

CHAPTER 5

CONCLUSION AND RECOMMENDATIONS

This chapter is categorized into four sections including conclusion of the study, implications of findings, limitations of the study, and recommendations for further research.

Conclusion of the Study

The two groups pretest –posttest experimental design was employed to examine the effects of the cognitive adjustment program on parental attitudes toward child rearing and potential for child physical abuse among Thai parents of one to six year old children. The intervention was conducted during a six-month period, from October 2008 to March 2009. Two hundred and seventy nine parents agreed and were screened in this study. One hundred and twenty six subjects participated in this study. Final analysis included only 116 subjects. Ten subjects were excluded from the analysis, seven from the control group and three from the experimental group due to incomplete program participation. The attrition rate of this study was 8.82%.

Two instruments were used to assess outcome measures: 1) the Adult-Adolescent Parenting Inventory-2 Form B developed by Bavolek and Keene (1999) and 2) the Child Abuse Potential Inventory developed by Milner (1986). Both instruments were translated into Thai by the researcher using back translation approach. The internal consistency reliability of the Adult-Adolescent Parenting Inventory -2 Form B was

0.80 and that of the Child Abuse Potential Inventory was 0.90. Data analyses were conducted using descriptive statistics, paired t-test, and ANCOVA.

The sample included 116 subjects, with 53 in the experimental group and 63 in the control group. No differences were found on demographic characteristics in terms of parental age, gender, marital status, educational level, occupation, smoking history, gambling history, and abusive childhood experience. However, the two groups were significantly different on religion ($p < .05$) and borderline difference on alcohol consumption history ($p = .062$). In addition, there were no significant differences on family and children characteristics across the experimental or control groups.

The results demonstrated that subjects attending the cognitive adjustment program had significantly better parental attitudes toward child rearing ($p < .001$) and lower potential for CPA ($p < .05$) at 16 weeks follow up than before attending the program. Moreover, subjects attending the program had significantly better parental attitudes toward child rearing ($p < .001$), but not significantly lower potential for CPA ($p = .603$) at 16 weeks follow up than those not attending the program.

Implications of Findings

Implications of findings for nursing practice and nursing administration are presented as follows:

Implications for nursing practices

Firstly, the cognitive adjustment program should be incorporated into the regular services for parents from the low to middle socioeconomic status at well-baby clinic or primary health care setting. Since the program demonstrated its effectiveness

in improving parental attitudes toward child rearing. Small group discussion should be conducted by nurses with parents who have limited parental knowledge on child development, negative feeling of being parent, and poor parenting skills. In addition, the individual home visit should be integrated into home health care services of primary health care setting since it is revealed a positive impact on parental capability in child rearing.

Secondly, the program should be launched as a workshop with child caregivers and health volunteers in order to improve their capabilities to work with family. Such tactic will help child caregivers and health volunteer to understand more about child abuse issue, to raise their awareness on child protection as well as to early detect victims of child physical abuse.

Lastly, the parental booklet developed by the researcher and utilized in this study should be distributed to parents with one to six year old children. It is expected that the booklet can improve parental attitudes toward child rearing and raise parental awareness on child physical abuse.

Implication for nursing administration

Nursing administrators should consider integrating the cognitive adjustment program into regular nursing services of primary health care setting. The administrators may provide the workshop for training nurses and facilitate them to work with family based on the intervention protocol. A family folder should be created for family with early childhood in order to record child health and family characteristics and monitor problems in relation to child physical abuse. The administrators should set a case management system for child physical abuse to work as a co-network. In addition,

the cognitive adjustment program should be systematically collaborated with other sectors concerning child protection such as child care center, local government organizations, social development and human security provincial office, provincial health office, and primary health care setting for effectively preventive intervention.

Limitations of the Study

There are several possible limitations in this study that limits its applicability to other as presented below.

1. Considered with the program implementation, activities designed for promoting the fourth stage of the Social Information Processing Model of Child Physical Abuse may be inadequate to produce the desired change in potential for child physical abuse.
2. The sample of this study included parents of one to six year old children who residing in the Eastern part of Thailand. The majority of subjects were from the low to middle socioeconomic status and education. Thus, a generalization of the findings in other group of parents and other setting should be cautiously considered.
3. The instruments used in this study were translated from the original English version developed for western culture. The items may not be highly sensitive to capture the outcomes.
4. Since this study measured parental attitudes toward child rearing and potential for child physical abuse using self-report method, it would be meaningful to have affirmable evidence from other measures and several sources such as observation.

Recommendations for Further Research

Considered with the limitations of this study, recommendations for further study are presented as follows:

1. A replication of the design applying all stages of the Social Information Processing Model of Child Physical Abuse is needed to substantiate the intervention effects.
2. A follow-up study using the repeated measures experimental design with the intensive treatment and comparison between multiple settings needs to be conducted in order to ascertain the long-term effects of the cognitive adjustment program on parental attitudes toward child rearing and potential for child physical abuse.
3. The cultural appropriate instruments measuring parental attitudes toward child rearing and potential for child physical abuse should be newly developed or modified for Thai context.