhibit unhealthy behaviors toward their children (Liu & Meritt, 2018).

In a meta-analytic review, Mulder et al. (2018) researched risk factors for child neglect. They classified 24 risks from 315 effects in 36 studies and concluded that parental levels, including antisocial or criminal behavior, mental and physical problems, and a history of abuse, were among the highest contributing factors to neglect (Mulder et al., 2018). In addition to these parental levels, Hendaus et al. (2020) included single parenthood, domestic violence, level of parental coping skills, education level and a child's medical condition to the list of potential triggers of neglect.

Other risk factors or triggers associated with child neglect include race. When race was discussed with SES, race was less of a predictor of neglect than SES, suggesting that SES was more predictive of neglect than race (Kim & Drake, 2018). In conjunction with SES was a discussion on unemployment. In a study assessing the effect of unemployment on child neglect, Brown and De Cao (2020) reported that a "one percentage point increase in the unemployment rate leads to a twenty percent increase in

neglect” (Brown and De Cao, 2020, p. 23). The care that a parent or caregiver could provide for a child coupled with the limited choices of resources added to the list of factors that could trigger parental neglect of children.

Different from the current list was the socially disadvantaged environment that the parent and child lived in (Liel, et al., 2020). Ainsworth (2020) described the environmental conditions of the family unit as social and economic origins of child neglect: sub-standard housing, disadvantaged neighborhoods, and social isolation from families as factors that contributed to the neglect of children.

Failing to fulfill the parents’ expectations and needs or conditions of the child, family violence, lack of support for the parent, gender or social inequality, substance abuse, and social or cultural norms were also outlined by WHO as potential factors or triggers of neglect (WHO, 2020). Using data from child protective services investigations conducted in 2017 in the state of California, Palmer et al. (2022) similarly reported that parental substance use, mental illness, domestic violence, and abuse were common factors associated with child neglect (Palmer et al., 2022). Korbin et al. (2000), on the other hand, reported neighborhood residents determined poverty/family structure, lack of moral values, and individual pathology as contributors of child maltreatment (Gross-Manos et al., 2019). Research suggested that there were a plethora of reasons that parents neglect their children. While there were similarities between studies, no two studies reported the same exact triggers. Regardless of the number of factors, child neglect remained a social problem that needed to be better understood and addressed.

## Summary

Child neglect, one of the forms of maltreatment, was more reported and substantiated but less researched than child abuse or child maltreatment. However, the effects of child neglect were not only short-term but long-term as well, taking emotional, physical, mental, and physical tolls on child victims into their adulthood. To better understand child neglect and parents, it was necessary to understand their perceptions of the definition of neglect and the factors that trigger child neglect. Although there was a general definition and description of what child neglect was and what actions might or might not constitute neglect, the discussion on the definition of neglect was difficult because there were inconsistencies on how to define neglect. In order to create effective intervention programs, for instance, definitions and what they perceived triggers to be must be understood, including that of parents. The social cognitive theory provides a foundation upon which to better understand the acquisition of behaviors, what was modeled to parents, and how those influences shaped their own thinking and behaviors, and what roles self-regulation and self-efficacy play in neglecting their children. The literature on SCT concluded that cognition, behaviors, and self-efficacy determined how people thought and behaved, which in turn affected how people responded.

In chapter 3, the method and research design for this study will be presented. Included in the chapter will be procedures pertaining to recruitment. Information on the data collection tools, sources, and points will also be provided. There will also be a discussion on the limitations, barriers, and ethical procedures for this study.

## Chapter 3: Research Method

### **Introduction**

Research on child neglect highlights the factors that contribute to parental neglect and the subsequent effects, both short and long-term. The inconsistencies that exist in defining child neglect make defining child neglect difficult. This may also affect a parent's perspective of child neglect. While child neglect education programs are implemented as preventive and remedial tools, understanding parents' perceptions is vital to designing effective programs. Limited research has been devoted to understanding the perceptions of parents of child neglect and the beliefs on what triggers neglect.

The purpose of this qualitative study was to increase the understanding of how parents perceive child neglect and triggering factors. This chapter contains information pertaining to the generic qualitative research design and the methodology used to conduct this study. Details on the participants, procedures for recruitment, participation, data collection and analysis, threats to validity, and ethical procedures used in this study are discussed in the following sections of this chapter.

### **Research Design and Rationale**

The following RQs were used to guide this qualitative study:

RQ1: What are the perceptions of parents on the definition of child neglect?

RQ2: What factors do parents believe trigger child neglect?

To explore the perceptions of parents on the definition and triggers of child neglect, I used the generic qualitative research design. Qualitative research, as explained by Kahlke (2014), is the approach used when the researcher sets out to ascertain and

comprehend how individuals or groups understand their experiences, human or social. Qualitative research focuses on extracting meaning from the participant's attributes toward something else (Hesse-Biber, 2017). In this generic qualitative study, I focused on understanding the perspective of the participants and dealt with exploring, describing, and understanding the parental perceptions of the definition of neglect and finding meaning in understanding what factors they believed trigger neglect. There were other approaches within the qualitative research method that I considered using, such as the narrative research design. According to Renjith et al. (2021), narrative research uses the story of an individual to make sense of an individual's experience and to share it with others. However, this study was not centered on the experiences of parents in relation to child neglect but rather aimed to explore their perceptions of the definition of child neglect. As such, this research study used the generic qualitative research approach.

According to Caelli et al. (2003), the generic qualitative inquiry approach is used to bring out concepts and ideas about the participants that are outside of themselves, focusing specifically on their perspectives. As Percy et al. (2015) explained, this design is for researchers studying "people's subjective 'take' on actual external happenings and events" (p. 79). With the specific focus on perspectives in this type of approach, the purpose of this study aligned better with understanding the perceptions of parents.

To explore the perceptions of parents, I conducted semistructured interviews. Researchers use interviews to gather a range of opinions (Percy et al., 2015) and the semistructured interview method includes open-ended questions and subsequent follow-up questions that are used to invite participants to elaborate on key words or phrases

(Rubin & Rubin, 2012). In addition, open-ended questions are used by researchers to invite participants to engage in sharing their experiences or perspectives so that the researcher can build on and explore the responses of the participants (Seidman, 2019).

### **Role of Researcher**

Depending on the research design and approach, the role of the researcher can vary (Creswell et al., 2007). For this generic qualitative study, I fulfilled the role of the researcher. I, as the instrument (Patton, 1999) through which the interviews were conducted, arranged the time and mode by which the interviews were held. During the interview, I positioned myself not just as an interviewer but as a listener. I asked open-ended questions and used follow-up questions to collect the parents' perceptions of the definitions of child neglect and the factors they believed trigger child neglect to remain focused on this subject. As the data collector, I validated the findings and ensured accuracy (Creswell & Creswell, 2018). Subsequent to collecting the data, I also served as data analyst (Sorsa et al., 2015) by making sense of the data, categorizing it by themes, and then interpreting it. In addition to the aforementioned, throughout the process of interviewing, collecting, and analyzing the data, I took notes to indicate whether the responses were pertaining specifically to which of the research questions or the possibility of a relationship to both.

I examined my relationship to the participants, personal or professional, and the subject of child neglect to prevent possible bias. I was a middle school teacher and while I did understand the subject of child neglect, professionally, I had limited experience with being a victim of child neglect, labeling, reporting, or investigating child neglect. Parents



of students, family members, colleagues, and school community members, with whom I was familiar or had past relationships, were not included as participants in this study to avoid conflicts of interest or other ethical issues. As I did not have any personal or professional relationships with the participants, there were no power dynamics in the interview interactions.

As a teacher with a working knowledge of child neglect, it was imperative that I remained objective during the interview, data collection, and data analysis process. My perceived comprehension of the subject matter did not influence the way in which I interacted with participants, whether verbally or through non-verbal communication. As Patton (1999) explained, the credibility of the data included identifying what could influence the data. I did not use verbal fillers or offer suggestions during participant responses. I refrained from agreeing or disagreeing with responses. To control any potential biases, I took notes about the parents' responses and not what I inferred those responses to mean. I did not allow my professional definitions or cultural beliefs to influence parents.

### **Methodology**

I used the generic qualitative approach in this study. One of the methods commonly used in generic qualitative research is semistructured interviews (Kahlke, 2014). Researchers use semistructured interviews to ask open-ended questions and encourage for dialogue and drawing out the thoughts or experiences of the participants (Adams, 2015; Kostere & Kostere, 2021). During the interviews, preselected open-ended

questions were read to the participants, with follow-up questions depending on the responses received.

### **Participant Selection Logic**

The demographic for this study included men and women between the ages of 18 and 65 who were currently parenting at least one child. One of the factors of child neglect, as discussed in Chapter 2 was SES. One of the components of SES is income. The working ages set by the Social Security Administration of the United States are 15 to 65 (SSA, nd.), with full retirement beginning at age 66. For the purpose of this study, the working ages of the SSA were followed with the minimum age of 18, as required to avoid ethical issues with speaking to minors, and the maximum age of 65, the year prior to the start of full retirement. Additional criteria included being a legal U.S. resident and speaking and understanding the English language. This specific group of individuals was selected because the premise of the study was to ascertain the perspectives of parents on the topic of child neglect; however, parents need not have been involved in a child neglect allegation or substantiated case to participate in the study. Caregivers of children were not selected as participants of this study as prior research had been conducted on caregivers of children (Gross-Manos et al., 2019; Spilsbury, Nadan et al., 2018). Grandparents were also excluded from the study as the premise of the study was to understand the perceptions of parents, not caregivers, including grandparents. Neither the marital status of the participants nor whether the parent currently lived with the child or had custody of the child were considered as factors for this study.

### *Sampling Strategy*

A purposeful criterion-based sampling method was used to conduct this study. Purposeful sampling is commonly used in a qualitative inquiry to identify and select the participants based on their experience or knowledge about a particular phenomenon (Campbell et al, 2020; Patton, 2002). As Bloomberg and Volpe (2019) described, the criterion-based purposeful sampling strategy entails identifying and subsequently selecting participants based on meeting the preset criterion for the study. In this case, the parents were selected upon meeting the age, parental status, and other stated criteria, as these individuals were considered the most appropriate to address the research questions (Bryman, 2016).

In this study, the participants were parents who were able to provide rich information and an in-depth understanding about the perceptions of the definition of child neglect and the factors that may trigger child neglect. While a random sample might facilitate the generalization of the sample group to a larger population (Bloomberg & Volpe, 2019), it was not suitable for this study as it was more closely associated with quantitative research (Creswell et al., 2007).

The participant inclusion for qualitative research can range from 15 to 20 participants (Creswell, 2021), which was the projected point of saturation. Saturation, during the data collection process, is the point at which no new information or data is acquired (Rosenthal, 2016). Data saturation would require meeting a preset number of participants for the sample size (Fusch & Ness, 2015). However, I sought to achieve theoretical saturation, which is the point when data from participants becomes similar or

repetitive, thereby eliminating new themes from discovery (Glaser & Strauss, 1967; Saunders et al., 2018). Boddy (2016) suggested that an average of 12 participants is common in qualitative research of homogenous groups for theoretical saturation. Hennink and Kaiser (2022) reported that the number of participants can range from four to 17 participants in most cases. For this study, the data collection process with participating parents ended when no new definitions of child neglect were given, or no new factors were offered during the interviews; the projected point of saturation was expected to be reached with 15 participants.

All interviews for this study were conducted using Zoom. The interviews were held virtually as a substitution for more common in-person interviews (Braun et al., 2017). I respected the privacy of the participants by conducting the interviews in a secure location where participant responses were not overheard by others and by asking the participants if they were secure and comfortable on their end to ensure they also had privacy. Participants were asked for their consent to record the interview and were asked to turn off their cameras as they entered the Zoom meeting room.

### **Instrumentation**

The objective of this generic qualitative research was to explore the perceptions of parents on the definition of child neglect and the factors they believe trigger child neglect. I served as the instrument to facilitate this exploration through semistructured interviews. According to Kostere and Kostere (2021), semistructured interviews are recommended for generic qualitative studies as this process focuses on the words and language of participants to describe their experiences, specifically in this study their

perceptions on aspects of child neglect. This type of interview is used by researchers to structure and control the interview, assuring that the research questions are addressed (Ruslin et al., 2022). Based on the foreknowledge of the inquirer through an exhaustive review of the literature, these questions are predetermined by the researcher (Percy et al., 2015). By using semistructured interviews, a researcher can ask open-ended and probing questions and have the possibility of follow-up questions that dig deeper by asking ‘why’ or ‘how’ (Adams, 2015).

The questions used for this qualitative study were structured around the concepts of child neglect, factors of child neglect, and what triggers child neglect. The complete list of questions can be found in Appendix B. Also included in Appendix B are the open-ended and demographic questions.

### **Procedure for Recruitment and Data Collection**

A plan was devised to conduct a study and recruit participants, and a process was outlined to recruit potential candidates for inclusion. Once the participants were selected, the data were collected and analyzed. The procedures for recruiting individuals and data collection and analysis for this qualitative study are outlined in the following sections.

#### ***Recruitment***

Upon receiving approval from the institutional review board (IRB), approval #10-13-23-0297381, the recruitment process for this study's participants included posting flyers on my personal social media pages, specifically Facebook and Instagram. The flyer contained information pertinent to the study, including eligibility criteria, my contact information, and the available participation incentive. Potential participants demonstrated

their interest by reaching out to me via email or direct message on Instagram or the Facebook messenger application.

Once potential participants made contact, I sent a screening email, which included a brief introduction, title, and reiteration of the purpose of the study, participant responsibilities, and time commitment. I also included a copy of the informed consent form that outlined the benefits and risks. Communication with the potential participants was completed via email before the interview.

If the individuals affirmed meeting the study criteria and email confirmation of consent by replying with “I Consent”, they were offered available dates and times to participate in the interview. Based on their availability, a calendar invitation was sent to the participants no less than 24 hours before the interview. Individuals who did not meet the criteria were thanked for their interest but were not offered an invitation to join the study. They did not receive the participation gift card incentive. If too few participants were acquired during the first round of recruitment to reach saturation, I planned to request permission to post the flyer on parent groups, such as Parenting Group, Parenting in a Tech World, and Cat & Nat Chat. I also used snowball sampling (Zickar & Keith, 2023), where participants referred other parents to be screened for potential participation in this study. As Zickar and Keith (2023) explained, snowball sampling is a sampling method in which participants in a study can identify potential participants who meet the criteria. As a form of referral, the current participants recommend new participants and recruit them for inclusion in the study (Zickar & Keith, 2023). This strategy helped enlist the number of participants needed for saturation.

### ***Data Collection***

Collecting data is an important aspect of research, as data analysis hinges on the data collected. According to Braun et al. (2017), if the data collection is not good, neither will the data analysis (Braun et al., 2017). The following steps were taken to ensure that the data collected in this study was valid. This research study implemented the semistructured interview method using an interview protocol. I began by identifying the individuals who were to be interviewed (Creswell et al., 2007), namely parents who demonstrated an interest in participating in the study, met the criteria, and gave written consent to be interviewed. To facilitate the availability of the participants, 15 one-on-one virtual interviews were conducted until saturation. The duration of the interviews ranged from 30-60 minutes. This time was comprised of introductions, a review of the purpose of the study, the actual interview, and participant questions or comments at the end. The interview questions were open-ended, with follow-up questions for participants based on the literature review. This ensured that the data collected from the interviews was aligned with the research questions and valid for the study.

Montalvo and Larson (2014) stated that research participants report a lack of confidence in being informed about the risks, benefits, or worries pertaining to the studies they consented to. To address these concerns, at the start of the interview, participants were again informed of their right to stop the interview at any time and withdraw their consent to participate in the study. Also, before asking the participants for background information, the participants were reminded that the interview was going to be recorded. They were asked anew to give verbal consent to proceed with the interview. Participant

consent is an important aspect of how individuals feel about and react to the study.

Communication of the benefits and pitfalls of a study should be clearly and effectively articulated to the participants (Nusbaum et al., 2017) to ensure understanding and confidence in the study and process.

To facilitate consent, potential participants were emailed information about the study, including its title, purpose, benefits, and risks. The email also shared the criteria for participating in the study. The participants were also emailed a consent form, which listed Walden University's IRB office information, in the event they had any concerns or questions about their rights.

Alongside informed consent in qualitative research is anonymity, which enables the participants to provide more authentic or genuine responses (Terry & Braun, 2017). The privacy of the participants was maintained during and after the interview by protecting their names. Although the interview was recorded, the participants were asked to turn off their cameras as an added measure of protection, thereby making their faces anonymous as well.

The participants were interviewed using the agreed upon virtual platform, Zoom.. No meetings were scheduled in person. Participants who were reluctant to participate using the video-conferencing platforms could have also participated via a telephone call. Before the interview began, the participants were informed that the interview would be recorded and consent would be sought. As part of the introduction and included in the consent form, the information was reiterated about the names of participants not being used in order to safeguard privacy and that responses would be kept confidential.



Finally, through this reflexive process, I was able to monitor my biases by taking handwritten notes on the participants' responses and observations as they responded to the questions. Keeping a journal for self-reflection enabled me to have an outlet to reflect not only on the participants' responses but also on how I responded to them. Reviewing the reflections also allowed me to explore any subtle biases and how they might influence the data.

Once the interviews concluded, I thanked the participants and shared the process of following up for member checking via email. The participants were then offered an incentive for their volunteer participation in the study. The incentive was emailed to the participants within 24 hours after the interview concluded. The use of an incentive stems from the consideration of the time and the willingness of the participants to participate in the study. No follow-up interviews were scheduled.

### **Data Analysis Plan**

Once the data has been collected, it must be analyzed. The data analysis process becomes the avenue through which meaning is extracted from the data and sense is made of it (Lester et al., 2020). While making sense of the data, a researcher must be cautious not to allow interpretation to color the data but rather should let the responses and perceptions of the participants present themselves in order to achieve sufficient transparency and rigor (Aguinis & Solarino, 2019). To do that, a plan must be in place. The strategy outlined by Saldaña (2020), developed in 2009, was used for this study includes foreseeing what data will be needed and how to collect it, surveying or

determining which method of inquiry was a best fit for the study, collecting the data, feeling the data for insight and meaning, organizing the data files for ease of access and analysis, jotting anecdotal notes for tracking and capturing thoughts, prioritizing tasks and data content, analyzing the data for patterns, and finally coding and categorizing the data in order to interrelate the connections and themes found therein (Saldaña, 2020).

In his explanation of foreseeing and collecting data, Saldaña (2020) recommended transcribing and recording the data. To examine the data collected from the interviews and to correctly report the findings, I reviewed the recorded interviews, handwritten notes, and reflexive journal notes taken during the interview. I then transcribed the interviews, comparing the audio files of the interviews with the handwritten notes. Once all transcription was completed, I sent the participants a copy of the transcripts to verify the accuracy, which was the member-checking process (Shenton, 2004).

After verification, I began the process of familiarizing myself with the data according to Saldaña's (2020) inductive data analysis process. During the first stage of the process, I manually printed out the transcripts to complete the coding process. In qualitative research, a code refers to a portion of language, usually a word or phrase that was important to the study, as well as sums up and seizes the essence of the data (Mezmir, 2020). Coding also begins the process of structuring meaning from the data (Vanover et al., 2021). In this study, In vivo coding (Saldaña, 2020) was implemented as it used the participants' own words to code the data. Saldaña (2020) and Creswell and Poth (2018) argued developing codes requires rereading the transcripts, breaking them

down into segments, and naming the segments by highlighting, circling, and using a key of symbols. I then grouped the coded data into categories (Adu, 2019; Saldaña, 2020).

After aligning the codes under the categories, I looked for patterns (Richards, 2021; Saldaña, 2020). By creating patterns, I was able to examine the codes to determine the connection with the purpose of the research study. From there, I formulated the emerging themes using the patterns. The themes that were similar were unified. Richards (2021) explained that after collecting the data, the researcher was tasked with knowing, coding, and categorizing the data, then creating themes in order to interpret the data, the process of thematic coding analysis. To interpret the data, I referred to the literature (Bradley et al., 2007). Throughout the process of reading, organizing, coding, categorizing, and creating patterns, I continued to develop a thorough understanding of the data collected from the perspective of the participant.

### **Issues of Trustworthiness**

The lack of trustworthiness in research can adversely affect the reception and interpretation of the data (Miles et al., 2014). To ensure that trust was maintained, a researcher must have maintained credibility, transferability, dependability, and confirmability (Amankwaa, 2016) during the data collection and analysis processes. Researchers identified and implemented strategies to assess the accuracy of the data (Saldaña, 2020) and the interpretations extracted from them.

#### **Credibility**

One of the aspects of trust discussed in qualitative research was credibility. Credibility, also referred to as validity, allows a researcher to evaluate the accuracy of the

data in relation to the researcher and the participants (Johnson et al., 2020). Creswell and Ploth's (2018) description included checking for the accuracy of the researcher's interpretation of what the participants meant. Ensuring credibility in qualitative inquiry includes triangulation, member checking, and reflexivity. I incorporated triangulation by cross-referencing different sources as I constructed the themes (Creswell & Creswell, 2018). I also used member checking as the process by which participants were given access to data collected and analyzed to judge its accuracy (Creswell & Ploth, 2018). To do so, during the interview, I periodically checked with the participants to ensure that I correctly noted their responses, using probing questions, as necessary. The participants were given the option to confirm their responses, add to them, or even withdraw their responses if they wished. Once the audio recording of the interview was transcribed, I emailed the transcription of the interviews to the participants for review and verification. After the data was analyzed, interpreted, and when the findings were discovered, I shared a summary of the results with the participants.

For reflexivity, I manually recorded notes during the interview. After the interview, I reflected on my experience, notes written on hunches, and any concerns about the reactions of the participants during the process. Also, while analyzing and interpreting the data, I evaluated how my personal experiences could have influenced my interpretation of the results.

### **Transferability**

Transferability is another subject of trustworthiness. It was the applicability of one study (Linneberg & Korsgaard, 2019) to another study under similar conditions

(Bochner, 2018). The purpose of this study was to increase the understanding of how parents perceive the definition of child neglect and also to explore the factors that parents believe trigger child neglect. Using the semistructured interview method, I asked open-ended questions with follow-up questions depending on the responses of the participants.

To make the findings of this study relatable to researchers (Amankwaa, 2016), I used Creswell and Creswell's (2018) rich, thick description technique. I provided detailed descriptions of this study. These descriptions included details about the field notes, the setting of the study, and the themes selected. The descriptions also facilitated the organization of the documents for this study. The data collected can be used to promote research in the future. While the thick description technique calls for details on the process of the research, there was no guarantee that the study would be able to be repeated with the same results.

### **Dependability**

According to Bloomberg and Volpe (2019), dependability in a qualitative study refers to the reliability of a study or the ability of tracking the collection and analysis of the data. Amankwaa (2016) took a different approach and explained dependability as necessary for potential duplication of a study in the future. This study made use of an audit trail to document the research process and procedures (Amankwaa, 2016; Bloomberg & Volpe, 2019; Yin, 2009). To do so, I took notes from the start of the research process through the end. I used debriefing to check for accuracy (Anderson, 2017) with my committee Chair. I also used member-checking with the participants for transparency and accuracy. Triangulation ensured credibility of the findings (Lemon &

Hayes, 2020). The process of self-reflecting add to the validity of the study by allowing clarity related to researcher bias (Amankwaa, 2016)). Documenting not only my thoughts but the entire process helped me to track my thought process, assumptions, and check for biases. In doing so, the data was reported accurately and assessed for accuracy.

### **Confirmability**

Another way to establish trust in qualitative research was confirmability (Williams, 2019). According to Bloomberg and Volpe (2019), confirmability refers to objectivity that the researcher achieves in qualitative research by ensuring that the researcher demonstrates how conclusions are reached from the data and interpretations. For this study, I used reflexivity to mitigate biases. As Johnson et al. (2020) discuss, reflection allows the researcher to be open and honest during the process but not interfere with the essence of participant responses. Collins and Stockton (2018) asserted that it was important for the researcher to understand the tension between their experiences and how that affects their understanding of the data. In this study, I conveyed how my background, culture, and gender may help shape the interpretations of my findings. By being forthcoming about my biases and prejudices, I monitored my thoughts and how they might influence the research (Ravitch & Carl, 2019). To facilitate the confirmability of the interviews, member checking allowed the participants to confirm their responses and contributions to the study, creating a sense of transparency and increasing the credibility of the data. I also recorded not only the responses of the participants but also took notes about my thoughts and reactions.

### **Ethical Procedures**

In this study, I used semistructured interviews for this generic qualitative inquiry. The participants were recruited from social media platforms upon approval from Walden University's Institutional Review Board. During the screening process, I ensured the recruitment process did not include members of my family, friends, or co-workers to prevent power imbalances or conflicts of interest. The participants were also informed of the study in greater detail and informed of their right to refuse participation or continuance in the study, at any time. Individuals who meet the eligibility criteria were emailed a consent form to sign and return via email.

As the data for this study was conducted through interviews, potential ethical issues are being considered. According to DiCicco-Bloom and Crabtree (2006) there are four ethical questions connected to this interview process: the risk of unintended harm to participants, anonymity, disclosure of study, and risk of exploitation. While Creswell and Ploth (2018) list a myriad of potential ethical issues that may arise in qualitative research, privacy of participants and storage of data and materials are relevant to this study. During the interview, unintended harm could be done to participants as they remember or inadvertently relive experiences. Participants who exhibited stress or expressed intense feelings will be provided psychological support. Anonymity was also an ethical issue. The participants were reassured that their responses would remain private. While emailing the consent forms and again at the start of the interview, the participants were informed of the purpose and process of the study. In doing so, pertinent information was

disclosed to them so they could make a decision on whether to participate or withdraw from the study.

During the interview sensitive information could have been divulged by the participants. The information remained anonymous and protected. Pseudonyms were assigned to participants to refrain from using their names, and their information was not shared with other parties or systems. The data collected was digitally stored for a period of five years on my password-protected laptop. The transcribed recordings were also kept electronically on my password-protected laptop. Any hard copy files and notes were kept in a lock box in my locked office, accessible only by me. These measures served as additional forms of security and privacy. Once the interview was over, participants were informed of the process of receiving a thank you e-gift card via email, so they did not feel as though they were being exploited for their information.

### **Summary**

This generic qualitative research inquiry explored the perceptions of parents on the definition of child neglect and the factors they believe might trigger child neglect. The participants in the study were parents with at least one child who were between the ages of 18-65. The semistructured interview method of this design enabled open-ended questions to be asked with the possibility of follow-up questions. The interviews lasted 30-60 minutes and were audio-recorded. The use of semistructured qualitative research aligned with the research questions and was valuable in collecting data. The different aspects of the research were discussed in this chapter, including the chosen design, the role of the researcher, the methodology selected, data collection and analysis, issues of



trustworthiness, and ethical procedures. While Chapter 3 addressed the process and procedures for collecting and analyzing the data, in Chapter 4, I will present and discuss the results.

## Chapter 4: Results

### Introduction

The following chapter includes an overview of the data collected during this qualitative study and the results of the analysis. The purpose of this study was to explore the perceptions or beliefs of parents about the definition of child neglect and the factors they believe trigger neglect. The data generated from this research were centered on parents and their perceptions, beliefs, definitions, and thoughts. The two research questions that I used to guide the study were:

RQ1: What are the perceptions of parents on the definition of child neglect?

RQ2: What factors do parents believe trigger child neglect?

In this chapter, I describe the process I used to collect and analyze data from the 15 interviews. Using Saldaña's (2020) inductive data analysis process, the interviews were recorded and transcribed. Through In vivo coding, the codes were extracted from the data using the words verbatim. From there, the codes were grouped into categories (see Adu, 2019) and from categories to themes for thematic coding (see Richards & Bebeau, 2021). Throughout the data analysis process, the data were checked and compared to ensure that the perceptions and meanings of the parents were retained. This chapter includes discussion of the study's results and contains tables of the codes and themes developed from the interviews.

### Setting

For this study, I conducted interviews using Zoom and served as the primary instrument for data collection. Recruitment flyers were posted on social media. The

participation criteria included adults between the ages of 18 and 65 who were currently parenting at least one child, who were legal U.S. residents, and who could speak and understand the English language. As per the flyer, interested parents were asked to contact me and the consent form was emailed to them. With participant consent, the interview dates and times were coordinated, and I emailed the interview link to the participants. All 15 interviews were conducted via Zoom, the virtual conferencing software. Each interview was audio-recorded. Participants who joined the Zoom room with their cameras on were requested to turn off their cameras prior to the start of the interview to protect the privacy and confidentiality of the participants.

### **Participant Demographics**

To better understand the group of participants and their characteristics, demographic information was collected during the preliminary discussion. I conducted a total of 15 interviews for the study to reach saturation. A variation to the proposed plan was made in regard to the participant sample size. While the anticipated size of the sample was 10 to 12 participants, saturation was not achieved at 12 participants. Instead, saturation was reached with 15 interviews. The participants were five fathers and 10 mothers.

One of the criteria of the study included being a legal U.S. resident. All of the participants reside in the United States. Of the 15 participants in this study, 93% or 14 lived on the Eastern region of the United States, with 12 participants living in the Southeast and two living in the Northeast. One participant, making up 6% of the sample, lived in the Midwest. At the time of the interview, the ages of the participants ranged

from 24 to 55 years. Seven participants identified themselves as “Black” or “African American”, four as “Hispanic”, three as “Caucasian” or “White”, and one as Asian.

The participants also had varied employment statuses and educational backgrounds. One participant was not employed (6%), another participant was self-employed (6%), three were employed part-time (20%), and the remaining 10 participants were employed full-time (67%). Their educational levels also varied as one of the 14 participants who responded to this question had a PhD (7%), five obtained a master’s degree (36%), three held a bachelor’s degree (21%), four had completed an associate degree or had completed 2 or more years of college (29%), and three had started college (21%).

The demographic questions did not include marital status but did inquire about the number and age(s) of the participants’ child(ren). The children of the participants ranged from 11 months old to 33 years old. Three of the participants had only one child, seven had two children, four had three children, and one parent had five children. A total of 93% of the children lived with their parents, representing fourteen of the participants and only one participant (6%) did not have children living in the home. The following table, Table 1 lists some of the demographic information of the participants.

**Table 1***Participants' Demographics and Coding (N=15)*

Participant	Age (Yrs)	Race Identified	Employment Status	Education Level	Number of Children	Live with Children
Participant 1	28	African-American	Full-time	Bachelor's	2	Yes
Participant 2	24	Hispanic	Full-time	Started College	1	Yes
Participant 3	25	Hispanic	Part-time	Bachelor's	1	Yes
Participant 4	38	African-American	Part-time	No Response	3	Yes
Participant 5	28	Hispanic	Part-Time	Associate's	1	Yes
Participant 6	55	White/Caucasian	Full time	Started College 2+ yrs	2	Yes
Participant 7	40	Asian (Pakistan)	Full time	Started College 2+ yrs	3	Yes
Participant 8	47	Caucasian	Full time	Master's	2	Yes
Participant 9	34	Caucasian	Full-time	Master's	5	Yes
Participant 10	50	African-American	Full time	Associate's	2	No
Participant 11	47	Hispanic	Full time	Master's	3	Yes
Participant 12	45	African-American	Self-employed	Bachelor's	3	Yes
Participant 13	50	Haitian-American (African-American)	Full time	Doctorate	2	Yes (when not at college)
Participant 14	38	African-American	Full time	Master's	2	Yes
Participant 15	36	African-American	Not employed	Master's	2	Yes

### **Data Collection**

The recruitment process for this study consisted of posting the IRB-approved flyer on my personal LinkedIn, Facebook, and Instagram pages. I changed the private settings on each account from private to public to increase the likelihood that my flyer would be visible to more people. In addition, I requested permission to join a total of four parenting groups and to post the flyer on their pages. The flyer instructed interested parents to email my Walden University email expressing said interest to participate in the study. Each request provided the administrators with a brief description of the study, my interest in joining the group in hopes of recruiting parents for participation in the study, and the intention to share the flyer in a post upon approval to the group. I received approval from each and subsequently posted the flyer on the four group pages.

After posting the flyer on social media, I used the Walden University Participant Pool to recruit potential volunteers interested in Walden University studies. An IRB-approved invitation to the study was posted on the participant pool site. The invitation included information about the study, the study's criteria, and my contact information. Participants were also recruited through the snowball effect by sharing the study with other potentially interested parents they knew, who, in turn, contacted me with interest in participating.

The interested parents, whether responding to the flyer posted on social media, the invitation on the participation pool, or through snowballing, were directed to contact me via Walden email. Upon receiving their expression of interest, I emailed each prospect the consent form that provided a brief synopsis of the study, listed the inclusion criteria

anew, and shared the benefits and risks of participating in the study. Finally, if participants wished to move forward, they were to respond with “I Consent” to the email. Following the written consent from each participant, interview dates and times were arranged. The participants then received a link within 24 to 48 hours of the meeting via email.

While the proposed plan did not specify the virtual platform where the interviews would be conducted, the consent form specified that the interview would be recorded. The participants all consented to use the Zoom Video Communications platform. Upon joining the Zoom meeting, the participants entered the Zoom waiting room and were subsequently admitted to the Meeting Room set up for the interview. Parents who entered the Zoom room with their videos on were asked to turn off their cameras to protect their privacy. After the introductions were made, the participant was again asked to give consent for the audio recording to begin.

The proposed plan in Chapter 3 included video-recording participants to gather verbal responses and non-verbal cues from the parents during the interview. However, during the IRB process, the video-recording option of the plan was changed to audio-recording solely. Thus, a variation of the type of recording was made to proceed with the study.

With consent to audio-record, I proceeded to remind the participants of the purpose of the interview and that the focus of the interview was on their perceptions of child neglect and not personal experiences with neglect. The interview process began with a round of preliminary questions that asked demographic questions. Once the

questions were answered, the second set of questions exploring the two research questions was then asked. Each interview was audio recorded and captioned using the Zoom platform's recording option. During the interview, I kept a journal for self-reflexivity, checking for researcher biases. I also took notes on key points the participants shared or responses that required follow-up questions. The average interview lasted about 20 minutes, while the consent form suggested an interview time of 30 to 60 minutes.

At the end of the interview, the participants were thanked for participating in the study and for their time. The member-checking process was shared with each participant and consisted of transcribing the recording, verifying the transcriptions against the audio recording to ensure accuracy, and then emailing the transcription to the participants for verification. They were informed of the incentive, a \$20 Amazon e-gift card, that would be sent to each individual for participating in the study. The incentives were emailed to the participants within 24 hours of the interview.

In order to better facilitate the transcription process, the caption setting was activated during the interview. Once the interviews were completed, the audio recordings and transcripts rendered were converted by the Zoom software and downloaded onto a storage drive. While the transcripts accelerated the process, the software was not error-proof. As the data collector, I read through the transcriptions for general familiarity. Then, I manually replayed the audio recordings, comparing them to the digitally rendered transcripts to validate the findings and ensure accuracy. Once the recordings and transcripts were reconciled, signifying that the data was accurately transcribed, the updated files were stored on the storage drive for analysis. The updated files were



emailed to the participants for member-checking. Five of the 15 participants responded to the emails and verified the accuracy of the transcriptions.

### **Data Analysis**

After collecting data, meaning and sense were extracted from the data (see Lester et al., 2020). For the thematic inductive approach to the data analysis that I used for this study, I followed Saldaña's (2020) recommendations for collecting and reporting data. The process calls for recording the data and then transcribing it. The data were then transcribed on Microsoft Word documents, one for each participant's interview. I transcribed the interviews, comparing the audio recording files of the interviews to the transcriptions rendered by Zoom's auto transcription software. As the transcriptions were completed, the finalized transcription documents of the audio recordings were emailed to the participants for member-checking (see Shenton, 2004). The participants were invited to review the transcript for accuracy, if possible, in the few days following the interview. However, if they were unable to review the document, I would assume that they were okay with it as is. One-half of the participants verified the transcripts.

The next steps in Saldaña's (2020) inductive data analysis process after verification of the data were preparing and coding the data. After the transcripts were printed, I familiarized myself with the data by reviewing the recorded interviews, rereading the transcriptions and handwritten notes, and reflexive journal notes taken during the interview. The data were reviewed multiple times before proceeding to the next step, which was to code it manually. In vivo coding was implemented, using the words of the participants to develop codes. This was accomplished by breaking the

responses to each question into smaller segments, circling, developing symbols for the segments, and naming the segments by highlighting them (Creswell & Ploth, 2018; Saldaña, 2020). The codes were compiled in a new Microsoft Word document. The codes were then color-coded and grouped into categories. The categories were formed by compiling similar codes into larger chunks.

Repetitious codes, those that used similar words or had similar meanings, were condensed into categories. Once the categories were determined, I looked for patterns in the data by examining the codes and categories. Categories with similar concepts were bundled into larger groups. Looking for connections between the purpose of the study and the research questions, the larger groups were then turned into themes. These overarching themes emerged from the categories that allowed me to interpret the data as the process of thematic coding analysis calls for. Subsequently, the codes, categories, and emergent themes were entered into a coding matrix in Microsoft Excel. Similar themes were unified. The themes that emerged were inability to provide, socio-economic status, health, relationship status, substance use, stress, and exposure to neglect. These became the subthemes of the four overarching themes: perceived definitions, inconsistencies in defining child neglect, perceived factors, and perceived triggers. At each step of the analysis process, I revised and assessed the data, all the while evaluating my tactics and biases to verify that my thoughts, feelings, or conduct impacted the development of the codes, categories, or themes.

### **Evidence of Trustworthiness**

How a research study is received and interpreted is affected by the level of trustworthiness. Throughout the process of data collection and analysis, a researcher must maintain credibility, transferability, dependability, and confirmability to ensure trust. Saldaña (2020) identified strategies to implement for assessing the accuracy of the data.

#### **Credibility**

This qualitative study called for triangulation, member checking, and reflexivity during the data collection and analysis process to ensure credibility. Also known as validity, credibility enables the researcher to evaluate and demonstrate the accuracy of the data compiled with regard to the participants and the researcher herself (Johnson et al., 2020). To begin, each participant was interviewed using the same closed-ended questions. During the interview process, I remained objective to ensure that the data collection was not affected by my conceptions or personal beliefs. I incorporated triangulation by cross-referencing different sources, such as the interview protocol, the recordings, my notes from the interviews, and the transcriptions during data analysis and as I constructed the themes of the data. As I reviewed the data, I checked the transcriptions against the audio files and the notes that I had taken during the interview, verifying that what I had was indeed accurate.

Member checking was another way that credibility was established. During the interview, I periodically checked with the participants to ask if I had correctly noted their responses and used probing questions. The participants were able to amend their responses. After the recordings were completed, the recordings were transcribed exactly

or verbatim. The transcriptions were then emailed to each corresponding participant to validate the findings and assure that the data gathered, and transcriptions rendered conveyed the intended responses and meanings. As the participants responded affirmatively that the transcriptions were satisfactory and that no changes needed to be made. This helped to assure the accuracy of my data collection and the interpretation that would result from it.

Reflexivity also lends itself to credibility. As the interview progressed, I manually recorded notes to ensure the accurate collection of the data. I jotted down self-reflexive notes reflecting on my own experience, notes of the interview or hunches, and other concerns about the reactions of the participants during the data collection process. At the end of the interview, the participants were informed about the confidentiality of their participation in the study as well as their responses. The collection and analysis of the data were done privately. Throughout the process, I reflected and journaled about my personal experiences with the interviews, my thoughts and insights, on what my interpretations were, and on what could have been improved with each additional interview.

### **Transferability**

The purpose of this study was to increase the understanding of how parents perceive the definition of child neglect and to explore the factors that parents believe trigger child neglect. This study used purposeful criterion-based and snowball sampling methods to recruit participants. Each participant satisfied the criteria requirements for inclusion in the study and the description of the population was included, promoting

transferability. Transferability for this study was also established through the descriptions provided of the process implemented in the study. These descriptions including the context of the study and process of the research, the semistructured interview process including the interview protocol, as well as the description and accounts of the participants, can afford researchers information for further studies. As such, the applicability of this study to another study confirmed its trustworthiness through transferability.

### **Dependability**

The reliability of a study or the ability to track the data collection and analysis processes in a qualitative study is called dependability (Bloomberg and Volpe (2019)). This process makes future duplication possible Amankwaa (2016). The data collection and analysis processes for this study were explained in detail, providing an audit trail. I took notes during each stage of the research process. By not only documenting my thoughts throughout the entire process, but I was also able to track my assumptions and check for biases. Self-reflecting, then, was able to add to the validity of the study. With my committee Chair, I used debriefing to check for accuracy. Through member-checking with the participants, I was able to maintain transparency and certify the accuracy of the findings. Triangulation ensured the credibility of the findings. In doing so, the data was reported accurately and assessed for accuracy.

### **Confirmability**

Confirmability was established as I used reflexivity to mitigate biases. Reflection allowed me, as the researcher, to be honest and open for the duration of the research

process, while not interfering with the essence of the participants' responses. Journaling my thoughts and feelings afforded me the possibility to understand the tension between my experiences and beliefs and how they may have affected my understanding of the data. Member checking, then, allowed the participants to confirm their responses and contributions to the study, thereby facilitating confirmability. This increased transparency also increased the credibility of the data. The analysis and interpretation of the data was also reviewed with my chair. To foster trustworthiness of this study credibility, transferability, dependability, and confirmability were relevant and established.

### **Results of Research Study**

The following section presents the results of the data analysis of this generic qualitative research study. Each participant responded to the questions of the semistructured interview intended to address the two research questions that have guided the study: What are the perceptions of parents on the definition of child neglect and what factors do parents believe trigger child neglect? The participants disclosed their definitions, perceptions, and examples of child neglect and provided the factors they believe trigger child neglect. Through the data analysis process of coding and categorizing, four central themes were developed in relation to the research questions from the responses of the participants. Two themes, the perceived definition of child neglect and inconsistencies in defining child neglect, and three subthemes emerged when addressing RQ 1. Two themes were also developed when addressing RQ 2- perceived factors of child neglect along with seven encompassing subthemes and perceived triggers of child neglect. This section thus discusses the definitions, perceptions, and key factors

the participants stated as triggering child neglect and explores the themes extracted from the research questions in detail using participant quotes for illustration.

### **Theme 1: Perceived Definition of Child Neglect**

Prior to providing their definitions of child, the participants assessed how familiar they were with the term child neglect. Of the fifteen participants, one participant reported not familiar, three participants felt they were vaguely or somewhat familiar with the term, and ten shared that they were familiar with the term child neglect. Only one participant shared “I’m very familiar with child neglect” and provided the reason, “I worked for the department of children and families.” The participants, then, represent a range of parents who may not be familiar with the term, have a cursory or “common sense” knowledge of the term as Participant 11 phrased it, or have become familiar or are experts on the term child neglect through direct or indirect line of work, research, or experience with being reported as do the participants that make up the data for this study.

The participants went on to provide their definitions of the term child neglect. While the participants’ wording used to define the term child neglect varied, the concepts could be broken down into 3 groups. The majority of the participants, 12 of 15, defined child neglect as a deprivation of a child’s needs in some capacity or another. For example, Participant 10 said, “child neglect, I would say is when a child's not getting either the shelter they need, food, clothing- anything in that room, they would need to survive from day to day- they're not receiving.” In elaborating on their definitions, five of the participants who had classified child neglect as a deprivation of needs discussed the

neglectful actions of parents as not being deliberate. Three of those five participants also discussed the actions as potentially intentional.

In comparison, for a total of three participants, child neglect was not just about care but about the importance of the child's needs. In addition to defining child neglect in terms of deprivation, two of these three participants also described child neglect in light of prioritization of a child's needs, more specifically, failing to make those needs a top priority. For example, Participant 2 defined child neglect as "not prioritizing giving the child what they need and in any capacity." Participant 3 explained this concept further by sharing, "When a child's needs are being dismissed or disregarded- not given as much importance as they should. In that sense- the needs of the child in any capacity are not given top priority at the expense of the child". Conversely, only one of these three participants mentioned the importance of the child's needs solely described child neglect in terms of not prioritizing the needs of the child.

Lastly, the two remaining participants defined child neglect as "what parents omit in their care" or simply "not taking care of the child." neglect in terms of the care children receive or lack thereof. For example, Participant 15 explained, "for me, child neglect is what a parent might omit in their care." Similarly, Participant 7 phrased this same concept of care slightly differently and added the notion of consequence by explaining that care is continual, "daily tasks and not taking care of the child, in a daily sort of way. It all adds up to the child psyche." Participants 1 and 7 were the only parents to connect the impact of experiencing neglect to a child's development. The perceived definitions of the parents demonstrate their level of understanding of the term child



neglect. The following are the results of the subthemes that emerged from these perceptions.

***Subtheme 1: Failure to Provide***

The parental perceptions of the definition of neglect were predominantly meeting or depriving a child's basic needs and caring for the child's needs, inclusive of supervision of the child, and prioritizing the child's needs. Ten of the fifteen participants defined child neglect along similar lines. Participants 1, 4, 5, 8, 9, and 13 used the words "not providing, withholding, or deprive" in relation to a child's basic needs. Participants 4 and 5 explained that child neglect was to "deprive a child of their basic needs." Participant 1, using slightly different words, but conveying the same message, explained that child neglect is "not giving the child what they require- depriving them of their needs both physically, emotionally, mentally, psychologically." In addition to the 4 basic needs, Participant 15 included, "failure to meet that child's basic needs according to the Maslow's hierarchy of needs." Simply stated, Participant 13 added, "child neglect is basically ignoring the child for the basic needs they have, and they cannot provide for themselves." Other participants did not define child neglect as a deprivation of a child's needs but as a failure to meet those needs. Participant 6, for example, shared, "The definition I guess is what I perceive, not paying attention to your child, not getting their needs met." Participant 11, relatedly said, "there's not adult supervision and or someone that's making sure all the basic needs are met for the child." As such, more than half of the participants understood child neglect as failing to meet a child's needs or failing to adequately provide for the child.

### ***Subtheme 2: Parental Inadequacy***

The subtheme of inadequacy also came to light as parents shared their perceptions. While deprivation connotes not giving or providing, inadequacy suggests insufficiency, such that a parent might provide for a child, but not the necessary or sufficient amount. Participant 1 phrased it as “not giving the child what they require.” Participant 11 expressed it as “not...making sure that all the basic needs are met for the child.” There is a level of care given to the child, however, as Participant 13 provided, the parent does “not properly take of the child.” This inadequacy involves the different aspects of parenting, including nutritionally by “not properly feeding a child” like Participant 6 explained or when a child would “not have proper nutrition” or even missing “checkups, growth, and mile markers” as Participant 9 elaborated. Whether nutritionally, physically, or supervisory as Participant 12 alluded to when mentioning a “lack of parental attention,” the participants perceived that child neglect involves an aspect of parental inadequacy or insufficiency in care toward a child.

### ***Subtheme 3: Intentionality***

Participants 1, 9, and 13 included an aspect of child neglect not discussed by the other participants, the aspect of intentionality of child neglect. Participant 1 explained, what “I'm thinking about neglect is that sometimes it's not deliberate.” Iterating the same idea, Participant 9 shared, “I would say neglect would be withholding the necessary needing from a child, whether, you know, intentionally or not intentionally.” Participant 13 also discussed intentionality, stating, “Anything that you, I, voluntarily or unvoluntarily or involuntarily withhold from the child.” Unlike Participants 9 and 13,

Participant 1 elaborated on the concept of intentionality and explained that a voluntary act is “going out of your way to harm a child, or being deliberate is child abuse whereas involuntarily harming a child is child neglect.” Conversely, Participant 5 argued that with child neglect “I don’t feel it’s that straightforward...neglect is really a broad spectrum.” Speaking more on this duality, Participant 5 went on to explain that neglect can “sometimes be based on errors or mistakes or a lack of knowledge,” and “neglect, it can be malicious and sometimes it can be situation based and sometimes it's just ignorance.” As such, child neglect is not simply a matter of what a parent does or does not do in relation to their child(ren). Child neglect, as these parents relate, can be based on intent, the situation, or as Participant 5 suggested, even ignorance.

### **Theme 2: Inconsistencies in Defining Child Neglect**

There were inconsistencies in how the participants defined the term child neglect. While the majority of the parents included a variation of deprivation or failure to provide for their child in their definitions, about 1/3 of the participants defined child neglect differently. The perceptions of the participants as explained above, demonstrate that parents do not have a uniform definition of child neglect. Some parents defined child neglect in terms of actions that parents did not exhibit toward their children. For example, Participant 6 defined neglect in terms of “not paying attention to [a] child or watching children.” Similarly, Participant 8, when asked about the definition of child neglect answered by listing a series of actions a parent might fail to do, including “not feeding children, not keeping them safe, not meeting their needs, making sure they go to school, leaving them home alone...et cetera.” Whereas other parents, such as Participant 2 and

Participant 3, perceived the definition as prioritization stating child neglect is “not prioritizing giving the child what they need in any capacity needs” and “child’s needs are not given top priority at the expense of the child” respectively. Yet, one other participant included an aspect of quality of care in child neglect by defining it as “not having the nurturing...or guidance from the parent.” The definitions varied in verbiage and context, demonstrating that parental perceptions of the definition of child neglect were not homogenous but diverse.

In addition to defining child neglect differently, the participants also had differing views on what child neglect looks like when asked to provide an example of child neglect. Nine of the fifteen participants included inadequate food or nutrition in their responses, representing the most common example. Other frequent examples included a lack of or inadequate supervision and shelter. For instance, Participants 11, 13 and 15 mentioned “failure to provide food or not providing food” compared to Participant 3 who phrased it as “forgetting to feed the child.” Participants 6, 7, and 9 discussed receiving little or not enough food.

While Participant 12 did initially consider “little or no food” as an example of neglect, further in responding, another dimension was presented by linking access to food with supervision in explaining that the “charges [being] left in the house by themselves for hours at a time and sometimes they don't have access to food or sometimes where they can grab food that, it might be dangerous to get that for them.” Participant 12 went on to explicitly mention this lack of supervision by adding, “they don’t have the supervision of an adult” as Participants 6, 8, 12, and 13 for example, alluded to. In

comparison, Participant 14, was the only parent to explain that “DCF has a regulation for when any child can be left alone at home and the child cannot be left alone.” Herein lies another inconsistency, this time in the perception of the supervision of children and even the consequences or ramifications of this form of child neglect.

While some parents used the term lack of supervision, other parents used a different talking point, that of attention. Participant 10 was the only parent to allude to child neglect being visible in saying, “If I was to see a child... [who] would come in there always hungry and always have on the same clothing and is always dirty and can shy away from stuff...you can see they are not getting that attention.” Conversely, Participant 6 gave the example of “a child getting up in the middle of the night, the parent did not pay attention and they find that child in the street.” Not all parents incorporated lack of supervision or attention in their examples, as abandonment was also mentioned, which would be considered as no attention at all. Participant 8 reported, “the first thing that comes to mind is leaving a child in a car by themselves.” Participant 14 further explained that “child neglect to me is child abandonment, you’ve been abandoning your child of their basic needs, emotionally, physically and all the other needs.” This suggests that parents’ perceptions of attention were not uniform but ranged from a lack of attention to no attention at all.

The responses of the parents interviewed presented a wide range of perceptions from the definition of the term child neglect, including the actions or behaviors associated with the definition. There was also a lack of consensus, as well, in the perceptions of

parents when providing examples of child neglect. The implications of these inconsistencies will be discussed in Chapter 5.

### **Theme 3: Perceived Factors**

The second research question explored the parental perceptions of parents with regard to the factors they believe trigger child neglect. The participants were asked to divulge the factors they believed could lead parents to neglect their children. For this study, factors describe the circumstances or risks that contribute to child neglect (Christie et al., 2020; Font & Maguire-Jack, 2020; Morris et al., 2019) The following sub-themes represent the key factors derived from the perceptions the participants shared.

#### ***Subtheme 1: Health as a Factor Triggering Child Neglect***

One of the subthemes developed during the data analysis was health. “There are a lot of limitations on health literacy,” explained Participant 9. These limitations, as Participant 9 went on to explain, may be inadvertently “neglecting their children because they just didn’t have that knowledge.” Parental health, whether physical, emotional, or mental, as the participants relayed, is linked to the care they can give to their children. Participant 2 succinctly stated:

In the case of neglect, I’d say anything that impairs them, the parent, to take care of themselves. In the sense that, I feel like if a parent has something that impairs their ability to take care of themselves then they can’t take care of their child...a mom can’t take care of her child due to herself probably dealing with something that impairs her ability to do.

Speaking further on the point, Participant 2 continued to provide the example of a mother dealing with postpartum depression explaining that “maybe she just can’t handle taking care of the child at that moment.” In other words, parents cannot help their children when they cannot help themselves. Participants 3 and 4 also spoke to this point. Participant 3 shared that “when you are not in the best place emotionally, you become all scattered...it’s really hard to function like that-not to talk of having a child.” As Participant 4 described, “anything that can heavily disrupt a parent emotionally will trickle down or reflect in how they’re able to raise their child.”

While all but one of the participants discussed health, thirteen of the fifteen participants specifically mentioned mental health as a factor they believe could lead parents to neglect their children. The parents identified being mentally ‘unhealthy’ in a myriad of ways. Participant 2 names it as a “mental health issue”, Participant 3 said it was “not [being] in the best headspace mentally”, Participant 7 called it ‘not being mentally there’, and Participant 4 used the term “mental instability.” Even though most of the parents mentioned mental illness or one of its related phrases, the context was not uniform. For example, Participant 15 used the phrase “mental issues or illness” in its traditional sense. However, like Participant 5, Participant 1, also argued that parents may have “undiagnosed mental issues that is a contributor.” While Participant 13 agreed that “mental incapacitation [can be] in terms of mental illness.” The participant also shared that “mental incapability can be the result of substance abuse.” Others, such as Participant 10 suggested, “sometimes the parents may have a mental issue that was never taken care of in their life” bringing about an additional view of unresolved past issues

affecting present circumstances. Whether linked to another factor or as an independent factor, the participants perceived that the mental health of a parent can lead to child neglect.

A less popular perspective on mental health dealt with the parents' mental state. For example, Participant 1 disclosed, "I think the parent has some sort of mental problem if they [intentionally neglect], like there has to be something mentally that's creating that reaction." Participant 8 iterated a similar response, "intentional neglect, that has to be mental illness." In this sense, the participant is arguing that neglecting a child is itself a reaction of a mental problem.

Parental child neglect involves two parties, parents and children. Although during the interviews, parental health was dominant, two participants alternatively discussed the health of the child. For one participant, besides the parent's health being a factor, "the kids need[ing] some attention from the medical aspect, as well" could bring an added stress level to caring for children. The other participant shared that parents of special needs children also "have economic factors the child could need." In addition, parents can feel like there is a lack of family support as if "hey you brought that child in the world, you deal with it." As such, the condition of the child may bring additional factors that can lead to child neglect.

### ***Subtheme 2: Substance Use as a Factor Triggering Child Neglect***

The use of drugs or other substances was another key factor. Eight of the fifteen participants cited drugs and/or addiction as a factor that could lead parents to neglect their children. Listed by most participants as drug use, many participants did not elaborate on



this factor. However, Participant 2 provided the addition of “any form of addiction” to having “issues with drugs.” Participant 9 also contemplated addiction and elaborated on the effect of drugs on parents and child neglect, saying:

I feel like substance abuse is a big one. You may have someone who is a has all the intentions, but if they start abusing different substances and have that addiction. You know, addiction a lot of times overpowers their desires to be, you know, a parent that can provide those resources. So, neglect sometimes happens.

This was evidenced by one of the participants, a former Department of Children and Families (DCF) employee. The participant recounted, “I have gone to some homes where you go, you just see with plain eyes the neglectfulness of the parent. And the parent is there, the child is there, and the parent is high on drugs and the child was fully neglected.” Whether intentionally or unintentionally, the presence, use, and effects of drugs can lead a parent to neglect a child, impairing their ability to provide, assist, or supervise the child.

### ***Subtheme 3: Parent-Parent and Parent-Child Relationship Changes***

Health and substances, as previously discussed, were noted as key roles in parental child neglect. In addition to the aforementioned factors, the subtheme of relationship changes was also discussed. The dynamic of parental relationships while child rearing can require a delicate balance. A change to the balance not only affects the parents involved but can trickle into the parent-child relationship. Several participants conveyed that such relationship changes could lead to child neglect, although the reasons for the neglect varied. One such reason, given by Participant 14, was the occurrence of

“domestic violence, causing maybe one or other parent to separate; the parent could leave the house.” The turmoil within the parent relationship could push one parent to separate from the family unit, resulting in one parent neglecting the child. The former DCF employee, in turn shared that with “dirty divorces and separations of parents leaving one of them disgruntled and bitter and as a result, you don’t feel connected anymore to that child because of the separation.” Again, the notion of a change within the parents’ relationship could result in separation. This separation does not only have to be one parent leaving the relationship. Participants 3 and 5 also identified grief as a potential factor that can lead parents to neglect. As Participant 3 shared “sometimes death of a significant other can result in parent neglecting their child due to grief.” The situation of separation, temporary or permanent, could cause a parent to pull away from the child and with disconnect could come neglect.

Separation may not be the only cause of the relationship changing, the root cause of change could also be the shift or distribution of the roles or responsibilities of the parents. Both Participant 13 and Participant 6 mentioned that child neglect could also occur when “one parent seems to feel that they are doing all the work alone and the other parent is out there enjoying themselves.” With this sentiment, Participant 13 explained that a parent could go as far as feeling “why would I consider continue providing for that child or attend to that child’s needs, when that other parent who has 50% of DNA in that child- they’re doing their own thing and don’t care.” This complex web of isolation, frustration, and resentment can lead parents to feel and act in ways that are neglectful toward that child.

Although Parent 6 discussed that there might be “one parent trying to outdo the other parent,” but also mentioned that neglect can occur conversely when one parent pushes the responsibility of the child onto the other parent, explaining, “it’s your turn, your responsibility.” Parent 6 also brought to light the added dimension of gender roles by stating “I know it gets dumped on the woman a lot, it’s not fair in our society...I think a lot of men think that it’s the mother’s job.” Being the only participant to speak to this point, Participant 6 pulled back the curtain on a societal issue that may drop the responsibility of childcare on mothers. By doing so, mothers may then be burdened to care for children, and may have to do so alone, which may lead them to neglect their children.

Separating or withdrawing from a child, subsequent to changes within the parent-parent relationship status is not the only potential cause for this- factor of neglect. Two participants discussed the custodial parent punishing the child in lieu of the other parent. Participant 3 expressed the potential factor as “maybe they blame the child for something of their control...like punishing your child because he or she reminds you of your ex.” Speaking along the same lines, Participant 1 shared “the child is punished for the crimes of another, probably in their marriage or the child reminds you too much of their father, so the child will be the surrogate for the punishment.” The child, in essence, pays for the other parent, receiving the neglect that the custodial parent cannot give the co-parent.

While some participants discussed the ending of a relationship as potentially leading a parent to neglect their child, another participant looked to the beginning of a relationship as a potential factor. With new significant others, the relation changes and

the balance may be upset. As Participant 3 disclosed, when “parents that have custody of a child suddenly starts dating someone new and the new significant other is not a fan of the child, and the parent wants to make the new significant other happy and begins to neglect the child.” The new significant other’s response to the child may then dictate or influence the way in which the biological parent cares for or interacts with the change. Parental relationships affect the interactions of both the parents and children. The entrance or exit of parents or significant others, can intentionally or unintentionally lead the custodial parents to neglect their children as they adjust to the changes in their relationships.

#### ***Subtheme 4: Economic Factors Triggering Neglect***

Another factor referenced was related to finances and the effect the parental financial situation has on the family. Participants 12, 14, and 15 shared that “socio-economic conditions” can lead parents to neglect their children. The term SES connotes the educational, income, and occupations of a person, in this case, a parent. While Participant 15 did not go into detail, Participant 12 provided the aspect of socio-economic status, education, as a link to socioeconomics. Participant 14, on the other hand, shed more light on the complexities involved, explaining that parents in a “financial crisis ... don’t have resources to adequately take care of the child.” Without the proper resources or funds to acquire the necessary help, even as much as family support or babysitting, a parent may have to rely on “going to work” to meet the needs of the child. In some cases, as Participant 12 shared, “parents had to hold multiple jobs to make ends meet.” This lack of finances may bring on the domino effect of not being able to afford the things they

would want. This could also lead parents to have to settle for “an environment that is not conducive to how they wanna raise their kids,” explained Participant 12, further exposing them to “languages, music, and so forth” that they would not have chosen with adequate resources.

The concept of lack of funds or difficulty making ends meet resonated with other participants as well. Participant 7 commented that in situations where “there’s only one parent in the household, they can only do so much with the kids,” even more so when there are multiple kids, and “it wears down on them.” According to Participant 8, a parent may even be facing “extreme poverty”, and that parent may be “forced to work more than humanly normal to support the family.” Participant 8 continued to explain that the situation is not always dire or crucial to survival, but rather parents “sometimes think that making money or providing for the kids financially can justify leaving them home alone, unsupervised.” Participant 8 took an additional view, in that working justifies leaving, the neglect is not entirely intentional, but it is necessary. While Participant 6 agreed that neglect can be a byproduct of parents working 1 or even 2 jobs to provide for their children and to make ends meet, Participant 6 acknowledged that the expenses may be brought on by other factors the simple cost of living. For instance, “economic factors the child could need” could be brought on by “special needs children.” Several of the participants, then, perceived that the financial situation of parents can become the basis for finance to be a factor of child neglect. Providing for their children, as perceived by the participants, comes with the drawback of less time spent with the children- an unintentional, yet necessary aspect of child neglect for the greater good.

***Subtheme 5: Trauma or Cycle of Trauma as a Factor Triggering Neglect***

The list of potential factors that can lead to child neglect itself, included neglected or traumatized children. Few participants commented on the cyclical effects of trauma or neglected children who go on to traumatize or neglect their own children. Participant 7 commented that a potential factor of parental neglect is a parent who “grew up in that sort of neglectful environment. Participant 1 shared that:

Child neglect that stems from trauma is because it is in your DNA...[becoming] a subconscious reaction to that situation, so if the situation is replicated... Your brain would automatically assume that this is the way I’m supposed to react based on when this situation happened to the adults in my life, so I’m going to as well.

In essence, ‘hurt people, hurt people.’ Repeating the actions, in adulthood, which were observed and experienced in childhood perpetuated the cycle of neglect, trauma, and hurt. The “results of their own traumas” as Participant 15 mentioned, become the basis for a potential factor for child neglect in their parenting journey.

***Subtheme 6: Stress as a Factor Triggering Neglect***

More than one-third of the participants perceived that stress, including burnout or feeling overwhelmed, could also lead parents to neglect their children. The participants used a myriad of descriptions to explain how parents feel. Participants 7 and 15 both discussed stress in parenthood. Participant 7 explained that stress, from various sources, such as “stress of a job, maybe stress of being the single parent” and even “stress of the kids” and their needs, could lead parents to neglect their children. Participant 13 spoke to

the stress of dealing with children, especially teenagers like “16-17-year-olds who are disrespectful to the parent” can bring on an added level of stress on the parent.

The parent might not only be stressed out by a negative reaction from the child, but feel “stressed-out”, as Participant 15 shared, by a child who does “what a child does developmentally appropriately.” Participant 15 provided an explanation as to why the parent might feel stressed in that situation by saying “that parent, not having the bandwidth or the capacity to support that child’s emotions, might not only neglect, but also abuse that child.” Parent 15 was the only parent that mentioned child abuse or who alluded to a connection between child abuse neglect and child abuse. The pressure of providing, taking care of the child, and the developmental interactions with the child can increase the levels of stress of a parent and can potentially lead them to neglect their children.

The word stress was not the only descriptor used for this concept. For example, Participants 5 and 8 expressed that parents can feel overwhelmed, although Participant 5 further explained that parents “feel like we have to deal with things alone.” Participants 10 and 13, on the other hand, described child rearing as potentially burdensome. As Participant 13 related, “raising children is a burdensome task, an endeavor,” not in an of itself, but “because sometimes you get tired, and you don’t have the support and you’ve just pushed 24/7.” Participant 7 echoed the same perceptions, expressing that kids, especially multiple children, “are a handful” and that when “there’s tons of stuff going on, it wears down” on parents. Here, the impact of parental stress is evident. Whether the stress stems from without on account of what goes into providing for a child, from within

the family, or parent-child dynamic in terms of the behavior of the child, stress and the burdensome task of raising children can factor into triggering child neglect.

***Subtheme 7: Parental Age as a Factor Triggering Neglect***

The final subtheme of the participants' perceived factors of child neglect is parental age. This factor was not as frequently mentioned by the participants as the previously listed factors, three parents cited it as a potential for neglect. Participants 8, 10, and 12, each referenced parents of younger ages as factors they believe could lead parents to neglect their children. While these three participants described age as a factor, it was not listed in isolation, rather age was coupled with a differing reason or other contributing factor. For instance, Participant 8 explained that coupled with a young age may be the lack of preparedness to have the child or have limited support as evidenced, "maybe a parent wasn't ready to have a child, like if they're young and they don't have support, they might end up making bad decisions and being neglectful." Participant 12 started out with a similar viewpoint but in further explaining the concept of young parental age and neglect, Participant 12 included "careless and immature" along with they are "still underage, they don't have a sense of responsibility, so caring for another human being is not a priority to them." Through the responses of Participants 8 and 12, a few of the previously mentioned factors or concepts were revisited, such as parental priority or lack of support, this time in light of a parent's age. In contrast, the maturity of a parent or sense of responsibility of a parent, explained by Participant 12, were not mentioned by the other participants.



Participant 10 did not perceive young parental age to be coupled with a lack of preparedness or support but instead had a different perspective, one of succumbing to peer pressure:

Just think about it, it could be peer pressure from their friends of the same age, where their friends don't have kids and they do and they wanna go hang out like they used to but...their friends are pressuring them. "Hey, you need to come out, come on, let's go, let's go." They forget they have a child that they have to take care of...they have kids so young and don't want to be bothered, they don't want to be burdened down.

This perspective on young parental-age couples with its pressure from friends provides another dimension to the discussion on relationships as a potential factor of neglect.

The factors, therefore, are not necessarily mutually exclusive, such that child neglect stems from only one factor at a time. Instead, as Participant 11 shared, "it's all their contributing factors" or "the effect of contributing factors."

#### **Theme 4: Perceived Triggers**

Research Question 2 explored the factors that parents believe trigger child neglect. Theme 4 presents the perceived triggers and compares them to the list of themes and perceived factors presented in Theme 3. The given list of factors was read back to the participants for rating, based on what they believed would lead to or trigger parents to neglect their children. Those factors were then rated from 1-5, from most likely to least likely to trigger parental neglect.

Six of the fifteen participants, more than one-third, reported the same list of triggers as they had factors. In comparison, another six participants amended the list of factors to either add or remove two or more triggers. Half of these six participants added stress to their list of triggers where it had not previously been identified as a factor. A total of three participants added only one trigger, suggesting that for 9 out of 15 participants the list of factors and triggers are very similar. For instance, Participant 3 listed “change in relationship status, being with someone new, loss of a partner, addiction, and mental or emotional issues” as triggers. Each of these was previously counted among the factors that could lead to child neglect. Participant 11, the only one to make the connection between the triggers and factors overlapping, offered the explanation that “any of those factors that become overwhelming” can be a trigger. Depending on the circumstances or when “stress” levels become overwhelming, as Participant 11 went on to mention, factors of neglect may become triggers that lead parents to neglect their children.

Then there were some participants whose lists were almost or completely different from the factors they had previously shared. Participant 9, for example, provided “substance abuse, limited resources, limited health literacy, and addiction can overpower desire” as factors that could lead to neglect. However, when asked which of those factors could lead or trigger parents to neglect, Participant 9 responded, “toxic stress, mental health concerns, chronic stress, losing jobs, and having limited resources.” Except for limited resources, this participant’s list is almost entirely different, unlike the others. The most extreme list was provided by Participant 10, who in contrast to all the

parents, described completely different answers from the factors, by simply stating that in terms of a trigger, “either you will neglect, or you won’t.” This participant, by way of response, explained that while there may be factors that could lead to neglect, actively neglecting a child is a choice, one you chose to do or not.

The participants were asked to rank the triggers they identified from 1-5 with 1 being the most likely to occur and 5 being the least likely. No two participants had the same responses and neither did any of the participants list the exact same trigger at least once. Although the responses on rankings varied, as shown in Table 2, there were three triggers, mental health, finances, and substance use, that occurred most frequently.

**Table 2**

*Rankings of Triggers of Parental Neglect*

Participants	Rank 1	Rank 2	Rank 3	Rank 4	Rank 5
Participant 1	Marriages	Undiagnosed Mental Health	Substances		
Participant 2	Undiagnosed Mental health		Addiction		
Participant 3	Change in relationship Status		Addiction		Mental health Emotional health
Participant 4	Emotional instability	Mental	Drug use		
Participant 5	Trauma Drastic life Changes	Substance abuse Undiagnosed mental health issues	Substance abuse	Grief	Burnout
Participant 6	Divorce Separation	Hardships Stress	Mental illness	Child with special needs	Lack of family support

Participants	Rank 1	Rank 2	Rank 3	Rank 4	Rank 5
Participant 7	Job	Surroundings Environment	Money	Stress of the kids	Mental stability
Participant 8	Evil Postpartum	Unprepared Cycle of neglect Overwhelmed	Poverty Lack of support	Mental Illness	Misunder- standings in reporting
Participant 9	Substance abuse Mental health	Stress chronic Stress Limited knowledge	Generational cycle	Limited resources	Limitation on health
Participant 10	Mental Preparedness Pattern of Neglect	Child as burden Friend peer- pressure Parental selfishness Parental age	Not wanting to be bothered		
Participant 11	Mental illness Cycle of neglect Overwhelmed Stress		Financial issues Parent absence Lack of supervision Busyness		Cycle of neglect
Participant 12	Money or Multiple Jobs Inability to Cope Lack of sense of Responsibility	Upbringing Prior exposure Careless Immature Commitment	Not prioritizing child's education	Environment Faultless SES	
Participant 13	Mental incapability Drug use Lack of financial support		Lack of social support Punishment	Burdensome Overwhelm	Dirty divorces Separation
Participant 14	Financial burden	Lack of family support	Domestic violence Parental separation SES	Past trauma Mental issues Drug abuse	

Participants	Rank 1	Rank 2	Rank 3	Rank 4	Rank 5
Participant 15	Mental health	Inability to support Child's needs Drug abuse	Child's behavior	SES	Past trauma

*Note.* Participants were asked to rate factors from 1-5 -from most likely to least likely to trigger parental neglect.

Mental health was listed as a trigger by 11 of the 15 participants, making it the most cited and highest-ranked trigger. Triggers that dealt with finances, such as job, poverty, financial burden, SES, et cetera., were chosen by 9 of the 15 participants. Eight people selected stress as a trigger, while seven people chose relationship changes, including divorce, separation, and grief. Drug use was mentioned by 6 people, while the cycle of neglect or trauma was mentioned by 5. As with the factors, there were a wide variety of responses among the participants. Parental child neglect, whether deliberate or not, is not straight cut, but, as Participant 7 acknowledged, “it all adds up on a parent.” The overlap or duplicity of factors and triggers conveys a connection between the two, depending on the conditions and the state of the parent, the line between factor and trigger may become a thin line to cross.

### **Summary**

In Chapter 4, I presented the research results and perceptions of the participants in defining child neglect and exploring the factors and triggers they believe lead to child neglect. This chapter also discussed the setting, participant demographics, data collection, data analysis, evidence of trustworthiness comprised of credibility, transferability, dependability, and confirmability, as well as the themes and subthemes of the results. Through the semistructured interviews conducted via Zoom, the 15 participants were

allowed to express their beliefs and perspectives of parental child neglect. Their perceptions were relevant to understanding how parents define and identify factors and triggers of child neglect.

The participants discussed their perceived definitions of child neglect and their beliefs on the factors that lead to child neglect as well as the factors that trigger child neglect. From their interview responses and by implementing the thematic inductive approach for data analysis, 4 themes and 10 subthemes were developed. The themes were: perceived definitions of child neglect with subthemes: failure to provide, intentionality, and parental inadequacy; inconsistencies in defining child neglect; perceived factors with subthemes: health, substance use, relationship changes, trauma/cycle, economic factors, stress, and parental age; and perceived triggers.

By collecting the data, the research questions were explored, and the research questions were answered through the data analysis process according to Saldana's inductive data analysis process. The evidence of trustworthiness was also presented in the discussion on credibility, transferability, dependability, and confirmability as they pertain to this study. In Chapter 5, the conclusion of the study, based on the findings presented in Chapter 4, will be discussed. Included in the discussion of the conclusion will be recommendations for future research and social change.

## Chapter 5: Discussion, Conclusions, and Recommendations

### Introduction

Existing research on child neglect includes the causes and effects of neglect (Hendaus et al., 2020), behaviors that may be described as neglectful (Yoo & Abiera, 2020), and understanding the role and effects of community support (Klassen et al., 2020). However, not much is known about the parental perspectives on child neglect. This study was based on the gap in the literature on the deficiencies in the knowledge of parents on child neglect, focusing specifically on their perceived definitions of child neglect and factors they believe trigger child neglect. The purpose of the study was to explore the perceptions of parent participants to increase the understanding of how parents perceive the definition of child neglect and the factors they believe trigger child neglect. The perceptions of parents may increase understanding of how to meet the needs of families to effectively target intervention and prevention programs.

The research questions (RQs) addressed in the qualitative study are:

RQ1: What are the perceptions of parents on the definition of child neglect?

RQ2: What factors do parents believe trigger child neglect?

To address the research questions of this study, I used a generic qualitative research design. Using the generic approach, I was able to explore the beliefs and perceptions of the participating parents on child neglect and the factors they believed triggered child neglect through 15 semistructured interviews. I identified four themes that demonstrated the perceptions and beliefs of the parents on child neglect: (a) perceived definitions of child neglect, including subthemes failure to provide, intentionality, and

parental inadequacy; (b) inconsistencies in defining child neglect; (c) perceived factors of child neglect; and (d) the perceived triggers of child neglect along with subthemes: health, substance use, relationship changes, trauma/cycle, economic factors, stress, parental age, and perceived triggers.

From the interview responses, I found that while many parents could define the term child neglect in their own words, there were inconsistencies in how the term was defined and in examples given of child neglect. I also found that the parents had differing beliefs about what factors could lead parents to neglect and which of those factors could trigger parental child neglect.

This chapter consists of a revision and discussion of the results, my interpretation of the findings, including the themes discovered, and the study's limitations. It concludes with recommendations for future research, implications of the study, a discussion of the potential for social change, and a concluding summary of the study.

### **Interpretation of the Findings**

The participants in this study shared their perceptions of the definition of child neglect and their beliefs on the factors that trigger child neglect. The four themes that developed from the data analysis process and were presented in Chapter 4, are interpreted in this section. The two research questions and themes of the study are also discussed, considering the literature review that was presented in Chapter 2. The alignment of the findings to the theoretical framework of the study is also offered.



**Research Question 1**

The first research question centered on parents' perceived definitions of the term child neglect. The interview questions and responses were used to identify how parents defined the term and explored this understanding of the term through the examples of child neglect provided. Two themes emerged from this research question. The first theme extracted from the exploration of this research question was the perceived definitions of child neglect and included subthemes failure to provide, intentionality, and parental inadequacy. The second theme was inconsistencies in defining child neglect.

***Theme 1: Perceived Definitions of Child Neglect***

The 15 participants were asked to share their definitions of the term child neglect. While all the participants provided their perceived definitions of child neglect, the findings revealed that those definitions were not uniform and varied depending on the participant. Most of the participants interviewed defined child neglect as a form of deprivation of a child's needs. This failure to provide included intentionality, an aspect of inadequacy such that a parent might want or attempt to provide but would not be sufficient, or failing to provide for a child's basic needs as a blanket term for not giving the child what he requires. In this way, the perception is that parents fail to provide or inadequately provide for their children, intentionally or not. These definitions convey that action or inaction on the part of a parent is what brings on child neglect. As discussed in the literature review, the U.S. Department of Health and Human Services segments child neglect into two groups with failure to provide being one of them (Leeb et al., 2008). The

perceived definitions of failure to provide then align with the current literature in that child neglect deals with not meeting the provisional requirements of a child's needs.

In their definitions of child neglect, some parents also discussed different types of neglect. One parent, in particular, delineated the perceived categories of neglect, specifically physical, mental, emotional, and psychological neglect. In comparison, the Child Welfare Information Gateway (2019) categorizes the four types of neglect as physical, emotional, medical, and educational. Although the categories or classification rationales may differ, the perceptions of some parents reveal an awareness and understanding that neglect is not an all-encompassing term but rather that there are different types of neglect.

The actions of the parents in failing to provide care or the necessities for a child make up only part of the definition of child neglect. The definition of child neglect, taken from the Federal Child Abuse Prevention and Treatment Act (CAPTA; 42 U.S.C.A. § 5101) CAPTA Reauthorization Act of 2010, defines child neglect as: "an act or failure to act which presents an imminent risk of serious harm" (CAPTA, 2010, p. 4). While a minority of parents linked the actions of the parent with the notion of consequence or harm to the child, it was noted, nonetheless. This aligns with the DHHS definition of risking imminent or serious harm to a child through the actions or inactions on the part of the parent.

As it relates to Theme 1, most parents have a working perception of the definition of neglect. While those definitions may not fully be accurate, they do encompass some components of the definition and the findings are in line with existing research. This

study's findings align with Dickerson et al.'s (2020) research on the inability to ascertain or identify child neglect fully and accurately. As the term child neglect is defined differently depending on the participant asked, so is child neglect defined differently depending on the source used, resulting in an absence of consensus (Rebbe, 2018). Variation also exists in how child neglect is categorized. As Font and Macguire-Jack (2020) discussed, variations in defining or determining neglect make reporting more difficult.

### ***Theme 2: Inconsistencies in Defining Child Neglect***

The participants provided their perceived definitions of child neglect. However, the findings revealed that there was no consensus among all the parents. Instead, the definitions represented a wide range of perceptions on child neglect in verbiage, context, and content. About 10 of the parents perceived that child neglect had to do with parents depriving their children of their basic needs. Many of these participants discussed parents' failure to provide, such as not giving their children what they required or needed. Others discussed the inadequacy of providing for the child, suggesting that some provision was made but was insufficient.

There were some participants who defined child neglect in terms of the actions that a parent might fail to exhibit toward the child. These actions included not giving the child attention, not feeding the child, not assuring the child goes to school, et cetera. Still, other parents perceived child neglect in terms of prioritization. For these participants, parents who neglect their children fail to prioritize their needs over other things and people. Finally, child neglect was perceived as a concept of care. While this perception

represented a minority of participants, with only 3 parents specifically alluding to it in the wording of the definition, the concept of care was woven into the definitions provided by several participants. For these parents, providing for the daily and basic needs of a child, or lack thereof, was all part of providing care to the child.

The literature on child neglect suggests that there are inconsistencies in defining and categorizing child neglect, corroborating the findings of this study. As discussed in Chapter 2, the U.S. Department of Health and Human Services provides a general definition of child neglect that serves as a minimum guide for individual states, which can further add to (Child Welfare Information Gateway, n.d.). Because the states can tailor the definition of child neglect, a state-by-state comparison of the adopted definitions demonstrates inconsistencies in the definitions. These national and state inconsistencies also suggest ambiguity in how reporting and assessing agencies define child neglect (Robinson, 2019). These inconsistencies are important to highlight the issues presented in the inability to define child neglect across the board as they are reflected in the discrepancies of parental definitions of child neglect. Since each state can freely add to the definition of neglect, states operate under different definitions, reducing the likelihood of consistency and uniformity. So, too, parents living in different states or areas of the United States have different working definitions of child neglect and lack consistency and uniformity in how they define the term.

The discussion on the inconsistencies of the term child neglect also extends to the parents' actions or behaviors and the examples provided. Nine of the parents discussed the inadequacy of food as child neglect. Other examples included a lack of proper or

inadequate supervision and shelter as neglectful. The attention a parent gives a child was also cited among the examples of neglect.

Along with the discussion of attention was its extreme form, abandonment, as three of the parents interviewed noted that child neglect included abandoning the child's needs emotionally, physically, or entirely. Categorizing neglect was similarly inconsistent among the parents. Different participants alluded to neglect by using phrases like "educational neglect" or "emotional growth." However, only one parent referenced the concept of categories of neglect as physical, emotional, or other needs.

Once again, the responses from the participants describe a variety of examples with no clear consensus on what child neglect looks like or even how they are categorized. The differing definitions of neglect also impact the actions or behaviors parents describe or constitute as neglectful. The findings confirm the discussion on the inconsistency of the term child neglect in literature.

### **Research Question 2**

The second research question centered on the factors that parents believe trigger child neglect. To determine the triggers, it was necessary first to explore the factors that parents associate with child neglect. Two themes emerged from this research question. The first theme extracted, perceived factors, contained seven subthemes: health, substance use, relationship changes, trauma/cycle, economic factors, stress, parental age, and perceived triggers. The second theme was perceived triggers.

### ***Theme 3: Perceived Factors***

The risks or circumstances that could contribute to child neglect (see Font & Maguire-Jack, 2020; Morris et al., 2019) were provided by the participants as their perceived factors. Seven overarching factors were provided by the parents. The most frequently cited was mental health, which was mentioned by 14 of the 15 participants, with 13 specifically mentioning mental health as a factor perceived to trigger child neglect by parents. The participants discussed the importance of a parent's health, including the emotional health of a parent, undiagnosed mental illness, or mental incapability. Postpartum depression, affecting a mother's ability to care for herself, was mentioned by more than one participant. It was stated that if the parents, not just mothers, are impaired in any way, it will affect the quality or level of care the parents can provide for the child. In their research on risk factors for child neglect, Mulder et al. (2018) found that mental and physical problems were among the highest contributing factors to neglect, which aligns with this finding. Finally, the health of not just the parent but that of the child may also serve as a factor of child neglect. The participants also perceived that the health challenges of the child may increase the levels of stress of the parent or bring on economic challenges. Hendaus et al. (2020) also supported the effect a child's medical condition can potentially have on child neglect.

The discussion on health also consisted of mental incapability as "the result of substance abuse." This implies that the health of a parent, mental health in particular, may not be an isolated factor but may arise in conjunction with another factor. These

factors, though potentially independent, when combined, may become contributing factors of child neglect.

Substance use was another factor perceived by the participants to trigger child neglect. More than half of the participants in this study used terms such as “drugs,” “substances,” “drug use,” or “addiction” to name this potential factor. Most of the eight participants did not go into detail on the effects of drugs or substances on neglect. However, two parents underscored the detrimental effects of drugs, explaining that drugs impair a parent’s ability to care for the child. Participant 13 recounted the experience of seeing a parent strung out on drugs in the presence of the child. The condition of the parent made it difficult to care, supervise, provide for, and assist the child. This finding aligns with the WHO’s report that substance abuse is one of the factors or triggers of neglect (WHO, 2020).

Also included in the list of potential factors that can trigger child neglect are relationship changes. While this factor was not discovered in the literature search or discussed in the literature review of this study, several participants shared their perceptions that relationship changes can lead to child neglect. These changes can occur in several forms, such as parent-parent changes in cases of separation, divorce, or even death that lead to single-parent homes or even cases of abandonment by one parent or the other. The child could become neglected as a byproduct of this relationship change.

Another form of this relationship change is the parent-child change or dynamic. As the participants explained, there may be several reasons for the change in the parent-child relationship. One reason is that the child may remind one parent of the other and

become a scapegoat for the absent parent. In this case, the neglect the child would be subjected to would be intentional as the child would be “punished for the crimes of another.”

Yet another reason is the relationship with a new significant other and that person's reaction. With new interests comes divided attention, which may result in less time given to the child. The participants suggested that the new interest may not like or care for the child, and as a result, the parent may withdraw attention from the child to satisfy the significant other.

The literature does not use this verbiage of relationship changes in the discussion of factors or triggers of child neglect, the notion of single parenthood and domestic violence (Palmer et al., 2022), lack of support (WHO, 2020), and parent-reported issues with family structure (Korbin et al., 2000) all speak to the relational dynamics within a family which was supported in the literature. However, while the relationship change finding factor was not found in the literature as a potential factor for neglect, it represents a novel concept to this study. This finding is important to this study because it brings to light a factor that may be overlooked by researchers and yet relevant to parents. As such, new findings, such as these, make understanding the parental perceptions of the factors of child neglect necessary.

Conversely, the economic factors discussed by the participants of this study are well supported in the literature. The findings of Christie et al. (2017), Hendaus et al. (2020), and Kim and Drake (2018) align with the findings of this study when identifying socio-economic status as a potential factor for child neglect (Martins et al., 2023). Three



participants specifically cited socio-economic status (SES) as a factor that can lead to triggering child neglect. Without the proper resources or funds, parents provide for the needs of their children by making the difficult choices of working, at times multiple jobs, or as Participant 12 expressed, settling for “an environment that is not conducive to how they wanna raise their kids,” and other less than ideal situations. In these cases, child neglect comes as a result of working or providing for the child to meet the financial responsibilities that come with parenting.

Trauma or the cycle of neglect constituted another perceived factor submitted by the participants. While most of the participants did not discuss prior exposure to neglect as a factor, 3 out of 15 participants, representing 20%, referred to and explained this concept. As they related, growing up in a neglectful environment can lead a parent to repeat those observed or experienced actions. In addition, Participant 1 explained that a parent might neglect a child because “it is in your DNA...becoming a subconscious reaction.” The participant suggested that the reflective reaction is not only just a repeated behavior but one that is engrained in the now neglectful parent.

While the notion of child neglect being engrained in a person is not confirmed by the literature, Mulder et al. (2018) supported the concept that the cycle of maltreatment, including neglect, continues as parents who were maltreated or neglected behave negatively toward their children. The notion of prior exposure or being a victim of neglect as a factor for neglecting one’s child also aligns with the literature on the elevated risk of transmitting the generational cycle of child maltreatment (Islam et al., 2023). These findings would imply that mothers with a history of maltreatment are more prone

to maltreating their own children (Bartlett et al., 2017; Enlow et al., 2018) and also align with Mulder et al., (2018). It is assumed that the cycle of hurt and neglect, then, is a factor for triggering child neglect as one hurt child becomes the adult who will hurt another child.

The findings of this study also align with the findings in the literature of parental stress as another perceived factor cited that the participants named in relation to child neglect was the parental stress level (Liu & Meritt, 2018). As 5 of the participants discussed stress, they shared the differing aspects in which parental stress can lead to neglect. The parent's description of the overarching stress of parenthood was aligned with Maguire-Jack and Negash's (2016) research on the stressors of parenthood. The participants also spoke about the stress of a job or financial stress (Liu & Meritt, 2018), the children and their needs, and dealing with developmentally appropriate behaviors, like those of teenagers or energetic children.

Along with the behaviors of a child, the participants shared that parental stress can be also caused by the emotional needs of a child. The findings of this study align with Kairys (2020) explanation that parents who have a hard time coping with their children's needs can likely find those situations stressful. Other participants also introduced the words and concepts of being "overwhelmed" or "burned out" in discussing how parents process their feelings, which is still considered a type of stress. The reactions of parents dealing with situations from without or the sense of being overwhelmed or burned from within can impact the stress levels of parents and become potential stress factors of child neglect.

The final perceived factor explored by the participants was parental age. According to Najman et al. (2021) parental age was a contributing factor of neglect, suggesting that the younger a parent the more likely the occurrence of child neglect. Liel et al., (2020) reported, specifically, that this correlation of young age and high risk of neglect was present in mothers. While the parents did not make a case for mothers or fathers, the participants did discuss the age of parents in relation to child neglect. The three participants who mentioned age explained that parents may have had children early, may have still been underage and immature, and may have lacked the responsibility to care for a child. The participants also provided a lack of support resulting in poor decision making as a possible factor of neglect. Parental age and maturity play a role in parenting and, thereby, in the triggering of child neglect.

#### ***Theme 4: Perceived Triggers***

Although there are factors that parents perceive to trigger child neglect, there are discrepancies between the two. Factors are risks or circumstances that contribute to child neglect, while triggers are the reason parents neglect their children (Christie et al., 2020; Font & Maguire-Jack, 2020; Morris et al., 2019). From the list of factors they provided, the participants were asked to identify and rank the factors they believed could trigger child neglect, from what could contribute to neglect to what causes neglect. Six of the fifteen participants provided the same list of factors as triggers, while three of the fifteen added one trigger to the list of factors. Three participants added or changed two or more items to the list. Two parents provided almost completely different triggers from the

factors they had listed prior. One participant failed to provide a list of triggers but instead related that neglect boils down to a choice of neglecting or not.

The most cited trigger was mental health. Palmer et al. (2022) report that, among other factors, mental illness was commonly associated with child neglect, which aligns with this study. However, in an earlier study, Mulder et al. (2018) specifically reported that mental problems were among the factors contributing to neglect. Whether considered the highest or one of the most common, the mental condition of parents plays an important role in child neglect. Second on the list of most cited triggers is finance, and all that it encompasses. Here too, research speaks to the importance of finance. As Font and Maguire-Jack (2020), discussed, child neglect is most likely to occur in parents going through economic hardships. Morris et al., (2019) also made the connection between family income and SES with child neglect rates.

The other triggers mentioned with less frequency included stress and relationship changes with more than 50%. Drugs and the cycle of neglect were also noted among less than 50% of the participants. Only one parent ranked parental age. The literature confirms most of the findings. For instance, stress in the findings encompassed the stress of parenting, the responsibilities of caring for a child, and dealing with children's needs, to name a few. Parental stress from the daily demands of parenting, forces outside of their control, environmental situations, and reactions to the behaviors of their children can lead to neglect (Kairys, 2020).

Prior exposure to neglect and parental age were also discussed in the literature. While prior exposure to or having a history of neglect does not negate the neglectfulness

of a mother, said history does increase the likelihood that a mother would perpetuate child neglect (Islam et al., 2023). Similarly, parental age was reported as a correlative trigger of neglect among young mothers (Liel et al., 2020). Najman et al. (2021) did not specify the gender of the parent but did find that parental age, in addition to the number of partners of the parent, were both triggering factors of neglect. While the study's findings do not align with the number of partners of a parent, parental relationship status was ranked by one participant as most likely to trigger neglect. Finally, the World Health Organization (2020) provided a list of triggers of neglect, which include substance abuse. As such, the findings from the perceptions of the participating parents are aligned with the literature on the triggers of child neglect.

#### **Alignment With Theoretical Framework**

The study and findings were grounded in social cognitive theory. Social cognitive theory (SCT) describes how knowledge comes to be acquired. As Bandura (2001) explained, people learn by observing others and acquire knowledge through cognitive, behavioral, and environmental influences. In research studies, SCT has been used to explain how adults exposed to or modeled different behaviors and habits as children were more apt to exemplify those behaviors or habits as adults (Krcmar, 2019). SCT, in research, has also been used to discuss how behaviors and environmental influences can impact people's actions, thoughts, and decisions (Mulder et al., 2018). SCT incorporates the concepts of self-efficacy and self-regulation in discussing how one's beliefs can also affect behaviors. Through self-efficacy people not only act from the influence of what was seen or observed, but also from the expectations of others and themselves

(Rubenstein et al., 2018). With self-regulation, those expectations and beliefs affect how people react (Bandura, 1986).

While the definitions themselves may not align with the social cognitive theory, the acquisition and construct of the concept, and thereby definition, of child neglect does. In this study, several participants shared how they came to an understanding of the definition of child neglect. One participant shared that the understanding of child neglect was associated with the mother's career as a social worker. Another participant was able to define child neglect based on the research conducted for a graduate degree. A third participant, who was considered an expert or very familiar with the term child neglect, had previously "worked for the Department of Children and Families as a social worker." The perceived definitions of the participants related to social work were more closely aligned with the definition of child neglect than the researcher. Here, we see that the prior experiences or influences of these participants enabled them to provide definitions of child neglect that aligned with the definition of child neglect used or provided in this study.

This study demonstrates that the observed and modeled cognitive, environmental, and behavioral influences can determine the factors that lead parents to neglect and impact the decision-making process to trigger child neglect. A parent's childhood and upbringing shaped the constructs, perceptions, efficacy, and regulation that developed to make the parent more likely or less likely to behave in certain ways. For example, exposure to or the experience of neglect increases the likelihood that parents neglect their children (Enlow et al., 2018; Islam et al., 2023). Watching an adult intentionally or

unintentionally neglect a child, observing the behaviors and attitudes that parent exudes, can become the action that parents replay or become the words say from what the parent might know or recall from memory. As such, the environment and what they were exposed to are important to know and understand.

### **Limitations of the Study**

This study provides data describing the perceptions of parents on factors that trigger child neglect. Initially, I proposed limitations of access to parents, difficulty recruiting participants, accurately transcribing, processing, and storing data, and the fees incurred with the instrumentation applications. The parents were recruited through social media and were easy to access once they contacted me about the study. Upon completion of the interview, there was no difficulty accurately transcribing the data, and the data was processed and analyzed as proposed. The data was also securely and confidentially stored, as outlined in Chapter 3.

While many of the proposed limitations were not actualized, there were some limitations to the study beginning with demographics. The 15 participants consisted of a mixed group of parents, specifically 10 mothers and 5 fathers. The first limitation of the study, then, is the gender of the participants. While the participants were not homogenous in gender, the female participants were represented in a 2:1 ratio over father such that their voices were the majority. One other limitation was that the participants were not representative of parents who live in all the U.S. regions. Most of the participants were located on the eastern coast of the U.S, specifically residing in the southeastern region of the country. As recruitment was conducted through social media posts online, it was

difficult to seek the participation of parents based on specific locations. As such, the research findings are more specific to parents who are in the eastern regions of the United States and may not be representative of the perceptions of parents in other regions of the country.

Another limitation may be the level of education of the participants. Except for one participant who did not respond to the level of education question, all the participants had at least started college, with over 70% of them obtaining at least an associate degree. The findings of the study, therefore, represent the perceptions of a more educated group of parents. Uneducated or more educated parents may have beliefs or perceptions of child neglect that differ from those who participated in the study or who are at different academic levels. This difference in perception or beliefs may also extend to age, presenting an additional limitation. While the study's participant recruitment age was 18-65 years of age, the participants' age range was between 24 and 55 years of age. Parents were not prescreened based on age, nor were they disregarded to allow for a quota to be reached for age brackets. Therefore, the perceptions of parents between the ages of 18-23 and 56-65 were not explored and are not represented in the findings. While those specific ages were not present in this study's findings, the age range of the participants represented a span of 31 years.

Finally, in conducting the interviews, I suspected that one participant was interviewed at least 3 times. Each time, there was reason to believe that the participant had different contact information and attempted to disguise the voice and accent of a different and new parent. During the interview process, the participant endeavored to use



different responses and examples for each question asked. However, the voices of the participants seemed identical. The participants also expressed the same interest in the incentive reward for participation in the study and had the same urgency for receiving the incentive as quickly as possible. However, there was no concrete proof to support this claim; therefore, I did not disqualify the participants and used their responses as part of the study.

### **Recommendations**

A few recommendations for future research can be made based on the strengths and limitations of the current study. The first recommendation is to explore the relationship between parental perceptions and gender. While fathers were represented in this study there were twice as many mothers as fathers. Future research could further explore the parental perceptions of child neglect and the factors that trigger neglect by comparing the perceptions of mothers to fathers. In doing so, researchers may seek to better ascertain the differences in how both genders perceive child neglect. Prevention and intervention programs may be modified to reflect the differences between the parents if said differences are significant.

The second recommendation is to evaluate the discrepancies between the state or local agency's definition of child neglect and the perceived parental definitions of neglect. While the purpose of this study was to explore what the perceived parental definitions of child neglect were and what factors they believe trigger child neglect, this study did not seek to compare the discrepancies in defining child neglect between the state or agency and parents. Part of reporting child neglect or creating programs for

educating parents on child neglect is based on parents' definitions of neglect which can vary from the given definitions. As such, a future study can contribute to research by exploring the differences in the two definitions. A further study worth exploring could compare how parents define child neglect and what factors and triggers they believed would trigger child neglect. Though similar to the previous recommendation, the purposes would be different. The study would seek to explore the relationship between the definitions and the factors and triggers parents attribute or conceptualize as causing parental child neglect.

A final recommendation for future study is the exploration of the parental perceptions of parents who have had substantiated reports of child neglect. Understanding the general perceptions of parents on child neglect is helpful in determining what parents think about child neglect, how they define it, what factors contribute to it, and what factors trigger the occurrences of child neglect as this study has done for example. However, future research could focus specifically on understanding not just the perceived factors and triggers, but the actual causes of child neglect. While this exploration would be sensitive in nature, the information gleaned could go one step further in helping researchers understand how parents process child neglect, the transition from thought to action, and would benefit in creating programs to address the needs of parents.

### **Implications**

The findings of the study provide several implications for positive social change. The parental perceptions of child neglect and the factors that trigger neglect can encourage positive social change at the societal, institutional, and familial levels. To

encourage or achieve positive social change at the different levels, the issue of definitions must be addressed. Differing definitions of child neglect by agencies and states across the nation can make educating parents about child neglect, developing prevention and intervention programs, and even reporting cases of neglect difficult. It is, therefore, critical that the definitions of child neglect be clear and consistent across the nation, states, and agencies, for without clear definitions across the board, instructing parents, young and old, on child neglect will continue to be a challenge.

This social change can also impact parents directly. Parents in different areas or who move from one area to another have the burden of figuring out what the definition of neglect is in their new area. On account of these inconsistencies, parents may run the risk of misinterpretations, either being misinterpreted or misinterpreting the definitions of the newly settled area, resulting in shades of gray in defining the term and eventually reporting inconsistencies. However, if the definitions are uniform, formulating educational programs, from birthing classes at the hospital to social programs at the community or state level, can become more successful because everyone will be operating from the same parameters or definitions of the term.

Understanding the parental perceptions of parents concerning the examples they provided also gives us a more accurate glimpse as to what parents believe child neglect looks like. It is one thing to define a term and another to put it into concrete and definitive actions. These examples can strengthen the programs that social service providers and educational partners develop. Service providers and program writers can further explain what child neglect can look like using the very examples that parents have

shared to solidify the concept. They can also use these examples to provide parents with positive examples of a parent-child relationship or interaction to drive home the definition of neglect.

In addition, understanding the parental perceptions on the definitions and examples and the factors they believe trigger child neglect can better assist social services providers and professionals as they create social services programs. The programs that seek to prevent neglect or provide intervention and remediation can benefit the members of the communities in which they are implemented. These programs are not limited to the prevention of child neglect or intervention of child neglect but can be educational programs that can teach or re-educate parents and the public on what child neglect is and is not. The factors that parents perceive as triggers of neglect can also be useful information for policymakers who seek to outline or draft social policies, regulations, bills, and laws to protect children and parents alike.

One final implication pertains to the theoretical foundation of the study. As discussed in the literature review, our social constructs are influenced by the behaviors we observe, our cognition, and our environments. While these influences shape our constructs, our thoughts and actions are not bound by these influences but rather can evolve (Rhodes et al., 2019). Perceptions or beliefs, whether personally or environmentally influenced (Schunk & DiBenedetto, 2020) can impact behaviors and can even be used as predictors of behaviors (Keeley et al., 2023). Therefore, the perceptions that parents have about child neglect can impact the actions, neglectful or not, they carry out in relation to their children.

Through self-efficacy and self-regulation, and coupled with social support, parents can change their behaviors. This is encouraging because parents with perceptions toward child neglect or parents with prior exposure to child neglect are not confined to them but can change those perceptions. Social and community services are thus necessary to instruct parents and impact their perceptions of child neglect so that the cycle or prevalence of neglect does not continue but will dwindle.

### **Conclusion**

Child maltreatment is an umbrella term for child abuse and child neglect (CDC, 2022). While child neglect is the most reported and substantiated form of child maltreatment, it has been less researched than the other types of maltreatment (Hendaus et al., 2020; Mulder et al., 2018). The prevalence of research that exists on child neglect has sought to describe and discuss the factors that contribute to neglect (Robinson, 2019), the triggers of child neglect (Lafantasia et al., 2019), behaviors associated with child neglect (Yoo & Abiera, 2020), and provide an explanation of the causes along with short- and long-term effects of child neglect victims (Hendaus et al., 2020). However, child neglect is not limited to the experiences of victims but to parents. Less attention is given to understanding child neglect solely from the parental perspective (Hendaus et al., 2020), not just a caregiver's perspective (Spilsbury, Nadan, et al., 2018).

Further research on child neglect reveals discrepancies in its definition. There was a lack of consensus on the definition at the global, national, state, and local levels (Child Welfare Information Gateway, 2019). Discrepancies in definitions also emerged in the public's perceptions (Dickerson et al., 2020), which parents are part of. Limited research

existed on the perceptions of parents regarding the definition of child neglect and the factors they believed trigger its occurrence (Elias et al., 2018). As such, parents' definitions and perceptions of child neglect must be determined and should be considered indispensable to effectively create prevention and intervention programs (Hendaus et al., 2020).

Grounded in Bandura's social cognitive theory, this qualitative study explored parental perceptions on the definition of child neglect and the factors they believe trigger child neglect. The study aimed to increase the understanding of how parents perceive child neglect. In order to design effective education, prevention, and intervention programs for parents, there must be an understanding of what parents perceive and believe. Two research questions were created to explore the topic of the study. The generic qualitative research design was implemented to investigate the beliefs and perceptions of the participants. The purposeful sampling of the 15 participants via semistructured interviews allowed me to collect the data, interpret it, and extract meaning to make sense of those beliefs.

From the two research questions emerge four themes and a total of 10 subthemes. The first theme, perceived definitions of child neglect, was based on the collective perceptions of the participants on the definition of child neglect and revealed that parents believe child neglect involves a parent's failure to provide for a child, including intentionality and inadequacy. The second theme, inconsistencies in defining child neglect, demonstrated the variation of definitions that exist in defining child neglect. Theme three, perceived factors, discussed how parents also believe that there are factors

that contribute to child neglect, including health, substance use, relationship changes, trauma/cycle, economic factors, stress, and parental age. Based on the factors, the parental perceptions on triggers of child neglect cited mental health and finance as the most likely triggers, with stress and relationship changes also being mentioned, making up theme four, perceived triggers.

The findings of this study provide insight to social service providers as they develop programs and work to educate parents on what child neglect is and is not, as well as what it does and does not look like. The findings can also provide assistance to policymakers by increasing their understanding of what parents perceive as child neglect as well as the need to define child neglect uniformly across the national, state, and local levels so that all parents can be educated on child neglect, and everyone can have a clear understanding on how to define it. As policymakers and service providers work to inform and educate the public and parents, positive social change can be promoted by supporting parents and families to ensure that child neglect improves.

## References

- Adams, W. C. (2015). Conducting semi-structured interviews. In K.E. Newcomer, H.P. Hatry, & J.S. Wholey (Eds.), *Handbook of Practical Program Evaluation*.  
<https://doi.org/10.1002/9781119171386.ch19>
- Administration for Children and Families. (2021). *Child Maltreatment 2019*.  
<https://www.acf.hhs.gov/sites/default/files/documents/cb/cm2019.pdf>
- Administration for Children and Families. (2022). *Child Maltreatment 2020*.  
<https://www.acf.hhs.gov/sites/default/files/documents/cb/cm2020.pdf>
- Adu, P. (2019). *A step-by-step guide to qualitative data coding*. Routledge.
- Ainsworth, F. (2020). The social and economic origins of child abuse and neglect. *Children Australia*, 45(4), 202-206. <https://doi.org/10.1017/cha.2020.36>
- Aguinis, H., & Solarino, A. M. (2019). Transparency and replicability in qualitative research: The case of interviews with elite informants. *Strategic Management Journal*, 40(8), 1291-1315. <https://doi.org/10.1002/smj.3015>
- Anderson, V. (2017). Criteria for evaluating qualitative research. *Human Resource Development Quarterly*, 28(2), 1-9. <https://doi.org/10.1002/hrdq.21282>
- Amankwaa, L. (2016). Creating protocols for trustworthiness in qualitative research. *Journal of Cultural Diversity*, 23(3), 121–127.
- Avdibegović, E., & Brkić, M. (2020). Child neglect-causes and consequences. *Psychiatria Danubina*, 32(suppl. 3), 337-342.
- Bagherniya, M., Sharma, M., Firoozeh, M. D., Mohammad, R. M., Safarian, M., Ramesh, A. B., Bitarafan, V., & Seyed, A. K. (2017). School-based nutrition education



intervention using social cognitive theory for overweight and obese Iranian adolescent girls: A cluster randomized controlled trial. *International Quarterly of Community Health Education*, 38(1), 37-

45. <https://doi.org/10.1177/0272684X17749566>

Bandura, A. (1969). *Principles of behavior modification*. Holt, Rinehart & Winston.

Bandura, A. (1979). *Self-referent mechanisms in social learning theory*. American Psychological Association. <https://doi.org/10.1037/0003-066X.34.5.439.b>

Bandura, A. (1986). *Social foundations of thought and action: A social cognitive theory*. Prentice Hall.

Bandura, A. (1990). Self-regulation of motivation through anticipatory and self-reactive mechanisms. In Dienstbier R. A. (Ed.), *Perspectives on motivation: Nebraska symposium on motivation* (Vol. 38, pp. 69–164). Lincoln: University of Nebraska Press.

Bandura, A., Freeman, W. H., & Lightsey, r. (1999). Self-efficacy: The exercise of control. <https://doi.org/10.1891/0889-8391.13.2.158>

Bandura, A. (2001). Social cognitive theory: An agentic perspective. *Annual Review of Psychology*, 52(1), 1-26. <https://doi.org/10.1146/annurev.psych.52.1.1>

Bandura, A. (2007). Albert Bandura. In G. Lindzey & W. M. Runyan (Eds.), *A history of psychology in autobiography, Vol. IX*. (pp. 43–75). American Psychological Association. <https://doi.org/10.1037/11571-002>

- Bandura, A. (2012). Social cognitive theory. In P. A. M. Van Lange, A. W. Kruglanski, & E. T. Higgins (Eds.), *Handbook of theories of social psychology* (pp. 349–373). Sage. <https://doi.org/10.4135/9781446249215.n18>
- Bartlett, J. D., Kotake, C., Fauth, R., & Easterbrooks, M. A. (2017). Intergenerational transmission of child abuse and neglect: Do maltreatment type, perpetrator, and substantiation status matter? *Child Abuse & Neglect*, *63*, 84-94. <https://doi.org/10.1016/j.chiabu.2016.11.021>
- Bloomberg, D. L., & Volpe, M. (2019). *Completing your qualitative dissertation: A road map from beginning to end*. Ringgold.
- Bochner, A. P. (2018). Unfurling rigor: On continuity and change in qualitative inquiry. *Qualitative Inquiry*, *24*(6), 359-368. <https://doi.org/10.1177/1077800417727766>
- Boddy, C. R. (2016), Sample size for qualitative research. *Qualitative Market Research*, *19*(4), 426-432. <https://doi.org/10.1108/QMR-06-2016-0053>
- Boughey, H., Trainor, G., & Smith, G. M. (2021). The impact of childhood neglect on cognition in school-aged children. *Biomedical Journal of Scientific & Technical Research*, *34*(5), 27213-27222. <https://doi.org/10.26717/bjstr.2021.34.005629>
- Bradley, E. H., Curry, L. A., & Devers, K. J. (2007). Qualitative data analysis for health services research: Developing taxonomy, themes, and theory. *Health Services Research*, *42*(4); 1758-1772. <https://doi.org/10.1111/j.1475-6773.2006.00684.x>
- Braun, V., Clarke, V., & Gray, D. (2017). Collecting textual, media and virtual data in qualitative research. In V. Braun, V. Clarke, & D. Gray (Eds.), *Collecting Qualitative Data: A Practical Guide to Textual, Media and Virtual*

*Techniques* (pp. Xxv-Xxviii). Cambridge.

<https://doi:10.1017/9781107295094.002>

Brown, D., & De Cao, E. (2020). Child maltreatment, unemployment, and safety nets. *Unemployment, and Safety Nets (January 2020)*, <https://doi.org/10.2139/ssrn.3543987>

Bryman, A. (2016). *Social research methods*. Oxford.

Bullinger, L. R., Feely, M., Raissian, K. M., & Schneider, W. (2020). Heed neglect, disrupt child maltreatment: A call to action for researchers. *International Journal on Child Maltreatment: Research, Policy and Practice*, 3, 93-104.

<https://doi.org/10.1007/s42448-019-00026-5>

Cabrera, C., Torres, H., & Harcourt, S. (2020). The neurological and neuropsychological effects of child maltreatment. *Aggression and Violent Behavior*, 54, 101408. <https://doi.org/10.1016/j.avb.2020.101408>

Caelli, K., Ray, L., & Mill, J. (2003). 'Clear as mud': Toward greater clarity in generic qualitative research. *International Journal of Qualitative Methods*, 2(2), 1-13.

<https://doi.org/10.1177/160940690300200201>

Campbell S., Greenwood M., Prior, S., Shearer, T., Walkem, K., Young, S., Bywaters, D., Walker, K. (2020). Purposive sampling: complex or simple? Research case examples. *Journal of Research in Nursing*. 25(8), 652-661.

<https://doi.org/10.1177/1744987120927206>

- Centers for Disease Control and Prevention. (2021). About child abuse and neglect. *Child Abuse and Neglect Prevention*. Retrieved October 30, 2022, from <https://www.cdc.gov/child-abuse-neglect/about/index.html>
- Centers for Disease Control and Prevention. (2022). Fast facts: Preventing child abuse & neglect. *Centers for Disease Control and Prevention*. Retrieved May 31, 2022, from <https://www.cdc.gov/violenceprevention/childabuseandneglect/fastfact.html>
- Center for Disease Control and Prevention. (2023). Parenting Matters. Retrieved June 26, 2023, from <https://www.cdc.gov/ncbddd/childdevelopment/features/parenting-matters.html>
- Chamberlain, C., Gee, G., Harfield, S., Campbell, S., Brennan, S., Clark, Y., Mensah, F., Arabena, K., Herrman, H., & Brown, S. (2019). Parenting after a history of childhood maltreatment: A scoping review and map of evidence in the perinatal period. *PloS One*, *14*(3), e0213460.
- Chieh, A. Y., Liu, Y., Gower, B. A., Shelton, R. C., & Li, L. (2020). Effect of race on the relationship between child maltreatment and obesity in Whites and Blacks. *The International Journal on the Biology of Stress*, *23*(1), 19-25. <https://doi.org/10.1080/10253890.2019.1625883>
- Child Abuse Prevention and Treatment Act (CAPTA). (2010). Retrieved from <https://www.congress.gov/111/crpt/srpt378/CRPT-111srpt378.pdf>
- Child Abuse Prevention and Treatment Act (CAPTA). (2018). Retrieved from <https://www.acf.hhs.gov/sites/default/files/documents/cb/capta.pdf>

- Child Maltreatment*. (n.d.). Retrieved April 7, 2022, from <https://www.who.int/news-room/fact-sheets/detail/child-maltreatment>
- Child Maltreatment 2019*. (2019). Retrieved October 30, 2022, from <https://www.acf.hhs.gov/cb/report/child-maltreatment-2019>
- Children's Bureau (n.d.). Administration for Children and Families. *Child Maltreatment Report 2020*. Retrieved October 17, 2022, from <https://www.acf.hhs.gov/cb/report/child-maltreatment-2020>
- Children's Bureau. (2020). Capacity building center for states final evaluation report: Fiscal years 2015-2019 [Executive Summary]. Administration for Children and Families, U.S. Department of Health and Human Services. Retrieved from <https://www.acf.hhs.gov/sites/default/files/documents/cb/cbcs-2015-2019-executive-summary.pdf>
- Child Welfare Information Gateway* (2018). Acts of omission: An overview of child neglect. Retrieved November 9, 2022, from <https://www.childwelfare.gov/topics/can/identifying/neglect/>
- Child Welfare Information Gateway. (2022). *Definitions of child abuse and neglect*. U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. Retrieved on November 9, 2022 from <https://www.childwelfare.gov/topics/systemwide/laws-policies/statutes/define/>
- Christie, H., Hamilton-Giachritsis, C., Alves-Costa, F., Tomlinson, M., Stewart, J., Skeen, S., Vuyolwethu, N., Gqwaka, P., Sambudla, A., & Halligan, S. (2020). Associations between parental trauma, mental health, and parenting: A qualitative

- study in a high-adversity South African community. *Social Science & Medicine*, 265, 113474. <https://doi.org/10.1016/j.socscimed.2020.113474>
- Collins, C. S., & Stockton, C. M. (2018). The central role of theory in qualitative research. *International Journal of Qualitative Methods*, 17(1), <https://doi.org/10.1177/1609406918797475>
- Creswell, J. W., Hanson, W. E., Clark Plano, V. L., & Morales, A. (2007). Qualitative research designs: Selection and implementation. *The Counseling Psychologist*, 35(2), 236-264. <https://doi.org/10.1177/0011000006287390>
- Creswell, J. W., & Báez, J. C. (2021). *30 essential skills for the qualitative researcher*. Sage.
- Creswell, J. W., & Creswell, J. D. (2018). *Research design: Qualitative, quantitative, and mixed methods* (5th ed.). Sage.
- Creswell, J. W., & Poth, C. N. (2018). *Qualitative inquiry and research design: Choosing among five approaches*. Sage.
- DePanfilis, D. (2006). *Child neglect: A guide for prevention, assessment, and intervention*. US Department of Health and Human Services, Administration for Children and Families Administration on Children, Youth and Families, Children's Bureau, Office on Child Abuse and Neglect.
- Department of Health and Human Services (DHHS). (2014). *Child Maltreatment 2014*. Retrieved from <https://www.acf.hhs.gov/sites/default/files/documents/cb/cm2014.pdf>

- DiCicco-Bloom, B. & Crabtree, B.F. (2006). The qualitative research interview. *Medical Education, 40*, 314-321. <https://doi.org/10.1111/j.1365-2929.2006.02418.x>
- Dickerson, K. L., Lavoie, J., & Quas, J. A. (2020). Do laypersons conflate poverty and neglect? *Law and Human Behavior, 44*(4), 311-326. <https://doi.org/10.1037/lhb000415>
- Downey, C., & Crummy, A. (2022). The impact of childhood trauma on children's wellbeing and adult behavior. *European Journal of Trauma & Dissociation, 6*(1), 100237 <https://doi.org/10.1016/j.ejtd.2021.100237>
- Dubowitz, H., Pitts, S. C., & Black, M. M. (2004). Measurement of three major subtypes of child neglect. *Child Maltreatment, 9*(4), 344-356. <https://doi.org/10.1177/1077559504269191>
- Dubowitz, H., Roesch, S., Lewis, T., Thompson, R., English, D., & Kotch, J. B. (2022). Neglect in childhood, problem behavior in adulthood. *Journal of Interpersonal Violence, 37*(23-24), NP22047-NP22065. <https://doi.org/10.1177/08862605211067008>
- Elias, T. I., Blais, N., Williams, K., & Burke, J. G. (2018). Shifting the paradigm from child neglect to meeting the needs of children: A qualitative exploration of parents' perspectives. *Social Work in Public Health, 33*(7-8), 407-418. <https://doi.org/10.1080/19371918.2018.1543625>
- Elkin, M. (2019). Crime in England and Wales: Year ending June 2019. *Office for National Statistics*.

- English, D. J., Thompson, R., Graham, J. C., & Briggs, E. C. (2005). Toward a definition of neglect in young children. *Child Maltreatment, 10*(2), 190-206. <https://doi.org/10.1177/1077559505275178>
- Fader, W. (1990). *A model of literacy development: A social cognitive perspective*. City University of New York.
- Flaherty, E. G., Thompson, R., Dubowitz, H., Harvey, E. M., English, D. J., Proctor, L. J., & Runyan, D. K. (2013). Adverse childhood experiences and child health in early adolescence. *JAMA Pediatrics, 167*(7), 622-629. <https://doi.org/10.1001/jamapediatrics.2013.22>
- Florida Senate. (2018). *2018 Florida Statutes*. Retrieved from <https://www.flsenate.gov/Laws/Statutes/2018/827.03#:~:text=Abuse%2C%20aggravated%20abuse%2C%20and%20neglect%20of%20a%20child%3B%20penalties.&text=3..permanent%20disfigurement%20to%20the%20child>.
- Flynn, M., Cicchetti, D., & Rogosch, F. (2014). The prospective contribution of childhood maltreatment to low self-worth, low relationship quality, and symptomatology across adolescence: A developmental-organizational perspective. *Developmental Psychology, 50*(9), 2165-2175. <https://doi.org/10.1037/a0037162>
- Font, S. A., & Maguire-Jack, K. (2020). It's not "Just poverty": Educational, social, and economic functioning among young adults exposed to childhood neglect, abuse, and poverty. *Child Abuse & Neglect, 101*, 104356. <https://doi.org/10.1016/j.chiabu.2020.104356>



- Fortin, K. (2020). When child neglect is an emergency. *Clinical Pediatric Emergency Medicine*, 21(3), 100784. <https://doi.org/10.1016/j.cpem.2020.100784>
- Fortson, B. L., Klevens, J., Merrick, M. T., Gilbert, L. K., & Alexander, S. P. (2016). *Preventing child abuse and neglect: A technical package for policy, norm, and programmatic activities*. Division of Violence Prevention, National Center for Injury Prevention and Control Centers for Disease Control and Prevention. <http://dx.doi.org/10.15620/cdc.38864>
- Fusch, P. I. & Ness, L. R. (2015). Are we there yet? Data saturation in qualitative research. *Qual Rep*, 20(9), 1408–16.
- Glaser, B. G., & Strauss, A.L. (1967). *The discovery of grounded theory: Strategies for qualitative research*. Aldine.
- Gonzalez D., Bethencourt Mirabal A., & McCall J. D. (2022). Child abuse and neglect. StatPearls. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK459146/>
- Gross-Manos, D., Haas, B. M., Richter, F., Korbin, J. E., Coulton, C. J., Crampton, D., & Spilsbury, J. C. (2019). Why does child maltreatment occur? Caregiver perspectives and analyses of neighborhood structural factors across twenty years. *Children and Youth Services Review*, 99, 138-145. <https://doi.org/10.1016/j.childyouth.2019.01.043>
- Hendaus, M. A., Al-Khuzaei, A. M., Samarah, O., Hamad, S. G., Selim, B. A., & El Ansari, W. (2020). Child abuse and neglect in a rapidly developing country: Parents' perspectives. *Journal of Family Medicine and Primary Care*, 9(6), 3053. [https://doi.org/10.4103%2Fjfmprc.jfmprc\\_971\\_19](https://doi.org/10.4103%2Fjfmprc.jfmprc_971_19)

- Hennink, M. & Kaiser, B. N. (2022). Sample sizes for saturation in qualitative research: A systematic review of empirical tests. *Social Science & Medicine*, 292, 114523. <https://doi.org/10.1016/j.socscimed.2021.114523>
- Herruzo, C., Raya Trenas, A., Pino, M. J., & Herruzo, J. (2020). Study of the differential consequences of neglect and poverty on adaptive and maladaptive behavior in children. *International Journal of Environmental Research and Public Health*, 17(3), 739. <https://doi.org/10.3390%2Fijerph17030739>
- Hesse-Biber, S.N. (2017). *The practice of qualitative research* (3rd ed.). Sage.
- Horwath, J. (2013). *Child neglect: Planning and Intervention*. Bloomsbury Publishing.
- Humphreys, K. L., LeMoult, J., Wear, J. G., Piersiak, H. A., Lee, A., & Gotlib, I. H. (2020). Child maltreatment and depression: A meta-analysis of studies using the childhood trauma questionnaire. *Child Abuse & Neglect*, 102, 104361. <https://doi.org/10.1016/j.chiabu.2020.104361>
- Hunter, A. A., & Flores, G. (2021). Social determinants of health and child maltreatment: A systematic review. *Pediatric Research*, 89(2), 269-274. <https://doi.org/10.1038/s41390-020-01175-x>
- Islam, S., Jaffee, S. R., & Widom, C. S. (2023). Breaking the cycle of intergenerational childhood maltreatment: Effects on offspring mental health. *Child Maltreat*, 28(1), 119-129. <https://doi.org/10.1177/10775595211067205>
- Jaffee, S. R., & Christian, C. W. (2014). The biological embedding of child abuse and neglect implications for policy and practice. Social Policy Report. *Society for Research in Child Development*.28(1).

- Johnson, E. J., & James, C. (2016). Effects of child abuse and neglect on adult survivors. *Early Child Development and Care*, 186(11), 1836-1845.  
<https://doi.org/10.1080/03004430.2015.1134522>
- Johnson, J. L., Adkins, D., & Chauvin, S. (2020). A review of the quality indicators of rigor in qualitative research. *American Journal of Pharmaceutical Education*, 84(1), 138-146. <https://doi.org/10.5688/ajpe7120>
- Kahlke, R. M. (2014). Generic qualitative approaches: Pitfalls and benefits of methodological mixology. *International Journal of Qualitative Methods*, 13(1), 37–52. <https://doi.org/10.1177/160940691401300119>
- Kairys, S. (2020). Child abuse and neglect: The role of the primary care pediatrician. *Pediatric Clinics*, 67(2), 325-339. <https://doi.org/10.1016/j.pcl.2019.11.001>
- Keeley, J., Mancini, V. O., Castell, E., & Breen, L. J. (2023). Factors influencing public perceptions of child neglect: A mixed methods study. *Children and Youth Services Review*, 155, 107154. <https://doi.org/10.1016/j.childyouth.2023.107154>
- Kennedy, D. M. (2016). Is it any clearer? Generic qualitative inquiry and the VSAIEEDC model of data analysis. *The Qualitative Report*, 21(8), 1369-1379.
- Kern, S., & Laurent, H. K. (2019). Childhood abuse predicts affective symptoms via HPA reactivity during mother-infant stress. *Psychoneuroendocrinology*, 107, 19-25. <https://doi.org/10.1016/j.psyneuen.2019.04.023>
- Kim, H., & Drake, B. (2018). Child maltreatment risk as a function of poverty and race/ethnicity in the USA. *International Journal of Epidemiology*, 47(3), 780-787. <https://doi.org/10.1093/ije/dyx280>

- Klassen, C. L., Gonzalez, E., Sullivan, R., & Ruiz-Casares, M. (2020). 'I'm just asking you to keep an ear out': Parents' and children's perspectives on caregiving and community support in the context of migration to Canada. *Journal of Ethnic and Migration Studies*, 48(11), 2762–2780.  
<https://doi.org/10.1080/1369183X.2019.1707647>
- Klika, J. B., & Conte, J. R. (2017). *The APSAC Handbook on Child Maltreatment*. SAGE Publications.
- Kobulsky, J. M., Dubowitz, H., & Xu, Y. (2020). The global challenge of the neglect of children. *Child Abuse & Neglect*, 110, 104296. <https://doi.org/10.1016/j.chiabu.2019.104296>
- Korbin, J. E., Coulton, C. J., Lindstrom-Ufuti, H., & Spilsbury, J. (2000). Neighborhood views on the definition and etiology of child maltreatment. *Child Abuse & Neglect*, 24(12), 1509-1527. [https://doi.org/10.1016/S0145-2134\(00\)00206-4](https://doi.org/10.1016/S0145-2134(00)00206-4)
- Kostere, S., & Kostere, K. (2021). *The generic qualitative approach to a dissertation in the social sciences: A step by step Guide*. Routledge.
- Krcmar, M. (2019). Social cognitive theory. In M.B. Oliver, A. A. Raney, J. Bruant (Eds.), *Media effects: Advances in theory and research* (4<sup>th</sup> ed.). Routledge.  
<https://doi.org/10.4324/9780429491146>
- Krug, E. G., Mercy, J. A., Dahlberg, L. L., & Zwi, A. B. (2002). The world report on violence and health. *The Lancet*, 360(9339), 1083-1088. [https://doi.org/10.1016/S0140-6736\(02\)11133-0](https://doi.org/10.1016/S0140-6736(02)11133-0)

- Lafantaisie, V., St-Louis, J. C., Bérubé, A., Milot, Tristan, & Lacharité, C. (2019). Dominant research on child neglect and dialogic practices: When the voice of families is translated or ignored. *Child Indicators Research* 13, 411–431. <https://doi.org/10.1007/s12187-019-09679-7>
- Leeb, R. T., Melanson, C., Paulozzi, L. J., & Simon, T. R., Arias, I. (2008). Child maltreatment surveillance: Uniforms definitions for public health and recommended data elements. Centers for Disease Control and Prevention, National Center for Injury Prevention and Control.
- Lent, R. W., Brown, S. D., & Hackett, G. (1994). Toward a unifying social cognitive theory of career and academic interest, choice, and performance. *Journal of Vocational Behavior*, 45(1), 79-122. <https://doi.org/10.1006/jvbe.1994.1027>
- Lemon, L. L., & Hayes, J. (2020). Enhancing trustworthiness of qualitative findings: Using leximancer for qualitative data analysis triangulation. *The Qualitative Report*, 25(3), 604-614. <https://www.proquest.com/scholarly-journals/enhancing-trustworthiness-qualitative-findings/docview/2377697869/se-2>
- Lester, J. N., Cho, Y., & Lochmiller, C. R. (2020). Learning to do qualitative data analysis: A starting point. *Human Resource Development Review*, 19(1), 94-106. <https://doi.org/10.1177/1534484320903890>
- Liel, C., Ulrich, S. M., Lorenz, S., Eickhorst, A., Fluke, J., & Walper, S. (2020). Risk factors for child abuse, neglect and exposure to intimate partner violence in early childhood: Findings in a representative cross-sectional sample in Germany. *Child Abuse & Neglect*, 106, 104487. <https://doi.org/10.1016/j.chiabu.2020.104487>

- Linneberg, M. S., & Korsgaard, S. (2019). Coding qualitative data: A synthesis guiding the novice. *Qualitative Research Journal*, 19(3), 259-270.  
<https://doi.org/10.1108/QRJ-12-2018-0012>
- Liu, Y., & Merritt, D. H. (2018). Familial financial stress and child internalizing behaviors: The roles of caregivers' maltreating behaviors and social services. *Child Abuse & Neglect*, 86, 324-335. <https://doi.org/10.1016/j.chiabu.2018.09.002>
- Maguire-Jack, K., & Negash, T. (2016). Parenting stress and child maltreatment: The buffering effect of neighborhood social service availability and accessibility. *Children and Youth Services Review*, 60, 27-33. <https://doi.org/10.1016/j.chilyouth.2015.11.016>
- Martins, P. C., Matos, C. D., & Sani, A. I. (2023). Parental stress and risk of child abuse: The role of socioeconomic status. *Children and Youth Services Review*, 148, 1–7. <https://doi.org/10.1016/j.chilyouth.2023.106879>
- McCormick, M. J. (2001). Self-efficacy and leadership effectiveness: Applying social cognitive theory to leadership. *Journal of Leadership Studies*, 8(1), 22-33. <https://doi.org/10.1177/107179190100800102>
- McSherry, D. (2007). Understanding and addressing the “neglect of neglect”: Why are we making a mole-hill out of a mountain? *Child Abuse & Neglect*, 31(6), 607-614. <https://doi.org/10.1016/j.chiabu.2006.08.011>

- Mezmir, E. A. (2020). Qualitative data analysis: An overview of data reduction, data display, and interpretation. *Research on Humanities and Social Sciences, 10*(21), 15-27. <https://doi.org/10.7176/RHSS/10-21-02>
- Miles, M. B., Huberman, A. M., & Saldaña, J. (2014). *Qualitative data analysis: A methods sourcebook*. 3rd. Sage
- Montalvo, W., & Larson, E. (2014). Participant comprehension of research for which they volunteer: A systematic review. *Journal of Nursing Scholarship, 46*(6), 423-431. <https://doi.org/10.1111/jnu.12097>
- Morris, M. C., Marco, M., Maguire-Jack, K., Kouros, C. D., Im, W., White, C., Bailey, B., Rao, U., & Garber, J. (2019). County-level socioeconomic and crime risk factors for substantiated child abuse and neglect. *Child Abuse & Neglect, 90*, 127-138. <https://doi.org/10.1016/j.chiabu.2019.02.004>
- Mulder, T. M., Kuiper, K. C., van der Put, C. E., Stams, G. J. M., & Assink, M. (2018). Risk factors for child neglect: A meta-analytic review. *Child Abuse & Neglect, 77*, 198-210. <https://doi.org/10.1016/j.chiabu.2018.01.006>
- Najman, J. M., Bor, W., Williams, G. M., Middeldorp, C. M., Mamun, A. A., Clavarino, A. M., & Scott, J. G. (2021). Does the millennial generation of women experience more mental illness than their mothers? *BMC Psychiatry, 21*, 1-11.
- Negriff, S., Gordis, E. B., Susman, E. J., Kim, K., Peckins, M. K., Schneiderman, J. U., & Mennen, F. E. (2020). The young adolescent project: A longitudinal study of the effects of maltreatment on adolescent development. *Development and Psychopathology, 32*(4), 1440-1459. <https://doi.org/10.1017/S0954579419001391>

- Nottingham City Safeguarding Children Partnership (NCSCP). (n.d.). Nottinghamshire safeguarding children partnership: Child and young person's neglect toolkit. Retrieved from <https://www.nottinghamcity.gov.uk/media/0nhhkvlj/nscb-neglect-toolkit.pdf>
- Nusbaum, L., Douglas, B., Damus, K., Paasche-Orlow, M., & Estrella-Luna, N. (2017). Communicating risks and benefits in informed consent for research: A qualitative study. *Global Qualitative Nursing Research, 4*.  
<https://doi.org/10.1177/2333393617732017>.
- Office for National Statistics. (n.d.). *Child neglect in England and Wales*. Retrieved August 14, 2022, from <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/childneglectinenglandandwales/yearendingmarch2019>
- Palmer, L., Font, S., Andrea, L. E., Guo, L., & Putnam-Hornstein, E. (2022). What does child protective services investigate as neglect? A population-based study. *Child Maltreatment* <https://doi.org/10.1177/10775595221114144>
- Patton, M. Q. (1999). Enhancing the quality and credibility of qualitative analysis. *Health Services Research, 34*(5), 1189–1208.  
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1089059/>
- Patton, M. Q. (2002). Two decades of developments in qualitative inquiry: A personal, experiential perspective. *Qualitative Social Work, 1*(3), 261-283.



- Percy, W. H., Kostere, K., & Kostere, S. (2015). Generic qualitative research in psychology. *The Qualitative Report*, 20(2), 76-85.  
<https://nsuworks.nova.edu/tqr/vol20/iss2/7>
- Petrucelli, K., Davis, J., & Berman, T. (2019). Adverse childhood experiences and associated health outcomes: A systematic review and meta-analysis. *Child Abuse & Neglect*, 97, 104127. <https://doi.org/10.1016/j.chiabu.2019.104127>
- Pezzoli, P., & Saudino, K. J. (2021). Causes and consequences of childhood maltreatment: insights from genomics. *The Lancet Psychiatry*, 8(5), 348-349.  
[https://doi.org/10.1016/S2215-0366\(21\)00042-0](https://doi.org/10.1016/S2215-0366(21)00042-0)
- Pilkington, P. D., Bishop, A., & Younan, R. (2021). Adverse childhood experiences and early maladaptive schemas in adulthood: A systematic review and meta-analysis. *Clinical Psychology & Psychotherapy*, 28(3), 569-584.  
<https://doi.org/10.1002/cpp.2533>
- Proctor, L. J., & Dubowitz, H. (2014). Child neglect: Challenges and controversies. *Handbook of child maltreatment* (pp. 27-61). Springer. [https://doi.org/10.1007/978-94-007-7208-3\\_2](https://doi.org/10.1007/978-94-007-7208-3_2)
- Ravitch, S. M., & Carl, N. M. (2019). *Qualitative research: Bridging the conceptual, theoretical, and Methodological*. Sage.
- Rebbe, R. (2018). What is neglect? State legal definitions in the United States. *Child Maltreatment*, 23(3), 303-315. <https://doi.org/10.1177/1077559518767337>

- Renjith, V., Yesodharan, R., Noronha, J. A., Ladd, E., & George, A. (2021). Qualitative methods in health care research. *International Journal of Preventive Medicine*, 12, 20. [https://doi.org/10.4103/ijpvm.IJPVM\\_321\\_19](https://doi.org/10.4103/ijpvm.IJPVM_321_19)
- Rhodes, R. E., McEwan, D., & Rebar, A. L. (2019). Theories of physical activity behavior change: A history and synthesis of approaches. *Psychology of Sport and Exercise*, 42, 100-109. <https://doi.org/https://doi.org/10.1016/j.psychsport.2018.11.010>
- Richards, J. C., & Bebeau, C. (2021). *Demystifying Reflexive Thematic Analysis*.
- Robinson, Y. (2019). Child abuse: Types and emergent issues. In I. Bryce, Y. Robinson & W. Petherick (Eds.), *Child Abuse and Neglect* (pp. 3-22). Academic Press. <https://doi.org/10.1016/B978-0-12-815344-4.00001-5>
- Rolling, T. E., & Hong, M. Y. (2016). The effect of social cognitive theory-based interventions on dietary behavior within children. *Journal of Nutritional Health and Food Science*, 4(5), 1-9. <https://doi.org/10.15226/jnhfs.2016.00179>
- Rosenthal, M. (2016). Qualitative research methods: Why, when, and how to conduct interviews and focus groups in pharmacy research. *Currents in Pharmacy Teaching and Learning*, 8(4), 509-516. <https://doi.org/10.1016/j.cptl.2016.03.021>
- Rubenstein, L. D., Ridgley, L. M., Callan, G. L., Karami, S., & Ehlinger, J. (2018). How teachers perceive factors that influence creativity development: Applying a social cognitive theory perspective. *Teaching and Teacher Education*, 70, 100-110. <https://doi.org/10.1016/j.tate.2017.11.012>

Rubin, H. J., & Rubin, I. S. (2012). *Qualitative interviewing: The art of hearing data*.

Sage.

Ruslin, R., Mashuri, S., Rasak, M. S. A., Alhabsyi, F., & Syam, H. (2022). Semi-structured interview: A methodological reflection on the development of a qualitative research instrument in educational studies. *IOSR Journal of Research & Method in Education (IOSR-JRME)*, 12(1), 22-29.

<https://doi.org/10.9790/7388-1201052229>

Saldaña, J. (2020). Qualitative data analysis strategies. In P. Leavy (Ed.), *The Oxford Handbook of Qualitative Research* (2nd ed.), Oxford.

<https://doi.org/10.1093/oxfordhb/9780190847388.013.33>

Saunders, B., Sim, J., Kingstone, T., Baker, S., Waterfield, J., Bartlam, B., Burroughs, H., & Jinks, C. (2018). Saturation in qualitative research: Exploring its conceptualization and operationalization. *Quality & Quantity*, 52(4), 1893–1907.

<https://doi.org/10.1007/s11135-017-0574-8>

Schunk, D. H. (1989). Social cognitive theory and self-regulated learning. *Self-Regulated Learning and Academic Achievement*, 83-110.

Springer. [https://doi.org/10.1007/978-1-4612-3618-4\\_4](https://doi.org/10.1007/978-1-4612-3618-4_4)

Schunk, D. H., & DiBenedetto, M. K. (2020). Motivation and social cognitive theory. *Contemporary Educational Psychology*, 60,

101832. <https://doi.org/10.1016/j.cedpsych.2019.101832>

- Schunk, D. H., & Usher, E. L. (2019). Social cognitive theory and motivation. In R. M. Ryan (Ed.), *The Oxford Handbook of Human Motivation* (2<sup>nd</sup> ed., pp 11-26). Oxford University Press.
- Seidman, I. (2019). *Interviewing as qualitative research: A guide for researchers in education and the social sciences*. Teachers College Press.
- Sharley, V. (2020). Identifying and responding to child neglect within schools: Differing perspectives and the implications for inter-agency practice. *Child indicators research*, 13(2), 551-571. <https://doi.org/10.1007/s12187-019-09681-z>
- Shenton, A. K. (2004). Strategies for ensuring trustworthiness in qualitative research projects. *Education for Information*, 22(2), 63–75. <https://doi.org/10.3233/EFI-2004-22201>
- Shonkoff, J. P., Garner, A. S., Siegel, B. S., Dobbins, M. I., Earls, M. F., Garner, A. S., McGuinn, L., Pascoe, J., & Wood, D. L. (2012). Committee on psychosocial aspects of child and family health, committee on early childhood, adoption, and dependent care, and section on developmental and behavioral pediatrics. The lifelong effects of early childhood adversity and toxic stress. *Pediatrics*, 129(1), e232-e246. <https://doi.org/10.1542/peds.2011-2663>
- Shur, N., Tigranyan, A., Daymont, C., Regier, D. S., Raturi, S., Roshan Lal, T., Cleary, K., & Summar, M. (2023). The past, present, and future of child growth monitoring: A review and primer for clinical genetics. *American Journal of Medical Genetics Part A*, 191(4), 948-961. <https://doi.org/10.1002/ajmg.a.63102>

- Slack, K. S., Berger, L. M., & Noyes, J. L. (2017). Introduction to the special issue on the economic causes and consequences of child maltreatment. *Children and Youth Services Review*, 72, 1-4. <https://doi.org/10.1016/j.chilyouth.2016.11.013>
- Smith, T.A., Kievit, R.A. & Astle, D.E. (2023). Maternal mental health mediates links between socioeconomic status and child development. *Current Psychology* 42, 21967–21978. <https://doi.org/10.1007/s12144-022-03181-0>
- Sorsa, M. A., Kiikkala, I., & Åstedt-Kurki, P. (2015). Bracketing as a skill in conducting unstructured qualitative interviews. *Nurse Researcher*, 22(4), 8–12. <https://doi.org/10.7748/nr.22.4.8.e1317>
- Spilsbury, J. C., Gross-Manos, D., Haas, B. M., Bowdrie, K., Richter, F., Korbin, J. E., Crampton, D. S., & Coulton, C. J. (2018). Change and consistency in descriptions of child maltreatment: A comparison of caregivers' perspectives 20 years apart. *Child Abuse & Neglect*, 82, 72-82. <https://doi.org/10.1016/j.chiabu.2018.05.020>
- Spilsbury, J. C., Nadan, Y., Kaye-Tzadok, A., Korbin, J. E., Jespersen, B. V., & Allen, B. J. (2018). Caregivers' perceptions and attitudes toward child maltreatment: A pilot case study in Tel Aviv, Israel, and Cleveland, USA. *International Journal on Child Maltreatment: Research, Policy and Practice*, 1(1), 19-40. <https://doi.org/10.1177/0907568218774096>
- Social Security Administration. (n.d.). *Starting your retirement benefits early*. Retrieved from <https://www.ssa.gov/benefits/retirement/planner/agereduction.html>

- Stacey, F. G., James, E. L., Chapman, K., Courneya, K. S., & Lubans, D. R. (2015). A systematic review and meta-analysis of social cognitive theory-based physical activity and/or nutrition behavior change interventions for cancer survivors. *Journal of Cancer Survivorship, 9*(2), 305-338. <https://doi.org/10.1007/s11764-014-0413-z>
- Swenson, C. C., & Schaeffer, C. M. (2018). A multisystemic approach to the prevention and treatment of child abuse and neglect. *International Journal on Child Maltreatment: Research, Policy and Practice, 1*(1), 97-120. <https://doi.org/https://doi.org/https://doi.org/10.1007/s42448-018-0002-2>
- Talmon, A., Horovitz, M., Shabat, N., Haramati, O. S., & Ginzburg, K. (2019). “Neglected moms”-The implications of emotional neglect in childhood for the transition to motherhood. *Child Abuse & Neglect, 88*, 445-454. <https://doi.org/10.1016/j.chiabu.2018.12.021>
- Teherani, A., Martimianakis, T., Stenfors-Hayes, T., Wadhwa, A., & Varpio, L. (2015). Choosing a qualitative research approach. *Journal of Graduate Medical Education, 7*(4), 669-670. <https://doi.org/10.4300/JGME-D-15-00414.1>
- Terry, G., & Braun, V. (2017). Short but often sweet: The surprising potential of qualitative survey methods. In V. Braun, V. Clarke, & D. Gray (Eds.), *Collecting qualitative data: A practical guide to textual, media and virtual techniques* (pp. 13-14). Cambridge. <https://doi:10.1017/9781107295094.003>
- Thommen, D., Grob, U., Lauermann, F., Klassen, R., & Praetorius, A. (2022). Different levels of context-specificity of teacher self-efficacy and their relations with

teaching quality. *Frontiers in*

*Psychology*, <https://doi.org/10.3389/fpsyg.2022.857526>

- Thornberg, R., Wänström, L., Hong, J. S., & Espelage, D. L. (2017). Classroom relationship qualities and social-cognitive correlates of defending and passive bystanding in school bullying in Sweden: A multilevel analysis. *Journal of School Psychology, 63*, 49-62. <https://doi.org/10.1016/j.jsp.2017.03.002>
- Toth, S. L., & Manly, J. T. (2019). Developmental consequences of child abuse and neglect: Implications for intervention. *Child Development Perspectives, 13*(1), 59-64. <https://doi.org/10.1111/cdep.12317>
- Turner, H. A., Vanderminden, J., Finkelhor, D., & Hamby, S. (2019). Child neglect and the broader context of child victimization. *Child maltreatment, 24*(3), 265-274. <https://doi.org/10.1177/1077559518825312>
- U.S. Department of Health and Human Services. (2014). *What is child abuse or neglect? What is the definition of child abuse and neglect?* Retrieved from <https://www.hhs.gov/answers/programs-for-families-and-children/what-is-child-abuse/index.html>
- Vanderminden, J., Hamby, S., David-Ferdon, C., Kacha-Ochana, A., Merrick, M., Simon, T. R., Finkelhor, D., & Turner, H. (2019). Rates of neglect in a national sample: Child and family characteristics and psychological impact. *Child Abuse & Neglect, 88*, 256-265. <https://doi.org/10.1016/j.chiabu.2018.11.014>
- Vanover, C., Mihás, P., & Saldaña, J. (Eds.). (2021). *Analyzing and interpreting qualitative research: After the interview*. Sage Publications.

- Wang, X., Yang, J., Wang, P., & Lei, L. (2019). Childhood maltreatment, moral disengagement, and adolescents' cyberbullying perpetration: Fathers' and mothers' moral disengagement as moderators. *Computers in Human Behavior, 95*, 48-57. <https://doi.org/10.1016/j.chb.2019.01.031>
- Washington State Legislature. (2012). Definitions. Retrieved from <https://app.leg.wa.gov/rcw/default.aspx?cite=26.44.020#:~:text=42.100.,itself%20C%20negligent%20treatment%20or%20maltreatment.>
- Williams, G. (2019). *Applied qualitative research design*. Scientific e-Resources.
- Wilson, H. W., & Widom, C. S. (2009). A prospective examination of the path from child abuse and neglect to illicit drug use in middle adulthood: The potential mediating role of four risk factors. *Journal of Youth and Adolescence, 38*(3). <https://doi.org/10.1007/s10964-008-9331-6>
- Wolock, I., & Horowitz, B. (1984). Child maltreatment as a social problem: the neglect of neglect. *American Journal of Orthopsychiatry, 54*(4), 530. <https://doi.org/10.1111/j.1939-0025.1984.tb01524.x>
- World Health Organization. (2020). *Child Maltreatment*. Retrieved March 21, 2022 from <https://www.who.int/news-room/fact-sheets/detail/child-maltreatment>
- World Report on Violence and Health (pp. 59–61). (n.d.). Retrieved March 21, 2022, from <https://www.who.int/news-room/fact-sheets/detail/child-maltreatment>
- Yin, R. K. (2009). *Case study research: Design and methods* (4th ed.). Sage.



- Yoo, H., & Abiera, K. (2020). Stories less told: Parenting strengths and family-of-origin experiences amongst parents Involved with child protective services. *British Journal of Social Work, 50*(1), 119-136. <https://doi.org/10.1093/bsjw/bcz107>
- Zeanah, C. H., & Humphreys, K. L. (2018). Child abuse and neglect. *Journal of the American Academy of Child & Adolescent Psychiatry, 57*(9), 637-644. <https://doi.org/10.1016/j.jaac.2018.06.007>
- Zickar, M. J., & Keith, M. G. (2023). Innovations in sampling: Improving the appropriateness and quality of samples in organizational research. *Annual Review of Organizational Psychology and Organizational Behavior, 10*. <https://doi.org/10.1146/annurev-orgpsych-120920052946>

## Appendix A: Recruitment Flyer



**Parents Needed**

To Better Understand The

Walden University  
Doctoral Study

## Parental Perceptions of Child Neglect and Triggering Factors



### Purpose:

The purpose of this research is to identify and describe how parents understand the definition of child neglect and what factors they believe trigger child neglect.

### You are invited to participate if you are:

- 18-65 years of age
- Currently parenting at least one child
- A legal U.S. resident, and
- Can speak and understand English

Participants will receive a complimentary e-gift card of \$20 for participating in the interview.

Contact Via Phone or Email



*This research has been reviewed by the Institutional Review Board.*

## Appendix B: Interview Questions

## Part 1

1. Would you mind sharing which region of the US or world you are located in?
2. Can you state your age, please?
3. What race do you identify as?
4. Please share your employment status.
5. What is your current level of education?
6. Do you have any children? If so, how many and how old are they? *If no, thank you for willingness to participate in this study and for your time. However, we will not be able to continue with the interview as one of the criteria for participation is having at least one child. Thank you again for your interest and time.*
7. Do you currently live with your child(ren)?

Now that I have gotten to know you a little bit, I will ask you questions specific to the research study I am conducting.

1. Please describe if you and how you are familiar with the term child-neglect?
2. In your own words, please share how you would define the term child-neglect?
3. Can you describe the difference between child abuse and child neglect?
4. Please describe a situation or scenario that you consider would be an example of child neglect. Remember, I am not asking for you to disclose, explain, or describe any neglectful behavior.
5. What do you think could lead parents to unintentionally neglect their children?

6. What do you think could lead parents to intentionally neglect their children?
7. Please share any factors, situations, or circumstances that you believe could cause parents to neglect their child(ren)?
8. Which of those factors could lead to or trigger parents to neglect their children?
9. (I will repeat the factors shared) As I repeat the factors shared, please rate those factors in terms of more likely to trigger neglect to less likely to trigger parental child neglect (on a scale of 1-5, with 1 being mostly likely and 5 being least likely)?
10. Is there anything else that you would like to share about how you perceive child neglect, either defining child neglect or what triggers child neglect?

## Appendix C: Interview Protocol

Greetings and thank you for agreeing to participate in this study. With your permission, I will now begin recording the interview.

I will begin our interview today by asking you a few demographic questions, followed by 10 questions. Please note that I am only asking about your perceptions of child neglect, not whether you are neglecting your own children. Due to the mandated reporting obligations of my profession, I am not asking you to disclose, explain, or describe any personal incidences of neglectful behavior.

The study only requires your perceptions about child neglect. Are you ready to proceed? *Following a positive response, I will proceed with the demographic questions and then the interview questions.*

1. Would you mind sharing which region of the US or world you are located in?
2. Can you state your age please?
3. What race do you identify as?
4. Please share your employment status.
5. What is your current level of education?
6. Do you have any children? If so, how many and how old are they? *If no, thank you for willingness to participate in this study and for your time. However, we will not be able to continue with the interview as one of the criteria for participation is having at least one child. Thank you again for your interest and time.*
7. Do you currently live with your child(ren)?

Now that I have gotten to know you a little bit, I will ask you questions specific to the research study I am conducting.

1. Please describe if you and how you are familiar with the term child-neglect?
2. In your own words, please share how you would define the term child-neglect?
3. Can you describe the difference between child abuse and child neglect?
4. Please describe a situation or scenario that you consider would be an example of child neglect. Remember, I am not asking for you to disclose, explain, or describe any neglectful behavior.
5. What do you think could lead parents to unintentionally neglect their children?
6. What do you think could lead parents to intentionally neglect their children?
7. Please share any factors, situations, or circumstances that you believe could cause parents to neglect their child(ren)?
8. Which of those factors could lead to or trigger parents to neglect their children?
9. (I will repeat the factors shared) As I repeat the factors shared, please rate those factors in terms of more likely to trigger neglect to less likely to trigger parental child neglect (on a scale of 1-5, with 1 being mostly likely and 5 being least likely)?
10. Is there anything else that you would like to share about how you perceive child neglect, either defining child neglect or what triggers child neglect?

We have reached the end of our interview today. Thank you again for your time and participation. Do you have any questions or comments for me? Please remember, your name, phone number, and email address will not be linked to your responses. Your confidentiality is important and will be safeguarded. I will now stop the recording. As previously mentioned, I will transcribe this interview. Once completed, I will email a

copy of the transcription to you for review. Also, as a thank you for your participation today, an e-gift card of \$20.00 within 24 hours.