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Assessing the Value of and Contextual and Cultural Acceptability of the Strength and Difficulties Questionnaire (SDQ) in Evaluating Mental Health Problems in HIV/AIDS Affected Children

ABSTRACT: *The Strengths and Difficulties Questionnaire (SDQ) is an internationally recognized tool. This study aims to evaluate the cultural and contextual acceptability, and potential uses of the SDQ amongst Sesotho*

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learners in South Africa. This paper uses reports from ten teachers based on their experience of using the SDQ. Teachers found the SDQ contextually relevant and easy to administer. They felt it assisted them in understanding the challenges learners were facing and to develop better relationships with them. Very few concerns were raised. The lack of referral options for affected learners and their own lack of appropriate skills generated frustration.

The Strength and Difficulties Questionnaire (SDQ) has been used extensively, the results are trusted (Achenbach 1991; Mullick and Goodman 2001), and it has been shown to be an effective, quick measure of emotional and behavioral problems in multiple settings (Goodman 1997; 2001; Mathai, Anderson, and Bourne 2003; Obel et al. 2004; Goodman, Renfrew, and Mullick 2000; Marzocchi et al. 2004; van Widenfelt et al. 2003). One of the main advantages of the SDQ is that it can be used by nonprofessional people with low levels of additional training to make provisional diagnoses (Goodman et al. 2003; Goodman et al. 2000). These characteristics make it ideal for use in South Africa where there is a distinct lack of mental health professionals. It has been used successfully in South Africa as part of a study looking at the impact of being orphaned by AIDS (Cluver 2011), but there has been no previous attempt at standardizing it for local use or to ascertain its cultural acceptability.

The material for this paper was drawn from a subcomponent of a larger study aimed at evaluating the psychometric properties of the SDQ among the Sotho population (Sharp et al. 2014). While such an evaluation is important, it is also necessary to examine the cultural and contextual acceptability and the potential for its use in a community context (Canino and Alegria 2008). Items and measures may be understood differently (Cluver and Gardner 2007a), and individuals may be incorrectly categorized based on an inaccurate understanding of responses and behavior, the "category fallacy" (Kleinman, Eisenberg, and Good 1978).

One of the primary groups who have regular contact with children is teachers who see them in the school environment and develop a particular knowledge of and insight into each child in their class. The aim of this paper was to assess the acceptability of the SDQ by teachers at schools that enroll high numbers of vulnerable children. A similar approach was used in assessing the local acceptability of the Diagnostic Interview Schedule, by Sotho-speaking mental health professionals, for Sotho-speaking children (Sharp et al. 2011). For this paper, we are defining acceptability as a tool that has been culturally appropriate for a Sotho-speaking population; it is easy to use and apply and useful to the teachers in their work.

The study was conducted in in a large township in the urban center of Mangaung, which is the capital of the Free State, located in the heart of South Africa. It is one of the areas affected most by HIV with a prevalence rate of 14.9 percent (Shisana and Simbayi 2002). The Free State is the third most

urbanized province, with the Mangaung Local Municipality in the Motheo District being the most densely populated. Of the 752,906 people living in Mangaung, 618,408 (82 percent) are Black (mostly Sesotho). In 2008, 31 percent of children in the Motheo district were orphaned (Mangaung Local Municipality 2008). The percentage is likely to have increased since then.

Methods

This paper is nested within a larger study aimed at evaluating the psycho-metric properties of the SDQ for use within a Sotho-speaking population in South Africa (Sharp et al. 2014). As part of the study, the educators of the children who were enrolled in the study were asked to use the SDQ to assess the emotional and behavioral problems of children in their classes. The educators who agreed to participate were given brief training in the use of the SDQ. Educators were given lists of pupils in their specific class that they were asked to observe and assess using the SDQ. The teachers were paid a small honorarium of R100 per pupil. They were given up to two weeks to complete the assessments. The forms were then collected by the fieldworkers.

Participants

After having completed about two-thirds of the total assessments—having given the educators a number of opportunities to use the tool—ten educators, who had each assessed at least five pupils, were approached to write an evaluation on their experience of using the SDQ. The teachers were selected on the basis of obtaining a representative spread across multiple schools in the communities where the study was done and across different educational levels of pupils. Each educator was paid R500 ($50) to write a report of about five pages. The students themselves were not asked to reflect on the instru-ment as they were felt to be too young, ages 7–11 years, and lacking the personal resources to reflect insightfully on the instrument.

Measures

The terms of reference (Sharp et al. 2011) to which the teachers responded included the following questions; each of these questions had sub-questions that served to focus their responses further.

(1) How did you experience administering the SDQ on learners in your class?
(2) Was the SDQ useful to you as a teacher?
(3) Do you feel that you need additional support to be able to use the SDQ better?

(4) How could the SDQ be used in the school or more broadly in the community?
(5) Is there anything that you think we should know that we have not asked?

Educators were also asked to make specific comments on aspects of SDQ and its use in general, and to assess both the strengths and weaknesses of the instrument.

Qualitative Analysis

The reports were analyzed using a modified interpretive content analysis approach (Skinner 2007), which drew together teacher comments into the key areas, as organized in the results section below. To protect confidentiality, no personal details on any of the teachers or learners are reported.

The provisional results from the five-page reports were presented to two meetings of teachers, of about 35 teachers each, as part of our feedback to the community. In the meetings, the teachers affirmed the results as reported here. The open discussion after the presentations added some details.

Ethics

The full study was reviewed by the institutional review boards (IRBs) of Houston University, Free State University, and Stellenbosch University.

Results and Discussion

The dominant theme was one of support for the SDQ and of appreciation that it had been passed onto the teachers as a tool for use in their classrooms. "I personally give an SDQ a go ahead; it has really worked for me." There appeared to be a huge gap in the tools currently available for teachers to be able to assess and understand their pupils. A key issue was that the use of the SDQ made teachers aware of the problems that many of the children faced, leaving the teachers feeling empowered.

Experience of Using the SDQ with Learners

The educators felt comfortable with the SDQ. It was easy to use, and there were no experiences of discomfort or concern. The instructions were felt to be clear and the questions easy to answer. All elements of the SDQ were felt to be important and of value. Some of the material covered was new to the

teachers, but the SDQ provided a structure for them to understand and use the new information. The tool was felt to provide a very constructive overall view of the children in the classroom. The elements in the questionnaire were clear and simple. They addressed the problems that the teachers often experience with certain learners who have behavioral problems.

Usefulness of the SDQ

All the reports addressed the usefulness of the tool and testified to the value of the tool in assessing and understanding the children in their classes. The teachers wanted to be able to identify children in trouble and thereby have some power to deal with them. The SDQ was, thus, seen as offering a valuable contribution, giving teachers greater understanding of what was restricting the children or why they were generating problems in the classroom. Some comments follow.

> The questionnaire was useful and an eye opener to me because I was not aware of some of the problems children encountered at home and at school. I now know that I should treat each individual with respect and differently considering their environment as well.

The educators felt that, by using the tool, they gained personally and grew in their professional capacity. It helped to increase their awareness and understanding of the aspects of the mental health of the pupils that may impinge on a learner's capacity to work in the classroom. There appeared previously to be a very low awareness of the nature of the mental health and emotional problems that the pupils faced, and the teacher had felt impotent in trying to respond. Thus, the SDQ was felt to empower them and provide considerably greater insight.

> I have used the SDQ to identify particular problems amongst learners in my class. Everything was clear. The SDQ has opened my eyes and added to my knowledge in identifying children with emotional and behavioral difficulties in my class.

The tool added structure to the evaluations and observations of the learners, identifying issues that teachers previously would have missed. Teachers learned how to view pupils individually, holistically, and in depth. They saw the need to focus not just on schooling, but also on emotions, social interactions, behavior, and capacity. Teachers comments addressed this with them stating how they would come back to observing the children while completing the SDQ to look at aspects of their behavior that they had not considered or had overlooked before, e.g. to assess difference between developmental and emotional problems. There was also potential for the SDQ to be used to assist in assessments such as when a child is ready to return to school following trauma, or in a school readiness assessment.

It will also reduce stress and confusion since now educators will know exactly what kind of learners they are working with and which learning barriers to treat. I think since the educational needs of every learner differs from one another, so for teachers not to end up treating a gifted child like a learner with any learning barrier.

Teachers also noted that it opened avenues for them to support the learner directly with their problems. This applied both in the direct assistance to the learner and the organization of the class so that the teachers could work more effectively. Important for the teachers was the contribution the SDQ made toward developing their relationships with pupils in their classes. The new relationship allowed for a closer connection to develop and greatly raised the empathy and understanding that the teachers felt for the learners. The empathy had the further effect of helping teachers to provide greater assistance and support to the learners, and, thus, reduce conflict in the classroom. It further reduced the stereotyping of pupils by educators. Insight was also gained into the strengths of the learners, giving the teachers additional tools with which to work. The additional insights allowed for a more positive and insightful relationship to develop. It was noted that as learners realized that teachers understood them better, they also related better to teachers and began to trust this relationship.

My experience in doing SDQ measure on learners has brought me closer to them. It has helped me to be more careful, broadminded and protective than before. It has also helped me to try and make life easier for them.

The following excerpt shows how the SDQ directly facilitated the teacher's work with a child in her class, allowing the teacher to better understand the stressors the learner faced.

I started to know her better, her parents, as well as the conditions under which the learner lives. For example: The learner is coming from a very poor family. The mother is HIV positive. She is a single mother with three children. The mother is unemployed. So the type of life has already affected the learner though she is not infected with HIV. The behavior of the learner is affected by the way and conditions of the family.

The SDQ is particularly important in situations where the teacher is overworked and has too many learners in the class. Some teachers described class sizes of up to 50 or 60 learners, many who had special needs and emotional problems. The schools are predominantly under-resourced, and teachers operate with little or no support from the Department of Education. The use of the SDQ assisted teachers to assess pupils individually and to see them each as separate individuals, rather than a mass that needed to be controlled. The teachers were also empowered by being able to use the SDQ to elicit broader assistance for the children. This included both

referrals to outside agencies and their capacity to work with the child's parents in order to assist the learner.

> In township schools teachers teach many children and they are unable to give individual attention. Some children are not identified so the instrument will help teachers identify children with emotional and behavioral problems earlier and support systems will be applied to help the learner. At present, schools are not using any instrument and it will be of great assistance if the SDQ can be applied at schools.

It was noted that the SDQ was a tool. It does still require the educator to be proactive and to put in the effort to use the information gained to assist the child. Great emphasis was put on the effort that the educators put into observing the child and to considering the behavior of the children in relation to the questions raised by the SDQ.

Do you Feel That You Needed Additional Support to Be Able to Use the SDQ Better?

The dominant theme expressed by the teachers was that the SDQ was generally easy to implement on their own. The clear structure provided by the SDQ provided teachers with a framework to observe children's behavior. The structure of the forms and the clear content of the documentation made it easy to use and score. Teachers expressed that, with this tool, learners would not be able to hide their problems, and the teachers had the capacity to recognize mental health symptomatology and concerns.

> There were no components that I felt I do not understand. Everything was clear and understandable.

Training requests that arose focused both on the content on the SDQ and a desire to understand and interpret the individual components. One area that was emphasized for additional training was assistance for teachers in moving from the domain of the cognitive training into the arena of emotion. Similarly, teachers expressed the need to be able to interpret and to use the SDQ themselves, especially if it was to be used by the educators independently. The teachers wanted to be able to use the SDQ as a starting point for providing actual on-going assistance. For many educators, this ability would require a conceptual shift on their part. The requests also reflected an excitement about and a commitment to using the tool on an on-going basis. There was a real sense from some that they wanted a greater involvement in the use of the tool and to have it connected to broader operations with the education department.

> Yes, to me it would have been useful to have received some additional training in the use of the instrument. I am prepared to undergo and also to be involved in training in order to use the SDQ.

As an extension to the above concern, some teachers felt the need to be open about their use of the SDQ with the learner. Teachers asked for assistance in how to explain the SDQ to the learners, to use the results effectively, and to work with the learners on a collective basis using the findings.

A key point of frustration was that the tool still left the teacher without the tools to intervene. While it was important to determine the learner's problems, the more important need was to find solutions to assist the learner to move forward.

> [I]t helps to be able to diagnose and understand the child, but there remained huge frustration in terms of not having anywhere to refer the children who need assistance. Neither the health services nor the Dept of Education took the issue of mental health problems among school children seriously and few if any real services existed. Those services that did exist were heavily overextended.

How Do You Feel the SDQ Could Be Used in the School or More Broadly in the Community?

There was strong support for the use of the SDQ, both in schools and in the community. They felt that there were currently no tools to help the teachers to perform such tasks. The teachers usually relied merely on closely observing the learner's behavioral changes. The instrument's holistic approach was identified as a further strength over current referral forms. The SDQ could also act as an advocacy document to promote the need for additional resources for schools to assist learners with mental health problems.

> Could the strengths and difficulties questionnaire be used in the school or more broadly in the community, yes I fully agree in the sense that the school and the community plays a major role in the upbringing of the child. . . . In the question whether we need the tool, I will vocally say yes we need it as I have alluded to the fact that the tool is user friendly because it addresses a holistic approach [to] the problematic learner.

Teachers felt that the SDQ was easy to use, and that this ease would allow for a broad use in the school context. Teachers mainly addressed the use of the SDQ in assisting them with the process of referral and explaining the problems that they had noted to other professional, service providers, and to the children's parents. Many pupils with mental health problems are incorrectly sent to remedial schools, while their problems are actually primarily emotional. This finding was born out in discussions with teachers at the follow-up workshop.

> It will also stop wrong or let me say "quick referring" of learners if need be. It will help teachers to provide coherent reasons for a referral and to provide adequate information about the referral to the family.

The school is also connected to the community, so the application and benefits can be broader than just the school. The teachers focused on their own role, but suggested some additional service providers, including social workers and church leaders, who could apply it.

> I feel it should be used in both the school and in the community. The very same learner that I am dealing with is the member of a certain church. And at church there are organizations that deal with or experience similar problems with learner as us at school. Now if the program could be extended to the broader community we will be able to deal with the learner at all spheres.

Translation Issues of the Instrument in Sotho

The teachers were generally satisfied with the translation given to them and expressed no problems in understating it. They felt that the questions were structured in such a way that each question did not need a follow-up explanation. It was recognized that some confusions may arise as many different dialects exist in Sotho, so there will be differences between the version of the language spoken in academic circles to that spoken in the poorer communities and differences based on where the family comes from geographically. These differences can extend to the point of terms and entire sentences not being understandable. However, the teachers felt that the structure and general clarity of the instrument would contribute to reducing even those problems.

> The translation is 99.9% correct. The Sotho speaking child and the English speaking child who have similar problems will answer the questionnaire more or less the same. They will provide almost similar answers to all questions.

An item relating to the attention deficit disorder of fidgeting or squirming in seats was the only item found to be difficult. The teachers did not use the term fidgeting often and it did not have a clear translated term in the Sotho lexicon.

Concerns or Problems

Very few concerns or problems were experienced in the use of the SDQ. It was felt to cover the major issues faced by the teachers in assessing children in their classrooms and in extra curricula activities. One concern common in many critiques from Africa of diagnostic schedules is the lack of coverage of somatic symptoms, which received brief, but not consistent, mention.

> The learner often complains of headaches, stomach aches or any other sickness that is true and this matter can never be disputed.

Some of the questions were difficult for teachers to respond to, based on their restricted contact with the children, e.g., covering information from the home situation or requiring knowledge of the child over a period longer than their year in the class. The teachers felt that they would have to involve the parents or caregivers to assist them in answering these questions. Some additional training could facilitate their consultation.

> Yes there were elements that I felt created confusion, like that question from the SDQ asking as to whether my learner is kind to younger children or not.

Limited concerns were raised about the grading system used to evaluate the absence of the symptoms with some teachers struggling with the construct of a symptom happening sometimes. They felt it either happened or it did not. One concern raised was the use of terms such as "somewhat true," which most teachers found difficult to address.

The context of the teacher was raised as an issue. The overcrowded classrooms and multiple demands on the teacher made diagnosis, even with an instrument such as the SDQ, difficult. This may present particular difficulties in allowing time to establish trust with learners so they will feel comfortable talking about their concerns.

> In our school the classrooms are over-crowded. The more learners there are in the classroom that need individual vocational attention, the less the teacher is going to concentrate on their emotional issues unless that particular learner exhibits severe emotional and behavioral changes.

One teacher raised a number of concerns related to the developmental and contextual issues of adolescent children. It was also felt that children respond differently depending on whether they were at home, at school or in another context. Teachers felt uncertain about how to respond to some questions. Some of the issues raised included:

> Consideration of other people's feelings: Most children are self-centered, they only think about themselves, they do not consider other people's feelings.

> General obedience: Children behave differently in different situation. They change their behavior in order to adapt to what is happening around them at that particular moment. A child can misbehave at home but be obedient at school or the other way around.

> Thinks things out before acting: Many children do not think before they act, they just do things and regret it afterwards especially 7–9 yrs age group.

One critique raised was that the SDQ did not deal in depth with some of the issues that teachers faced. In this case, they would have liked to see more

focus on the issue of disruptive behavior, which is a common problem faced by the teachers. The issue of the learners challenging behavior was felt by some to warrant a separate, more intensive focus. Similarly, some questions that are directed at the specifics of the teaching situation were suggested.

1) Has the child participated in class activities?
2) Does the child raise his/her hand when a question is asked?
3) Does the child like going out occasionally?
4) Is the child an attention seeker?

Conclusions

There was generally high acceptance of the SDQ as a diagnostic screening tool. The tool appeared to be culturally appropriate with minimal concerns being raised. Even the concern expressed around the translation of the one item on fidgeting in the classroom could be addressed by improving the translation. The SDQ also appeared to be easy to use and useful for the teachers in the classroom situation. Primarily, the teachers spoke positively of the tool, both as a basis for understanding children in classrooms who are having problems and as a tool for making effective referrals. This support was evident both in the reports written by the teachers and in the discussions held as part of the reporting-back process. The tool clearly addressed a significant gap in teacher expertise and responded to an important need, especially as the learners raised multiple problems for the teachers. The value of the SDQ lay in teachers being able to better understand what affects children and, thereby, being able to respond more effectively. It also improved their capacity to refer the child effectively, or at least to be able to discuss issues involving the child with the parents\caregivers.

Some concerns were raised with the instrument, but these were limited to having difficulty with the graduation system in the response set and the desire to tailor it specifically for their needs by adding focused questions for the classrooms. Additional tools would have to be developed to deal with these concerns.

Beyond the formal role of the instrument, the SDQ appeared to generate additional awareness in the teachers concerning mental issues and the potential impact of these on their pupils, which they had not previously considered. This additional insight went beyond the direct diagnostic power of the tool. Thus, it also provides an awareness-raising function. These roles do raise the possibility for the use of the instrument beyond the immediate context of the schools by laypeople in the broader community to identify children with problems and to facilitate referrals. Amongst others, social workers, church leaders, and youth group leadership were identified as people who could use the SDQ to assist children with problems.

Of primary concern to the teachers was the lack of referral sources for children with emotional and behavioral problems. The teachers felt that

the Department of Education did not provide adequate support services, and there were limited referral sources within the health services as well. While this is not a problem with the SDQ, the value of a tool to identify emotional and behavior problems is reduced if no referral sources are available. For instance, in an earlier part of this study (Sharp et al. 2011), we identified only six Sotho-speaking psychologists in the Mangaung area. The teachers expressed the need for additional professional services, such as psychologists and social workers, to whom they could refer children in need; specialized facilities to treat and support the children, especially those most affected; coping assistance to households; and support and training for the teachers themselves to help them to assist directly and appropriately the children in their classrooms with their social and mental health problems. As indicated in Sharp et al. (2014), the needs of the community are very high; considerable resources are needed to provide this assistance. In the interim, the SDQ does at least provide the teachers, as one front-line set of workers, with a tool that can assist them.

Limitations

A number of limitations need to be acknowledged in this study. The sample of teachers selected was small and represented those who were more committed than most teachers to their professional roles and the children for whom they cared. As such, they may have more commitment than other teachers who did not participate. Given the low levels of institutional and state support that teachers receive, this support could, in part, be supporting the use of the SDQ out of desperation as they get so little other support. Given the extremely heavy burdens that they face on a daily basis, teachers may find that the energy and commitment needed to use the SDQ may be difficult to maintain.

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