

**Expressed Fears and Coping
Mechanisms of a Selected Group of
Preschool Children**

Helene Loxton



**Dissertation presented for the degree of Doctor of Philosophy at the
University of Stellenbosch**

Promoter: Prof. TWB Van Der Westhuÿsen

April 2004

DECLARATION

I, the undersigned, hereby declare that the work contained in this dissertation is my own original work and that I have not previously in its entirety or in part submitted it at any university for a degree.

Signature

Date

ABSTRACT

Although fear is an integral part of normal human functioning, the onset of many anxiety disorders can be traced back to childhood. For preventative intervention to be effective, it is important to obtain knowledge of children's normative fears and coping mechanisms in order for parents and caregivers to understand and contribute towards mediating potentially stressful experiences of young children in their care.

The primary aim of the study was to obtain normative data regarding the content and number of expressed fears, coping mechanisms and perceived efficacy in response to these fears by a culturally diverse group of South African preschool children living in Stellenbosch in the Western Cape Province. The secondary aim was to ascertain whether any differences in the expressed fears, coping mechanisms and perceived efficacy of the participants were found with respect to the independent variables of gender, culture, socio-economic status (SES) and community comparisons with regard to violence risk. Parental perception of children's fears, coping mechanisms and perceived efficacy, compared to the children's own views, were also taken into account.

The participants consisted of 152 preschool children selected from the population of children between 5 and 7 years attending a preschool or day-care setting for at least 3 months prior to testing.

The study was of an exploratory and descriptive nature. A predominantly qualitative method of data collection was used. Measuring instruments consist of the Goodenough-Harris Drawing Test, as well as semi-structured interviews in combination with drawings. Parental perceptions of children's fears, coping mechanisms and perceived efficacy, as well as participants' background information were obtained by means of a Biographical questionnaire.

The data were analysed and coded according to categories based on emerging themes. The results showed similarities in many ways to that of the existing body of knowledge. The largest proportion of participants reported having animal fears, especially wild animal fears, showing that this is a relatively common type of fear in normal children

between the ages of 5 and 7. Other high-frequency fear categories that emerged are the fears of the dark, night, bad dreams; fantasy people fears; real people fears; and fears of physical harm. A total number of 429 fears were expressed, ranging from 1 to 9 per participant, with an average of 2.8 fears per child for the overall sample. Parents' perceptions of the content and number of their children's fears differed hugely from those expressed by the children. Social/spiritual support was found to be the most frequently utilised, as well as perceived effective coping mechanism. Similarities with regard to the parents' perceptions were also found in this regard.

Significant differences regarding the content of expressed fears were found amongst the groups relating to culture, SES and violence risk comparisons. Gender and SES differences were found to be significant amongst the groups with regard to the utilisation of coping mechanisms and perceived efficacy. These differences yielded few similarities upon comparisons to the findings of previous studies.

The implications of the present study's findings for the South African context as well as recommendations for further studies are discussed.

OPSOMMING

Hoewel vrees 'n integrale deel van normale menslike funksionering is, word, wat die etiologie van angsversteurings betref, gevind dat dit dikwels tot vreesagtigheid tydens die kinderjare herlei kan word. Vir voorkomende intervensies om effektief te wees, is dit belangrik om kennis aangaande kinders se normale vrese en hanteringsmeganismes in te win, sodat ouers en versorgers 'n beter begrip kan hê en 'n bydrae kan maak deur middel van die mediëring van potensiële stresvolle ervarings by kinders in hulle sorg.

Die primêre doel van die studie was om normatiewe data in te win aangaande die inhoud en frekwensie van uitgesproke vrese, sowel as die hanteringsmeganismes en waargenome doeltreffendheid in respons tot hierdie vrese by 'n kultureel diverse groep Suid-Afrikaanse voorskoolse kinders wat woonagtig is te Stellenbosch in die Westelike Provinsie. Die sekondêre doel van die studie was om vas te stel of daar verskille was in die uitgesproke vrese, hanteringsmeganismes en waargenome doeltreffendheid van die deelnemers met betrekking tot die onafhanklike veranderlikes van geslag, kultuur, sosio-ekonomiese status (SES) en van gemeenskapsvergelyking op grond van geweldsrisiko. Ouers se persepsie van kinders se vrese, hanteringsmeganismes en waargenome doeltreffendheid is ook in ag geneem.

Die deelnemers was tussen 5 en 7 jaar oud en het bestaan uit 152 voorskoolse kinders wat 'n voorskoolse - of dagsorgsentrumopset bygewoon het vir minstens 3 maande lank voor toetsing plaasgevind het.

Die studie was eksploratief en beskrywend van aard. 'n Oorwegend kwalitatiewe metode van data-insameling is gebruik. Meetinstrumente wat gebruik is, is die Goodenough-Harris Drawing Test, sowel as semi-gestruktureerde onderhoude in kombinasie met tekeninge. Ouers se persepsies van kinders se vrese, hanteringsmeganismes en waargenome doeltreffendheid, sowel as agtergrondsinsigting oor die deelnemers, is met behulp van die Biografiese vraelys ingewin.

Die data is geanaliseer en in kategorieë gekodifiseer op grond van die temas wat na vore gekom het. Die resultate het in baie opsigte ooreenkomste met die bestaande kennisbasis getoon. Die grootste proporsie van die deelnemers het vrese vir diere, veral wilde diere, gerapporteer, wat 'n aanduiding is dat dit 'n baie algemene tipe vrees by normale kinders tussen die ouderdomme van 5 en 7 jaar is. Ander hoë-frekwensie vreeskategorieë wat na vore gekom het, is vrese vir die donker, nag, slegte drome; vrese vir fantasiekarakters; vir werklike mense, en vrese vir ligamlike skade. 'n Totale aantal van 429 vrese is gerapporteer, wat gewissel het van 1 tot 9 per deelnemer, met 'n gemiddelde van 2.8 vrese per deelnemer vir die totale groep. Ouers se persepsies van die inhoud en frekwensie van hulle kinders se vrese het grootliks verskil van dié van die kinders. Dit is gevind dat sosiale/geestelike ondersteuning die mees algemeen gebruikte sowel as die mees effektiewe waargenome hanteringsmeganisme was. Ooreenkomste ten opsigte hiervan is ook gevind met betrekking tot die ouers se persepsies.

Beduidende verskille ten opsigte van die inhoud van uitgesproke vrese is gevind tussen groepe met betrekking tot kultuur, SES en gemeenskapsvergelyking op grond van geweldsrisiko. Met betrekking tot die keuse van hanteringsmeganismes en waargenome doeltreffendheid, is beduidende verskille ten opsigte van geslag en SES tussen groepe gevind. Daar blyk weinig ooreenkoms met bevindinge van vorige studies in hierdie verband te wees.

Die implikasies van die huidige studie se bevindinge ten opsigte van die Suid-Afrikaanse konteks, sowel as aanbevelings vir verdere studies, word bespreek.

ACKNOWLEDGMENT OF FINANCIAL ASSISTANCE

The financial assistance of

the Centre for Science Development (HSRC, South Africa) towards this research is hereby acknowledged. Opinions expressed and conclusions arrived at are those of the author and are not necessarily to be attributed to the Centre for Science Development;

a Harry Crossley Bursary towards this research is hereby acknowledged. Opinions expressed and conclusions arrived at are those of the author and are not necessarily to be attributed to the Harry Crossley Foundation.

ACKNOWLEDGMENTS

I would like to express my gratitude and appreciation to the following people:

- Professor Bodley van der Westhuysen, my promotor, vir sy waardevolle akademiese insigte, onontbeerlike opbouende kritiek en voortdurende ondersteuning dwarsdeur my studieloopbaan aan die Universiteit van Stellenbosch.
- Die navorsingsassistente en vertalers, Renata, Ben en Maria. Julle het 'n groot bydrae gelewer om die navorsing 'n positiewe ervaring te maak.
- Dankie aan al die kinders wat vreesloos deelgeneem het en bereid was om so braaf oor hulle monsters te gesels.
- Ek waardeer my kollegas, veral Johnny, Sheila, Astrid en Munita se hulp met klasgee tydens krisistye en ook julle aanmoediging op die regte tye.
- Marieanna, Henry en Edwin vir die hulp met die statistiese verwerkings, tegniese - en taalversorging.

OPGEDRA AAN

Leon

Waar begin ek om dankie te sê vir jou optimisme, inspirasie, eiesoortige humor en onvoorwaardelike ondersteuning die afgelope 25 jaar..... Ek is diep dankbaar vir jou liefde en geloof in my om geleenthede te gee waardeur ek soveel onverdiende vreugde uit ons gesin en die Sielkunde kan put.

Jean-Maré en Christine

Baie dankie vir julle geloof in dié ma en alles wat ek van julle kon leer van die Sielkunde die oortuiging dat 'n mens kan kies om te kies, Christine en alles in die lewe, wat 'n geskenk op sigself is, kan probeer, Jean-Maré

Jul liefde en menswees is 'n inspirasie.

LIST OF CONTENTS

CONTENTS	PAGE
Declaration	ii
Abstract	iii
Opsomming	v
Acknowledgement of financial assistance	vii
List of Tables	xvi
List of Figures	xx
Chapter 1: Introduction, motivation for and aims of the study	1
1.1 Introduction	1
1.2 Motivation for the study	3
1.3 Research problem and aims of the study	5
1.4 Organisation of the dissertation	5
1.5 Chapter summary	7
Chapter 2: Defining key concepts and terms	8
2.1 Defining preschool children	8
2.2 Contextualising the South African preschool child	8
2.3 Defining expressed fears in preschool children	9
2.4 Defining coping mechanisms and perceived efficacy in preschool children	12
2.5 Defining the independent variables	14
2.5.1 Gender	14
2.5.2 Culture	14
2.5.3 Socio-economic status	15
2.5.4 Community violence risk	16
2.6 Exclusion criteria	16
2.7 Chapter summary	16

Chapter 3: A review of the relevant psychological literature: fears and coping mechanisms in early childhood	18
3.1 Content and number of fears in early childhood	18
3.1.1 Gender differences in fear content and number	32
3.1.2 Cultural group differences in fear content and number	35
3.1.3 Socio-economic status differences in fear content and number	41
3.1.4 Community violence risk differences in fear content and number	43
3.1.5 Conclusion	43
3.2 Coping mechanisms and perceived efficacy in early childhood	44
3.2.1 Gender differences in coping mechanisms and perceived efficacy	53
3.2.2 Cultural group differences in coping mechanisms and perceived efficacy	53
3.2.3 SES differences in coping mechanisms and perceived efficacy	54
3.2.4 Community violence risk comparisons in coping mechanisms and perceived efficacy	54
3.2.5 Conclusion	56
3.3 Chapter summary	56
Chapter 4: Theoretical framework	57
4.1 Ecological systems theory	57
4.1.1 Conclusion	61
4.2 Psychodynamic perspective	61
4.2.1 Conclusion	66
4.3 Social-learning perspective	66
4.3.1 Conclusion	70
4.4 Cognitive developmental perspective	71
4.4.1 Conclusion	72
4.5 Summary and conclusion	73

Chapter 5: Methodology	74
5.1 Introduction	74
5.2 Research design	74
5.3 Participants	77
5.4 Measuring instruments	91
5.4.1 Overview of assessment strategies and tools	91
5.4.2 The measuring instruments used	93
5.4.2.1 Goodenough – Harris Drawing Test (DAM)	93
5.4.2.2 Semi-structured interview	96
5.4.2.3 Drawings of fear	99
5.4.2.4 Biographical questionnaire and parental report	101
5.5 Research procedures	101
5.6 Data analysis	102
5.7 Related matters and arrangements	102
5.7.1 Ethics	102
5.7.2 Consultation	104
5.8 Summary	105
Chapter 6: Results	106
6.1 Content and number of expressed fears	106
6.1.1 Content and number of expressed fears for all participants	106
6.1.2 Content and number of expressed fears with regard to gender distribution	111
6.1.3 Content and number of expressed fears with regard to cultural distribution	114

6.1.4	Content and number of expressed fears with regard to socio-economic status distribution	119
6.1.5	Content and number of expressed fears with regard to community violence risk comparison distribution	123
6.1.6	Content and number of expressed fears with regard to parental perception	127
6.2	Coping mechanisms and perceived efficacy	129
6.2.1	Coping mechanisms and perceived efficacy for all participants	129
6.2.2	Coping mechanisms and perceived efficacy with regard to gender distribution	130
6.2.3	Coping mechanisms and perceived efficacy with regard to cultural distribution	132
6.2.4	Coping mechanisms and perceived efficacy with regard to socio-economic status distribution	135
6.2.5	Coping mechanisms and perceived efficacy with regard to community violence comparisons	139
6.2.6	Parents' perception of their children's coping mechanisms and perceived efficacy	142
6.2.7	Coping mechanisms and perceived efficacy in relation to certain frequently expressed fears	143
Chapter 7: Discussion		147
7.1	Content and number of expressed fears	147
7.1.1	Content and number of expressed fears for all participants	147
7.1.2	Content and number of expressed fears with regard to gender	

distribution	152
7.1.3 Content and number of expressed fears with regard to cultural distribution	153
7.1.4 Content and number of expressed fears with regard to SES distribution	156
7.1.5 Content and number of expressed fears with regard to community violence risk distribution	157
7.1.6 Content and number of expressed fears with regard to parental perception	160
7.1.7 Conclusion on content and number of expressed fears	161
7.2 Coping mechanisms and perceived efficacy	163
7.2.1 Coping mechanisms and perceived efficacy for all participants	164
7.2.2 Coping mechanisms and perceived efficacy with regard to gender distribution	165
7.2.3 Coping mechanisms and perceived efficacy with regard to cultural distribution	166
7.2.4 Coping mechanisms and perceived efficacy with regard to SES distribution	166
7.2.5 Coping mechanisms and perceived efficacy with regard to community violence risk distribution	167
7.2.6 Coping mechanisms and perceived efficacy with regard to parental perception	168
7.2.7 Frequently utilized coping mechanisms, perceived efficacy, and fear categories	168
7.2.8 Conclusion on coping mechanisms and perceived efficacy	169

Chapter 8: Summary of findings, recommendations and critical review	72
8.1 Main findings	172
8.1.1 Findings with regard to content and number of expressed fears	172
8.1.1.1 Findings relating to the existing body of knowledge	172
8.1.1.2 New findings	174
8.1.1.3 Implications for the South African context	175
8.1.2 Findings on coping mechanisms and perceived efficacy	177
8.1.2.1 Findings relating to the existing body of knowledge	178
8.1.2.2 New findings	178
8.1.2.3 Implications for the South African context	180
8.2 Recommendations	181
8.3 A critical review of the study	182
8.3.1 Aspects of the study that the researcher found challenging	182
8.3.2 Aspects of the study that added to its value	183
References	185
Addenda	203
A. Preschools: Information letter	203
B. Parents/guardians: Information letter	204
C. Parents/guardians: Permission	205
D. Parents/guardians: Biographical data of participant	208
E. Motivational talk format	210
F. Semi-structured interview	211
G. Department of Education, Western Cape: Permission letter	212
H. The Numerical Occupation Classification Scale	213

LIST OF TABLES	PAGE
Table 1: Frequencies of Fear Content for All Participants (N=152)	106
Table 2: Frequencies of Primary Fear Content for Participants with Regard to Gender Distribution	111
Table 3: Comparisons for the Gender Differences in Participants' Primary Fear Content: Mann-Whitney Test Results	112
Table 4: Frequencies of Total Fear Content for Participants with Regard to Gender Distribution	113
Table 5: Comparisons for the Gender Differences in Participants' Total Fear Content: Mann-Whitney Test Results	114
Table 6: Frequencies of Primary Fear Content for Participants with Regard to Cultural Distribution	115
Table 7: Comparisons for the Cultural Differences in Participants' Primary Fear Content: Kruskal-Wallis Test Results	116
Table 8: Frequencies Total Fear Content for Participants with Regard to Cultural Distribution	117
Table 9: Comparisons for the Cultural Differences in Participants' Total Fear Content: Kruskal-Wallis Test Results	118
Table 10: Frequencies of Primary Fear Content for Participants with Regard to SES Distribution	119
Table 11: Comparisons for the SES Differences in Participants' Primary Fear Content: Kruskal-Wallis Test Results	120

Table 12:	Frequencies of Total Fear Content for Participants with Regard to SES Distribution	121
Table 13:	Comparisons for the SES Differences in Participants' Total Fear Content: Kruskal-Wallis Test Results	122
Table 14:	Frequency in Primary Fear Content for Participants with Regard to Community Violence Risk Distribution	123
Table 15:	Comparisons for the Community Violence Risk Group Differences in Participants' Primary Fear Content: Kruskal-Wallis Test Results	124
Table 16:	Frequency in Percentages of Total Fear Content and Number for Participants with regard to Community Violence Risk Comparison Distribution	125
Table 17:	Comparisons for the Community Violence Risk Group Differences in Participants' Total Fear Content: Kruskal-Wallis Test Results	126
Table 18:	Frequency of Fear Contents of Participants with Regard to Parental Perception	127
Table 19:	Frequencies of Coping Mechanisms and Perceived Efficacy for All Participants (N=152)	129
Table 20:	Frequencies of Coping Mechanisms with Regard to Gender Distribution	130
Table 21:	Comparisons for the Gender Differences in Participants' Coping Mechanisms: Mann-Whitney Test results	131

Table 22:	Frequencies in Percentages of Participants' Perceived Efficacy with regard to Gender Distribution	132
Table 23:	Comparisons for the Gender Differences in Participants' Perceived Efficacy: Mann-Whitney Test Results	132
Table 24:	Frequencies of Coping Mechanisms with regard to Cultural Distribution	133
Table 25:	Comparisons for the Cultural Differences in Participants' Coping Mechanisms: Kruskal-Wallis Test Results	134
Table 26:	Frequencies of Participants' Perceived Efficacy with regard to Cultural Distribution	134
Table 27:	Comparisons for the Cultural Differences in Participants' Perceived Efficacy: Kruskal- Wallis Test Results	135
Table 28:	Frequencies of Participants' Coping Mechanisms with regard to SES	136
Table 29:	Comparisons for the SES differences in Participants' Coping Mechanisms: Kruskal-Wallis Test Results	137
Table 30:	Frequencies of Participants' Perceived Efficacy with regard to SES distribution	138
Table 31:	Comparisons of Participants' Perceived Efficacy with regard to SES Distribution: Kruskal Wallis Test Results	138
Table 32:	Frequencies of Participants' Coping Mechanisms with regard to Community Violence Comparisons	139

Table 33:	Comparisons for the Community Violence Differences in Participants' Coping Mechanisms: Kruskal-Wallis Test Results	140
Table 34:	Frequencies of Participants' Perceived Efficacy with regard to Community Violence Comparisons	141
Table 35:	Comparisons for the Community Violence Differences in Participants' Perceived Efficacy: Kruskal-Wallis Test Results	141
Table 36:	Frequencies of Parents' Perception of Coping Mechanisms and Perceived Efficacy for All Participants	142
Table 37:	Frequencies of Coping Mechanisms and Perceived Efficacy Related to Fear Category: Wild animals	143
Table 38:	Frequencies of Coping Mechanisms and Perceived Efficacy Related to Fear Category: Real People	144
Table 39:	Frequencies of Coping Mechanisms and Perceived Efficacy Related to Fear Category: Fantasy People	145
Table 40:	Frequencies of Coping Mechanisms and Perceived Efficacy Related to Fear Category: Dark, Night, Bad Dreams	145

LIST OF FIGURES	PAGE
Figure 5.1: Chronological age distribution of participants	80
Figure 5.2: Gender distribution of participants	81
Figure 5.3: Cultural distribution	82
Figure 5.4: Mothers' occupation	83
Figure 5.5: Fathers' occupation	84
Figure 5.6: Mothers' education	85
Figure 5.7: Fathers' education	86
Figure 5.8: Socio-economic status estimated for mothers	87
Figure 5.9: Socio-economic status estimated for fathers	88
Figure 5.10: SES according to highest combination of occupation and ducation	89
Figure 5.11: Parental composition	90
Figure 5.12: DAM standard scores distribution	95
Figure 5.13: Participants' indications of origin of fears	98
Figure 5.14: Participants' drawings' compliance with primary fears.	100

CHAPTER 1

INTRODUCTION, MOTIVATION FOR AND AIMS OF THE STUDY

Chapter 1 consists of an introduction to fear and coping research in early childhood, the motivation for the present study, as well as a statement of the research problem and aims. Finally, the organisation of the dissertation will be discussed.

1.1 Introduction

Fear is an integral part of normal human functioning. Its first observable emergence is a reflexive response to loud noises or a sudden loss of support by infants, as reported as early as 1920 by Watson and Raynor (in Lefrancois, 2001). After this the six-month-old's typical fear of strangers and later on the six-years old's equally frequently expressed monster-under-the-bed fantasy fear remain, although changing in content, throughout a person's life stages until old age.

When the six-year-old's monster, however, becomes an overpowering reality for her*, and equally untamable, and becomes the centre of the family's focus, disrupting everyday functioning, it is considered to be unhealthy and detrimental to the child's development. Since monsters are part and parcel of real life, it is important for caretakers and professionals not only to know what they are, but also to know how young children cope with their monsters, thereby addressing potential problems and contributing meaningfully towards the well-being and development of the children in their care.

It is no wonder, therefore, that one of the foci of fear research of the twentieth century was aimed at establishing the content of normative fears for different age groups in order to predict "normal" as well as "abnormal" fear behaviour. The topics of fear and the role of hereditary and environmental factors, and whether there are innate, species-

* The feminine form of pronouns refers throughout to both sexes, unless specifically indicated otherwise.

specific fears or whether this is a learned phenomenon have been studied by various professional groups, such as neuroscientists, ethologists and psychologists. Yet there still are no conclusive answers and they remain debatable topics. According to LaFreniere (2000), the answer to all the above questions is most probably "Yes". The young child, especially, is highly dependent on interaction with her daily environment and it is clear that the child's fear phenomenon and coping mechanisms cannot be understood without understanding the child's world.

In order to stimulate and develop human potential, it is good policy to start with the young, preferably as young as early childhood. There appears to be a need for research on the young South African child of between the vulnerable ages of five and seven years, who are on the point of entering the formal schooling system. Each of the above variables poses its own challenges. Lack of research on children of this age group could be ascribed to factors such as the young child who is not yet able to read and complete questionnaires, or who is not prepared to be questioned by child-unfriendly intruders. The research process with young children is complicated by the fact that it consumes time, money and energy.

The importance of listening to young children's own voices on their developmental issues has a long history of being ignored; they are thus reduced to a silent minority, being spoken for by well-meaning adults such as parents, teachers and other professionals. Davel (2000), in her introductory quotation on the status of children in South African Private Law states that the stage has been reached where it is commonly acknowledged that children form an important interest group in society. According to Van Bueren (in Davel, 2000), ratification of The United Nations Convention on the Rights of the Child has initiated a potential evolutionary revolution whereby, amongst other things, communities are required to develop a culture of listening to children and thus changing their images of childhood. In order to have access to the world of children, it is of vital importance to hear what they say in their own words; thus the motivation for this study is based on the collection of data in a primarily qualitative way.

The multi-cultural context of South Africa also poses unique challenges to the researcher. With the "lighter label" of being born in a post-apartheid South Africa, the

present generation still has to deal with social transformation and issues such as the acknowledgement of eleven official languages and the impact of this on mother tongue education; the sometimes overwhelming influence of poverty and hardship; and the extremely high levels of crime and violence. In view of this context, it becomes even more important to understand the child's perceptions, fears and coping mechanisms in response to these "adult" world problems.

This study therefore aims at understanding the content and number of the fears, as well as the coping mechanisms and the perceived efficacy in response to these fears, as expressed by a sample of normal five- to seven-year-old preschoolers in the South African context.

1.2. Motivation for the study

From a scientific point of view the motivation for the study was the need to acquire a better psychological understanding of the preschool child's world and her perception of it. It is of fundamental importance to incorporate the child's point of view into caring systems, professional practice and social policies (Dibrell & Yamamoto, 1986) before any meaningful contributions can be made towards developing and optimising human potential. In this regard Duffy and Wong (1996) state that the basis of effective prevention or intervention strategies which promote social change is explorative or descriptive scientific research.

The preschool child is assumed to be ready to enter the formal schooling system in the ensuing year. Du Toit and Kruger (1991) warn against the negative implications of unnecessary emotional stress caused by fear and anxiety in the preschool child.

A knowledge of children's normative fears and coping strategies has the potential to assist teachers/caregivers and parents/guardians in their understanding of children in their care and can thus contribute towards mediating potentially stressful experiences of children by teaching them developmentally appropriate effective coping skills.

Focussing on the target age group is also relevant in that, as was already evident from Jersild and Holmes' (1935a; 1935b) classic study on fears, children tend to develop the greatest number of fears during the preschool and early school years. These normal fears are usually transient and not of sufficient magnitude to be problematic. Some fears, however, cause considerable personal distress and can interfere with family functioning. According to Marks (1987), there are two fears in adults which have usually persisted since childhood: the first is of blood injury, the second of animals, which mostly begins before age 7 (p. 689). There is also growing evidence that anxiety disorders (some of which are fear related) in childhood and adolescence are significant and warrant more attention from researchers and clinicians as they are, according to various studies, the most common form of psychological distress reported by children and adolescents and are also associated with various other psychosocial impairments (Dadds, Spence, Holland, Barrett & Laurens, 1997). According to Duncan and Rock (1997), Hickson and Kriegler (1991) and Robertson (1988), the fact that South African children have been exposed to inordinately high levels of violence is indisputable and the psychological effects of such an exposure remain a debatable topic. Early intervention and prevention programmes aimed at this target group in community settings have the potential to be more effective in reducing the overall incidence of childhood disorders, as well as of certain adult disorders and their costs to the community.

The social relevance of this study in the South African context is parallel to that of the Reconstruction and Development Programme's (African National Congress, 1994) call to meet the developmental needs of children as paramount throughout all programmes, as well as the demand in the Draft White Paper (1996) for Social Welfare, section 45, to acknowledge and foster children's physical, mental, emotional, moral and social development.

A search of the available databases has revealed that, apart from the pilot study by Martalas (1999) on the expressed fears of preschool children in the Atlantic Seaboard Area in Cape Town, as well as two fear-related studies of preschoolers in a low to middle socio-economic status area, by Pretorius (2000) and Keller (2001), no similar studies have been done in South Africa. The findings of an exploratory study will

therefore not only be useful in directing further research, but will also contribute towards the development of effective and efficient intervention strategies in the diversity of the Western Cape preschool child population.

1.3. Research problem and aims of the study

The *primary aims* of the study are:

- to determine the content and number of expressed fears of a selected group of preschool children in the Stellenbosch region; and
- to determine the coping mechanisms and perceived efficacy in response to the expressed fears of the selected group of preschool children in the Stellenbosch region.

The *secondary aims* of the study are:

- to establish whether there are differences in the content and number of expressed fears of the selected group of preschool children in the Stellenbosch region, and if so, with which biographical variables they correlate; and
- to establish whether there are differences in the coping mechanisms and perceived efficacy in response to the expressed fears amongst preschool children in the Stellenbosch region, and if so, with which biographical variables they correlate.

1.4 Organisation of the dissertation

Chapter 1 provides the introduction of the dissertation. The motivation for the research, based on its scientific and social relevance in the South African context, is stated. Accordingly, the broad aims of the research with respect to the primary and secondary foci are outlined. The organisation of the dissertation is outlined.

In **Chapter 2** key concepts and terms pertaining to preschool children, the South African preschool child, expressed fears as well as coping mechanisms and perceived efficacy will be defined. The divide in the conceptualisation and terminology of fear and anxiety as interrelated constructs will be highlighted. The four independent variables, namely gender, culture, socio-economic status and community violence risk, will be described.

Chapter 3 provides the literature review on research findings relating to fears, as well as coping and perceived efficacy in early childhood. Firstly, research pertaining to the content and number of fears will be summarised and discussed in detail. Accordingly, research on coping with fear, including perceived efficacy in early childhood, will be addressed. The literature on the four independent variables will be reviewed and discussed in relation to the following: gender, culture, socio-economic status and community comparisons regarding levels of violence risks.

In **Chapter 4** a theoretical framework for the study is outlined. Ecological systems theory provides an extensive description of the context in which development proceeds and thus offers a meta-theoretical framework for contextualising the preschooler's world and experience of fears and coping mechanisms. Within this broad perspective other relevant developmental theories, such as mainly the psychodynamic perspective, social-learning theory and cognitive developmental perspective, will also be incorporated and discussed.

The methodology that was used to obtain and analyse the data for the research will be outlined and discussed in **Chapter 5**, including the introduction, the research design, and selection of the participants. The measuring instruments are then discussed, starting off with an overview of assessment tools and strategies, followed by a discussion of the instruments, the Goodenough-Harris Drawing Test, the Semi-structured interview, Drawings of fears, as well as Biographical data obtained, as used in order of application during the research. Accordingly, research procedures, data analysis and related manners concerning ethics and consultation will be dealt with.

In **Chapter 6** the quantitative results will be reported according to the preschoolers' content and numbers of fears as the one focus, and the coping mechanisms and

perceived efficacy as the other focus of the research. References will be made to the qualitative results with regard to a selection of transcriptions and drawings compiled in the Addenda.

The discussion of the results will follow in **Chapter 7**, broadly divided into the two foci of the research, namely the content and number of the preschoolers expressed fears, on the one hand, and the coping mechanisms and perceived efficacy in response to their fears, on the other hand.

Chapter 8 provides a summary of the findings, recommendations, a critical review of the study, as well as reflection on the value of the study.

1.5 Chapter summary

In Chapter 1 four aspects of the dissertation were addressed, namely an introduction on the relevance of studying fear and coping research in early childhood; the motivation for the present study; statement of the research problem and, finally, an overview of the organisation of the dissertation.

In the following chapter the key concepts and terms pertaining to expressed fears, coping mechanisms and perceived self-efficacy will be addressed.

CHAPTER 2

DEFINING KEY CONCEPTS AND TERMS

In this chapter the central concepts concerning preschool children, the context of the South African preschool child, expressed fears, and coping mechanisms and perceived efficacy will be defined. In addition, the concepts relevant to the four independent variables, namely gender, culture, socio-economic status and community violence risk, as well as the exclusion criteria, will be clarified,

2.1 Defining preschool children

Early childhood, also sometimes referred to as the preschool period, is known as the period from approximately the ages of two to six (Louw, Van Ede & Louw, 1998). For the purpose of this study, however, the term “preschool children” refers only to children in the year before they probably enter the formal schooling system. The target age group of the study, therefore, was children of between five and seven years old, attending pre-primary or other day-care facilities in one of the eight areas in the Stellenbosch region (see Addendum A).

2.2 Contextualising the South African preschool child

The importance of children as the most vulnerable citizens in any society and representing one of society’s greatest treasures was emphasised by former President Mandela in his acceptance speech for the Nobel Peace Prize on 10 December 1993; this is probably the best account of South Africa’s vision for its youth as the future of the country (Mandela, 1993). Even though there are better opportunities for all children, irrespective of gender, race, culture, religion, etc., protected within a first world Constitution, contemporary South Africa is still struggling with a reputation of having a culture of violence as a consequence of the turmoil of the political and socio-economic inequalities of the past.

The present study was conducted in the Stellenbosch area, a town situated in the Western Cape, one of the nine provinces in South Africa. The language preferences in the Western Cape are Afrikaans, English and Xhosa – three of the eleven official languages in the country.

Statistics obtained from an annual survey (Mackrill, L. personal communication, August 18, 2003) of the Western Cape Education Department for the year 2000 show a demographic picture of 2751 children in the age group 5 to 7 years, with 780 (28.35%) of the children enrolled at a pre-primary or Grade R in the Stellenbosch area. For the Western Cape Province, statistics show a total number of 145 664 children in the age group 5 to 7 years, with 35 755 (24.55%) of the children enrolled at a pre-primary or Grade R class.

Taking into account that 44.22% of the total South African population is under the age of 18, with the largest age cohorts being between 5 and 9 years, according to the 1996 census data (in Biersteker & Robinson, 2000), the time spent in developing a greater understanding and appreciation of this special population should be a worthwhile investment for the future.

2.3 Defining expressed fears in preschool children

There are many different definitions of the term fear, as is evident from the literature. However, fear is mostly defined as a normal emotional response to a perceived threat that may be real or imagined (Morris & Kratochwill, 1983; Rachman, 1998; Sarafino, 1986).

For the purpose of this study the concept of fear can be considered as referring to developmentally appropriate reactions to either objective or real sources (such as a fear of dentists stemming from the pain associated with a tooth extraction) or subjective or imagined sources (such as fear of the dark) of circumscribed threat (Eisen & Kearney, 1995).

According to Gullone and King (1992), the expression of fear is an individualistic one and is influenced by many factors such as past experiences, situational stimuli, temperament, and physical and cognitive development. Eisen and Kearney (1995) conclude that a child's fear reaction may develop either from certain experiences, which may be traumatic (such as a car accident), a vicarious encounter (such as observing someone else's fear during a storm), or in the absence of a clear antecedent event (such as being afraid of the dark and refusing to sleep alone due to fears of imaginary people).

The term fear is sometimes used interchangeably with the terms anxiety or phobia, as distinguishing among the three in actual practice is often difficult. On theoretical grounds the following differences can be highlighted.

It is important to distinguish between fear as a normal reaction to threatening stimuli and phobia as an excessive, persistent and unadaptive fear response (Van der Zanden, 1997). A very typical fear situation may be the following:

Tonight was the third evening in a row that 5-year-old Hillary called from her bedroom after the lights had been turned out. 'Mommy, Daddy, monsters are in my room again.' Already, Hillary's parents had removed the animal pictures from her wall and the mobile that hung from the ceiling. Still, monsters lurked under the bed and in the closet. Young children's vivid imaginations combined with their difficulty in separating appearance from reality make fears common in early childhood. (Berk, 1996, p. 360)

In the South African context the following might, however, be just as typical:

John, a six-year-old boy from a middle-class family, was brought to a local Child Guidance Clinic by his parents because he had suddenly become obsessed with death and had started refusing to attend school. His greatest fear was that his parents might be killed during his absence. This morbid obsession is frequently encountered among young children who have been exposed to traumatic events, such as the death or injury of a

relative or pet. In John's case, however, no such traumatic event could be identified in the life of his family or close friends. Moreover, according to John's parents, their family enjoyed very supportive and caring relationships. During psychotherapy it transpired that John's family normally watched the evening news on television together. When the current state of political violence was featured, John's parents would often discuss their anxiety about it with each other. From her discussions with John, the psychotherapist gathered that John assimilated his parents' fears and concerns and came to the conclusion that nobody was secure any more – everyone was going to die. John ultimately had to undergo intensive psychotherapy to solve his phobia. (Duncan & Rock, in Duncan & Rock, 1997, p.145)

According to Morris and Kratochwill (1991), phobias can be distinguished from fears in that phobias are in general more persistent, disproportionate to the demands of the situation, and inaccessible to reasoning than fears. The above authors illustrate the difference between fears of specific objects, such as snakes, on the one hand, where the child's daily functioning is not impaired, and phobias, on the other hand, which usually result in greater avoidance of certain situations and interference with psychosocial functioning. They stated that the extent to which daily functioning is impaired depends on the frequency with which the child is confronted with the phobia-related object. Degree of interference thus becomes a key factor in differentiating fear from phobia (Eisen & Kearney, 1995).

Anxiety refers to a more diffuse, unfocussed emotional state arising from a vague or unspecific source. According to Rachman (1998), the most intense and irrational fears which persist are thus classified as phobias or anxiety disorders. Some authors (Izard, 1977) regard fear as the dominant emotion of anxiety.

There are other researchers who are of the opinion that, since both fear and anxiety cause psychological and physical stress, the two phenomena are similar rather than different (Van Eeden, 1989). It is particularly difficult to distinguish between them in practice, since they both show a complex pattern of psychological, physiological and

behavioural reactions or expressions to a real or perceived threat (Rachman, 1977; Reed, Carter & Miller, 1992; Sarafino, 1986).

For the purpose of the present study the concept of fear will be operationalised and distinguished from anxiety on the basis that fear is a normal reaction caused by a specific object or situation (which is identifiable by the participants), in contrast to anxiety, which refers to an enduring response to a vague, unspecific source (operationalised as not being identifiable by the participants).

The **content of expressed fears** are described in terms of 15 categories based on already existing categories (Martalas, 1999), as well as additional newly created categories. For the purpose of the study a distinction is made between *primary fears* and *additional fears*. The criteria for identifying primary fears are threefold, in that refers to the spontaneous first fear expressed as a response to the question "*What are you scared of ?*"; or the content referred to in the participant's drawing; or, if more than one fear was expressed spontaneously, the most prominent fear.

The **number of fears** refer to the sum of both the primary and additional fear(s) being expressed during the investigation.

2.4 Defining coping mechanisms and perceived efficacy in preschool children

Compas, Connor-Smith, Saltzman, Thomsen and Wadsworth (2001) postulate that much of the research on coping in children and adolescence has proceeded without a clear definition of the concept of coping, resulting in a confusion in approaches to measurement, difficulties in comparing findings across research, as well as in documenting differences in coping as a function of certain variables such as age, gender and other factors in individual differences. According to the above authors, coping definitions range from those derived from adult definitions of coping to the more childhood- and adolescent-oriented conceptualisations of coping. A frequently cited example from the first category is the definition by Lazarus and Folkman (1984) in which they conceptualise coping as "constantly changing cognitive and behavioural efforts to

manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of the person” (p. 141).

Coping definitions which are more childhood- and adolescent-oriented include, amongst others, the one by Band and Weisz (1988). Although their model shows similarities with that of Lazarus and Folkman’s model concerning the goal directedness and motivational nature of coping (Compas et al., 2001), there are differences between them with regard to what the coping efforts are directed towards. Band and Weisz (1988) found the *primary/secondary control model* was effective to describe coping behaviour in young children. They report that “even children as young as 6 years are sufficiently aware of stress and coping in their own lives to report conditions and events that they find stressful, describe their own efforts to cope, and evaluate the efficacy of those efforts” (p. 251). In their data-processing the coping approaches were coded according to three broad categories, namely *primary control* (coping efforts intended to influence events or conditions), *secondary control* (coping efforts directed towards maximising one’s fit to current conditions) and *relinquished control* (no coping attempt), and they complemented these three categories with a refined descriptive set of categories.

For the purposes of the present study the researcher applied the *primary/secondary control model* in analysing the coping mechanisms of the participants in order to better understand the developmental acquisition of coping strategies, as well as the processes associated with effective and ineffective coping in preschool children.

The **Primary Control Coping Mechanism** consists of the following four subdivisions: *Direct problem solving*, *Problem-focused crying*, *Problem-focused aggression* and *Problem-focused avoidance*.

The following five subdivisions were used to describe the **Secondary Control Coping Mechanism**: *Social/Spiritual support*, *Emotion-focused crying*, *Emotion-focused aggression*, *Cognitive avoidance*, *Pure cognition*.

Expanding on the third broad strategy, namely **Relinquished Control** (Band & Weisz, 1988), an additional new category, namely *Don’t know*, was added by the researcher.

Definitions of the participants' responses with regard to coping strategies used and their perceived efficacy were based on a study by Tremewan and Strongman (1991). Apart from the **Effective/Ineffective Coping** categories, a new category, namely **Uncertain Coping**, was added by the researcher.

For the purpose of this study the terms "mechanisms" and "strategies" are used interchangeably as referring to the same phenomena.

2.5 Defining the independent variables

2.5.1 Gender

The 152 participants were compared with regard to gender distribution: 72 girls and 80 boys.

2.5.2 Culture

According to Slee and Cross (1989), children's fears reflect something of their understanding of the world and their place in it. The latter is also related to the context in which the child lives and as such is affected by variables such as ethnicity and the culture in which the child lives. It is important to recognise that there are many ethnic and cultural varieties of childhood in South Africa, which will probably be reflected in the results of the study. The emphasis of the study is to focus on explaining differences, if found, within ethnic groups, but also between groups in order for the different communities to benefit from the results.

The effects of apartheid continue to be experienced by communities throughout South Africa and ethnicity remains a salient dimension of differences in this country. According to Bam and Visser (undated), the issue of terminology is potentially explosive in that "the idea of groups has become deeply embedded in the South African consciousness" (p. 134). It is important to bear in mind that, according to the above authors, "all ethnic

categories are somewhat arbitrary in the sense of being socially constructed and not phenomena of nature” (p. 138).

Against this background, this researcher has therefore used the categories that were applied during the apartheid era in order to call attention to present inequities amongst communities and in this way account for differences in the responses amongst groups. The terms* “white”, “coloured” and “black” are therefore used not as a means to label people according to a discredited system of classification, but to acknowledge differences that continue to exist as a consequence of South Africa’s racialised past.

For this purpose the 152 participants were divided according to ethnic/cultural group membership into three groups, namely 48 white, 59 coloured and 45 black participants. These three groups are representative of the main ethnic/cultural groups in the Western Cape, South Africa.

2.5.3 Socio-economic status (SES)

Socio-economic status was estimated for each participant as a composite score derived according to an adapted formula used initially by Riordan (in Tennant, 1986). This SES index took into account the total score based on the classification of the breadwinner’s education on a 9-point scale (see Addendum H) and the occupation of the father or guardian, on a 7-point scale (see Addendum H). The present researcher adapted this formula to take into account the *highest* level of education, as well as the *highest* occupation in the *household* (irrespective of whether it was the mother’s or father’s). As the classification index by Riordan (in Tennant, 1986) was used in recent South African studies within the same geographic area of the Western Cape by Vorster and Brand (1995) and Dunn (2001), it was found to be a useful operational classification method to provide the researcher with a comparable estimated SES index for the present study.

* The use of the terms “white”, “coloured” and “black” participants could be viewed as controversial. The terms will be used descriptively and in the context as explained.

A distribution of the 152 participants according to three groups was made, namely 51 participants in a low SES group, 32 participants in a middle SES and 69 in the upper SES group.

2.5.4 Community violence risk

For the purpose of this study a comparison among low-risk, medium-risk and high-risk community violence areas within the Stellenbosch region was made. The areas were distinguished on the basis of statistics obtained from the South African Police Centre for the Analysis and Interpretation of Crime Information. The violent crime categories that were taken into account included assault, robbery, attempted robbery, arson, rape, attempted rape, murder, attempted murder, abduction, and rioting. Due to restriction on the announcement of crime-related information at the time, it was negotiated not to publish any further detailed data.

The distribution of the participants was as follows: 81 participants from the low-risk, 44 participants from the medium-risk and 25 from the high-risk areas.

2.6 Exclusion criteria

Broad screening exclusion criteria were any known pathology, as well as extremes regarding mental age, such as mental retardation. Three other potentially stressful situations that may psychologically impact on the preschool child (Louw, et al., 1998), namely recent divorce, separation or remarriage of the parents, recent hospitalisation, as well as recently moving home, also served as exclusion criteria. The term "recent" is defined as a period within three months prior to the intervention. This information was collaterally obtained from the teachers/caregivers.

2.7 Chapter summary

In this chapter, key concepts and terms pertaining to preschool children, the South African preschool child, expressed fears as well as coping mechanisms and perceived efficacy were defined. The divide in the conceptualisation and terminology of fear and

anxiety as interrelated constructs were highlighted. The four independent variables, namely gender, culture, socio-economic status and community violence risk, were also described.

In the next chapter, the literature review on research findings relating to fears, as well as coping and perceived efficacy in early childhood will be discussed.

CHAPTER 3

A REVIEW OF THE RELEVANT PSYCHOLOGICAL LITERATURE: FEARS AND COPING MECHANISMS IN EARLY CHILDHOOD

Chapter 3 provides the literature review on research findings relating to fears and coping in early childhood. Firstly, research pertaining to the content and number of fears is summarised and discussed in detail. Accordingly, research on coping with fear, including perceived efficacy in early childhood, is addressed. Literature on the four independent variables is reviewed and discussed in relation to the following: gender, culture, socio-economic status, as well as community comparisons regarding levels of violence risks.

3.1 Content and number of fears in early childhood

Gullone (2000) concludes in her review of a century's research into the developmental patterns of normal fears in children that fear as a phenomenon has been extensively researched. Over 100 investigations had already been undertaken, starting with the documented research by Hall in 1897 (in Gullone, 2000) and escalating rapidly, especially in the 1980s and still continuing to do so. In reviewing these investigations, concerned with the worries and fears of youth, **certain issues** seemed to be prominent in research on normal fears.

Firstly, Gullone (2000) noted the importance of distinguishing normal fears from pathological fears, because the main focus of research into normal fear, as cited in her earlier work (Gullone, 1996) has been to identify developmental patterns, intensity and duration as indicators against which to identify pathological fears. The literature is not always clear in identifying what "normal fears" entail. In this regard the following points or criteria stated by Miller, Barrett and Hampe (1974) seemed to be acknowledged by most researchers: it is important to distinguish whether the fear is age- or stage-specific; persists over an extended period of time and/or significantly interferes with everyday functioning. Ollendick, Hagopian and King (1997), also emphasised that almost all

children experience some degree of fear in their development and, although “such fears vary in intensity and duration, they tend to be mild, age-specific and transitory” (p. 201). Findings from Hampe, Noble, Miller and Barrett (1973) suggest that, with or without treatment, most children overcome their fears within 2 years. Graziano, DeGiovanni and Garcia (1979) suggested that in terms of the intensity and duration criteria, as mentioned, clinical fears could be identified as “those with a duration of over two years or an intensity that is debilitating to the client’s routine life-style” (p. 805). Simultaneously, as reported in a review by Costello and Angold dated 1995 (in Ollendick et al., 1997) several epidemiological studies on anxiety disorders, including specific phobias, have been conducted which estimate the presence of pathology in community samples as ranging from 5.7 to 17.7 % in children.

Ferrari (1986) points out that in viewing the role of fear in normal development, it is important to “strike a delicate balance in terms of what level of intensity and qualitative features of fear we might assume are positive versus negative influences on the development of children” (p. 77). As emphasised by Graziano et al. (1979), the positive side of fear can be seen in the way that it is utilised as helping children to cope successfully with problems. Fear can thus be translated as “a stressor in modifying a child’s strategies to cope” (Ferrari, 1986, p. 77). Hence the absence of realistic fears in certain situations, such as “fear” of crossing a busy street alone; the inappropriate attentions of strangers, or fear of potentially dangerous animals could be seen as maladaptive. The minuses of fears, as referred to by Ferrari (1986), are more intricate to identify than the positive aspects. This could be ascribed to the notion that the negative side of fear relates more to dimensions such as the intensity rather than the fear itself being present or not.

The question on whether fear has predictive value in determining later pathology still remains a challenge to researchers in the field. As noted by Ferrari (1986), ideally longitudinal studies to gather data on the continuity of childhood fears’ behavioural expression into adulthood would produce the most meaningful answers. Unfortunately, data pertaining to the continuity of fears seemed to be mainly gathered from adults having a known problem and reconstructing data from their past. Such a study on the fear history of 139 adult phobic patients was conducted in 1966 by Marks and Gelder (in

Ferrari, 1986). Their results show that certain types of simple adult phobias pertaining to “extreme fears of animals and insects, presented the most continuous course into adulthood and had the earliest onset ages”, usually before age 5 (cited in Ferrari, 1986, p. 78).

Some research addressed fear continuity issues by means of follow-up studies or case reports, such as those by Hampe et al. (1973), whose findings show that children who did not overcome their fears within two years experienced problems in adulthood. Results of a longitudinal study following preschoolers through junior high school by Fischer, Rolf, Hasazi and Cummings (1984) show positive correlations in internalising, fearful-anxious behaviour. Results of an adolescent sample study by Bamber (1974) show a relation between fears and neuroticism.

Ferrari (1986) noted that Erikson, in his much cited work on *Childhood and Society* (1963), “suggested a clear continuity between child fears and the later presentation of fear and anxiety disorder in adulthood, in his discussion of ‘infantile fears’ as the precursors of ‘irrational anxieties entertained by adults’”(p. 78).

Gullone (2000) also noted that, apart from focusing on the identification of normal fears, researchers paid pertinent attention to differences in the content of these fears which can be predicted with regard to certain demographic or contextual factors such as age, gender, geographical location and socio-economic status (Graziano, et al., 1979; Gullone, 1996; King, Hamilton & Ollendick, 1988).

Another tendency that has emerged in recent years was an increase in cross-cultural and cross-national investigations. Gullone’s review also reveals an increased sophistication with regard to assessment strategies and tools used for data collection (Gullone, 2000).

In reviewing the literature it became apparent that, although childhood fears (mainly referring to primary school going children) have been researched extensively, there still remains a shortage of research on early childhood fears. This seemed to be mainly ascribable to researchers being confronted with practical problems in assessing young

children, such as time constraints, as well as reading and language barriers (La Greca & Lemanek, 1996). Thus the usage of sophisticated, relatively easily administrable research methods, such as fear list investigations, were not viable options for building up substantial databases. As most studies with young children rely on time-consuming individual child-friendly interviews, the result is usually small sample-size groups. Although there are exceptions, such as the study by Slee and Cross (1989), in which the fears of 1243 Australian children and adolescents were assessed, including a relatively large sample of 379 children between the ages of 4 to 7 years, it appears from the literature that kindergarten sample groups usually consisted of fewer than 100 participants per study. Many of the results for the preschoolers are obtained from cross-sectional studies, resulting in relatively small databases for the specific younger age groups; they thus need to be interpreted cautiously, taken into account their limitations regarding generalisability.

The following studies serve as examples of the nature of these databases for the preschooler target group.

Maurer (1965) obtained verbatim fear data on the question "*What are the things to be afraid of?*" (p. 268) as an additional question immediately following administration of an intelligence scale for children from 20 children between the ages of 5 and 6 years; the total group size consisted of 112 children between the ages of 5 and 14 years. Bauer (1976), using similar methodology, studied the fears of 19 young children in kindergarten, 15 in 2nd Grade and 20 in 6th Grade by means of an open-ended approach by asking them to describe and draw their fears. Bowd (1983) interviewed 37 five-year-olds for a study on children's fears of animals, while Vandenberg (1993) assessed the fears of approximately the same size sample group (36) 4 to 6-year-olds. Stevenson-Hinde and Shouldice (1995) assessed a fairly big sample size of 70 second-born children, aged 4, 5 and 7 years (plus/minus 1 month) from Cambridge and surrounding villages in Great Britain as part of a longitudinal sample of 82 children when they were 2,5 years old to investigate fearful behaviour, fears and worries by means of questionnaires, interviews and behavioural observations. In the most recent documented study on early childhood fears Muris, Merckelbach and Luijten (2002) interviewed 88 young children between 4- and 7- year-old from the Netherlands as part

of a widespread age target group of 4-to 12-year-olds on the relationship between cognitive development and anxiety phenomena such as fears, worries and scary dreams.

In terms of the content of fears, the literature shows a variety of ways of reporting on this; this usually depends on the results of the assessment tools used to establish the content of fears. With young children various assessment tools have been used in previous research such as self-rating scales (used, for example, by Neal, Lilly & Zakis, 1993; Stevenson-Hinde & Shouldice 1995); parent/teacher reporting (Bouldin & Pratt, 1998; Draper & James, 1985); in vivo observations (Jersild & Holmes, 1935a); semi-projective play techniques (Lentz, 1985a; Stevenson-Hinde & Shouldice, 1995); semi-structured interviews with or without projection (Bauer, 1976; Maurer, 1965; Mooney, 1985; Vandenberg, 1993); ordinary projection techniques, such as the Children's Apperception Test (Yatt, 1996); or iconic representation of that which participants feared (Bauer, 1976; Keller, 2001; Martalas, 1999; Slee and Cross, 1989).

Martalas (1999) concludes that, apart from the open-ended question method, most other methods restrict the participants' responses. In this regard participants were either given options of what to report, such as in the self-rating scales; situations in which something could be feared, such as in the in vivo observations or semi-projective play technique or their parents'/teachers' view of their fears. These results therefore are also reflected in pre-established content categories, correlating with the content of the items being asked about. In contrast, the open-ended or semi-structured interview allows for the participants' unsolicited responses (Martalas, 1999). Although by using the latter methodology the content of expressed fears is also described in terms of categories based on already existing categories, additional categories can be added, as presented by the participants.

Seeing that the chosen methodology for the present study was based on semi-structured, open-ended interviewing of the preschoolers, an overview of prominent (more or less) comparable fear studies and the results pertaining to existing fear categories follows. The focus on the latter is also to provide background to the development of existing fear categories up to the present.

In their now acknowledged classic study Jersild, Markey and Jersild (in Jersild & Holmes, 1935a), investigated the reported fears of 400 children across different age groups between the ages of 5 and 15. A scheme of 18 different fear categories was developed to classify the children's fears, namely: (1) *bodily injury and physical danger*; (2) *animals*; (3) *bad people, robbers, etc.*; (4) *supernatural events and beings, mystery*; (5) *the dark, being alone, strange sights, deformities*; (6) *nightmares and apparitions*; (7) *scolding, guilt, failure*; (8) *loss of property*; (9) *illness, injury, death of relative*; (10) *loss of parent or other relative*; (11) *others injured, fighting*; (12) *startling events and noises* (13) *frightening gestures, noises, tales*; (14) *scary games* (15) *certain persons and objects* (16) *marriage* (17) *nothing*; (18) *don't know, can't remember* (in Draper & James, 1985, p. 148). From the 1933 study the researchers conclude that the younger children showed a higher incidence of *fear of animals* than did the older children; with boys expressing more frequent concern over *bodily injury* than the girls did. The girls, in contrast, reported more concerns about *darkness, loneliness, and strange sights and sounds* than the boys did.

In a cross-sectional in vivo study of exposure to fear-provoking stimuli in eight laboratory situations by Jersild and Holmes (1935b) the above-mentioned categorisation scheme was used to study fears in children between the ages of 2 and 5 years. The results indicated the highest over-all level of fear observed for animals consisting of a large dog and a snake. This fear was followed by fear of the dark; a fear of high boards (which correlated with a fear of danger of falling); strange people and, lastly, loud sounds (in Draper & James, 1985). Interestingly, Jersild and Holmes (1935b) found that the older preschoolers (age range 36 to 59 months) showed less fear of animals than the younger preschoolers (age range 24 to 35 months). They reported that fear of the dark and of being left alone were higher in the older preschoolers group (age range 36 to 47 months) than it was in the younger group (age range 24 to 35 months). Despite the study's limitations with regard to the cross-sectional methodology, the findings on the age-related decrease in most of the fears reported for young children were confirmed as reported almost 50 years later by Winer in 1982 (in Draper & James, 1985).

Draper and James (1985) re-examined the fears of young children from a university nursery setting by means of a longitudinal parent report between 1966 and 1981, using the same basic categories as Jersild et al. (in Jersild & Holmes, 1935a). They limited their reporting to six categories, namely (1) *animals*; (2) *supernatural beings*; (3) *the dark, being alone, and strange sights*; (4) *scolding, injury, and loss of parent*; (5) *startling events, and noises*; and (6) *certain persons and objects*. The results support the general developmental trend reported by earlier researchers. Apart from this, they also reported that *fears of the dark* and of *being alone* appear to be more frequent among young children than previously found.

Upon reviewing the literature, the present author found the comparison of the latter findings with the results of Jersild et al. (in Jersild & Holmes, 1935a) to be questionable. Although the same categorical scheme was used by both sets of researchers to classify the expressed fears, methodological problems arise when making deductions based on a comparison of children's fears as expressed by themselves with children's fears as reported by their parents.

For example, in a recent study by Keller (2001) on the expressed fears of 50 preschoolers, and comparing these with their parents' reports, it was found that the children's views contradicted the parents', while the latter's results confirmed comparable results by Draper and James (1985). According to Keller (2001), parents reported fears related to *dark/night* and *being alone*, while children participants reported only few fears in these categories. It should be noted, however, that Keller's study took into account socio-economic status as a variable, as all the children came from a lower- to middle-class socio-economic status area, while Draper and James had no measure of socio-economic status, other than that 29 of the sample group of 49 had at least one parent in an occupation that required a professional degree in a lower- to middle-class socio-economic status area, which means that they were more likely in an "economically advantaged group" (Draper & James, 1985, p. 149).

Martalas (1999, p. 6) attempted to summarise the main contents of early childhood fears, as reported by several researchers up to 1999, by grouping them into the following categories:

Animals (wild, domestic, imaginary): Bauer (1976); Bowd (1983); Derevensky (1979); Draper and James (1985); Jersild and Holmes (1935a), Lentz (1985a, 1985b); Maurer (1965); Pratt (1945); Sarafino (1986); Shepherd, Oppenheim and Mitchell (1971); Sipes, Rardin, & Fitzgerald (1985); Slee and Cross (1989); Tremewan and Strongman (1991); Vandenberg (1993).

People (family, doctors, dentists, "bad" people): Band and Weisz (1988); Bauer (1976); Derevensky (1979); Draper and James (1985); Jersild and Holmes (1935a); Lentz (1985b); Maurer (1965); Milgrom, Mancl, King & Weinstein (1995); Sarafino (1986); Sipes et al. (1985); Slee and Cross (1989); Vandenberg (1993).

Monsters and ghosts: Bauer (1976); Derevensky (1979); Draper and James (1985); Jersild and Holmes (1935a); Lentz (1985a, 1985b); Maurer (1965); Pratt (1945); Sarafino, (1986); Sipes et al. (1985); Tremewan and Strongman (1991); Vandenberg (1993).

Dark, bed-time fears, being alone and nightmares: Bauer (1976); Derevensky (1979); Draper and James (1985); Jersild and Holmes (1935a); Lentz (1985b); Maurer (1965); Pratt (1945); Reed et al. (1992); Sipes et al. (1985); Slee and Cross (1989).

Bodily injury, heights, physical danger and death: Band and Weisz (1988); Bauer (1976); Derevensky (1979); Draper and James (1985); Jersild and Holmes (1935a); Lentz (1985b); Sarafino, (1986); Sipes et al., (1985); Slee and Cross (1989); Tremewan and Strongman (1991).

Natural hazards: Derevensky (1979); Graham and Gaffan (1997); Pratt (1945); Sarafino (1986); Sipes et al. (1985); Tremewan and Strongman (1991); Vandenberg (1993).

Certain fear categories, especially those categorised as *animal fears* and also fears relating to *darkness*, *bed-time*, *being alone*, and *nightmares*, appeared to receive prominence in the literature. A discussion on some of these studies follows below.

The category ***animal fears*** appeared to be the most reported fear category with regard to preschool children. Marks (1987) confirmed that the contents of childhood fears vary across situations or objects, partly depending on age. He noted that some fears, such as *animal fears*, show a rapid rise during preschool years, with a fall again at a later stage, while other fears, such as *darkness fears*, tend to vary less with age. Also of developmental interest is that fear of animals is one of the two fears (the other is blood-injury fear) that, when found in adults, have usually persisted since childhood and mostly begin before the age of 7 years. He concluded that animal fears in young children “tend to appear out of the blue”, whereas the rare animal phobias that start in adolescence or adulthood for the first time are usually associated with trauma (Marks, 1987, p. 689).

According to some earlier researchers, such as Angelino, Dollins and Mech (1956), *animal fears* rapidly decline from the ages 9 to 11 years in both sexes. These results, however, were contradicted by a recent South African study (Burkhardt, 2002), which found that the fear of snakes (in the *wild animal* category) was still the most common item amongst a group of 404 middle-childhood children (ranging from ages 8 to 12 years). This research was based on a comparable Free Option Method (FOM) study. According to Burkhardt (2002), one of the explanations for her findings for the prominence of the fear of snakes might be ascribed to the fact that South Africa has a diverse snake population, of which many are poisonous, as noted by Broadley (1983). Another explanation for this might be confirmation of the hypothesis on the innate nature of fears related to evolutionary dangers and the survival value attached to these fears.

The importance of taking into account that the results critically depend on the methodology that researchers use to employ when obtaining and interpreting fear data can be illustrated with regard to the following study.

Muris, Merckelbach, Meesters and Van Lier (1997) compared fear rank orders in a group of children aged 7 to 12 years in two different ways. The one method to obtain

data was based on the Fear Survey Schedule for Children Revised (FSSC-R) scores, while the other consisted of the Free Option Method (asking children what they feared most). The top ten scores according to the Free Option Method yielded 58 distinct fears. Although 78% of these fears were also covered by the FSSC-R results, the rank orders differed significantly. Muris, Merckelbach and Meesters et al. (1997) report, for example, that, according to the free option method results, the fear of spiders was reported to be the most intense fear, but this was an item that ranked 34th in the total FSSC-R order. Fear of snakes is ranked 6th on the Free Option Method and not under the first ten in the FSSC-R order.

According to Muris, Merckelbach and Meesters et al. (1997), the literature on adult fears also echo the finding that fear rank orders are dependent on the method of investigation. This is demonstrated in the much-cited study by Agras, Sylvester and Olinveau (1969). Based on 40 items from traditional fear scales, they found the fear of snakes to be the most prevalent among both women and men. In contrast with the above results, Kirkpatrick (1984) found, in a survey with 133 fear items, the fear of snakes to be ranked 6th by women and 21st by men.

According to Agras et al. (1969), fear of snakes usually starts in childhood. The fear of snakes appears to be very common and one of the most frequently mentioned fears in the *animal fear* category by preschoolers. It is argued that common childhood fears, as well as specific phobias, originate from innate fears of evolutionary dangers (Menzies & Clarke, 1995). The results of the open question method support this argument (Burkhardt, 2002; Muris, Merckelbach & Meesters et al., 1997).

According to an early study by Maurer (1965), 80% of the 91 over-all replies of the 20 children between 5 and 6 years were allocated to *animal fears*, including amongst others, snakes, lions, tigers and bears. A study by Bowd (1983), where 37 five-year-olds were asked to name an animal of which they were afraid, produced ranking results that compared closely with Maurer's findings. The children's order of the five most feared animals were bear (18%); tiger (12%); snake (12%); dog (12%); and lion (12%).

About two decades after Maurer's study, Slee and Cross (1989) found in an Australian study of a group of 379 4- to 7-year-old children that the fear of snakes still appears to be one of the most frequently occurring fears. Also in the two South African pilot studies by Martalas (1999) and Keller (2001), snakes featured among the most frequently mentioned fears in the *wild animal category*, which comprised by far the largest category of fears.

Derevensky (1979) found that, in a comprehensive study of the developmental comparison of the fears of 106 normal children aged 6 to 12 and 133 exceptional children aged 7 to 19 – who were classified as educable mentally retarded, trainable mentally retarded and specific learning disabled – for all the children the fear of animals was the most frequent response. The most feared animal, according to all children's responses, was the snake, with next in order lions, tigers, dogs, cats and bees, with animals in the reptile, insect and rodent categories also being frequently mentioned. According to Derevensky (1979), the results showed little differentiation among the responses of older and younger children; the fear of animals, however, emerged as much more widespread among the educable mentally retarded and specific learning disabled children than previously found among the normal group. Derevensky (1979) noted that, pertaining to animal fear responses, a perseveration effect was noticeable in that once children named an animal, they often followed with other animals. This tendency was also confirmed by Martalas (1999).

In a pilot study for the present research by Martalas (1999), 54 children between the ages of 5 and 7 years attending preschools in the Atlantic Seaboard area, Western Cape, South Africa, were interviewed in order to establish the content and number of their expressed fears. The data were collected by conducting a semi-structured interview with the participants, whilst they made drawings of that which they feared. The content of the participants' fears were analysed quantitatively and grouped according to pre-established categories, based on similar previous research as a guide (Bauer, 1976; Derevensky, 1974, 1979; Draper & James, 1985; Jersild & Holmes, 1935a; Maurer, 1965; Pratt, 1945). In the pilot study by Martalas the animal fears were subdivided into the categories *wild animals* (such as lion, tiger, leopard, cheetah, snake, crocodile, bear, elephant, wolf); *domestic animals* (such as dog, cat, horse, bull); *insects* (such as

spider, bee, wasp, worm, snail, ant); *sea/water animals* (such as sharks, squids, whales, octopuses); *fantasy animals* (such as dinosaur, ghost/spook, monster, dragon, goggo, beast). A category, *real people*, was used to classify fears relating to strangers, burglars, brothers and sisters. The category, *fantasy people*, included fears of creatures such as a witch/wizard, Dracula, vampire, boogiemán, giant, alien, devil, angel and skeleton. Fear content pertaining to volcanoes, fire, firecrackers, electricity, wind and lightning were assigned to the category fear of *the dark, night, bad dreams and natural phenomena*. A ninth category was established to classify any *other fears* than those already mentioned, which included fears of guns, knives, a tractor, a car, train, merry-go-round, daddy's watch and a door.

Martalas (1999) found that *animal fears* at 77.53% of all the fears expressed by the preschoolers comprised the largest category. The wild animal mentioned mostly as being feared was the lion, but also included the tiger, leopard and cheetah. The most feared fantasy animal was the dinosaur (mentioned by 37% of the participants). According to the Martalas, the content of the fears was largely similar to that reported in the existing body of literature. Two notable exceptions, however, appear to be in the category of *bodily injury*, which was not explicitly mentioned by the participants in the Martalas study, as well as relatively frequent reports of fears of dinosaurs, which seemed to be the result of the realistic depictions of dinosaurs in the film *Jurassic Park*, as mentioned by several participants upon further questioning.

The latter may tie in with the results of what is described by Muris, Merckelbach, Ollendick, King and Bogie (2001) as the "largest study on the origins of childhood fears" (p. 14), namely that by Ollendick and King (1991), who found that negative information was the most prominent pathway to fear, followed by conditioning and modelling. In a study on the origin of *night-time fears*, Muris et al. (2001) found very similar results. They reported that most children (almost 80%) attributed the acquisition of their fear to negative information, 25.6% to conditioning as a pathway; 13.2% to modelling, while 24% of the participants indicated that learning experiences had not played a role.

The Martalas (1999) study was followed by a further explorative study (Keller, 2001), in which the expressed fears of preschool children in a lower- to middle-class socio-

economic status area were investigated by using the same methodology and existing categories as basis. The results showed that the content of the fears was similar in many ways to that of previous studies and largely confirmed Martalas's (1999) findings. *Animal fears*, at 57.24% of all the fears expressed, comprised by far the largest category of fears, with the lion, snake and crocodile, presented in rank order of most feared animals. Keller (2001) found *fantasy people* (predominantly fears of ghosts) as the second most feared category of fears (19.31%), followed by *fantasy animals* (monsters) in the third place (12.41%) and the category fears of *real people* (9.65%) fourth. Fears related to the other categories were reported as insignificant (less than 9.65%).

According to the literature, other fear categories that appeared to be prominent around the preschool years are fears associated with the categories **darkness, bed-time fears, being alone and nightmares**, as well as associated **monsters and ghosts**. In a study by Bauer (1976), on the developmental changes in children's fears, children in the age groups 4 to 6; 6 to 8, and 10 to 12 years were asked what they feared most and to describe their scary dreams. It became evident that age-related patterns were found as 74% of the children in the age group 4 to 6 years reported fears of ghosts and monsters, while 53% of the children in the 6- to 8-year group and only 5% of the 10- to 12-year group reported similar fears. The frequency of fears and scary dreams of imaginary creatures were found to decrease with age. The tendency for fears of imaginary creatures to emerge at this stage is thought to be closely linked to the typical "magical thinking" during the preschool years (Bauer, 1976).

It is interesting, however, that certain researchers report childhood fears not to be closely related to nightmares and bed-wetting behaviour (Lapouse & Monk, in Marks, 1987) or psychopathology, as reported by Graziano et al. (1979).

In a recent study by Muris, Merckelbach, Gadet and Moulart (2000) anxiety symptoms pertaining to fears, worries and *scary dreams* in 4- to 12-year-old children were investigated. The above authors considered *scary dreams* as a separate anxiety phenomenon, due to its occurrence during sleep, in contrast with fears and worries, which occur when the person is awake. They also distinguish between fear and worry on the basis that "fear occurs when the participant is actually confronted with a dangerous

stimulus or situation, whereas worry takes place in the absence of actual danger and is primarily concerned with thinking about threatening scenarios” (p. 43). Interestingly, the results pertaining to the comparisons among fears, worries and scary dreams revealed certain differences. Fears, according to Muris, Merckelbach and Gadet et al. (2000), involved animal and environmental threats, whereas worries were mainly concerned with death, test performance, separation from parents and being punished. In contrast, *scary dreams* appeared to be associated with imaginary creatures and being kidnapped. Results pertaining to the content of fears for the total group of 190 children also showed *animal fears* to be most prominent for all age groups. These fears include, for example, fear of snakes, spiders, dogs, crocodiles, lions, tigers and wolves. Second in rank order of specific fears reported by the children were fears of *imaginary creatures*, such as witches, ghosts and monsters. Third in rank order were fears of being kidnapped, as well as fears concerning social threats (such as being teased), with *frightening dreams* or *movies* in the fourth place.

Muris, Merckelbach and Gadet et al. (2000) conclude that, amongst other findings, the most frequently mentioned fears, worries and scary dreams remained relatively stable across different age levels. A comparison among the three phenomena revealed “significant differences with respect to content and origins, suggesting that they reflect separate anxiety phenomena” (p. 49). The results concerning the rank order of the fear categories largely correspond with those of other studies of childhood fears (Muris, Merckelbach & Collaris, 1997; Muris, Merckelbach & Meesters et al., 1997)

According to Muris et al. (2001), *night-time fears* are heterogeneous in nature. *Night-time fear categories* which have been established are, for example, fear related to personal safety, fear associated with separation or loss of others, fear of imaginary creatures, fear of scary dreams and fear of the dark (Mooney, 1985; Mooney, Graziano, & Katz, 1985).

When considering differences in the **number of fears**, it is important to compare methodologically similar studies. It appears that, according to Bouldin and Pratt (1998), the number of fears represents an inverted U-curve across childhood and adolescence. This tendency is indicated in an increase in the number of fears from preschool to early

school, with a decrease towards adolescence. Gullone (2000) reported an average of between 2 and 4 to 5 fears in interviewed base studies within the age range between 4 and 19 years, as reported by researchers such as Eme and Schmidt (1978) and Maurer (1965). In recent South African studies Martalas (1999) reported an average of 4.77 expressed fears per participant (ranging between 1 to 12 per participant), while Keller (2001) reported an average of 2.9 fears per participant (ranging between 1 to 10 per participant).

Results of methodological studies using parental reporting of their children's fears reveal that, compared to the reports given by children themselves, parents have tended to underestimate their children's fears, particularly with regard to the number of fears (Keller, 2001; Lapouse & Monk, 1959; Muris et al. 2001). In an early classic study Lapouse and Monk (1959) found parents reported fewer fears for their children than the children themselves. Keller (2001) found an average number of 2.9 fears (145 fears in total reported by 50 children) per child participant, while the parents reported an average of 1.5 fears (73 fears in total reported by 50 parents) per participant. According to Muris et al. (2001), in the most recent study on parent-child ratings of frequency, content, origins, coping behaviours and severity on children's *night-time fears*, parents reported considerably fewer (34%) night-time fears for their children than the children themselves (73%).

In the present study, although this was not initially a key point of focus, parents' reports of their children's fears were also investigated in order to gain better insight into children's worlds from an additional source from a micro-systemic viewpoint.

3.1.1 Gender differences in fear content and number

According to Gullone's review (2000), **fear content** differences pertaining to gender are less well researched than, for example, those pertaining to age. With regard to the **number of self-reported fears of children**, she reveals that no clear age or gender differences have been found.

In general most studies, however, show that girls overwhelmingly express or are reported to express more fears than boys (Burkhardt, 2002; Elbedour, Shulman & Kedem, 1997; Keller, 2001; Ollendick, Matson & Helsel, 1985; Slee & Cross, 1989; Spence & McCathie, 1993). According to Ollendick, Yang, Dong, Xia and Lin (1995), girls not only tend to have more fears at almost every age, but tend to rate themselves as more fearful and report more intense fears than boys.

It appears that the effects of gender-role expectations and greater willingness among girls and their parents to report their fears, rather than genuine differences in fear responses, could have an influence on these consistent findings, as reported by researchers such as Bouldin and Pratt (1998); Draper and James (1985); Ferrari (1986); Graziano et al., (1979); Ollendick and King (1991); Sarafino (1986); Slee and Cross (1989).

Interestingly, older studies, such as those by Jersild and Holmes (1935a) and Lapouse and Monk (1959), found girls to express being more afraid of phenomena such as the dark, strange sights, sounds, objects or persons, being kidnapped, robbed or killed, snakes, dirt and animals than the boys. The boys, on the other hand, were found to be more afraid of bodily injury, school, failure, nightmares, harm and imaginary creatures.

Gullone and King (1997) reported that in their three-year follow-up study on the fears of 273 children and adolescents between the ages of 7 and 18 years, the respondents' gender and initial fear scores were found to be better predictors of follow-up fear scores than age. Amongst other findings, they reported that, although girls also experienced the same age-related changes than the boys over time, they still reported higher levels of fearfulness. Interestingly, they found that age was only predictive of fears related to two categories of fear, namely *death/danger* and *psychic stress/medical fears*. Both the latter fears decreased over time for younger children, but increased for older respondents.

Gullone and King (1997) ascribed the finding that there is an increase in gender differences over time to the suggestion that gender differences in normal fear are socially determined. This confirms the conclusion by Graziano et al. (1979) that fears

become more pronounced and more strongly internalised with increased exposure to processes of socialisation. Gullone and King (1997) also speculated that, as an alternative explanation, it may be indicative of the increased influence of biological factors, the latter resulting in greater differentiation between boys and girls.

The results of a semi-structured doll play technique by Lentz (1985a) to investigate fears of 5- and 6-year-old children in the three environments of the home, the school and the babysitter's house revealed girls to be more concerned with *bodily injury* than the boys in the environments of home and school respectively.

Martalas (1999), in contrast, found in her study that boys over-all reported more (55.43%) fears than girls (44.57%). With regard to content differences between the gender groups, she furthermore reports that the boys fears of animals exceeding those of the girls contradict the findings of Vandenberg (1993), who found that girls had twice as many fears of animals than the boys. The girls in the South African study, however, reported more fears of real people (including strangers, burglars and siblings) than the boys (Martalas, 1999).

Other studies also supporting the finding of a higher number of fears for boys are amongst others, those by Eme and Schmidt (1978) and Maurer (1965). In the case of Maurer (1965), however, the differences were reported as not being statistically significant.

The results of the study by Keller (2001) on the expressed fears of a group of preschoolers from a low to middle South African socio-economic status group contradicted those found by Martalas. According to Keller (2001), although it was not found to be statistically significant, the girls reported more fears than the boys in general. In this study statistically significant gender differences relate to the girls expressing more fears in the category *wild animals* than the boys and the boys expressing more fears in the category *other fears* (such as a fan, a brick, a bomb, an accident and videos) than the girls respectively. Although these results (Keller, 2001) differ from South African research by Martalas (1999), they appear to be similar to most other research results. It is important to note that the participants in the study by

Martalas were selected from a high socio-economic status area, which might explain some of the differences. Several other studies have reported significant differences in the fears reported by males and females from different socio-economic status (Croake, 1969; Staley & O'Donnell, 1984), while others failed to find any significant differences (Deverensky, 1979).

In a comprehensive retrospective study Sipes et al. (1985) examined the responses of 3728 students' essays regarding their greatest fears when they were young. Gender differences were found with regard to number as well as types of fear. Girls reported more fears than the boys retrospectively regarding their early childhood fears in the number of categories mentioned. Content differences in which the girls reported more fears included fears of their fathers, being alone, dreams, people and insects.

Particular attention was paid to gender differences in a longitudinal study of fearful behaviour, fears and worries of young children aged 4, 5 to 7 years of age by Stevenson-Hinde and Shouldice (1995). No gender differences at any of the ages were found. Several other authors who have reported no gender differences pertaining to expressed fears in young children include Rende and Plomin (1991), Ross (1981) and Van Eeden (1989).

Literature surveys on the above topic thus still confirm the conclusion by Gullone (1996) that, although various content differences with regard to expressed fears and gender have been reported, there is still little clarity on the topic. This appears to be particularly relevant to the younger child population.

3.1.2 Cultural group differences in fear content and number

The issue of the universality of emotional experience seems to be important to investigate. According to Wallbot and Scherer (1986), reporting on a large-scale cross-cultural study of students from 27 countries on 5 continents, "emotional experience is both quite specific for a number of individual emotions and more or less universal, that is, highly similar for people all over the world" (p. 788). They also conclude that the differences cross-culturally are smaller than differences between emotions and that

differences experienced by people of different cultures pertaining to emotional experience itself are differences of degree or emphasis. It is argued by Wierzbicka (1986) that emotions are limited by language and, although the experience of emotion appears to be universal, there is a need for more research to be done to before coming to any conclusions on the topic.

In order to understand the development of fear and thus contribute towards compiling effective preventative programmes, it is important to take into account cultural factors, which play a role in the evolution and maintenance of fears. According to Burkhardt (2002), this implies gaining knowledge on fear patterns which are universal as well as those fears which simply reflect idiosyncrasies within the particular setting, groups or countries of the participants whose data are being collected.

Robinson, Robinson and Whetsell (in Berk, 1996), for example, found that some fears, such as of the dark and of being alone, are common across cultures and continue for many years.

Burkhardt (2002) refers to the research of Tikalsky and Wallace (1988) as an example of the influence of culture in the huge differences pertaining to the frequency of unrealistic fears found between a sample of 92 third grade children from the Navajo and Anglo cultures. Tikalsky and Wallace (1988) found the average number of fears for the Navajo sample to be 22.1, with the average number of unrealistic fears for the Anglo sample to be 3.72 per child. The researchers explain this phenomenon in the light of cultural differences pertaining to two hypotheses. In the first place, the Navajo and Anglo children learn to fear different things so that the object of fear is partly determined by the cultural context. In the second place, the cultural perceptions of fear differ. Whereas in the Anglo culture having many fears is regarded as an "ominous sign", having many fears in the Navajo culture may be considered as a "sign of perceptivity" (p. 490).

Tikalsky and Wallace (1988) warn against preconceptions, such as high fear frequencies being indicative of pathology, where the cultural image of the ideal person may include being fearless. They contrast this view on fears with evidence from ethnographic studies on the Navajo, who "like the traditional Eskimo do not believe –

they fear" (p. 482). Considering the impact of cultural variables is important when deciding whether a child is display normal fears or tends to be phobic. More research into the topic is clearly necessary to validate the above findings, especially with regard to young children's fears.

In her review Gullone (2000) stated that the majority of normal fear investigations were conducted in Northern America, although an increasing amount of research was undertaken in other countries. To the present author, however, it appeared as if cross-cultural research pertaining to the expressed fears of preschool children is scarce.

Gullone (2000) warned in interpreting research results from several different countries of the need to make a "distinction between cross-national investigations and cross-cultural investigations" (p. 444). She argued that cross-national studies are important for determining the generalisability of findings across different populations and not necessarily across different cultures, whereas cross-cultural investigations focus on the universality of fear research across different cultures. It is also important to take into account that fear measures differ across the research studies and valid comparison is somewhat limited regarding the interpretation of results.

With regard to cross-national studies, several studies, such as those by Gullone and King (1993), reporting on the most commonly reported fears and specifically the themes of death and danger, have found the content of fearfulness to be similar across different "Western countries" (Gullone, 2000, p. 444). She further concluded that "there appears to be strong cross-national consistency in the central parameters of normal fear, including developmental patterns, gender differences, the most common fears, and the structure of fear (Gullone, 2000, p. 444).

Frequently cited recent cross-cultural studies, such as those by Dong, Yang and Ollendick (1994) and Ollendick, Yang, King, Dong and Akande (1996) hypothesised that children and adolescents in non-Western cultures should report more fears and higher levels of fears than the Western cultures'. In the large sample size study by Dong et al. (1994) of the fears of 825 Chinese children between the ages of 7 and 17 years, it was found, amongst other things, that in the youngest of the three age groups (the 7- to 10-

year-old), the Chinese group reported less fear than their American and Australian age-equivalent groups.

In an extensive cross-cultural study by Ollendick et al. (1996), the fears of 1200 American, Australian, Chinese and Nigerian 7- to 17-year-olds were compared. The results showed that the girls reported more fears than the boys in three of the four samples (American, Australian and Chinese children and adolescents); no gender differences were found among the Nigerian sample. Contrary to the researchers' initial prediction that there would be an age-related decrease in fear, age differences were also restricted to certain samples; the younger children reported more fears than older children and adolescents only in the American and Australian samples. No age differences were found for the Nigerian sample. Cross-cultural differences pertaining to the content of fears were found in the Chinese and the Nigerian samples reporting more social and safety-related fears than the American and Australian samples. *Death and danger*-related fears were most common. Interestingly, certain fear content, such as looking foolish (America); guns (Australia); ghosts (China) and the ocean (Nigeria) were country-specific (Ollendick et al., 1996).

According to Slee and Cross (1989), children's fears reflect something of their understanding of the world and their place in it. This is related to the context in which the child lives and as such is affected by the culture in which the child lives. The majority of fear studies have been conducted with middle-class white children; few studies have examined fears in non-white children and very few studies have investigated fears in African American children specifically.

According to Neal et al. (1993), the published findings on African American research up to the time of their study suggest that their fears differ significantly from the fears of white children; they appear to report more fears and their fears appear to be more reality based (LaPouse & Monk, 1959; Nalven, 1970). Interestingly, according to Neal and Turner (1991), this might be ascribed to semantic differences; they stated that African American children tended to report specific fears (such as, for example, a fear of rats), while the white children tended to make use of generic terms (such as, for example, fear of small animals).

Neal et al. (1993), however, concluded that their research, comparing the fears of 109 African American and 124 white children aged 6 to 12 using the FSSC-R, was limited by region and class and they urged further investigation to better understand fears in African American children. Their overall results indicate, however, that African American and white children have more similarities than differences in their most common fears, thus indicating that many fears transcend race and culture.

No South African studies highlighting fears and cultural differences pertaining to young children could be found. Two studies, however, focusing on the fears and anxieties in middle-childhood children give, to a certain extent, an indication of the dynamics of multi-culturism within the milieu of Stellenbosch, South Africa. Burkhardt (2002) assessed the fears of 404 children between the ages of 8 and 12 years and found the number and level of fears to be the highest for the black South African children, followed by the coloured South African children, while the white South African children indicated the lowest number of fears. She also reported that the number and level of fears for all cultures were generally higher than found elsewhere in the world.

In another fear-related study undertaken by Muris, Schmidt, Engelbrecht and Perold (2002) on DSM-IV (American Psychiatric Association, 1994) anxiety disorder symptoms in middle-childhood South African children, it was found that the anxiety levels of the latter were clearly higher than those of Western (for example, Dutch) children. This finding confirms the results of previous cross-cultural comparisons relating to the prevalence of fear among African children (Ollendick et al., 1996; Ingman, Ollendick & Akande, 1999). Within the South African sample itself, consisting of more than 600 children from Grades 3 to 7, age range 7-13 years, from four primary schools in the vicinity of Stellenbosch, South Africa, it was found that the children from the white South African sample generally displayed lower anxiety levels than children of mixed or black ethnicity. According to Muris and Schmidt et al. (2002), possible explanations for this finding could be that socio-economic background could have been a major factor, because the white children generally had a higher socio-economic background than the other children of the sample group. Accordingly, the finding might be explained in terms of the consequences of living under certain conditions, according to Biersteker &

Robinson (2000), such as deprivation, poor health and inferior education, which create profound inequalities among children of different racial and socio-economic status groups. The South African children, on average approximately 10 years old, might still have experienced the apartheid system's negative legacy; a legacy which has promoted violence towards non-white communities and subsequent negative feelings such as insecurity, fear and anxiety (Rudenberg, Jansen & Fridjhon 1998; Pillay, Naidoo & Lockhat, 1999). A third explanation by Muris and Schmidt et al. (2002) is based on possible cultural differences in the tendency that white children are most probably raised within the Western tradition's cultural values.

The present author agrees that the above findings should be interpreted with caution, as it is important to bear in mind that the above-mentioned study also suffers from methodological problems such as a lack of detailed information on the ethnicity/culture and socio-economic status of the participants, as well as problems with the translation of the questionnaires.

From the above, however, it is also evident that it is difficult to identify and clearly pinpoint the influence of individual variables such as culture, socio-economic status and community comparisons, as these variables are usually interrelated. It is, however, clear that more research pertaining to cross-cultural variables needs to be undertaken to confirm differences and their interpretation. In this regard, Gullone (2000) also refers to the importance of developing measures of fear within the culture, rather than measures developed in a culture and translated for use in other cultures.

In this regard, the present study has also striven to study the preschool children's fears and coping mechanisms, as well as perceived efficacy, within the different cultural group contexts. The present researcher worked for approximately 5 years in the different preschool communities in the Stellenbosch area and was sensitised to respect the influence of cultural values, taking into account factors such as different child-rearing practices, myths, traditions and stories told. Although it would be arrogant to state that the dynamics within the different communities are fully understood, it is believed that the knowledge gained from practical work in the field of early childhood stimulation across

the social spectrum contributed significantly towards the process of obtaining reliable data.

The notion of cultures as “crystallised” and “unchanging” entities has been strongly and appropriately criticised by researchers such as Boonzaaier, Sharp and Said (in Dawes & Donald, 1994, p. 11). It is, however, important to recognise that there are varieties of childhood in South Africa which may be reflected in the results of the present study. The emphasis of the present study is on explaining differences, if found, within cultural groups, but also between groups in order for the different communities to benefit from the results. For the purpose of operationalising the construct culture, grouping is defined in terms of the main representative cultural communities present in the Stellenbosch area of the Western Cape. The cultural groups referred to are white, coloured and black South African preschool children.

3.1.3 Socio-economic status (SES) differences in fear content and number

Gullone (2000) argued that, as with gender differences, SES differences point towards a socially determined component regarding the content and level of fear. She suggests, however, that results pertaining to SES needed to be interpreted with caution, as there appear to be some contradictory findings regarding fear content and SES groups.

It appears that SES is an important variable in the study of fears of children. As postulated by Graziano et al. (1979), children from lower SES areas may perceive their immediate environments as far more hostile and dangerous, which could be reflected in their fears being reported as being more immediate and reality based than those of children in the middle or upper SES areas.

The tendency for children from lower SES to report more fears than children from the middle or upper SES class may be indicative of a tendency among the former group to report more specific fears as opposed to the latter group's tendency to report more generic categories, as noted by Graziano et al. (1979). Children from low SES homes were reported to have more fears over-all, whereas high SES children have more

school-related fears (Staley & O'Donnell, 1984). Various studies reported fears in children from lower socio-economic status to be more intense and higher in number than in children from higher socio-economic status (Neal et al., 1993; Ollendick et al., 1985; Ollendick, King & Frary 1989; Ollendick, Yule & Ollier 1991).

Two South African studies used the same methodology to obtain data on the expressed fears of preschool children in a high socio-economic status area. Martalas (1999) compared the fears of preschoolers in a predominantly low to middle socio-economic status area (Keller, 2001). It emerged that the average fears per child for the two studies were 4.77 (Martalas, 1999) and 2.9 (Keller, 2001) respectively. This tendency of preschoolers in the low SES areas to expressing fewer fears than those in the higher SES areas appears to be in contrast with the body of research findings relating to socio-economic status and number of fears. Clearly, more research is needed in this regard before any final conclusions can be drawn.

Apart from the gender differences already mentioned, there were many similarities with regard to the content of fears in the results of the two studies. Participants in the study by Keller (2001), however, reported higher frequencies of fears relating to the category *real people* than those in the Martalas study (1999), which might be indicative of the children in the lower socio-economic status area being more exposed to higher levels of violence than those in the higher socio-economic status area. Further research on these variables in different communities was recommended by Keller (2001); some of these variables are examined in the present study.

Demographic variables estimating SES within the broad South African context, taking into account the highest level of education in the household, the ratio of workers per household and the level of employment in the family, as used by Liddell, Kvalsig, Shabalala and Qotyana (in Dawes & Donald, 1994, p. 56) in their study on the cultural context of children's everyday experiences in the year before school were taken into consideration in the present research for descriptive purposes (see Chapter 5).

To operationalise socio-economic status in the present study, each participant was classified according to a composite score derived from an adapted formula initially used

by Riordan (in Tennant, 1986) into one of three categories, namely low, middle or upper socio-economic status groups (see Addendum H).

3.1.4 Community violence risk differences in fear content and number

Liddell et al. (in Dawes & Donald, 1994) state that it may be important for psychologists doing cross-cultural research to focus more frequently on community comparisons, as opposed to the broader cross-cultural comparisons (p. 58). Rudenberg et al. (1998) found that black South African children from particularly high violence-prone areas showed more distress in their drawings than white suburban children did. Martalas (1999) concluded that, although the black children's fears included guns and knives, which could be regarded as symbols of physical violence, according to Rock (1997), all children are affected by violence, not only those at the epicentre of violence, who are black children in most cases in South Africa.

According to Duncan and Van Niekerk (2001), despite "momentous political changes that South Africa has undergone in recent years", the majority of South African children are still faced with "enormous socio-economic problems" including poverty, homelessness and exposure to violence (p. 327). Desjarlais (in Duncan & Van Niekerk, 2001) concludes that children who grow up under these or similar conditions might exhibit, amongst other symptoms, a high prevalence of stress-related psychological symptoms.

For the purpose of the present study, a comparison among low-risk, medium-risk and high-risk community violence areas within the Stellenbosch region was made. These areas were distinguished on the basis of statistics obtained from the South African Police Centre for the Analysis and Interpretation of Crime Information.

3.1.5 Conclusion

From the literature review it became clear that, although recent research has provided encouraging results pertaining to a variety of aspects of normal childhood fears, for various reasons there is a shortage of data concerning the preschool target group.

The literature is not clear on the content of early childhood fears, mainly due to the variety of ways of reporting on it. The contents of fears are often described in terms of existing fear categories that have emerged from previous research. Some of these categories, as discussed, will be used as guidelines to classify the data on the content of early childhood fears for the present study. Specific categories of fears, such as *animal fears; fantasy people; fantasy animals; darkness, bed-time fears, being alone and nightmares*, that are frequently found in preschool children are also discussed extensively. Results from studies of parental reports on preschoolers' fears tend to show an underestimation by the parents of their children's fears. Although this is not the main focus of the present study, it will briefly be addressed as a mechanism to obtain additional information on the preschoolers' world.

There is no clarity on gender differences regarding the number of self-reported fears in early childhood. From the literature it emerges that fear frequencies and content might be ascribed partly to being a function of culture and need to be taken into consideration as such. It is evident that expanded research results are still necessary for the clarification of certain cultural variables and their role in the expression of early childhood fears. Taking into account the influence of the dynamic interaction of culture, socio-economic status and violence risk factors within different communities, it became evident that research in this regard is still underdeveloped and little is known about the preschool child's expressed fears. It is hoped that the present study will give some answers with regard to research into the above-mentioned areas.

3.2 Coping mechanisms and perceived efficacy in early childhood

In a comprehensive review of the literature from 1988 to 1999 on the progress and issues in the study of coping with stress during childhood and adolescence, Compas et al. (2001) conclude that research on the nature and functioning of coping processes is important with regard to both basic and applied research. With respect to basic research they state that "findings from coping research should provide valuable information on the nature and development of self-regulatory processes" (p. 87). With regard to applied research Compas et al. (2001) postulate that the significance of coping research is

twofold. First, the development of ways of coping in childhood may be a precursor of coping patterns throughout the later stages of development. Secondly, it is important to establish information about the nature and efficacy of coping in order to continually inform intervention research for the treatment and prevention of psychopathology (Sandler, Wolchik, Mackinnon, Ayers & Roosa, in Compas et al., 2001).

Compas (1987) noted that research on coping in children and adolescents was scarce until the 1980's. Despite considerable progress thereafter in the field over the next 10 to 15 years, Compas, Connor, Saltzman, Thomsen & Wadsworth (in Compas et al., 2001) stated in 1999 that research on coping during childhood and adolescence has fallen behind similar research being done on the stages of infancy and adulthood.

In their review Compas et al. (2001) evaluate the advances and limitations of child and adolescent coping research with regard to the investigation of four issues. They considered definitions and conceptualisations of the coping process as of great importance, as the latter influenced, amongst other things, the methods of measurement, which was considered the second important issue to be investigated. Thirdly, the association of coping with aspects such as psychological adjustment, on the one hand, and psychopathology, on the other, were looked into. The final aspect that was highlighted related to similarities and differences in coping as a function of age, as well as individual difference factors such as gender and socio-economic status. Compas et al. (2001), however, conclude that, although the latter areas are considered to be of fundamental importance in understanding coping, research in these areas has been disappointing; this can be ascribed mainly to problems in conceptualisation and measurement of coping. As a result of the limitations in this area, the issue of age effects and individual differences in coping was thus not addressed in their review.

The issues of conceptualisation and measurement appear to be the most problematic and crucial in coping research dealing with children and adolescents. According to Compas et al. (2001), there appears to be a lack of clarity and consensus with regard to the conceptualisation. This leads to, amongst other things, confusion in approaches to measuring the construct coping, problems in comparing the results across studies, as

well as to difficulties in documenting differences in coping with regard to age, gender and other variables.

Fields and Prinz (1997) stated that there is strong indication from coping literature that research on children's abilities to cope is still at a relatively early age. Although the conceptualisation of children's coping mechanisms was mainly derived from work on adult coping (Fields & Prinz, 1997), the coping abilities of children differ from those of adults, as concluded by Band and Weisz (1988) and confirmed by others, such as Compas, Banez, Malcarne and Worsham (1991). Fields and Prinz (1997) listed a few differences to take into consideration when investigating children's coping versus that of adults. Factors such as developmental level pertaining to cognitive, affective, expressive and social functioning may limit children's coping repertoire. Other aspects such as lack of experience, the environment being perceived as different from that of adults, less control over circumstances, restricted freedom to actively avoid certain stressors and a state of dependence (personal and material) on parents may have an influence on the coping strategies that children are capable of devising.

The above-mentioned aspects of development and environment may influence both coping responses and the coping strategies promoting adjustment in children. In order to cater for better-informed interventions, it is important to understand the processes associated with effective and ineffective coping (Fields & Prinz, 1997).

In the literature coping is usually associated with the concepts of stress and stressors. In adult coping research stressors are usually grouped conceptually along different dimensions, such as research on major life events; minor life events or daily hassles; or a distinction on the basis of uncontrollable and controllable stressors. Because of children's different perceptions and experience, the above does not necessarily apply to their world; the impact of certain stressors may either be buffered or magnified by their "incomplete understanding of the ramifications of particular events" (Fields & Prinz, 1997, p. 938). In their review the authors confirmed the conclusion by Band and Weisz (1988) that research on coping in children should be studied in relation to the situational context of the stressor, rather than stressor groupings, as mentioned in the research literature on adults.

An overview of the literature shows a variety of categories of coping, such as “problem solving, information seeking, cognitive restructuring, seeking understanding, catastrophizing, emotional release or ventilation, physical activities, acceptance, distraction, distancing, avoidance, self-criticism, blaming others, seeking support and the use of religion” (Compas et al., 2001, p. 92).

Descriptive studies with regard to the coping strategies of preschool children in particular, however, remain scarce. According to Fields and Prinz (1997), most of the studies have focused on either common medical procedures (Altshuler & Ruble, 1989; Band & Weisz, 1988; Peterson, Harbeck, Chaney, Farmer & Thomas, 1990); social stressors pertaining to peer relationships (Band & Weisz, 1988; Bernzweig, Eisenberg & Fabes, 1993; Eisenberg et al., 1993; Fabes & Eisenberg, 1992), as well as academic stressors (Band & Weisz, 1988). With regard to young children’s coping efforts in response to the medical stressors, the general tendency found was that avoidance strategies were used more often than approach strategies. Both the social stressor and academic stressor studies found that children reported using problem-focused strategies more often than emotion-focused strategies.

The following three studies, namely Band and Weisz (1988); Tremewan and Strongman (1991) and Muris et al. (2001) are regarded as important for the present study in compiling a framework to categorise preschool children’s coping mechanisms and efficacy ratings.

In order to “provide a framework for thinking about broad, overarching approaches and places special emphasis on the goals underlying behavior”, Band and Weisz (1988, p. 247) postulated the ***primary-secondary coping model*** to describe coping behaviour. The broad categories were complemented with a refined descriptive set of categories or subdivisions.

The *Primary control strategy* (coping efforts intended to influence events or conditions) was divided into the following four subdivisions: *Direct problem solving*; *Problem-focused crying*; *Problem-focused aggression*; and *Problem-focused avoidance*. The

following five subdivisions were used to describe the *Secondary control strategy* (coping efforts intended towards maximising one's fit to current conditions): *Social support*, *Emotion-focused crying*; *Emotion-focused aggression*; *Cognitive avoidance*; and *Pure cognition*. The category *Relinquished control* refers to doing nothing to alleviate fear.

In interviews 73 young children aged 6 - (n=24); 9 - (n=25) and 12 years (n=24) were asked to recall stressful episodes with regard to six different situations, namely loss/separation, medical procedure, conflict with authority, peer difficulty, school failure and physical accident. The results were indicative of mainly active responses (96.5%), with only 3.5 % attributed to the category *Relinquished control*. According to Band and Weisz (1988), styles of coping varied across situations, as well as with age. They found that as age increased reporting of *primary coping* declined and *secondary coping* increased. Furthermore, the children's coping responses were explored in relation to efficacy; no significant differences were found for either the 9- or the 12-year-olds. The results for the 6-year-olds showed primary control strategies alone to be significantly more efficacious than the secondary control strategies alone. Band and Weisz (1988) comment on this finding that the use of primary control as a coping strategy in early childhood is "appropriate and adaptive" (p. 252). The researchers, however, concluded that the children's coping approaches are influenced by factors such as situation and cognitive development. An increase in age seemed to be associated with a decline in *primary coping* and an increase in *secondary coping*.

While the importance of this study is acknowledged, the present author's critique of Band and Weisz (1988) is based mainly on their methodology. Taken into account the suggestibility of young children and practicalities such as the time-consuming process of exposing children in the 6-year-old group to six different situations, the results might be compromised by superficially "created" answers when they are asked for. In the present study this will be addressed by asking an open question on what children are afraid of. They will then have the choice to respond on the basis of their perception of what their fears are and what their coping mechanisms entail.

Coping with fear in early childhood by comparing fiction with reality was investigated empirically in three studies by Tremewan and Strongman (1991). In Study 1 the coping

strategies of a group of children between the ages of 4 and 6 years, based on the main character's methods of coping in fear-related picture-story book stimuli, were analysed in terms of *Primary*, *Secondary* and *Relinquished control*, adopted from the coding scheme developed by Band and Weisz (1988).

Effectiveness of coping was analysed according to the coping strategies being judged *effective*, *ineffective* or *uncertain* in reducing fear. In their Study 2 children of 5 and 6 years old gave their perspectives on coping with regard to the construction and resolution of a story, while Study 3 tapped parents' responses to a questionnaire on how these children cope with fear in reality.

Using the primary-secondary control model to conceptualise coping, the overall results on young children's coping behaviour contrasted sharply with the conclusions drawn by Band and Weisz (1988), as it was found that secondary coping strategies was most consistently associated with effective coping. The authors, however, warn that this could in part be explained by the differences in context being investigated. According to Tremewan and Strongman (1991), another reason for divergence could be attributed to the difference between children's and parents' reports. They postulate that children themselves might give a stronger indication of their methods of coping when confronted with aversive situations; parental reports, in contrast, might focus more on the outcome, for example, what form of coping is most effective in reducing fear. Tremewan and Strongman state the challenge for future studies as being "to strive to understand both the intent and outcome of the coping behaviour of young children" (1991, p. 32).

Even though Tremewan and Strongman (1991) are to be applauded for working with a child-friendly methodology, the question as to the extent to which fiction and reality can be linked or related remains. In the present study this aspect will be investigated by assessing "real" everyday fears and coping mechanisms. The efficacy rating system proved to be helpful and will be incorporated into the present study.

In one of the few studies that explicitly coupled expressed fears with coping and efficacy ratings Muris et al. (2001) investigated children's night-time fears and their reported coping strategies in order to deal with them in a sample of 176 normal school children

aged 4 to 12 years. The sample group (91 boys and 85 girls), was divided into three age groups consisting of children in group 1, aged 4, 5 and 6 years (n=68); children in group 2, aged 7, 8 and 9 years (n=59); and group 3 of children aged 10, 11 and 12 years (n=49). Although the sample consisted mostly of Caucasian children (99%), a further socio-economic status division was based on the occupational levels of both parents, with 15%, 65% and 20% of the children assigned to the low, middle and upper socio-economic status groups respectively. Information was obtained through interviews with both the children and their parents. Muris et al., (2001) found that, with respect to coping behaviour, children reported a variety of strategies in order to deal with their night-time fears and generally rated them as helpful in reducing anxiety.

Reported coping strategies were assigned to six categories in the following rank order of preference: *Seeking support from parents* (44.2%); *Avoidance* (29.5%); *Distraction* (27.1%); *Trying to sleep* (24%); *Active control* (11.6%) and *Clinging to stuffed animals* (5.4%). *Effectiveness* was rated by the children on a 3-point scale from 1= not at all helpful; 2= helpful and 3= very helpful in their coping behaviour for reducing their anxiety. Muris et al. (2001) also found that the coping strategies differed with regard to effectiveness. Whereas an *Avoiding coping* strategy was reported to be less effective, an *Active control* coping strategy was found to be more effective.

The above self-reported coping strategies results confirmed those of Mooney et al. (1985). The latter researchers reported that children presented with a variety of coping strategies in response to a checklist and a factor analysis of the results revealed the following five coping categories: *Internal self-control*; *Social support*; *Inanimate objects*; *Prayer*; and *Avoidance/escape*. According to Mooney et al. (1985), *Self-control* and *Avoidance/escape* were the most commonly used strategies. Unfortunately, the effectiveness of children's coping strategies was not addressed.

It is interesting to note that maternal reports (Bernzweig et al., 1993; Eisenberg et al., 1993) indicate high levels of support seeking, in contrast with the children's own, more frequent reporting of avoidance actions.

According to Muris et al. (2001), the parents reported comparable frequencies for their children in the more overt categories, such as *Seeking support from parents* and *Avoidance*, whereas they underreported categories such as *Distraction*, *trying to sleep* and *Active control*. Interestingly, the researchers found a substantial number of parents whose responses were classified as *Don't know*, while this category was not an option for the children's reporting. According to Muris et al. (2001, p. 25), the results showed that there was often "substantial divergence between parental and children's own reportings". This is in line with findings by other authors such as Roberts, Vargo and Ferguson (1989) that agreement between parent and child is usually low.

Muris et al. (2001) acknowledged some methodological limitations in their study, such as difficulties in the use of standardised measures for assessing night-time fears in the age range of the younger children; the questionnaires that are available are designed for school-going children. As a result the study relied solely on interviews with both parents and children. At this stage, however, it appears to be one of the most comprehensive studies on the relation between young children's fears, coping and efficacy ratings.

According to Fields & Prinz (1997), certain tentative conclusions can be drawn from a few studies on a normative population of preschool children that link coping and adjustment. Field, Alpert, Vega-Lahr, Goldstein and Perry (1988), conducted a study with 56 preschoolers (mean age = 6.5 years) by examining the relationship between coping and adjustment as measured by post-surgery anxiety recovery rates. It was found that, although approach coping was associated with greater distress during the medical procedure, it was strongly associated with faster recovery rates. According to Fields & Prinz (1997), other research linking coping and adjustment has been reported in the field of peer conflict; this mainly points towards improved social competence associated with problem-solving strategies and the expression of dislike. Outcome studies pointed towards the notion that "revenge coping, aggression and venting are not socially adaptive, while there were mixed findings for support seeking" (p. 969).

A variety of coping strategies are employed by children who experience problems or feelings of anxiety and depression (Muris, Van Brakel and Meesters, 1998), as well as night-time fears (Muris et al., 2001). Avoidance strategies were found to be least

effective. Ollendick, Langley, Jones and Kephart (2001) stated that ineffective coping styles such as avoidance might be associated with the development, or in particular, persistence of fears.

Two aspects of the Muris et al. (2001) study need to be challenged, namely, that no further mention is made regarding the socio-economic status groups (although an initial categorisation is made) and that the content was restricted to a certain extent by focusing on children's night-time fears and coping; thus children were "contaminated" by a given context. These issues will be addressed in the present study.

From a developmental and preventative perspective, it is important to take cognisance of coping strategies that have been reported to be associated with better adjustment, on the one hand, as well as higher problem symptoms, on the other, during the subsequent life stage of middle childhood. Fields and Prinz (1997) summarised this point by stating that in middle childhood "coping strategies associated with better adjustment (as defined by internalizing symptoms) include cognitive strategies of self-calming and cognitive distraction, as well as problem solving. Those strategies associated with higher levels of internalizing symptoms include self-denigration, focus on negative affect, support seeking, intervening in parental quarrels, and escape thoughts" (p. 969). They conclude that higher levels of externalising symptoms correspond with greater use of emotion-focussed strategies and less recourse to problem-focused strategies. The tendency that teacher/children reports can vary substantially is underlined by the interesting report by teachers that socially competent children make more use of approach strategies. On the other hand, depressed socially competent children self-reported that they make use of avoidance strategies more often (Fields & Prinz, 1997).

Although it appears from the literature that understanding children's coping mechanisms, and especially their perceived efficacy, is important for our understanding of what it means to them and for our efforts to develop effective prevention programmes, the researcher could not find any South African research on coping with fears in early childhood.

3.2.1 Gender differences in coping mechanisms and perceived efficacy

As mentioned above, although the understanding of age effects and individual differences is of fundamental importance, coping research on these variables has been disappointing (Compas et al., 2001).

In one of the few recent studies which addressed gender differences in relation to coping strategies and their effectiveness in young children, Muris et al. (2001) found that the girls reported the coping strategy of *Seeking support* from parents more frequently than the boys did.

In a comprehensive retrospective study Sipes et al. (1985) examined the responses in the essays of 2728 (676 boys and 613 girls) students on their greatest fears when they were young, as well as their coping strategies. Apart from gender differences with regard to types of fear, students also reported several significant differences in the coping strategies; the boys employed more active means of overcoming their fears, while the girls exhibited more diversity in their coping strategies.

3.2.2 Cultural group differences in coping mechanisms and perceived efficacy

It is certain that the situational context affects coping, its influence ranging from the choice of coping strategies to the outcome of coping (Aldwin, 1994). According to Aldwin, socio-cultural influences on the stress and coping process are not well researched.

Aldwin (1994) postulated that there are four ways in which the influence of culture on stress and coping process can be conceptualised. The cultural context influences the types of stressors; it also influences the appraisal of the stressfulness (through factors such as the beliefs and values prevalent); it affects the choice of coping strategies as well as providing institutional mechanisms by which someone can cope.

Another cultural aspect that needs to be taken into consideration is the definition of the appropriateness of coping behaviours, which are not uniform among different cultures. Aldwin (1994) finally concludes that it is not a case of a one-way influence of culture affecting individuals' coping behaviours; it is also important to take into account the influence of individuals' coping behaviours on culture.

3.2.3 SES differences in coping mechanisms and perceived efficacy

As far as the researcher could ascertain, socio-economic status differences in young children that may affect coping and perceived efficacy with regard to fears have not yet been researched. Compas et al. (2001) ascribe the fact that research has been disappointing in this area primarily to the problems in the conceptualisation and measurement of coping. Certain researchers in this field, such as Muris et al. (2001), took socio-economic status, based on the occupational levels of both parents, into consideration in establishing a representative sample, but they did not elaborate on individual differences with regard to the results found. From the literature it appears that there is a need to research individual differences such as socio-economic status that may influence coping in young children.

3.2.4 Community violence risk comparisons in coping mechanisms and perceived efficacy

As far as the researcher could ascertain, no studies reflecting community violence risk comparisons in coping and perceived efficacy in relation to young children's fears could be established. Two South African studies, although not applicable to be compared to the present research group of 5- to 7-year-olds, provide a context for the conceptualisation of violence with regard to particular groups of children within the South African situation.

In studying the effect of exposure during an ongoing climate of violence on a sample of 115 8- to 12-year-old children from Gauteng, South Africa during the 1993 pre-election period, Rudenberg et al. (1998), found that the use of different coping styles and defence mechanisms appeared to influence the effect of stress on children. They found

that “social support and denial appeared to assist coping, while feelings of helplessness and internalisation of anger appeared detrimental” (p. 107). Rudenberg et al. (2001) conclude that in the face of ongoing violence, a high level of resilience was found in black South African children, and, despite lower proximity to violence, a possibly elevated level of stress was found in white South African children.

Govender and Killian (2001) deduce from the literature that it is evident that the relationship between exposure to violence and its effects is rather complex and dynamic. The South African study by Govender and Killian (2001) gives perspective to the psychological effects of chronic violence on adolescent youth living in the townships of the Midlands region of KwaZulu-Natal, South Africa. The researchers identified four school communities which had differing levels of violence as reflected by Police Crime Statistics according to the HSRC (in Govender & Killian, 2001). The violent categories that were taken into account included murder, abduction, armed robbery, theft of firearms, arson, public violence, assault, assault of police officers and rape. With regard to the utilisation of coping strategies, the results show that the participants of the school that recorded the lowest crime statistics were “significantly lower on the relatively maladaptive emotion-focused coping strategies of acceptance and self-blame” (Govender & Killian, 2001, p. 9). The researchers report that these participants’ deployment of active coping strategies seemed at some level to ameliorate their situation, whereas the participants of the school which yielded high crime statistics appear to be using few coping strategies. Govender and Killian (2001) conclude that there is still a need for greater focus on factors which facilitate coping both at a community and individual level.

For the purpose of the present study a comparison among low-risk, medium-risk and high-risk community violence areas within the Stellenbosch region was made. The areas were distinguished on the basis of statistics obtained from the South African Police Centre for the Analysis and Interpretation of Crime Information. The violent crime categories that were taken into account included assault, robbery, attempted robbery, arson, rape, attempted rape, murder, attempted murder, abduction and rioting.

3.2.5 Conclusion

From the literature review it appears that there is a shortage of data concerning young children's coping with fears and perceived efficacy. Within the South African context in particular little is known on this topic and it is hoped that some answers will be provided by the present study.

3.3 Chapter summary

Chapter 3 provided the literature review on research findings relating to fears, as well as to coping and perceived efficacy in early childhood. Firstly, research pertaining to the content and number of fears was summarised and discussed in detail. Accordingly, research on coping with fear, including perceived efficacy in early childhood, was addressed. The literature on the four independent variables was reviewed and discussed in relation to the following: gender, culture, socio-economic status and community comparisons regarding levels of violence risks.

In the following chapter, a theoretical framework, based on ecological systems theory and other relevant developmental theories, such as the psychodynamic perspective, social-learning theory and cognitive developmental perspective, will be discussed.

CHAPTER 4

THEORETICAL FRAMEWORK

This chapter provides a theoretical framework for the study. Ecological systems theory provides an extensive description of the context in which development proceeds and thus offers a meta-theoretical framework for contextualising the preschooler's world and experience of fears and coping mechanisms, including their perceived efficacy. Within this broad perspective, other major developmental theories, such as the psychodynamic perspective, social-learning theory and the cognitive developmental perspective, will also be incorporated and discussed.

4.1 Ecological systems theory

In order to account for the wide interrelated range of systems that impact on the child, **Ecological systems theory**, which stresses the need to understand the development of the self in terms of the everyday environment in which children grow up (Meyer, Loxton & Boulter, 1997) will serve as the broad theoretical framework for the proposed study. Within this broad framework other theories pertaining to relevant developmental phenomena will be incorporated to understand the preschool child's functioning holistically.

Bronfenbrenner (1979, 1986) postulated that the ecological systems theory accounts for all interrelated systems describing the ecological environment, which is seen as an arrangement of four concentric systems, namely micro-, meso-, exo- and macrosystems that are continuously interacting. The development of the child takes place across all these areas. The developing child is influencing and at the same time being influenced by his environment in a dynamic two-way interaction (Craig, 1996). According to this ecological systems approach to human development, children's fears, coping mechanisms and perceived efficacy can be influenced by their interactions with different systems.

The **microsystem** represents the activities, roles and interactions of children within their immediate physical and social setting, such as for example the home and the day-care centre (Craig, 1996), which influences their development on all levels, including intrapsychic and interpsychic dynamics. According to Craig (1996), this level is studied most often by psychologists.

Intrapsychically, from a developmental perspective, the child's physical, cognitive, emotional and social developmental status impacts on her functioning and thus also on the experience and expression of fears, coping mechanisms and the perceived efficacy of the coping.

As preschoolers' physical and especially *motor* functioning are more sophisticated than during their toddler years; they are capable of moving around very independently, taking pride in riding their own bicycles, exploring their worlds from trees, jungle gyms, sandpits and self-built "houses". Increased gross-motor developmental changes are co-ordinated with improved fine motor development, resulting in most preschoolers being very fond of expressing their creativity through activities such as drawing, cutting, pasting, playing with dough, mud or any gooey textured materials. Not surprising then that researchers such as Burgess and Hartman (1993), amongst others, found drawings a useful medium to assist children in talking about frightening events. Martalas (1999) confirmed this finding and emphasised the value of the child-friendly and non-threatening nature of drawings within the preschool environment where children are used to making drawings of themselves on an almost daily basis in most preschool contexts.

Simultaneously with the independence achieved by motor development in the early childhood years, language skills develop at a rapid speed, enabling children to communicate very well. From the age of 5 years onwards the young child's skills to engage their conversation partner improves significantly; they are also good listeners who understand language well (Brems, 2002). As language improves, children's cognitive development also develops accordingly. Characteristically of their inquisitiveness and curiosity at this stage, preschool children are exploring their world. As they engage more and more in symbolic thought, as seen in their symbolic and make-belief play on a cognitive level, their logic tends to remain bound to perception,

due to the absence of crucial elements, such as conservation and perspective, as defined by Piaget (in Brems, 2002).

According to Denham and Couchoud (1990) and Tremewan and Strongman (1991), preschool children's *emotional functioning* provides them with the ability to recognise and describe basic emotions, such as happiness, sadness and fear. Liwag and Stein (1995) conclude that young children are able to retain coherent and meaningful memories of emotional events which directly affect their well-being. In addition, research findings show that preschoolers are able to report on their fears should they be asked to do so (Borke, 1971). Young children in the age group between 5 and 7 years are able to report verbally due to rapid development of language and speech during the early childhood years (Louw et al., 1998; Mussen, Conger & Kagan; 1974; Papalia & Olds, 1986). Simultaneously, it is postulated that children's emotional and cognitive development also plays an important role in their coping strategies and perceived efficacy as the regulation of emotion is one of the important developmental tasks of early childhood. From a *biological* point of view, it is postulated (Izard, 1977) that maturation of the nervous system has an influence on the process of emotional development. The latter contributes towards emotional self-regulation as children become increasingly more able to inhibit crying and reactions of frustration. Emotional development is thus influenced by both maturation and social learning factors.

Healthy psychosocial development in early childhood is characterised by the young child's initiative to explore her environment by asking questions and in becoming increasingly curious in her way of participating purposefully in the environment. The acquisition of children's coping abilities is influenced by *social factors* in that young children experience support from their parents by means of the activities that they share with them. At a later stage, during middle childhood, children become increasingly able to incorporate other people's perspectives (Fields & Prinz, 1997).

On an *interpsychic level*, it can be concluded that parents play an important role in acting as social agents with regard to sex-role expectations, while in terms of social-learning theory they may influence aspects such as the number of fears their children are prepared to report (Graziano et al., 1979).

The second level, or **mesosystem**, is formed by the interrelationships among two or more settings (Craig, 1996). In this regard the dynamic interaction (including formal and informal connections) among, for example, the child's home, day-care centre and peer group, have the strong potential to affect the child's development and functioning. The active role of the developing child as participant in the various interactions which form the mesosystem is emphasised by Bronfenbrenner (1979). It is evident that the child's interaction on the mesosystemic level has the potential to provide stimuli for childhood fears, such as school phobia (Shand, 1994). In the same way, the child's coping mechanisms and perceived efficacy may be influenced on this level.

The **exosystem** refers to the social settings not in the immediate experience of the individual, but still affecting her. According to Bronfenbrenner (1979), the exosystem does not involve the developing child as an active participant, but affects and is affected by what happens to the child. A very appropriate example would be the influence of the media, especially television, which has been shown to influence children's fears (Cantor & Hoffner, 1990).

Bronfenbrenner (1979) refers to the **macrosystem** as consisting of the values, laws and customs of a society, as being critical to the development of a child since it has the power to influence all the other levels of functioning. This can be demonstrated with regard to the shortage of mental health services for children in South Africa. According to Pillay and Lockhat (2001), this shortage is common even in many high-income countries all over the world. However, taking into account South Africa's history of discriminatory and hostile policies of apartheid and the discrimination against especially black people into consideration, they postulate that the incidence of childhood mental health problems is expected to be much higher comparing to other countries. Statistics from the 1996 Central Statistics Service (in Pillay & Lockhat, 2001) show that almost 20 million (46,8%) South Africans are children under the age of 19 years. It is projected that approximately 3 million (15 %) of the country's children could have their quality of life improved by psychological or psychiatric intervention. Pillay and Lockhat (2001) concluded that the traditional mental health model failed to address the mental health needs of South African children; they thus advocated the "search for alternative

community-oriented models that could provide basic mental health care to all citizens, regardless of their socio-economic status" (p. 104).

By addressing macrosystemic issues such as, for example, policy regarding children's mental health needs, all the other systems could be dynamically influenced in the best interest of the child.

Martalas (1999) conceptualises the interaction of the different systems by citing Dawes and Donald's (1994) statement that parental unemployment could have considerable effects on other family members (the exosystem), for example, increased conflict at home (the microsystem) may lead to fearfulness in the child which in turn could influence his performance at school (mesosystem).

4.1.1 Conclusion

From an ecological systems theory perspective, it is clear that the different systems within which the child functions can contribute towards the preschool child's expressed fears, coping mechanisms and perceived efficacy. During the 5 to 7 year stage the child's abilities from a developmental perspective contribute towards their being able to recognise the emotion of fear, recall fearful situations and able to describe coping mechanisms in order to address these fears. The most child-friendly way of eliciting these fears and accordingly obtain data on coping behaviour for research purposes relies on the skilful use of non-threatening techniques such as child interviews and drawings.

4.2 Psychodynamic perspective

The **psychodynamic perspective** emphasises the child's feelings, drives and developmental conflicts. According to this perspective, unresolved conflicts can result in, amongst many other things, anxiety and fearfulness in young children (Erikson, in Craig, 1996).

According to Westenberg, Siebelink and Treffers (2001), the presumed link between normative fears and phobias implies that the latter are extreme cases of normative fears; but this provides no explanation of why there should be a developmental pattern of normal fears in the first place. According to them, psychosocial developmental theory may offer an explanation for the converging pattern of normative fears and anxiety disorders. In order to describe the development of early fears, the two most prominent approaches, **psychoanalytic and attachment theories**, may account for the early roots of vulnerability to anxiety disorders.

Anxiety as construct is a key concept in the psychodynamic model of abnormal behaviour. Difficulties in development during the early psychosexual stages (the oral, anal and phallic stages) of childhood are believed to potentially be the foundation of future anxiety-based disorders. Freud introduced the concepts “free-floating” or “neurotic” anxiety to describe ongoing feelings of discomfort associated with the repression of an id impulse, while “moral” anxiety was associated with the superego punishing the ego for expressing an id impulse (in Eisen & Kearney, 1995, p. 50). Neurotic anxiety may manifest itself in the form of a phobia about a specific object, which is translated in psychodynamic theory as a displaced symbolic representation of an expressed id impulse. The case of 5-year-old Hans, referred for a phobia of horses, serves as a good example of how Freud interpreted his problem as a repressed and displaced fear of his father’s potential punishment for the expression of the boy’s love for his mother. The child’s fear was reduced after Hans’s father provided him with this etiological explanation (Eisen & Kearney, 1995).

A basic assumption of psychoanalytic theory is that anxieties are symbolic expressions of early fears and the latter are rooted in inner conflicts stemming from early childhood (Westenberg et al., 2001). One of the main critiques against the psychoanalytic theory of anxiety is its narrow focus on development in early fears and its failure to explain further developments of anxiety and its disorders.

Attachment theory relates anxiety disorders to an insecure attachment relation to a person’s primary caretakers in the first 2 to 3 years. The possible connection between insecure attachment and the existence of anxiety disorders in children and adolescents

has been investigated by several researchers. Clinical observations by Bowlby (1973) and Klein (1981) suggesting a strong connection between insecure attachment in early childhood and agoraphobia in adulthood were contradicted by later studies. The findings of De Ruiter and van Ijzendoorn (in Westenberg et al., 2001) indicate a non-specific relation between anxious attachment in the early years and anxiety disorders later in life. The latter finding confirms Anna Freud's view that the same anxiety may be expressed in a variety of ways. According to Ollendick (1998), it thus appears that insecure attachment may constitute a vulnerability to the development of anxiety disorders, but that the specific outcome is determined by life experiences and developmental level.

However, to account for the continuing changes in the expression of fears, anxieties and disorders, **alternative** psychosocial developmental theories need to be accommodated.

Frequently used, widely known and studied is **Erikson's** model of psychosocial development (Erikson, 1963). Although many principles overlap with Freudian theory regarding a stage approach and the importance of childhood experiences, Erikson differed greatly from Freud with regard to his emphasis on psychosocial development rather than the Freudian psychosexual determining factor in development. Erikson (1904-1994), being a third-generation Freudian, believed that development occurs in 8 stages across the life span of the individual and he postulated that personality emerges from the way in which social conflict is resolved during key interaction points in development. Each stage is therefore marked by a psychosocial crisis in which the individual has to orient him- or herself according to two opposite poles. During each of the eight stages a specific task or conflict will be more important than others and the resolution of each stage lies in a synthesis of two opposite poles. In this view he included the role of cultural or social influences on human development and thus introduced a more optimistic view of human development than the Freudian psychosexually deterministic view (Craig, 1996; Louw et al., 1998).

The eight stages of psychosocial development are more or less age-relevant, but although each conflict is critical at only one stage, it is presented throughout life. The third stage of psychosocial development, which lasts from approximately 3 to 6 years is characterised by the task of children exploring beyond themselves and learning to deal

with things and people in a constructive way to gain a sense of initiative, with a synthesis of purpose. At the same time a feeling of guilt, being the opposite pole of initiative, needs to be overcome. Because children have greater access to the world and society at this stage, compared to their early years, they now may find themselves in situations in which they can act against society's rules. If they are criticised severely or punished for their actions, they learn to feel guilty. Unresolved conflicts can result in, amongst other things, anxiety in young children.

It is hypothesised that children's coping and perceived efficacy may be linked to the resolution of the crisis. Effective coping mechanisms could contribute towards taking initiative and exploration, thus gaining a sense of purpose. A feeling of ineffective coping, on the other hand, could generate a sense of not being able to deal with the world constructively, thus creating unnecessary conflicts, fears and anxiety. The latter may also hamper future psychosocial development, so the successful management of the crisis in the middle childhood years entails learning to balance feelings of industry versus inferiority in order to gain a sense of mastering and self-confidence. It is hypothesised that this may also be linked to feelings of effective or ineffective coping with fears on the same basis as in the early childhood years.

Another stage model to describe development in childhood and adolescence on the basis of a different organising principle perspective is **Loevinger's ego development theory** (Loevinger 1976, 1993). Westenberg et al. (2001) stated that the age data on normative fears and the prevalence of anxiety disorders converge both with regard to fear content as well as with empirical data with Loevinger's ego development theory (1976, 1985). Her theory lends itself to exploring the underpinnings of anxiety and its disorders in childhood and adolescence.

Four levels of ego development are particularly relevant with regard to the study of anxiety, namely the *Impulsive level*, *Self-protective level*, *Conformist level* and *Self-aware level*. Westenberg et al. (2001) synthesised material from the literature on fears, anxiety disorders and ego development in terms of four clusters connected to four approximate age ranges, i.e. the time period expected for the peaking of the corresponding developments. They insist that it is important to take cognisance of the

fact that the age ranges “do not imply that these developments never occur in younger or older subjects” and also to bear in mind that, although anxiety and its disorders may be related to psychosocial development, the latter is not perfectly related to age (p. 79).

The clusters are age related under the above-mentioned conditions: Cluster 1 (age 5 to 9 years); Cluster 2 (age 9 to 13 years); Cluster 3 (age 13 to 17 years) and Cluster 4 (age 17 to 21). In light of the present study's focus on preschoolers, the target group relates to findings pertaining to Cluster 1, with the relevant approximate age group ranging from 5 to 9 years.

Cluster 1 refers to the *Impulsive* stage of ego development and it is interesting to note that the fear of fantasy objects and situations, fear of animals, specific phobias about the animal type and separation disorder are all connected with this cluster (Westenberg et al., 2001). Characteristic of the Impulsive stage is the child's vulnerability and dependency. The sense of vulnerability is highlighted by the inability of the child to distinguish between realistic and imaginary dangers. Simultaneously, the child is dependent on other people to determine whether a situation is dangerous or not. This can be illustrated by the fear of animals where other people (often elders) have to determine whether an animal is dangerous. Trusted elders thus provide reality-testing of and protection against dangers.

Westenberg et al. (2001) postulate that the dual dependence on others produces the greatest fear in children in this stage, which is to be without the resources of elders, leading to a fear about getting lost or losing their parents and thus being left alone with their own limited resources. Should something happen to their parents, children fear being left unprotected.

Westenberg et al. (2001) remark that it is interesting that fear of regular people is relatively absent during this stage, although it is hypothesised that children in this stage would fear harm done by people as much as being done by animals. They conclude that the trust that children have in their caretakers is generalised to a belief that other people would take care of them. Separation anxiety could be explained in terms of a lack of transfer of trust to other people. Another explanation that is offered for children not

fearing humans may be the familiarity of the physical features: "anything too discrepant from the physical norm is fear-provoking" (p. 81). This also explains why children in the Impulsive stage fear imaginary creatures and animals, dangerous people such as burglars with ugly faces, masks and weapons. Contrary to this, any person "remotely resembling one's own kin is not feared" (p. 81). The fact that children easily trust familiar-looking people because of their limited capacity to differentiate between trustworthy and dangerous people, as well as real from imaginary dangers, is often of great concern to adults working with young children.

The present researcher is, however, concerned about the possibility of children in a South African violence-racked community who, contrary to developmental research findings from elsewhere in the world, might be scared of other people. On the one hand, the fear of other people, should it emerge, might be an indication of the South African reality in the sense that it might reflect something of the dynamics and the influence of a violent community; on the other hand, such a fear might be positive for a young child to enable her to recognise the dangers relating to other people who scare her, to be able to adapt to the reality of her life and be self-protective.

4.2.1 Conclusion

Although the psychodynamic models of anxiety treatment and etiology are still used, they have, according to Johnston and March (in Eisen and Kearney, 1995) fallen into disfavour. The main reasons for this can be ascribed to insufficient empirical evidence and the inadequate psychodynamically based assessment techniques.

4.3 Social-learning perspective

Eisen and Kearney (1995) postulated that, although the etiology of fear and anxiety disorders still receive intensive research attention, an etiology based largely on social-learning principles seems to be most accurate for understanding the phenomena of fear and anxiety in preschoolers and young elementary school-aged children.

Biological variables, however, serve as the basis for many learned internalising reactions and cannot be ignored when trying to conceptualise the fears and coping mechanisms in young children. Genetic factors, as well as potentially strong evolutionary fears of separation and the dark, can have a strong influence on children (Eisen & Kearney, 1995).

Marks (1987) refers to the influence of social referencing on children's fears. In his review on the development of normal fears, Marks (1987) noted that that it appears to be possible to predict when normal fears will emerge, reach a plateau and decline over the course of human development. This tendency is notable in studying the phenomena of fear of separation and strange adults. These fears are common in infants at age range 8 to 22 months; this is usually followed by fear of strange peers and, at a later stage, fears of animals and, still later, fear of the dark. Fears of separation, strange adults and strange peers start to decline from approximately the age of 24 months, while the latter two decline when the child is older. Marks argues that this sequence is a reflection of maturation under genetic control whilst in interaction with the environment. Bateson (in Marks, 1987) concludes that, although disruption of the usual genetic or environmental influences can change what happens, many developmental processes can be compensated for by a variety of routes. It is interesting for example that, taking into account the varying patterns of child-rearing, fear of strangers and of separation are experienced universally by children all over the world.

According to Marks (1987), the processes on which the emergence and decline of developmental phenomena such as fears depend are still not clear; apparently these processes slowly consolidate to a certain point where behaviour becomes noticeably transformed. By taking the example of the fear of strangers, the continuum of control between the genes and the environment can be demonstrated. Marks (1987) argues that, for such a fear to develop, prior learning of what is familiar is required beforehand. This process goes back as far as the mother's womb. After birth everything is novel for the neonate and only abrupt big changes in stimulation makes a difference in the child's world. However, over a period of time, more subtle and complex discrepancies, associated with development, begin to arouse wariness, so that recognisable fears of

strangers and of separation usually develop towards the end of the first 12 months of the infant's life.

There appear to be no clear-cut indicators of the degree of learning required for a fear to emerge, however, as some fears emerge only after specific experiences (such as an exam), while others (such as those of separation), seem to emerge spontaneously in most children of a certain age, without any experience beyond the normal.

It is believed that fear is a normal part of childhood development and that it is possible to predict the fear patterns throughout different developmental stages. Normal fears are developmentally appropriate, short-lived, frequently have adaptive qualities and reflect the everyday experiences of the child. It is interesting, however, that some of these fears can be connected to some common objects of phobia, suggesting that normative fears could be a predisposing factor to phobia (also commonly referred to as excessive and persistent fear). In order to understand the theoretical model of fear acquisition through conditioning, it is helpful to examine critically the evidence that childhood experience has a link with the acquisition of phobias.

In order to understand the present conditioning tendencies, the shortcomings of the early simple conditioning models from exponents such as Watson and Mowrer are briefly discussed in terms of five main criticisms (Field & Davey, 2001).

They mention first that some phobics (e.g. some animal phobics) have no memory of an aversive conditioning experience at the onset of their phobia about, for example, snakes and spiders (Davey, 1992). Secondly, there is evidence that not all people who experience fear or trauma develop a phobia. Evidence shows that fliers who experienced a traumatic accident do not necessarily develop a fear of flying (Aitken, Lister & Main, 1981). Thirdly, incubation (Eysenck, in Field & Davey, 2001), which refers to "the phenomenon where fear increases over successive non-reinforced presentations of the conditioned stimulus" (p. 191). The fourth criticism refers to the uneven distribution of fears; it appears that some stimuli are more readily feared than others. The theory behind this phenomenon suggests that, in the Pavlovian tradition, "all stimuli are equally likely to enter into association with an aversive consequence" (Field &

Davey, 2001, p. 191). Certain phobias (such as about spiders, snakes, dogs heights, etc.) are more prevalent than others (such as for knives, guns) and are more likely to be associated with trauma. The last criticism refers to what Rachman (1977) called a second route of learning, namely that fears could be acquired through observational learning.

The above criticisms disqualify the simple conditioning model from being adequate to effectively explain the acquisition of phobias. Davey (1997) proposed an updated model of fear acquisition in which some of the above criticisms are addressed.

Firstly, the fact that some phobics cannot recall an aversive conditioning event could be ascribed to the fact that it never happened and that phobia developed over time. Davey's neoconditioning model thus predicts that direct conditioning is not a necessary prerequisite for a phobia to develop. The second criticism, namely that not all people who experience trauma develop a phobia, is addressed in Davey's neoconditioning model by "incorporating cognitive factors which could determine whether a person experiences a phobia as the result of trauma, or not" (Field & Davey, 2001, p. 204). Interestingly, the use of coping strategies serves as an important contributory factor to explain why some people can devalue traumatic experiences. Pearlin and Schooler (1978), identified three major types of coping with stressors, namely (1) problem-focused coping; (2) emotion-focussed coping and (3) strategies to control the meaning of the trauma. With regard to Pearlin and Schooler's (1978) third category, Davey (1993) identified a threat-devaluation strategy to devalue the impact of trauma. In a study comparing the coping strategies of simple phobics, panic disorder patients and normative fear groups, Davey, Burgess and Rashes (1995) found that the first two groups differed from the normative groups in that they reported greater use of avoidance strategies and less use of threat-devaluation strategies. Thirdly, it is proposed that the incubation process could be explained by rehearsal, leading to successive increases in fear. Field and Davey (2001) conclude that empirical research still has to be done to confirm the above hypothesis. With regard to the uneven distribution of fears, the neoconditioning model suggests that people acquire information (verbally, but also transmitted culturally) about which stimuli elicit fear. Field, Argyris and Knowles (in Field & Davey, 2001) argue that children's normative fears are guided by a great deal of

culturally transmitted information about what to fear and what not; some of this information could also provide a future base for abnormal fears. Especially with young children, some nursery rhymes often transmit scary information about fearful objects. For example, there may be a possibility that a spider fear or phobia is connected to the nursery rhyme about Little Miss Muffet.

Little miss Muffet, sat on a tuffet, eating her curds and whey.

Down came a spider and sat down beside her and frightened miss Muffet away

And what does the familiar “Siembamba” in Afrikaans really convey about protection and nurturance?

Siembamba, Mamma se kindjie (2)

Draai sy nek om, gooi hom in die sloot

Trap op sy kop dan is hy dood.

Lastly, fear acquired through observational learning is an essential part of the expectancy evaluation system and reevaluation system in this model (Field & Davey, 2001)

It appears that the distinction between normative fears and phobias is important, especially in addressing these phenomena therapeutically. Eisen and Kearney (1995) postulated that, although the etiology of fear and anxiety disorders still receive intensive research attention, etiology based largely on social-learning principles seem to be most accurate for understanding the phenomena in preschoolers and young elementary school-aged children.

4.3.1 Conclusion

The **social-learning perspective** therefore appears to be an important theoretical approach to consider as it emphasises the link between behaviour and the environment. This theory may, for example, offer an explanation for phenomena such as gender differences in children's fears in that parents could find fear in girls more readily

acceptable than in boys (Wicks-Nelson & Israel, 1984). Another example is social pressures which result in a reduction in visible responses to fear, for example crying, as the child grows older (Du Toit & Kruger, 1991). Lefrancois (2001), for example, reported on the tendency in children to adopt their parents' or caregiver's fears, both through identification and by observational learning.

4.4 Cognitive developmental perspective

The **cognitive developmental perspective** (Piaget, 1951), which emphasises children's own thoughts and concepts as organisers of their social behaviour, is relevant in understanding the acquisition of fears, understanding coping mechanisms and perceived efficacy. This theory is supported by the findings of Bauer (1976) and Tremewan and Strongman (1991), who maintain that children's developmental growth from concrete personal conceptions of reality to more abstract, objective ones is reflected in the contents of fears expressed by preschool children. According to Piaget (1951), children in the pre-operational period continue progressively to acquire the ability to distinguish between fantasy and reality. Various studies verify this theory by reporting on a large number of fears relating to imaginary beings within this age group (Bauer, 1976; Derevensky, 1979; Draper & James, 1985; Tremewan & Strongman, 1991; Vandenberg, 1993).

It appears that the **development of coping abilities** in children is affected by processes including biological, emotional, social and cognitive changes. The acquisition of coping mechanisms is influenced by several aspects of cognitive development. According to a synthesis by Fields and Prinz (1997), from the very early childhood years onwards "cognitive processes are involved in the appraisal of and coping with stress" (p. 967). The cognitive conceptualisation of stressors appears to be developmentally linked. According to Piagetian theory (Piaget, 1951), the preschool child, being in the pre-operational period, has certain cognitive limitations in being egocentric, unable to distinguish between fantasy and reality, and relying on magical thinking and circular logic. An understanding of stressors is thus based on what they can observe externally. Simeonsson, Buckley and Monson (in Fields & Prinz, 1997), for example, found that

reassurance about stressful experiences being temporary may not be helpful with preschool children as their sense of temporal relations are not well developed.

The cognitive appraisal of the controllability of stressful experiences is strongly linked with children's coping abilities. Compas (in Fields & Prinz, 1997) stated that several developmental shifts in this respect have been found across studies. For example, according to Weisz, (in Band and Weisz 1988), it has been found that children between the ages of 6 and 8 years overestimated contingency in their judgement of certain situations where it did not exist; at a later stage recognition of true non-contingency improved, with a corresponding decrease in the belief in luck and in the powers of others.

Another cognitive developmental process that is related to and influences problem solving and emotional regulation is the emergence of and development of metacognitions in young children. It was found by Mischel and Mischel (in Fields & Prinz, 1997) that the availability of alternative self-control strategies involving, for example, cognitive distraction and cognitive reappraisal of the challenge increases with age.

Another consideration to be taken into account when contextualising fear and coping from a cognitive perspective in young children are, according to Vasey (in Eisen & Kearney, 1995) the development of increased memory ability to accommodate threat-related information.

4.4.1 Conclusion

According to Eisen and Kearney (1995), the popularity of cognitive models has increased in recent years with the growth of cognitive behaviourism and because of the difficulty of behavioural etiological models to explain internalising effects such as fears. Many of the cognitive models are linked to Ellis's (1962) rational-emotional theory and therapy. It is evident that the central focus of the cognitive approach is that the individual (including children and adults) gain information from the environment and appraise it

against their existing cognitive structure. The results of this are evident in individuals' unique experience of fear, coping mechanisms and perceived efficacy.

4.5 Summary and conclusion

It appears that all the major theories of childhood, and especially the combination of psychodynamic, social-learning theory as well as cognitive developmental theory, contribute towards explaining and understanding the phenomena of fear, coping mechanisms and their perceived efficacy in young children. No theory on its own provides a complete underpinning for the explanation of these phenomena. It might also be good policy to bear in mind that, in the words of Maurer (1965) "much caution is needed in interpretation, for recent events and the child's mood during the examination may be the fleeting cause of any particular answer" (p. 276).

In the following chapter, the methodology that was used to obtain and analyse the data for the research will be outlined and discussed, including the introduction, the research design, selection of participants, and the measuring instruments. Accordingly, research procedures, data analysis, and related manners concerning ethics and consultation will be dealt with.

CHAPTER 5

METHODOLOGY

The method used to obtain and analyse the data will be outlined and discussed in this chapter.

5.1 Introduction

The primary aim of the study was to obtain normative data regarding the content and number of expressed fears of a selected group of preschool children in the Stellenbosch region, as well as the coping mechanisms and perceived efficacy in response to their expressed fears of these children.

The secondary aim was to ascertain whether any differences in the expressed fears, coping mechanisms and perceived efficacy of the preschool children were found with respect to the independent variables of gender, culture, socio-economic status and community comparisons with regard to violence risk. Although parental perceptions of children's fears, mechanisms and perceived efficacy were not a particular point of focus in the study, this subject will briefly be introduced to give a broader perspective on the preschool child's world in a systemic approach.

In order to address these aims the research design, participants and sampling, measuring instruments, research procedures, data analyses as well as related matters concerning ethics and consultation will be discussed.

5.2 Research design

The study was of an exploratory and descriptive nature and was conducted in three stages.

The first step during the *first stage* of research was to obtain permission from the Western Cape Education Department to do the research (see Addendum G). After permission was granted, the participants were recruited using a convenience sample from eight regular preprimary schools from different socio-economic status areas in the Stellenbosch area. The headmasters and/or preprimary class teachers of the identified schools were approached individually through appointments that ranged from 15 to 60 minutes, during which the purpose of the study, as well as the benefits and possible disadvantages were discussed (see Addendum A). All the schools that were approached gave their full support with regard to participation and collaboration in the study. The children who complied with the exclusion criteria (see 2.6) as potentially suitable participants were identified by the researcher in collaboration with the class teachers. Information letters (see Addendum B) were sent to these children's parents. All the children for whom informed consent was obtained from the parents/guardians (see Addendum C) were incorporated as participants in the study. Two research assistants – a male and female student, both fluent in Xhosa, with Honours qualifications in Psychology, experience of working with children and cross-culturally sensitive – were selected and trained by means of a workshop to assist the researcher in conducting the interviews of especially the Xhosa-speaking participants, for whom they acted as interpreters. The researcher made use of a child-friendly preschool teacher, who was well known as a motherly figure to all the Xhosa-speaking children to facilitate small talk and put them at ease whenever necessary. She was trained beforehand with regard to her role in the process and was committed to not commenting on or interfering with the assessment procedure of the researcher and assistants.

Stage two consisted of the process of collecting data from the children and their parents. After the necessary consent was obtained from the parents, the latter were asked to complete the Parental Questionnaire (see Addendum D) concerning biographical information, as well as reports regarding their own perception of their children's primary fears, additional fears, as well as coping mechanisms and perceived efficacy in this regard. The logistical aspects of distributing the parental questionnaires were managed in collaboration with the different school systems. A questionnaire (in the preferred language of the parents) in a sealed envelope was sent home with each child accompanied by a motivational memo from both the researcher and the teacher. This

was found to be the most time-saving and cost-effective procedure for the majority of parents as many parents work long hours, do not possess a telephone or cell phone to make arrangements and live in unsafe communities, so could not be visited by a researcher at the parents' available hours, which were usually late at night.

Most of the completed forms were received back via the class teacher and collected at the school by the researcher within the same week of distribution. Special provision was made for additional assistance to parents who indicated to either their children's teacher or to the researcher that they experienced problems of any kind. This was, however, only applicable to a small minority of the parents and was handled with great sensitivity. Additional arrangements were made with the assistance of the school system for personal interviews as far as possible.

Issues that arose with this group of parents were mainly of a threefold nature. *Firstly*, most problems were ascribed to the illiteracy of some of these parents. This problem was experienced mainly by parents in the low socio-economic status groups and assistance was provided in this regard. *Secondly*, some of the parents (mostly the same parents who experienced the first problem) were scared and sceptical about the researcher's motivation for asking the question on the number of people living together in the household (Addendum D, question 12). They expressed their concerns about the possibility that information might be given to the municipality or other authorities with adverse consequences for them such as, for example, losing their houses due to overcrowding. The researcher (and/or interpreters) found this a good opportunity to give perspective on the research and assuring people of their rights regarding research participation. *A third tendency* that emerged was that a few of the parents did not know the answers to some of the questions, especially about what their children were scared of and how they cope (questions 20 - 23). During conversations on this issue, the option of "don't know" when they really did not know was introduced, so that they were satisfied and did not feel obliged to just give any answer to satisfy the researcher.

Special efforts to accommodate all participants in addressing the above issues contributed towards the process of obtaining reliable information. Initially 165 children were recruited but 13 profiles needed to be discarded due to incomplete biographical

data. This could mainly be ascribed to illiteracy among the parents and, according to the translator, a lack of understanding of the purpose of the questions. These data obtained could therefore not be utilised as reliable information.

Once the parental information was obtained, arrangements were made to obtain data from the identified children. Apart from visiting the relevant schools prior to the interviews to familiarise the researcher and the research assistants with the participants, approximately 30 minutes for individual interviewing were allocated per participant; this proved to be a realistic time unit according to the pilot study of Martalas (1999). Interviews with each child were either audio-taped or video recorded to be transcribed afterwards in order to verify or clarify written notes made by the researcher during the interviews.

During *stage three* the data were analysed quantitatively as well as qualitatively. Arrangements were made to discuss the results of the research individually with the interested teachers/caregivers as well as parents/guardians of the participants, should the need arise. Individual feedback was requested by approximately 10% of the participants' parents and or teachers.

The researcher was privileged to discuss the preliminary findings of the study with Dr Peter Muris (see reference list for publications), an expert researcher in the field of childhood fears and anxiety, at Maastricht University in the Netherlands during a study visit exchange programme in June/July 2002. During two guest lectures at the Departments of Psychology of Maastricht University and the Department of Psychology, University of Stellenbosch, the preliminary results were discussed with interested students and colleagues. These experiences contributed a great deal to broaden and challenge the researcher's perspective on the study.

5.3 Participants

The final sample of participants consisted of 152 children selected from the population of children between 5 and 7 years attending a preschool or day-care setting for at least 3 months prior to testing. To enhance generalisability, a convenience sample of

participants were selected from eight preschool settings from different socio-economic areas in the Stellenbosch region, according to the local School Clinic's classification. Independent variables taken into account were gender, culture, socio-economic status, community comparisons with regard to violence risk, as well as parental perceptions of their children's fears, coping mechanisms and perceived efficacy.

The guidelines by Kruger (1989) for qualitative phenomenological research were applicable to the participants in the present study. These guidelines were utilised in the pilot study by Martalas (1999) and proved to be scientifically as well as socially relevant within the South African context. The following guidelines, as suggested by Kruger (1989, p. 150), were taken into account:

- The participants' experiences could be related to the phenomenon that is researched; in this case the expression of fear content, coping mechanisms and perceived efficacy. The methodology was adapted according to findings in the literature in order to elicit responses to the above in a child-friendly and ethical way;
- The participants were verbally fluent and able to communicate their feelings. According to research findings from a developmental perspective, 5- to 7-year-olds can express themselves verbally and understand the concept of fear (Louw et al., 1998);
- Participants were tested in their home language. In order not to lose subtle semantic nuances, all the interviews were either audio-taped or video recorded to be transcribed as necessary;
- The participants expressed a willingness to be open to the researcher. As was the case in Martalas's study (1999), the majority of the participants seemed keen on drawing and/or talking about their fears. In the present study 12 of the 152 participants (7.9%) chose not to draw their fears, while two participants (1.3%) expressed having no fears. Of the 92.1% of participants who drew their fears, 78% of the participants' drawings complied with their expressed primary fear; 10.5% of

the participants drew an expressed additional fear, while 3.3% of the participants' drawings did not comply with their expressed fears.

- The participants were naïve with respect to psychological theory, as is required by Kruger (1989). This assumption was made based on the age of the participants.

According to the preferences of the participants, the research was conducted in Afrikaans (53.3% of the participants), English (18.4% participants) and Xhosa (28.3% of the participants).

The biographical and other data of the 152 participants of the study are reflected in the following figures and refer to age, gender, culture, the fathers' and mothers' occupations, their education, the socio-economic status of the mother, father and both parents, and lastly the child's domicilium.

Figure 5.1 provides a histogram of the chronological age distribution of the 152 participants.

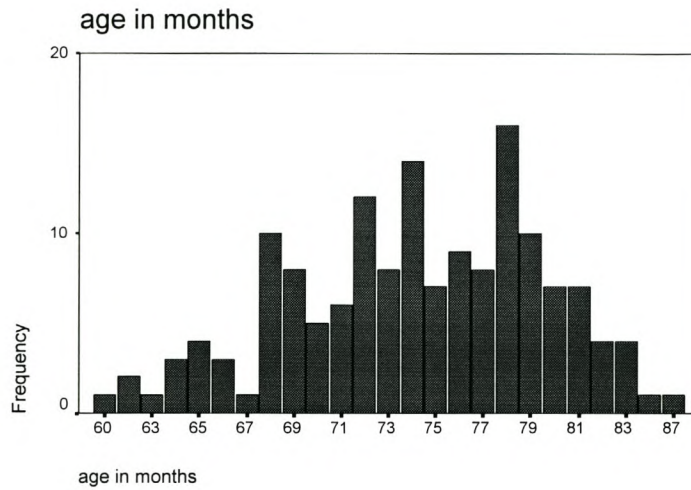


Figure 5.1 Chronological age distribution of participants

The 152 participants' chronological ages ranged between 60 months (5 years) and 87 months (7 years and 3 months). The mean chronological age of the children was 74.19 months (6 years and approximately 2 months), with a S.D = 5.32

The gender distribution of the 152 participants is depicted in Figure 5.2.

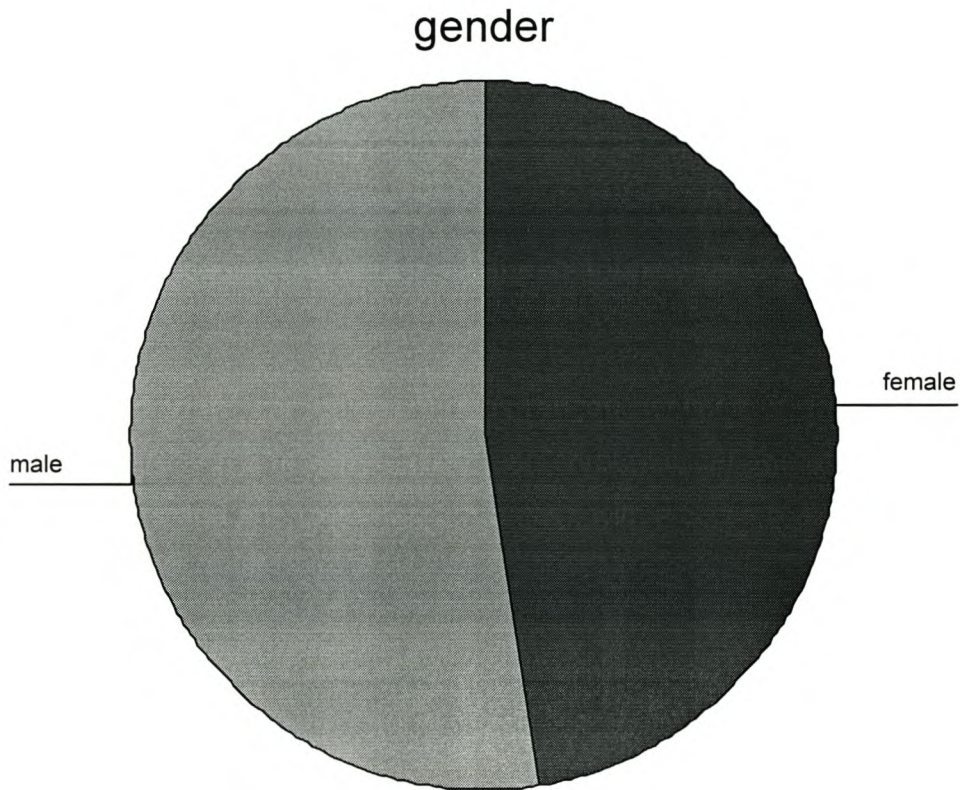


Figure 5.2 Gender distribution of participants

The gender distribution consisted of 80 (52.6%) boys and 72 (47.4%) girls.

The cultural distribution of the 152 participants is depicted in Figure 5.3.

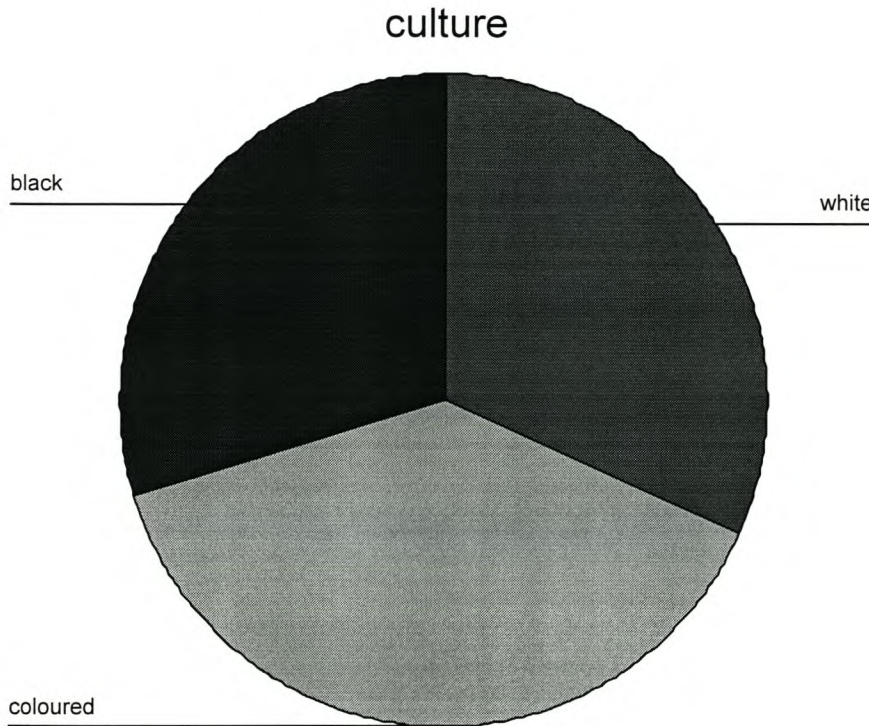


Figure 5.3 Cultural distribution

The different cultural groups were represented in the following way: 48 (31.6%) white South African (30 = 19.7% boys and 18 = 11.9% girls), 59 (38.8%) coloured South African (29 = 19.1% boys and 30 = 19.7% girls) and 45 (29.6%) black South African (21 = 13.8% boys and 24 = 24.8% girls) children.

Following is a histogram depicting the mothers' occupations.

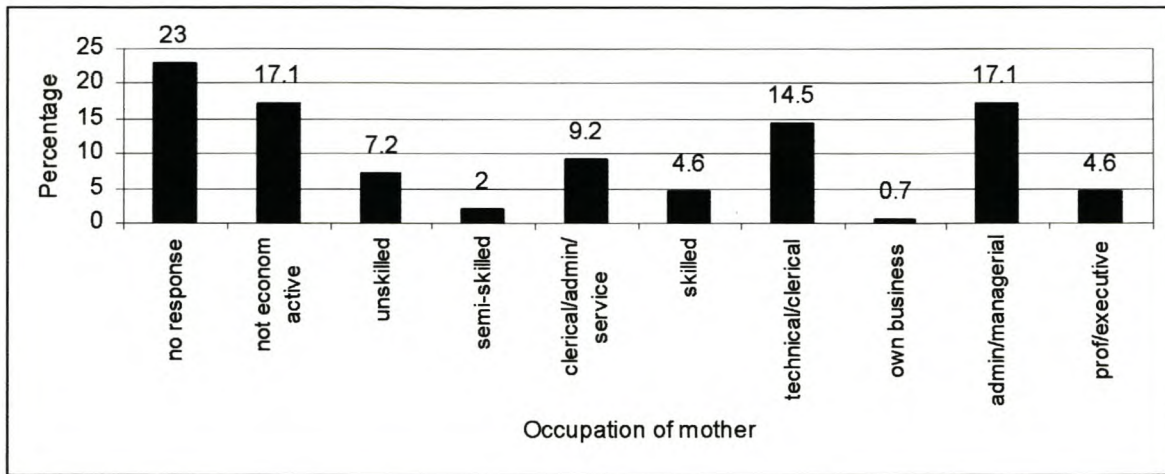


Figure 5.4 Mothers' occupation

Of the 152 mothers, 23% did not respond with regard to occupation; 17.1% were not economically active; 7.2% were unskilled; 2% were semi-skilled production and manual workers; 9.2% reported being employed as routine, clerical and administrative workers, service and sales workers; 4.6% were skilled workers and artisans with trade qualifications; 14.5% lower qualified administrative, technical and clerical work with limited supervisory responsibility; 0.7% reported being economically independent; 17.1% reported being employed in the field of professional, administrative and managerial work; and 4.6% fell into the category of highly qualified professional, executive, administrative and technical occupations.

Following is a histogram depicting the fathers' occupations.

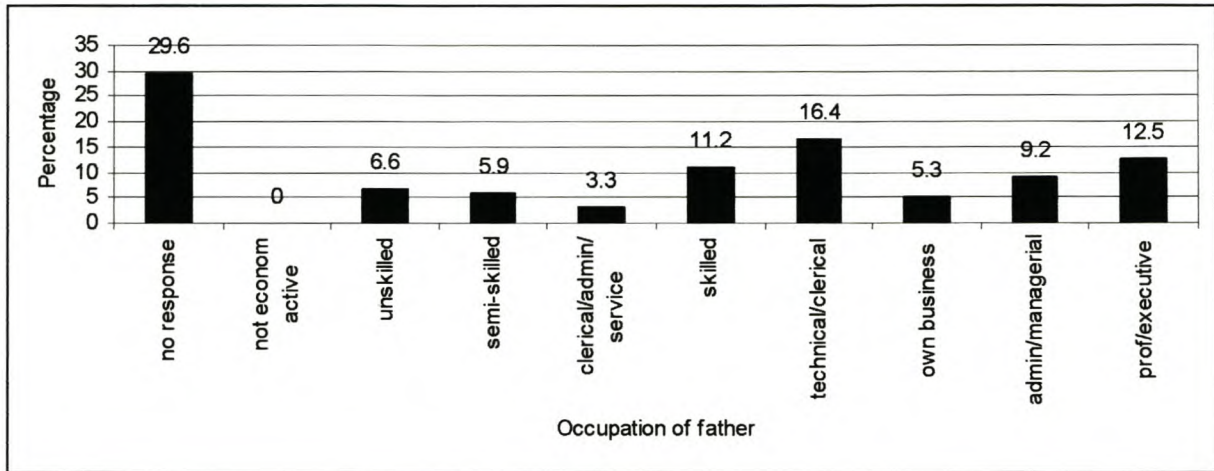
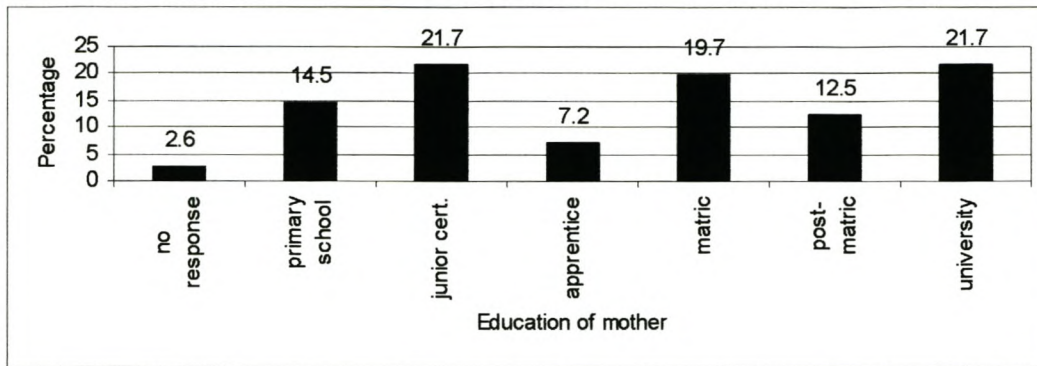


Figure 5.5 Fathers' occupation

Of the 152 fathers, 29.6% did not respond with regard to occupation; 6.6% were unskilled; 5.9% were semi-skilled production and manual workers; 3.3% reported being employed as routine, clerical and administrative workers, service and sales workers; 11.2% were skilled workers and artisans with trade qualifications; 16.4% did lower qualified administrative, technical and clerical work with limited supervisory responsibility; 5.3% reported being economically independent; 9.2% reported being employed in the field of professional, administrative and managerial work; and 12.5% fell into the category of highly qualified professional, executive, administrative and technical occupations.

Figure 5.6 provides a histogram on the mothers' education profile.



* not all percentages add up to 100 due to rounding

Figure 5.6 Mothers' education

The education profile of the mothers reveals the following: 2.6% did not respond; 14.5% attended only primary school; 21.7% passed the junior certificate; 7.2% achieved an apprenticeship; 19.7% of the mothers received matric certificates, while 12.5% were educated at post-matric level (not university); and 21.7% attended university.

Figure 5.7 provides a histogram on the fathers' education profile.

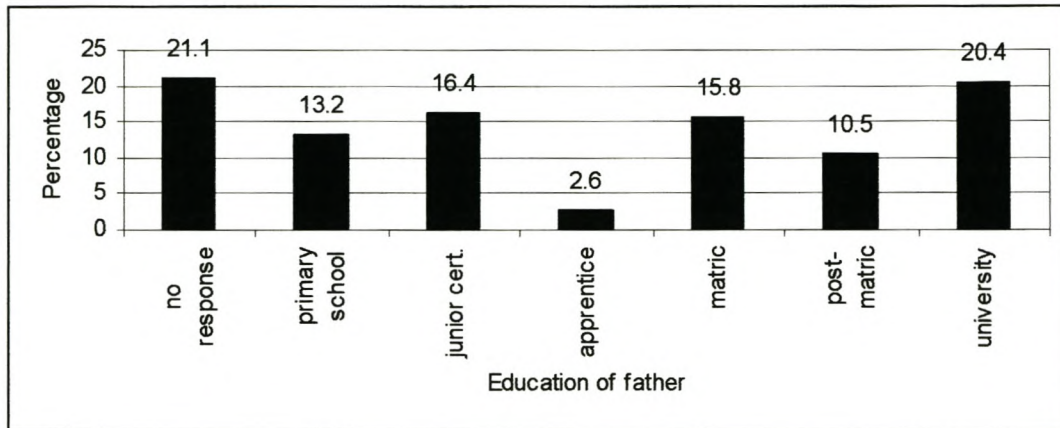


Figure 5.7 Fathers' education

The education profile of the fathers reveals the following: 21.1% did not respond; 13.2% attended only primary school; 16.4% passed the junior certificate; 2.6% completed an apprenticeship; 15.8% of the fathers received matric certificates, while 10.5% were educated at post-matric level (not university); and 20.4% attended university.

Following in Figure 5.8 is a histogram depicting the estimated socio-economic status profile of the mothers.

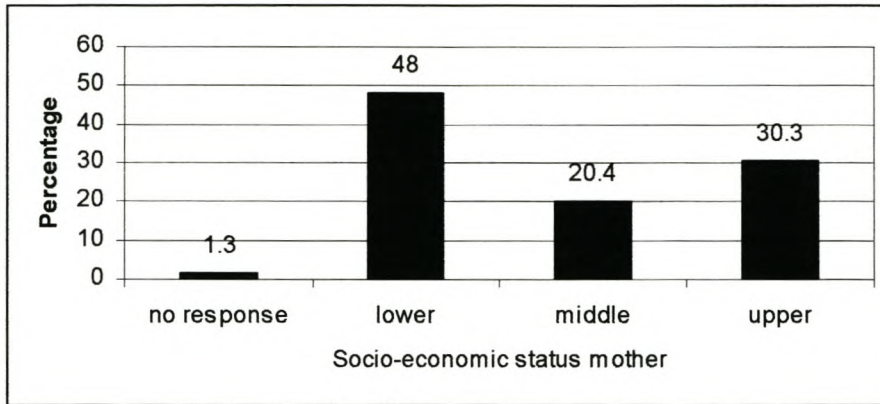


Figure 5.8 Socio-economic status estimated for mothers

According to the formula for the estimation of the mothers' socio-economic status, based on their occupation classification and level of education (see Addendum H), the following categories emerged:

Of the total group 1.3% did not respond; 48% could be assigned to the lower socio-economic status group; 20.4% to the middle socio-economic status group and 30.3% to the upper socio-economic status group. The assignment to the three socio-economic status groups respectively was based on the classification index used by Tennant (1986) (see Addendum H).

Following in Figure 5.9 is a histogram depicting the estimated socio-economic status profile of the fathers.

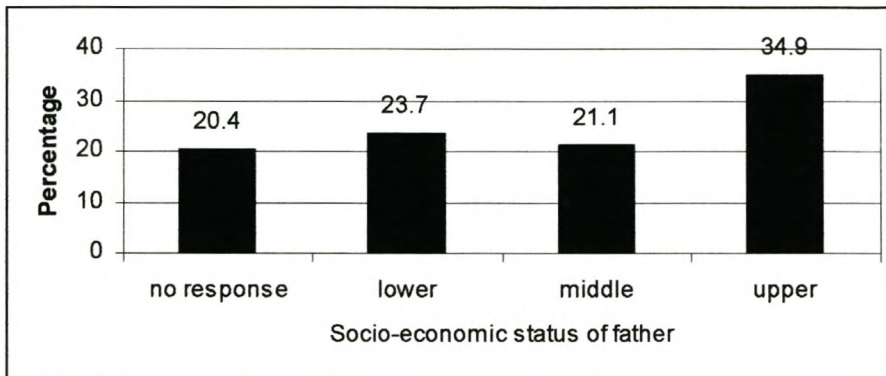


Figure 5.9 Socio-economic status estimated for fathers

Of the total group of fathers 20.4 % did not respond; 23.7% could be assigned to the lower socio-economic status group; 21.1% to the middle socio-economic status group and 34.9% to the upper socio-economic status group. The assignment to the three socio-economic status groups respectively was based on the classification index used by Tennant (1986) (see Addendum H).

Following in Figure 5.10 is a histogram depicting the estimated socio-economic status profile according to the highest combination of occupation and education.

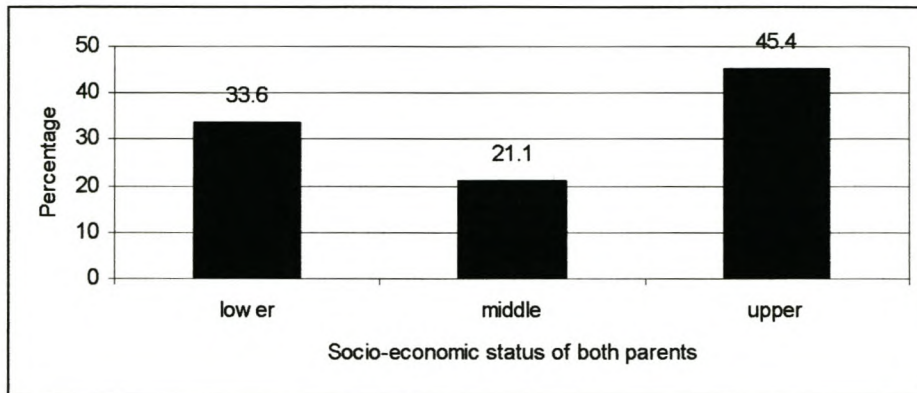


Figure 5.10 SES according to highest combination of occupation and education

For the purpose of the study it was argued that the highest socio-economic level, according to the formula of the combination of occupation and education, determined by either of the parents will be the most valid operational indication of a particular household's socio-economic status.

According to this distribution, the sample was divided into three groups: a lower SES group (51 children), a middle SES group (32 children) and an upper SES group (69 children).

Figure 5.11 provides a histogram depicting the parental composition for the 152 participants.

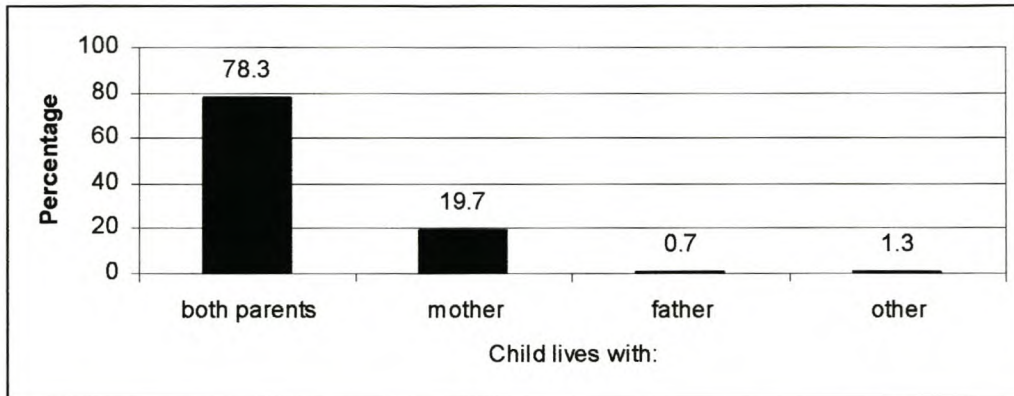


Figure 5.11 Parental composition

Biographical information regarding the parental composition revealed that 119 of the participants were staying with both parents, whether on a regular or irregular basis, 30 participants were staying with their mother only, 1 girl with her father only, while 2 participants were staying with caretakers other than their parents.

Additional data revealed that the average number of people in the house was 5, ranging from 2 to 13. Of these, the number of siblings per household ranged from 1 (21 family units only had 1 child) to 5 (4 family units consisted of 5 children). The highest frequencies regarding number of siblings were those of the 2 children units (71), followed by the 3 children units (48) and the 4 children units (8)

The number of people per household who were employed among the 152 participants ranged from 0 to 4 per household, with an average of 1.8.

5.4 Measuring instruments

The overview of assessment strategies and tools will be followed by a discussion of the measuring instruments, which are described in the order in which they were used during the research.

5.4.1 Overview of assessment strategies and tools

According to Gullone (2000), the quality of normative fear research has significantly improved with regard to assessment strategies and tools for data collection, although a wide variety of fear assessment methods were part and parcel of the past century's research. These included:

- **Retrospective accounts**

In a very early study in using this methodology, Hall (in Gullone, 2000) reported in 1897 on detailed descriptions of over 1000 adults' childhood fears between the ages of less than 4 to 26 years. The classic research of Jersild and Holmes (1935a) was also based on a similar methodology to Hall's by collecting data retrospectively. Despite the obvious limitations of this method which is clearly problematic, Gullone (2000) noted that it is, however, interesting that the major findings of these studies have since been supported by comprehensive research findings which have adopted more advanced methodologies.

- **Observational investigations**

Although investigations relying on observational methodology are few in number, they include studies carried out since 1928 by Jones and Jones (in Gullone, 2000), where a specific fear of a 6-foot long snake was examined in a sample of children aged 14 months to 10 years, as well as in a sample of adults. In a more comprehensive laboratory-based observational method, Jersild and Holmes' study (1935a) involved 105 children ranging in ages between 12 and 71 months in eight experimental situations. The latter researchers also included parents' descriptions of their child's behaviour. Limitations of these types of investigations are mainly ascribed to the informal and non-objective nature of observation, as

recognised and reported by researchers such as Hollandsworth; as well as the difficulty and even unreliability of empirical investigation of fearfulness (Campbell, in Gullone, 2000).

- **Reports by Parents / Teachers**

Reports by parents / teachers (Bouldin & Pratt, 1998; Draper & James, 1985; Lapouse & Monk, 1959; Miller, Barrett, Hampe & Noble, 1972) appear to be a more frequently used method of assessment of children's fears. According to several studies using this methodology, parents (specifically mothers) tended to underestimate their children's fears (Jones, 1988; Lapouse & Monk, 1959). An additional factor in the underestimation of children's fears may be the age of the child, since younger children more likely tend to exhibit their fears than older children (Jersild & Holmes, 1935b). Gullone (2000) therefore warns that the results based upon third-party reports needed to be interpreted with some caution, especially with regard to older children.

- **Fear List investigations**

Due to the cognitive demands of this technique, it has been implemented with older samples, typically above the age of 8 years (Gullone, 2000). For the purpose of this study, with the age range of the participants being between 5 and 7 years, this method proved not to be a viable option for consideration.

- **Self-report survey schedule investigations**

The administration of self-report fear survey schedules, such as the well-researched, revised Fear Survey Schedule for Children (FSSC-R) by Ollendick (1983) or the second revision of the FSSC-R (Gullone & King, 1992) for groups of children, has been the most commonly used method of assessing fears in young people (Gullone, 2000). As with fear list investigations, certain cognitive requirements exclude preschool children to a great extent from this methodology.

- **Child interviews**

The interview (open-ended or semi-structured) has proved to be the most efficient method of learning about an individual's experiences. Several researcher such as Band and Weisz (1988); Bauer (1976); Bowd (1983); Derevensky (1979); Martalas (1999); Maurer (1965); Muris, et al. (2001); and Slee and Cross (1989) have utilised this method with success with younger children, who are unable to read. Martalas (1999) found semi-structured interviews, which allow for the children's spontaneous, unsolicited responses concerning that which they fear, to be a very effective methodology. Bearing in mind the caution to be taken with regard to the limitations of interviewer subjectivity in interpretation, this methodology was chosen as the main component for the assessment of preschool children's fears and coping mechanisms in the present study. This choice will be motivated further in 5.4.3 below.

5.4.2 The measuring instruments used

5.4.2.1 Goodenough-Harris Drawing Test (DAM)

Children's drawings are often used by psychologists to obtain information about their emotions, experiences and functioning (Botha, van Ede, Louw, Louw & Ferns, in Louw et al., 1998).

The Goodenough-Harris Drawing Test (DAM) designed by Harris (1963) was administered to the participants individually, as is required for preschool children. The DAM was used in the first place for the purpose of establishing rapport. In an initial discussion, in order to achieve rapport, before asking the participant to draw that which is feared, the interviewer asked the child whether he or she likes to draw. With few exceptions, the majority of children reacted positively. The researcher then asked whether they would like to draw a man. They all agreed and it appeared that drawing the human figure was generally experienced as a non-threatening medium of expression, which is in accordance with research findings in this regard (Richter, Griesel & Wortley,

1989). Once rapport was established, the researched continued to motivate children to draw a woman and themselves.

Secondly, the DAM was in a few cases referred to at a later stage during the interview with regard to its projective potential. According to Koppitz (1986), human figure drawings are commonly used as a projective technique to indirectly assess children's feelings and emotions, such as for instance anxiety and depression. Certain participants could not easily recall or were initially too scared or too shy to tell what they were scared of. As a first step, these children were asked what they thought their friends should be scared of. When they did not reply, the researcher asked what "this boy / girl" (pointing and referring to the drawing of the self) should be scared of. Most of the participants could relate to their drawings of themselves. The researcher ensured that it was projection by asking the name of the boy/girl in the drawing of themselves and linking it to the participant's own name.

In the third place, a quantitative median mental age for each group, scored according to the Goodenough-Harris scoring system, was compiled in order to provide an estimation of the participants' intellectual development. The Goodenough-Harris Drawing Test is often used as a screening device for the evaluation of children's developmental levels (Sattler, 1992). According to Richter et al. (1989), the simplicity of the test, the fact that it is non-threatening, child friendly and easily administered makes it an attractive instrument for assessing non-verbal intellectual levels, especially with regard to situations where few other standardised measures exist. The procedure has been applied in many societies and cultures and, despite certain limitations, it has proved to be useful as an effective broad screening measure of the intellectual development of black children in South Africa (Kruger, 1997; Richter et al., 1989).

The drawings were scored by the researcher and two other psychometrists, who negotiated complete agreement on all protocols. In this regard, Deverensky (1979); Derevensky and Coleman (1989) and Vandenberg (1993) have reported on developmental comparisons of normal and exceptional children's fears. Extremes with regard to possible developmental delays, as well as indications of giftedness, were

taken into account in the present study. The distribution of the scores of the present study is presented in Figure 5.13.

A distribution of the DAM standard average scores (DAPAV) for all participants, is indicated in Figure 5.12.

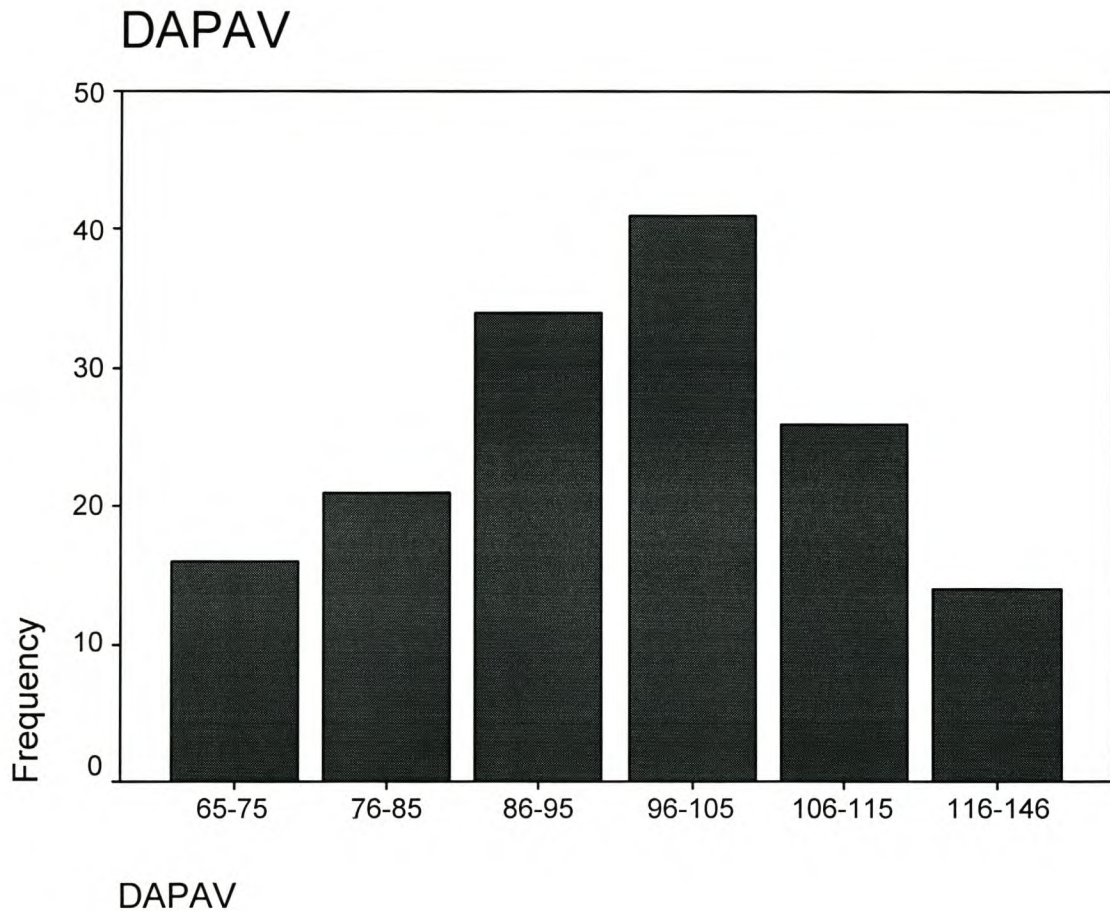


Figure 5.12 DAM standard scores distribution

From the above figure, it can be deduced that the average score, compiled by the average of the man and woman score, falls within the average/normal range of intellectual development.

5.4.2.2 Semi-structured interview

An individual semi-structured interview (see Appendix F) was chosen as the primary method of data collection, as the interview has been claimed by many researchers (e.g. Nietzel, Bernstein, & Russel, 1988) to be the most efficient means of gaining access to individuals' experiences. The semi-structured interview also enables the researcher to be flexible (Dooley, 1995; Kvale, 1983). Although there are potential validity problems associated with any data-gathering method, self-reports constitute direct access to the child's emotional experience (Gullone & King, 1997).

The skill of the interviewer appears to be a decisive factor in the success of the application of the interview method, especially with regard to the target group of preschoolers. In order to allow the participants to respond openly to a potentially threatening fear stimulus, special emphasis was put on creating rapport with the participants by conveying a feeling of trustworthiness and acceptance in a child-friendly manner. Although matching the gender and race of the interviewer and participant being interviewed have been found to help foster support and improve the quality of the data that are produced (Newman & Newman, 1999), this was not always practically and logistically possible in this study. Compensations, however, were that all participants were interviewed in their language of choice, at their familiar preschool environment, with their teacher in an adjacent or nearby room.

The 45 black Xhosa-speaking children consisted of 21 boys and 24 girls. The researcher and two assistants had previous experience of working through a translator in the preschool environment and relied on the existing open communication systems that had been established over a period of five years' collaborative work in the community.

It is well known that young children's responses are especially vulnerable to being influenced by the interviewer (Newman & Newman, 1999) and the fine line between establishing rapport and influencing responses was borne in mind.

Guidelines to formulating tentative cues for these interviews were based on the research of Band and Weisz (1988); Bauer (1976); Derevensky, 1979; Draper and James (1985), Eme and Schmidt (1978), Lentz, (1985a; 1985b), and Maurer (1965).

The topics of fear and coping were introduced by means of a semi-structured interview (see Appendix F). According to Russel (1990), preschool children have a good understanding of words which describe emotions and the results of her research showed that appropriate words were better than visual presentations depicting the word; preference was found for the words "fear" and "disgust." Tremewan and Strongman (1991) also confirmed that preschool children are able to recognise and describe basic emotions. In a study of fear word choice in preschoolers, Ryall and Dietiker (1978) conclude that, when examining a preschooler for describing fearful situations, the clinician would be wise first to evaluate the word preferences of the child. According to their data based on work with forty preschoolers, Ryall and Dietiker (1978) found that the most preferred words would most likely be "afraid", "scared" and "nervous", in descending order (p. 190). Martalas (1999) found the words "fear", "afraid" and "scared", with no accompanying visual presentation, to be effective during the structured interviews with preschoolers in the South African context. The latter word preference was adapted for the Afrikaans- as well as Xhosa-speaking children in the present study. In a few cases, when in doubt, the researcher attempted to ascertain whether the child was familiar with the emotion of fear by introducing the concept with a facial expression, starting with "a happy face", moving on to a "sad face" and then introduce "a scared face". Although the researcher is not an expert in acting, it was evident that the children understood the concept and could relate to the questions.

For the purpose of the present study, a distinction was made between the participants' primary and additional fears. Firstly, children were asked "what do you fear most / what are you most scared of?" The fear that was either mentioned firstly or emphasized mostly by means of either elaborating on the content verbally or by means of the drawing, was indicated as the primary fear. Additional fears were indicated as those that were asked for by the question "are there any other things that you are afraid / scared of?"

In addition to the above, children were also asked about the origin of their fears. The responses were coded in 12 categories of origin that emerged as a result.

The origin of participants' fears is depicted in Figure 5.13.

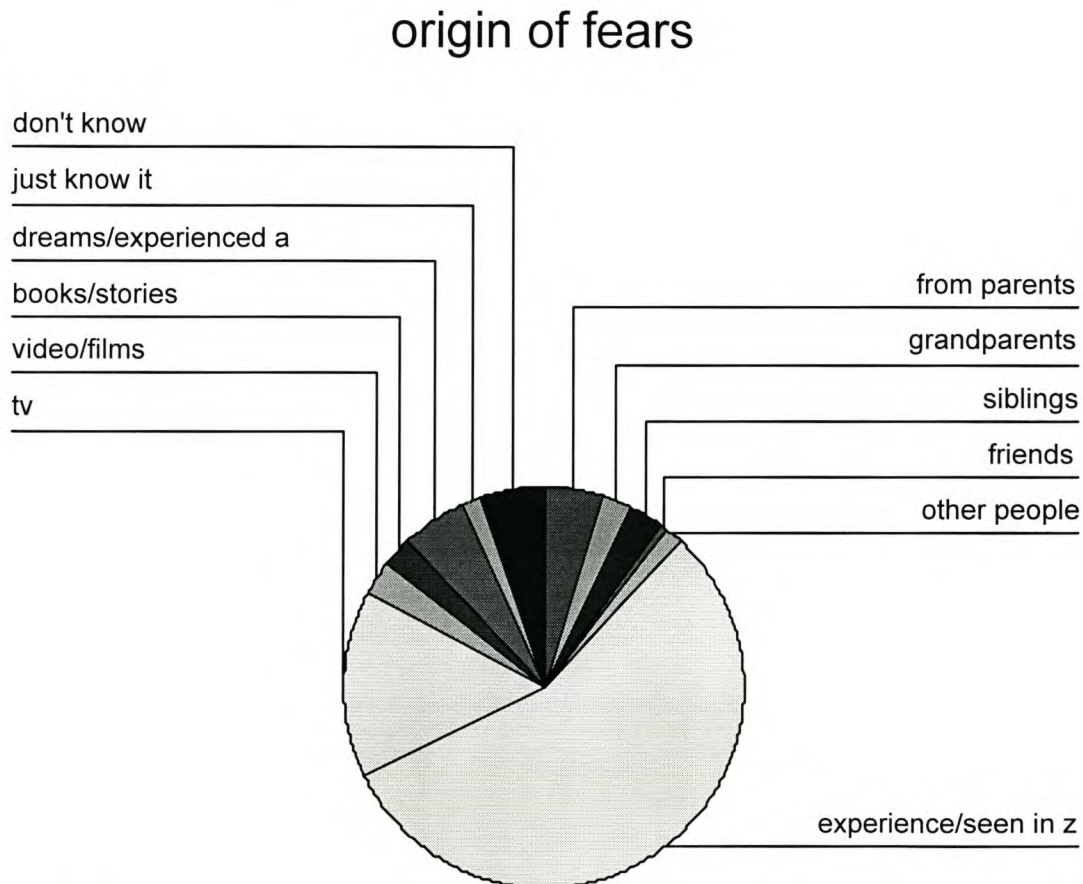


Figure 5.13 Participants' indications of origin of fears

From the above figure, it appears that the majority of participants' expressed fears originate from information that they perceived as "experiencing it", such as really "seeing" the snake, lion, etc. in the zoo, or on television. Upon further questioning of some of the participants, it appeared that these "experiences" were in few cases potentially traumatic. It seems as if the scary part for the participants related to lack of information pertaining to the "reality" factor. Certain participants, for example, wondered whether the "big" python, lion, etc. that they saw at the zoo can sneak out to fetch them

at home. It emerged that most participants do not talk spontaneously to their parents or caregivers about these fears and (typically) elaborate on them in their imagination.

To assess **coping** approaches, the methodology put forward by Band and Weisz (1988, p. 248) as being effective was incorporated and adapted for the purpose of the present study. After a participant was asked to tell what he/she is most afraid/scared of, the child was asked to give details, then to tell "What did you do and think when it happened?" Then "How did you think that ... would help or make things better?" For each strategy, if more than one was presented, the child was asked "Did it work/help you"? Each participant's coping mechanisms, as well as efficacy rating profile, could therefore be related to their primary fear and, in very few cases, an additional fear response.

These probes were used uniformly to minimise differential effects of social cues on the children's responding across stimuli. All interviews were either audio-taped and/or video recorded and the researcher also made notes during the interview regarding any significant and/or non-verbal communication by the participants.

The interviews were terminated in a pleasant way by asking the child to tell any nice story that he or she has seen or "read" in a book and commenting on the interview experience in the cases where the topic arose.

5.4.2.3 Drawings of fears

The interviews were combined with simultaneous drawings, since opportunity for iconic representation is known to facilitate communication with young children (Bruner, in Bauer, 1976; Louw et al., 1998, Van der Merwe & Jacobs, 1992).

According to Kamphaus and Pleiss (1991), drawings are very useful for assessing children, who have been found to naturally express their ideas about things around them through art.

During the semi-structured interview, the participants were asked what they are most afraid/scared of (Band & Weisz, 1988; Bauer, 1976; Martalas, 1999, Mauer, 1965) and to draw it. In certain cases, participants' drawings responded with regard to the contents of additional fears.

A depiction of the participants' drawings' compliance with primary fears is indicated in Figure 5.14.

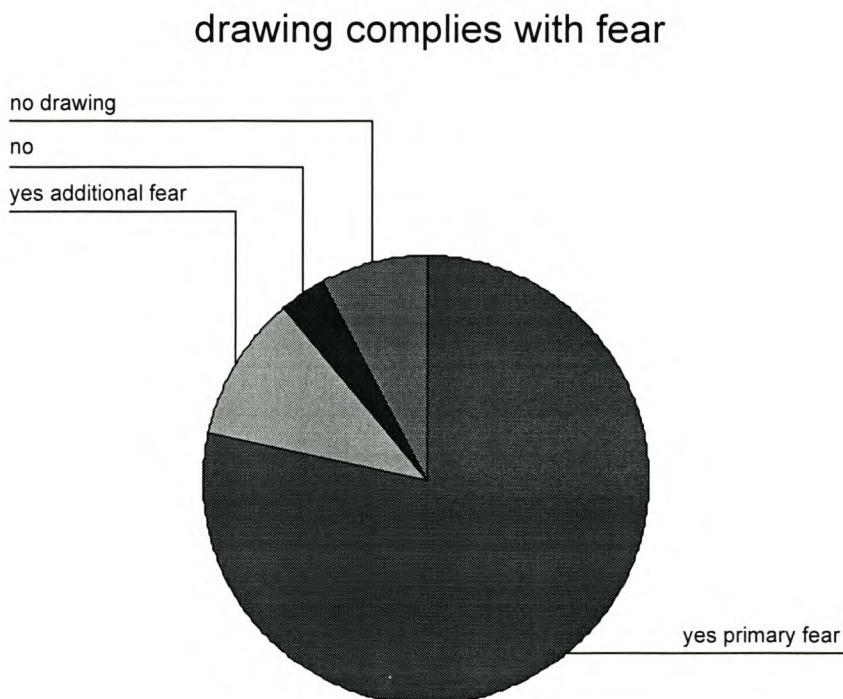


Figure 5.14 Participants' drawings' compliance with primary fears

It was significant that 78.3 % of the participants' drawings correspond with their primary fears, whereas 10.5% of them chose to draw that which they respond to as additional fears. In 3.3% of the participants there was no compliance with their drawings, while only 7.9% of the participants either refused to or indicated that they were not interested in drawing their fears.

5.4.2.4 Biographical questionnaire and parental report

Apart from obtaining biographical information regarding the participants, as was indicated in Figures 5.1 to 5.11, third-party reports regarding parents' perceptions of their children's primary fears, additional fears, as well as coping mechanisms and perceived efficacy, were gathered.

For this age group third-party report methodology can be problematic with regard to obtaining accurate information, whether from the child's mother or teacher (Miller et al., 1972; Rende & Plomin, 1991). According to Lapouse and Monk (1959), mothers reported 41% fewer fears than indicated by children's self-reports.

5.5 Research procedure

Once the preschools had been identified, the researcher made contact with the relevant teachers/caregivers in order to discuss the research (see Addendum A) to obtain their permission to do the research on the institution's premises and to identify pupils who fall within the perimeters of the target group. The final sample consisted of those children for whom parental permission to conduct an individual interview were obtained (see Addendum C).

The researcher and assistants visited the relevant schools prior to the day of the data collection in order to familiarise themselves with the participants and begin to establish rapport. Settings familiar to the children were chosen for interviews (Dibrell & Yamamoto, 1986; Martalas, 1999). In order to obtain optimum results, the researcher aimed at selecting a location that was private and relatively quiet with little or no disturbance from other children.

The researcher and/or assistants commenced each research session with a motivational talk (see Addendum E) to create a non-intimidating child-friendly atmosphere and then, according to the child's tempo, gradually carried on. The parents/guardians were asked to complete a biographical questionnaire regarding socio-economic (SES) and other variables for each participant (see Addendum D). This information was used to

investigate patterns in the data, as was seen in Figures 5.1 to 5.11, as well as parental reporting on children's fears, coping mechanisms and perceived efficacy, which are shown in Tables 18 and 36.

5.6 Data analysis

The data were collected primarily in a qualitative manner. Extracts of the drawings according to the fear categories, as well as selected case studies to elaborate on the richness of the children's "own words" are included in Addenda K and L.

Recorded interviews were translated and transcribed verbatim where necessary. The data were coded according to existing categories for content, based on research by Bauer (1976) and Martalas (1999) (see Chapter 6, p.106 for the 15 categories utilised in the present study). For the coping strategies, the categories were based on research by Band and Weisz (1988) (see Chapter 6, p.129 for the 11 categories utilised in the present study). For responses that fall outside these categories, new ones were created with regard to grouping into emerging themes (see Addenda I and J for extracts of more detailed descriptions).

Interrater categorisation was done for each system, with ratings being made by the researcher and two other psychometrists, all blind to children's gender, culture and socio-economic status. Complete agreement was negotiated on all protocols afterwards.

The data analyses were done by using the Statistical Package for Social Science (SPSS) (George & Mallery, 1999) to calculate descriptive statistics (frequencies, percentages) and to carry out analysis of variance, using the Mann-Whitney U-test and the Kruskal-Wallis 1-way ANOVA (Dancey & Reidy, 2002; Howell, 1999; Pretorius, 1995).

5.7 Related matters and arrangements

5.7.1 Ethics

There were no physical risks involved in the research. The personal nature of the interviews, however, might have been experienced as potentially threatening by participants. This, however, was not the case with the pilot study run by Martalas (1999). To discount such possibilities, apart from the researcher, only two advanced graduate students, both with at least an Honours degree in Psychology and experience of working with young children, were used as assistant-interviewers. In doing so, the participants were closely monitored for possible signs of distress and discomfort with the intention that interviews could be altered accordingly, should it been necessary.

The University of Stellenbosch's ethical guidelines (University of Stellenbosch, 1998), require that, where people or their behaviour is the focus of research, "their right to decent treatment should be respected and in particular their right to privacy, their right to confidentiality of personal information, their right to informed consent and their right to the minimisation of risks to which people could be exposed in the research process". Informed consent was obtained from the parents (see Appendix C). In these informed consent forms the best interest of the child with regard to the following aspects were emphasised:

A. Confirmation of

1. particulars of the researcher and the University involved;

B. Understanding of

2. the objective of the research project, as well as the nature and logistics concerning the interview with the child;
3. assurance that no physical risks were involved;
4. assurance that the parents will be contacted should the researcher became concerned about the child;
5. confidentiality issues;
6. the availability of feedback, should it be desired by the parties involved;

7. voluntary agreement to the child's participation;
8. the fact that no financial costs were involved;
9. the implication that participation was free and that the participants could withdraw from the project at any stage;
10. the explanation of the above in the language of choice.

5.7.2 Consultation

During the initial planning of the research project various role-players in the field of early childhood development were consulted regarding the logistics of interviewing children under optimal circumstances. In this regard the pilot study by Martalas (1999) also highlighted an awareness of certain aspects of the physical setting where the testing were to be conducted. Participants proved to feel more at ease with their usual everyday sounds and "noise" surrounding them, as well as familiar setting, without any "new" pictures or art works that may distract their attention. As children of this age group tend to be highly receptive of their environment, Martalas found that some children, by looking around in a "new" not so familiar room, tend to project their fears onto pictures or other stimuli that they lay their eyes on. Caution was therefore taken that the children's immediate environment did not present stimuli which could distract them.

The following **experts** were consulted:

- Dr H van der Merwe (Department of Geography, US) with regard to sampling;
- Prof. J Sharp (previously from the Department of Sociology, US) regarding cross-cultural issues;
- Ms F Foster (School Psychologist: Stellenbosch region) with regard to practicalities and logistics of the intervention at schools;
- Mr HJ Mentz (Psychological Services: Western Cape Education Department) concerning permission from the Department to conduct the study;
- Prof. A Kagee (Department of Psychology, US) with regard to cross-cultural issues;

- Dr P Muris (Maastricht University, The Netherlands) regarding his expertise on childhood fears and anxiety (see reference list for some of his recent publications);
- Dr C Meesters (Maastricht University, The Netherlands) concerning childhood coping (see reference list for recent publications).

5.8 Summary

The methodology that was used to obtain and analyse the data for the research was outlined and discussed in chapter 5, including the introduction, the research design, and selection of the participants. The measuring instruments were discussed, starting off with an overview of assessment tools and strategies, followed by a discussion of the instruments, the Goodenough-Harris Drawing Test, the Semi-structured interview, Drawings of fears, as well as Biographical data obtained, as used in order of application during the research. Accordingly, research procedures, data analysis and related manners concerning ethics and consultation were dealt with.

In the next chapter the quantitative results will be reported according to the preschoolers' content and numbers of fears as the one focus, and the coping mechanisms and perceived efficacy as the other focus of the research. References will be made to the qualitative results with regard to a selection of transcriptions and drawings compiled in the Addenda.

CHAPTER 6

RESULTS

In this chapter the quantitative data are reported according to the content and number of fears of the preschoolers as the one point of focus, and the coping mechanisms and perceived efficacy as the other. References will be made to qualitative results with regard to a selection of transcripts and drawings compiled in the addenda.

6.1 Content and number of expressed fears

6.1.1 Content and number of expressed fears for all participants

The participants' verbatim responses (see Addendum I), and drawings (see Addendum K) depicting the content of their expressed fears have been grouped together to provide a representation of the 15 broad categories, as summarised in Table 1.

Table 1

Frequencies of Fear Content for All Participants (N=152)

Fear categories	Freq. Primary Fears	% Total Primary Fears	Freq. Additional Fears	% Total Additional Fears	Freq. Total Fears	% Total Fears
Animals						
Wild	61	40.6	104	37.3	165	38.5
Domestic	7	4.7	22	7.9	29	6.7
Insects	7	4.7	8	2.9	15	3.5
Sea/water	2	1.3	9	3.2	11	2.6
Fantasy	4	2.7	6	2.1	10	2.3
Subtotal	81	54	149	53.2	230	53.6
Real people	19	12.6	22	7.9	41	9.6
Fantasy people	27	18.0	18	6.5	45	10.5
Subtotal	46	30.7	40	14.4	86	20.1
Dark, night	8	5.3	38	13.7	46	10.7
Natural phenom.	1	0.7	6	2.1	7	1.6
Being alone	3	2.0	4	1.4	7	1.6
Separation	1	0.7	1	0.4	2	0.5
Medical fears	0	0.0	1	0.4	1	0.2
Physical harm	6	4.0	18	6.5	24	5.6
Injury to others	3	2.0	6	2.1	9	2.1
Other fears	1	0.7	16	5.8	17	4.0
Subtotal	23	15.4	90	32.4	113	26.3
Total	150	100.1	279	100.0	429	100.0

- Not all percentages add up to 100 due to rounding

Two of the 152 participants (1.3%), both boys, reported no fears.

The rank order of broad categories into which expressed fears were assigned to represent the **content** of the fears is as follows (see Table 1):

Rank order	Primary fears categories	Total fears categories
1.	wild animals	wild animals
2.	fantasy people	dark, night
3.	real people	fantasy people
4.	dark, night	real people
5.	domestic animals / insects	domestic animals

Similarities regarding the content of the first five fear categories, irrespective of rank order of these categories, are evident. The five categories (in primary fear rank order) include wild animals, fantasy people, real people and dark, night, bad dreams, as well as domestic animals.

The **wild animals** category was reported as most feared of all the primary fears (40.6%), as well as the total fears reported (38.5%). Of all the wild animals, the snake was reported to be the most feared (49 responses; 30% of all wild animal fears), with the lion in second place (38 responses; 23% of all wild animal fears) and crocodiles (18 responses; 10.9% of all wild animals fears) next in order, followed by other wild animals such as the tiger, cheetah, elephant, jackal, wolf, rhino, ape, baboon (see Addendum I1 for an exhaustive list).

It appeared that the fears allocated to the **fantasy people** category were second in rank order for all primary fears and third in rank order for all total fears reported (see Table 1). From the verbatim responses (see Addendum I7), this category overwhelmingly consists of ghosts (26 responses, 58% of all fantasy people fears). The latter are described (see Addendum I7), for example, as “big, black” (participants no 104 and 114), or “white thing” (participant no 145) or “small” (participant no 142). An extract of some of the drawings of ghosts, as well as other fantasy characters are provided in Addendum K7. Other fantasy people that were mentioned as scary were monsters (7 responses, 16% of all fantasy people fears). Following with 2 responses allocated to each (4% of all

fantasy people fears) are fears of the devil, a bogeyman, a giant, as well as dracula. The other fantasy characters, namely a tokeloshe (see drawing Addendum K7, participant no 56), a cannibal (see drawing Addendum K7, participant no 10), batman and an alien were mentioned only once (see Addendum 17 for an exhaustive list of verbatim descriptions).

The category **real people** is ranked third and fourth with regard to primary and total fears categories respectively (see Table 1). With regard to the content of participants' fears of real people, a wide variety of characters emerged (see Addendum 16) and qualitatively this is the most elaborate category. In order to summarise, the following content can be grouped together in a meaningful way: Responses that refer to a bad guy (2); a real person called "Ghostman" (2); "Dishonest" (5); "Person" (5) and other names such as "Norman", "Morgan" and "Face" (3) add up to the majority of expressed fears in this category (a total of 17 responses; 41.5% of the total real people fears). The second largest sub-grouping relates to fears for real people within the family circle, such as siblings and mothers (9 responses; 21.9% of all real people fears). The third sub-grouping consists of real people labelled according to crime-related activities, such as burglars, robbers, thieves and gangsters (7 responses; 17% of the total real people fears expressed). Additional individual responses include fears such as those for a tramp, someone, a boy and children (see Addendum 16 for an exhaustive list). An extract of some of the drawings of real people is attached in Addendum K6.

Another overlapping category refers to the fears pertaining to the **dark, night and bad dreams**. According to Table 1, this category of fears is ranked second when taking the total fears into account and ranked fourth place with regard to primary fears. Verbatim responses allocated to this category consist of the description of fear of the dark, nightmares, dreams, bad dreams, night, evening and sleep (see Addendum 18). An extract of drawings depicting fears in this category can be found in Addendum K8.

The category **domestic animal fears** is ranked fifth both with regard to the primary and total fears categories (see Table 1). The most frequently expressed fear within the domestic animal total fear category was overwhelmingly the fear of dogs (18 responses; 62% of all domestic animal fears), followed by cats (6 responses; 21% of all domestic

animal responses), cows (2 responses; 7% of all domestic animal fears) and a horse, donkey and sheep respectively (see Addendum I2). Extracts of some of the drawings of cats and dogs in the domestic animals category are depicted in Addendum K2. Qualitative descriptive responses for the domestic animal category (see Addendum I2) were found to be similar in content (being mainly defined as either “big” or “small”) than for the above-mentioned wild animal category. It is, however, important to bear in mind that, overall, domestic animal fears comprised less than 7% (4.7% of primary fears and 6.7% of total fears) of the participants’ expressed fear profile (see Table 1).

The category **insects** is ranked fifth, along with domestic animals, in the participants’ primary fears profile. As was being the case with domestic animals, this fear accounts for only 4.7% of the primary fears (see Table 1). The specific primary fear expressed pertaining to the category of insect fears (see Addendum I3) mainly consists of spider fears (3 responses; 43% of the primary fear responses). It appears as if spiders were mostly described as being “big ones”. Accompanying drawings (Addendum K3) confirm this notion.

The main content of the remaining ten categories (see Table 1) will briefly be described with reference to the extracts of the participants’ verbatim responses (see Addendum I) and drawings (see Addendum K).

The category **sea/water animals** mainly consists of sharks (6 responses; 55% of all sea/water animals fears). The other 5 responses were those of fish (3); a hammer fish (1) and a whale (1). Qualitatively sea/water animals were generally described as “big” (see Addendum I4). Extracts from drawings can be seen in Addendum K4.

The **fantasy animal** fear category in general mostly consists of dinosaurs (6 responses from the total of 10 animal fears) (see Addendum I5). The 4 responses in the primary fear category, however, were attributed to dinosaurs (2); a monster (1) and an animal ghost (1). In Addendum K5 extracts from drawings of fantasy animals are shown.

Natural phenomenon fears were attributed to electricity (2 responses), as well as one response to each of the following: thunder, volcano, weather, fire, and a storm (see Addendum I9). Extracts of drawings in this category can be seen in Addendum K9.

The seven fear responses attributed to the category **being alone** (see Table 1) ranged from fear of being alone in a room, alone in the dark, alone during the day, to be forgotten at school or to be left alone if someone has to go to jail.

Only two participants (see Table 1) expressed fears related to **separation from parents** in a direct way (see Addendum I11). No drawings were made in this regard.

The category **medical fears** was under represented by only one fear response relating to being scared of going to the hospital (see Addendum I12). No drawing was made.

The content of the **physical harm** fear category refers to the participants themselves and varied widely, ranging from vague fears of getting hurt/harmed/killed (6 responses; 25% of all physical harm fears); being hit by parents (4 responses; 16.7% of all physical harm fears) to more specific fears such as a car accident (2 responses; 8.3% of all physical harm fears); being burned, being scolded, illness, poison, and to fall from a roof (see Addendum I13 for an exhaustive list). Extracts of drawings are provided in Addendum K13.

The category **injury to others** refers to fear of someone else, mainly friends or family, being hurt or injured. Responses varied from others being shot/bombed (4 responses; 44.4% of all injury to others fears); followed by fears of someone being hurt/hit (3 responses; 33.3% of all injury to others fears), to fire- and explosion-related fears (2 responses; 22.2% of all injury to others fears (see Addendum I14). No drawings were made in this category.

The last category titled **other fears** refers to 17 responses from which 16 were expressed as additional fears. These fears were mainly ascribed to seeing scary television programmes/movies/videos/hearing stories (13 responses; 76.5% of all other fears). The other three responses were assigned to being afraid of a bath, school and swimming respectively (see Addendum I15). A participant's drawing of a scary movie can be found in Addendum K15.

A total **number** of 429 fears was expressed, ranging from 1 to 9 per participant. The overall sample showed an average of 2.8 fears per participant.

6.1.2 Content and number of expressed primary fears with regard to gender distribution

A summary of the content and number of times a primary fear was expressed by the boys and girls respectively is shown in Table 2.

Table 2

Frequencies of Primary Fear Content for Participants with Regard to Gender Distribution

Fear categories	P Fears	% Tot P	P Fears	% Tot P	Tot P
	Boys (n=80)	Fears Boys	Girls (n=72)	Fears Girls	Fears (N=152)
Wild animals	36	46.2	25	34.7	61
Domestic animals	3	3.8	4	5.6	7
Insects	1	1.3	6	8.3	7
Sea/water animals	2	2.6	0	0.0	2
Fantasy animals	3	3.8	1	1.4	4
Real people	8	10.2	11	15.3	19
Fantasy people	14	17.9	13	18.1	27
Dark, night	5	6.4	3	4.1	8
Natural phenomena	0	0.0	1	1.4	1
Being alone	2	2.6	1	1.4	3
Separation	1	1.3	0	0.0	1
Medical	0	0.0	0	0.0	0
Physical harm	1	1.3	5	6.9	6
Injury to others	1	1.3	2	2.8	3
Other fears	1	1.3	0	0.0	1
Total	78	100.0	72	100.0	150

Two of the 80 boys (2.5%) reported no fears.

The following rank order of fears was obtained for the five most frequent primary fears with regard to gender distribution (see Table 2).

Rank order	Primary Fears Boys	Primary Fears Girls
1.	wild animals	wild animals
2.	fantasy people	fantasy people
3.	real people	real people
4.	dark, night	insects
5.	domestic animals / fantasy animals	physical harm

Apart from the same five categories of fears that have already been described with regard to Table 1, two additional categories emerged with regard to the rank ordering of fears when gender is taken into account. The boys expressed more fears with regard to **fantasy animals** than the girls did, while the latter expressed more fears of **physical harm** than the boys did. Both categories of primary fears were ranked fifth (see Table 2).

To ascertain whether the gender differences with regard to the content of the primary fears expressed were statistically significant, the Mann-Whitney Test was utilised and the results are presented in Table 3

Table 3

Comparisons for the Gender Differences in Participants' Primary Fear Content: Mann-Whitney Test Results

Fear categories	Mann-Whitney U	z	p
Wild animals	2584.000	-1.287	.198
Domestic animals	2828.000	-.529	.597
Insects	2676.000	-2.074	.038 *
Real people	2728.000	-.979	.328
Fantasy people	2864.000	-.089	.929
Dark, night	2820.000	-.572	.567
Physical harm to self	2716.000	-1.794	.073
Sea/water animals	2808.000	-1.346	.178
Fantasy animals	2812.000	-.905	.365
Natural phenomena	2840.000	-1.054	.292
Being alone	2848.000	-.490	.624
Separation from parents	2844.000	-.949	.343
Medical	2880.000	.000	1.000
Injury to others	2836.000	-.674	.500
Other	2844.000	-.949	.343

* $p < 0,05$

From Table 3 it is evident that there was a statistically significant difference between the boys and the girls in their primary expressed fears of the category **insects**. The girls expressed significantly more fears than the boys.

Table 4 provides a summary of the number of times a specific fear was expressed in total by the boys and girls respectively.

Table 4*Frequencies of Total Fear Content for Participants with Regard to Gender Distribution*

Fear categories	T Fears Boys (n=80)	% Tot. Fears Boys	T Fears Girls (n=72)	% Tot. Fears Girls	Tot. Fears (N=152)
Wild animals	101	43.7	64	32.2	165
Domestic animals	13	5.6	16	8.5	29
Insects	4	1.7	11	5.5	15
Sea/water animals	8	3.5	3	1.5	11
Fantasy animals	8	3.5	2	1.0	10
Real people	18	7.8	23	11.7	41
Fantasy people	28	12.1	17	8.5	45
Dark, night	18	7.8	28	14.1	46
Natural phenomena	3	1.3	4	2.0	7
Being alone	3	1.3	4	2.0	7
Separation	2	0.9	0	0.0	2
Medical	0	0.0	1	0.5	1
Physical harm	10	4.3	14	7.0	24
Injury to others	6	2.6	3	1.5	9
Other fears	9	3.9	8	4.0	17
Total	231	100.0	198	100.0	429

The following rank order of fears was obtained for the five most frequent total fears with regard to gender distribution (see Table 4).

Rank order	Total fears boys	Total fears girls
1.	wild animals	wild animals
2.	fantasy people	dark, night
3.	real people / dark, night*	real people
4.	domestic animals	fantasy people
5.	physical harm	domestic animals**

* both of the 3rd rank order

** although the rounded percentages for the categories fantasy people and domestic animals are both 8.5, the rank ordering differed according to the slight difference in the raw scores for the two categories.

The average number of fears expressed by the boys is 2.9, ranging from 1 to 9, while the girls expressed an average of 2.8 fears in total ranging from 1 to 8.

To ascertain whether the gender differences in the total fears expressed were statistically significant, the Mann-Whitney Test results are presented in Table 5.

Table 5

Comparisons for the Gender Differences in Participants' Total Fear Content: Mann-Whitney Test Results

Fear categories	Mann-Whitney U	Z	p
Wild animals total	2403.000	-1.857	.063
Domestic animals total	2780.500	-.571	.568
Insects total	2622.000	-1.900	.057
Real people total	2653.500	-1.112	.266
Fantasy people total	2726.500	-.772	.440
Sea animals total	2710.500	-1.529	.126
Fantasy animals	2742.000	-1.316	.188
Other fears total	2872.500	-.054	.957
Dark, night total	2408.000	-2.189	.029*
Physical harm total	2686.000	-1.174	.241
Natural phenomena total	2828.000	-.529	.597
Being alone total	2828.000	-.529	.597
Separation total	2808.000	-1.346	.178
Medical total	2840.000	-1.054	.292
Injury to others total	2818.500	-.587	.557

* $p < 0,05$

From Table 5 it is evident that there was a statistically significant difference between the boys and the girls in their total expressed fears of the category **dark, night, bad dreams**. The girls expressed significantly more fears than the boys.

6.1.3 Content and number of expressed primary fears with regard to cultural distribution

A summary of the content and number of times a primary fear was expressed by the white, coloured and black participants is shown in Table 6.

Table 6*Frequencies of Primary Fear Content for Participants with Regard to Cultural Distribution*

Fear categories	White (n=48)	% Total Primary Fears	Colour. (n=59)	% Total Primary Fears	Black (n=45)	% Total Primary Fears	Total Primary Fears
Wild animals	15	31.9	24	40.7	22	50.0	61
Dom. animals	1	2.1	2	3.4	4	9.0	7
Insects	3	6.4	2	3.4	2	4.5	7
Seawater animals	1	2.1	0	0.0	1	2.3	2
Fantasy animals	1	2.1	2	3.4	1	2.3	4
Real people	7	14.9	6	10.2	6	13.6	19
Fantasy people	6	12.9	16	27.1	5	11.4	27
Dark, night	5	10.6	3	5.1	0	0.0	8
Nat. phenomena	1	2.1	0	0.0	0	0.0	1
Being alone	3	6.4	0	0.0	0	0.0	3
Separation	1	2.1	0	0.0	0	0.0	1
Medical	0	0.0	0	0.0	0	0.0	0
Physical harm	2	4.4	4	6.8	0	0.0	6
Injury to others	1	2.1	0	0.0	2	4.5	3
Other fears	0	0.0	0	0.0	1	2.3	1
Total	47	100.1	59	100.1	44	99.9	150

- Not all percentages add up to 100 due to rounding

One of the white and one of the black participants, both boys, reported no fears.

The following rank orders were obtained for the five most frequently expressed primary fears with regard to culture distribution (see Table 6).

Rank order of primary fears

	White participants	Coloured participants	Black participants
1.	wild animals	wild animals	wild animals
2.	real people	fantasy people	real people
3.	fantasy people	real people	fantasy people
4.	dark, night	physical harm	domestic animals
5.	being alone / insects*	dark, night	injury to others / insects*

* both of the 5th rank order

To ascertain whether the cultural differences with regard to the primary fears expressed were statistically significant, the Kruskal-Wallis Test was performed and the results are presented in Table 7.

Table 7

Comparisons for the Cultural Differences in Participants' Primary Fear Content: Kruskal-Wallis Test Results

Fear categories	Kruskal-Wallis	p
Wild animals	3.000	.223
Domestic animals	2.755	.252
Insects	.493	.781
Real people	.509	.775
Fantasy people	5.770	.056
Dark, night	5.027	.081
Physical harm to self	3.083	.214
Sea/water animals	1.281	.527
Fantasy animals	.217	.897
Natural phenomena	2.167	.338
Being alone	6.587	.037*
Separation from parents	2.167	.338
Medical	.000	1.000
Injury to others	2.594	.273
Other	2.378	.305

* $p < 0,05$

From Table 7 it is evident that there was a statistically significant difference amongst the cultural groups in their primary expressed fears in the category **being alone**. The white participants expressed significantly more fears than the coloured and black participants.

A summary of the content and number of times a fear was expressed in total by the white, coloured and black participants respectively is shown in Table 8.

Table 8*Frequencies Total Fear Content for Participants with Regard to Cultural Distribution*

Fear categories	White (n=48)	%Total Fears	Colour (n=59)	% Total Fears	Black (n=45)	%Total Fears	Total Fears
Wild animals	49	33.8	67	38.3	49	45.0	165
Dom. animals	3	2.1	13	7.4	13	11.9	29
Insects	7	4.8	5	2.9	3	2.8	15
Seawater animals	5	3.4	4	2.3	2	1.8	11
Fantasy animals	5	3.4	2	1.1	3	2.8	10
Real people	14	9.7	15	8.6	12	11.0	41
Fantasy people	13	9.0	26	14.9	6	5.5	45
Dark, night	21	14.5	17	9.7	8	7.3	46
Nat. phenomena	5	3.4	1	0.6	1	0.9	7
Being alone	4	2.8	3	1.7	0	0.0	7
Separation	2	1.4	0	0.0	0	0.0	2
Medical	0	0.0	1	0.6	0	0.0	1
Physical harm	7	4.8	12	6.9	5	4.6	24
Injury to others	4	2.8	2	1.1	3	2.8	9
Other fears	6	4.1	7	4.0	4	3.7	17
Total	145	100.0	175	100.1	109	100.1	429

The following rank orders were obtained for the five most frequent primary fears with regard to cultural distribution (see Table 8).

Rank order of total fears

White participants

1. wild animals
2. dark, night
3. real people
4. fantasy people
5. physical harm / insects

Coloured participants

1. wild animals
2. fantasy people
3. dark, night
4. real people
5. domestic animals

Black participants

1. wild animals
2. domestic animals
3. real people
4. dark, night
5. fantasy people

The average **number** of fears expressed by the white and the coloured participants was 3.0, while the black participants expressed an average of 2.4 fears. The number of fears ranged from 1 to 9 for the white, 1 to 7 for the coloured, and 1 to 8 for the black participants. A Kruskal-Wallis Test was performed to test the hypothesis that there were no significant differences amongst the three groups. The results confirm that there were

no statistically significant differences amongst the **total number** of fears of the three groups ($U=4.516$; $p=.105$). To ascertain whether the cultural differences with regard to the **total fears content** expressed were statistically significant, the Kruskal-Wallis Test was performed and the results are presented in Table 9.

Table 9

Comparisons for the Cultural Differences in Participants' Total Fear Content: Kruskal-Wallis Test Results

Fear categories	Kruskal-Wallis	p
Wild animals	1.307	.520
Domestic animals	6.044	.049*
Insects	2.321	.313
Real people	.415	.813
Fantasy people	7.589	.022*
Dark, night	7.470	.024*
Physical harm to self	.800	.670
Sea/water animals	.760	.684
Fantasy animals	.708	.702
Natural phenomena	5.374	.068
Being alone	3.697	.157
Separation from parents	4.362	.113
Medical	1.576	.455
Injury to others	.694	.707
Other	.716	.699

* $p < 0,05$

From Table 9 it can be deduced that there are statistically significant differences amongst the cultural groups in their total expressed fears within the categories **domestic animals, fantasy people, and dark, night, bad dreams.**

Pairwise post hoc comparisons by means of Mann-Whitney Tests were applied to ascertain between which groups the significant differences were. The results indicated that the black participants expressed significantly more fears than the white participants ($U=880.5$; $p=.013$) in the category **domestic animals**. With regard to the category **fantasy people** the coloured participants expressed significantly more fears than the black participants ($U=1022$; $p=.007$). In the category **dark, night, bad dreams**, the white participants expressed significantly more fears than the black participants ($U=799.5$; $p=.007$).

6.1.4 Content and number of expressed fears with regard to SES distribution

A summary of the content and number of times a primary fear was expressed by the low, middle and upper socio-economic status groups participants respectively is shown in Table 10.

Table 10

Frequencies of Primary Fear Content for Participants with Regard to SES Distribution

Fear categories	Low SES (n=51)	% Low SES Primary Fears	Middle SES (n=32)	% Mid. SES Primary Fears	Upper SES (n=69)	% Upper SES Primary Fears	Total Primary Fears
Wild animals	25	50.0	12	38.7	24	34.8	61
Domestic animals	4	8.0	3	9.7	0	0.0	7
Insects	1	2.0	1	3.2	5	7.3	7
Sea/water animals	0	0.0	1	3.2	1	1.4	2
Fantasy animals	1	2.0	1	3.2	2	2.9	4
Real people	8	16.0	3	9.7	8	11.6	19
Fantasy people	7	14.0	4	12.9	16	23.2	27
Dark, night	0	0.0	1	3.2	7	10.2	8
Nat. phenomena	0	0.0	1	3.2	0	0.0	1
Being alone	0	0.0	1	3.2	2	2.9	3
Separation	0	0.0	0	0.0	1	1.4	1
Medical	0	0.0	0	0.0	0	0.0	0
Physical harm	1	2.0	3	9.7	2	2.9	6
Injury to others	2	4.0	0	0.0	1	1.4	3
Other fears	1	2.0	0	0.0	0	0.0	1
Total	50	100.0	31	99.9	69	100.0	150

Note: SES = Socio-economic status

One of the low and one of the upper socio-economic status group participants reported no fears.

The following rank orders were obtained for the five most frequent primary fears with regard to SES (see Table 10).

Rank order of primary fears

	Low SES	Middle SES	Upper SES
1.	wild animals	wild animals	wild animals
2.	real people	fantasy people	fantasy people
3.	fantasy people	physical harm*	real people

- | | | | |
|----|------------------|-------------------|-------------|
| 4. | domestic animals | real people* | dark, night |
| 5. | injury to others | domestic animals* | insects |

* all of the third rank order

To ascertain whether the SES differences with regard to the primary fears expressed were statistically significant, the Kruskal-Wallis Test was performed and the results are presented in Table 11.

Table 11

Comparisons for the SES Differences in Participants' Primary Fear Content: Kruskal-Wallis Test Results

Fear categories	Kruskal-Wallis	p
Wild animals	2.574	.276
Domestic animals	6.164	.046*
Insects	2.053	.358
Real people	.806	.668
Fantasy people	2.549	.280
Dark, night	6.382	.041*
Physical harm to self	3.196	.202
Sea/water animals	1.486	.476
Fantasy animals	.138	.933
Natural phenomena	3.750	.153
Being alone	1.541	.463
Separation from parents	1.203	.548
Medical	.000	1.000
Injury to others	1.731	.421
Other	1.980	.372

Note: SES = Socio-economic status

* $p < 0,05$

From Table 11 it is evident that there is a statistically significant difference amongst the socio-economic status groups in their primary expressed fears content within the categories **domestic animals** and **dark, night, bad dreams**.

Pairwise post hoc comparisons by means of Mann-Whitney Tests indicated that within the category **domestic animals** the low SES group participants expressed significantly more fears than the upper SES group participants ($U=1621.5$; $p=.018$). The middle SES group participants also expressed significantly more fears than the upper SES group ($U= 1000.5$; $p=.010$) with regard to the domestic animals category. In the category **dark,**

night, bad dreams the upper SES group participants expressed significantly more fears than the low SES group participants ($U= 1581$; $p=.020$).

A summary of the content and number of times a fear was expressed in total by the low, middle and upper socio-economic status groups participants respectively is shown in Table 12.

Table 12

Frequencies of Total Fear Content for Participants with Regard to SES Distribution

Fear categories	Low SES (n=51)	% Low SES Total Fears	Middle SES (n=32)	% Middle SES Total Fears	Upper SES (n=69)	% Upper SES Total Fears	Total Fears
Wild animals	64	49.2	32	33.7	69	33.8	165
Domestic animals	13	10.0	11	11.6	5	2.5	29
Insects	2	1.5	5	5.3	8	3.9	15
Sea/water animals	1	0.8	1	1.1	9	4.4	11
Fantasy animals	3	2.3	3	3.2	4	2.0	10
Real people	12	9.2	13	13.7	16	7.8	41
Fantasy people	11	8.5	8	8.4	26	12.7	45
Dark, night	9	6.9	10	10.5	27	13.2	46
Nat. phenomena	1	0.8	1	1.1	5	2.5	7
Being alone	0	0.0	2	2.1	5	2.5	7
Separation	0	0.0	0	0.0	2	1.0	2
Medical	0	0.0	0	0.0	1	0.5	1
Physical harm	6	4.6	6	6.3	12	5.9	24
Injury to others	3	2.3	1	1.1	5	2.5	9
Other fears	5	3.8	2	2.1	10	4.9	17
Total	130	99.9	95	100.2	204	100.1	429

Note: SES = Socio-economic status

The following rank orders were obtained for the five most frequent total fears with regard to SES (see Table12).

Rank order of total fears

	Low SES	Middle SES	Upper SES
1.	wild animals	wild animals	wild animals
2.	domestic animals	real people	dark, night
3.	real people	domestic animals	fantasy people
4.	fantasy people	dark, night	real people

5. dark, night fantasy people physical harm

The average **number** of fears expressed was 2.5 for the low SES group, 3.0 for the middle SES group, and 3.0 for the upper SES group. The number of fears ranged from 1 to 9 for the low SES group, 1 to 8 for the middle SES group, and 1 to 9 for the upper SES group. To ascertain whether there were significant differences amongst the groups with regard to the **total number** of fears, a Kruskal-Wallis Test was performed. The results show that there were no statistically significant differences amongst the total number of fears of the three groups ($U=2.873$; $p=.238$).

To ascertain whether the SES differences with regard to the **total fears content** expressed were statistically significant, the Kruskal-Wallis Test was performed and the results are presented in Table 13.

Table 13

Comparisons for the SES Differences in Participants' Total Fear Content: Kruskal-Wallis Test Results

Fear categories	Kruskal-Wallis	P
Wild animals	3.882	.144
Domestic animals	8.670	.013*
Insects	2.611	.271
Real people	2.053	.358
Fantasy people	3.009	.222
Dark, night	6.389	.041*
Physical harm to self	.755	.686
Sea/water animals	4.137	.126
Fantasy animals	1.293	.524
Natural phenomena	2.053	.358
Being alone	3.730	.155
Separation from parents	2.422	.298
Medical	1.203	.548
Injury to others	.376	.829
Other	1.464	.481

Note. SES=Socio-economic status

* $p<0,05$

Results in Table 13 show a statistically significant difference amongst the socio-economic status groups in their total expressed fears within the categories **domestic animals** and **dark, night, bad dreams**. Pairwise post hoc comparisons by means of Mann-Whitney Tests show that, with regard to domestic animal fears, the low SES

group expressed significantly more fears than the upper SES group ($U=1502.5$; $p=.021$). A significant difference is also found between the middle and upper SES groups; participants of the middle SES group expressed significantly more fears than those of the upper SES participants ($U=868.5$; $p=.004$). A statistically significant difference is evident in the category **dark, night, bad dreams**, where the upper SES group expressed significantly more fears than the low SES group ($U=1381.5$; $p=.011$).

6.1.5 Content and Number of expressed fears with regard to community violence risk comparison distribution

A summary of the content and number of times a primary fear was expressed by the low-risk, medium-risk and high-risk community violence comparison groups is shown in Table 14.

Table 14

Frequency in Primary Fear Content for Participants with Regard to Community Violence Risk Distribution

Fear categories	Low risk (n=81)	% of LR Primary Fears	Medium Risk (n=44)	% of MR Primary Fears	High Risk (n=25)	% of HR Primary Fears	Total Primary Fears
Wild animals	28	34.6	20	45.5	13	52.0	61
Domestic animal	2	2.5	2	4.5	3	12.0	7
Insects	6	7.4	0	0.0	1	4.0	7
Sea/water animal	1	1.2	1	2.3	0	0.0	2
Fantasy animals	3	3.7	1	2.3	0	0.0	4
Real people	9	11.1	5	11.4	5	20.0	19
Fantasy people	16	19.8	10	22.7	1	4.0	27
Dark, night	7	8.6	1	2.3	0	0.0	8
Nat. phenomena	1	1.2	0	0.0	0	0.0	1
Being alone	3	3.7	0	0.0	0	0.0	3
Separation	1	1.2	0	0.0	0	0.0	1
Medical	0	0.0	0	0.0	0	0.0	0
Physical harm	3	3.7	3	6.8	0	0.0	6
Injury to others	1	1.2	1	2.3	1	4.0	3
Other fears	0	0.0	0	0.0	1	4.0	1
Total	81	99.9	44	100.1	25	100.0	150

One participant in the low-risk community violence group and one in the high-risk group reported no fears.

The following rank orders were obtained for the five most frequent primary fears with regard to Community violence risk (see Table 14).

Rank order of primary fears

	Low-risk group	Medium-risk group	High-risk group
1.	wild animals	wild animals	wild animals
2.	fantasy people	fantasy people	real people
3.	real people	real people	domestic animals
4.	dark, night	physical harm	*insects, fantasy people, injury to others, other fears
5.	insects	domestic animals	

* all of the fourth rank order

To ascertain whether the community violence risk differences with regard to the primary fears expressed were statistically significant, the Kruskal-Wallis Test was performed and the results are presented in Table 15.

Table 15

Comparisons for the Community Violence Risk Group Differences in Participants' Primary Fear Content: Kruskal-Wallis Test Results

Fear categories	Kruskal-Wallis	p
Wild animals	2.777	.249
Domestic animals	3.697	.158
Insects	3.508	.173
Real people	1.295	.523
Fantasy people	4.333	.115
Dark, night	3.969	.137
Physical harm to self	2.030	.362
Sea/water animals	.658	.719
Fantasy animals	1.055	.590
Natural phenomena	.854	.653
Being alone	2.595	.273
Separation from parents	.854	.653
Medical	.000	1.000
Injury to others	.728	.695
Other	4.846	.089

From the results in Table 15 it appears that there were no significant differences among the community violence risk comparison groups.

A summary of the content and number of times a fear was expressed in total by the low-risk, medium-risk and high-risk community violence comparison groups is shown in Table 16.

Table 16

Frequency in Percentages of Total Fear Content and Number for Participants with regard to Community Violence Risk Comparison Distribution

Fear categories	Low Risk (n=81)	% of LR Total Fears	Medium Risk (n=44)	% of MR Total Fears	High Risk (n=25)	% of HR Total Fears	Total fears
Wild animals	84	34.7	53	40.5	28	50.0	165
Domestic animal	12	5.0	11	8.4	6	10.7	29
Insects	12	5.0	2	1.5	1	1.8	15
Sea/water animal	6	2.5	5	3.8	0	0.0	11
Fantasy animals	6	2.5	4	3.1	0	0.0	10
Real people	24	9.9	9	6.9	8	14.3	41
Fantasy people	25	10.3	19	14.5	1	1.8	45
Dark, night	32	13.2	9	6.9	5	8.9	46
Nat. phenomena	5	2.1	2	1.5	0	0.0	7
Being alone	6	2.5	1	0.7	0	0.0	7
Separation	2	0.8	0	0.0	0	0.0	2
Medical	1	0.4	0	0.0	0	0.0	1
Physical harm	13	5.4	9	6.9	2	3.6	24
Injury to others	5	2.1	3	2.3	1	1.8	9
Other fears	9	3.7	4	3.1	4	7.1	17
Total	242	100.1	131	100.1	56	100.0	429

The following rank orders were obtained for the five most frequent total fears with regard to community violence risk comparison groups (see Table 16).

Rank order of total fears

	Low-risk group	Medium-risk group	High-risk group
1.	wild animals	wild animals	wild animals
2.	dark, night	fantasy people	real people
3.	fantasy people	domestic animals	domestic animals
4.	real people	*real people,	dark, night

physical harm; dark, night

5. physical harm

other fears

* all of the fourth rank order

The average **number** of fears expressed by the low-risk group was 3.0, for the medium-risk group also 3.0 and for the high-risk group the average was 2.4. The number of fears ranged from 1 to 8 for the low-risk, 1 to 9 for the medium-risk, and 1 to 5 for the high-risk groups.

A Kruskal-Wallis Test was performed to test the hypothesis that there were no significant differences amongst the **total number of fears** for the three groups. The results show that there were statistically significant differences amongst the groups. Pairwise post hoc comparisons by means of Mann-Whitney Tests confirm that participants of the low-risk group expressed significantly more fears than participants of the high-risk group ($U=.770$; $p=.029$).

To ascertain whether the community violence risk comparison differences with regard to the **total fears content** were statistically significant, the Kruskal-Wallis Test was performed and the results are presented in Table 17.

Table 17

Comparisons for the Community Violence Risk Group Differences in Participants' Total Fear Content: Kruskal-Wallis Test Results

Fear categories	Kruskal-Wallis	p
Wild animals	.915	.633
Domestic animals	1.456	.483
Insects	3.789	.150
Real people	.967	.617
Fantasy people	7.497	.024*
Dark, night	6.445	.040*
Physical harm to self	1.202	.548
Sea/water animals	2.424	.298
Fantasy animals	1.764	.414
Natural phenomena	1.660	.436
Being alone	3.152	.207
Separation from parents	1.719	.423
Medical	.854	.653
Injury to others	.328	.849
Other	.145	.930

* $P < 0,05$

According to the results in Table 17 there is a statistically significant difference amongst the community violence risk groups in their total expressed fears within the categories **fantasy people** and **dark, night, bad dreams**. Results of pairwise post hoc comparisons by means of Mann-Whitney Tests show that with regard to the fear category **fantasy people**, the low violence risk groups expressed significantly more fears than the high violence risk group ($U=-2.312$; $p=.021$); the medium-risk group also expressed significantly more fears than the high-risk group ($U=410$; $p=.006$). With regard to the category **dark, night, bad dreams**, the low violence risk group expressed significantly more fears than the medium violence risk groups ($U=1469$; $p=.035$).

6.1.6 Content and number of expressed fears with regard to parental perception

A summary of the parents' perception of their children's fears have been grouped together to provide a representation of the 15 broad categories, as summarised in Table 18, with regard to primary, additional and total fears.

Table 18

Frequency of Fear Contents of Participants with Regard to Parental Perception

Fear categories	Primary Fears	% T Prim. Fears	Add. Fears	% T. Add. Fears	Total Fears	% T Fears
Wild animals	15	12.1	11	15.7	26	13.4
Domestic animals	7	5.6	4	5.7	11	5.7
Insects	7	5.6	5	7.1	12	6.2
Sea/water animals	0	0.0	0	0.0	0	0.0
Fantasy animals	1	0.8	1	1.4	2	1.0
Real people	9	7.3	6	8.6	15	7.7
Fantasy people	7	5.6	1	1.4	8	4.1
Dark, night	27	21.8	6	8.6	33	17.0
Natural phenomena	2	1.6	2	2.9	4	2.1
Being alone	11	8.9	10	14.4	21	10.8
Separation	1	0.8	4	5.7	5	2.6
Medical	1	0.8	0	0.0	1	0.5
Physical harm	13	10.5	4	5.7	17	8.8
Injury to others	8	6.5	8	11.4	16	8.2
Other fears	15	12.1	8	11.4	23	11.9
Total	124	100.0	70	100.0	194	100.0

Eight of the 152 parents reported that their children have no fears, while 20 reported that they don't know what their children are afraid of.

In the present study the following rank order of fears with regard to parental perception of their children's fears was obtained for the five most frequent primary fears as well as total fears expressed.

Rank order	Primary fears categories	Total fears categories
1.	dark, night	dark, night
2.	other fears / wild animals*	wild animals
3.	physical harm	other fears
4.	being alone	being alone
5.	real people	physical harm

* both of the 2nd rank order

A total **number** of 194 fears were expressed, ranging from 1 to 4 per participant. The overall sample showed an average of 1.6 fears reported by the 124 parents who did report fears for their children.

Although exploration of parental perception was not a specific focus area of this dissertation, the results (Table 18) were added to broaden the scope of understanding more about childhood fears in the broader ecosystemic context. The results in Table 18 were not statistically investigated further. They will, however, be used primarily to compare globally with those of the participants and be discussed in Chapter 7.

6.2 Coping mechanisms and perceived efficacy

6.2.1 Coping mechanisms and perceived efficacy for all participants

Table 19 indicates all participants' frequency of different coping mechanisms according to 11 categories and perceived efficacy with regard to 3 categories (see Addendum J).

Table 19

Frequencies of Coping Mechanisms and Perceived Efficacy for All Participants (N=152)

Coping mechanisms	Freq. Coping (N=152)	% Tot. coping	% effective coping		% ineffective coping		% uncertain coping	
Primary control								
Direct problem solving	21	13.8	17	11.2	1	0.7	3	2.0
Problem-focused crying	8	5.3	6	3.9	2	1.3	0	0.0
Problem-focused aggression	5	3.3	4	2.6	1	0.7	0	0.0
Problem-focused avoidance	41	27.0	22	14.5	9	5.9	10	6.6
Subtotal primary control strategies	75	49.4	49	32.2	13	8.6	13	8.6
Secondary control								
Social/spiritual support	47	30.9	38	25.0	5	3.3	4	2.6
Emotion-focused crying	2	1.3	2	1.3	0	0.0	0	0.0
Emotion-focused aggression	0	0.0	0	0.0	0	0.0	0	0.0
Cognitive avoidance	5	3.3	4	2.6	0	0.0	1	0.7
Pure cognition	1	0.7	0	0.0	0	0.0	1	0.7
Subtotal secondary control strategies	55	36.2	44	28.9	5	3.3	6	3.9
Relinquished control								
Doing nothing	19	12.5	1	0.7	10	6.5	8	5.3
Don't know	3	2.0	0	0.0	1	0.7	2	1.3
Subtotal relinquished control strategies	22	14.5	1	0.7	11	7.2	10	6.6
Total	152	100.1	94	61.8	29	19.1	29	19.1

- Not all percentages add up to 100 due to rounding; not all subtotal percentages add up to the sum of the subcategory percentages due to rounding.

According to Table 19, the results indicate that, when scared, most participants utilised **social/spiritual support** as a coping mechanism (30.9%), followed by **problem-focused avoidance** (27%); and **direct problem solving** (13.8%).

Social/spiritual support was perceived as the most **effective** coping mechanism (25%), while doing nothing was perceived as the most **ineffective** (6.5%) and problem-focused avoidance as the most **uncertain** (6.6%) coping mechanism.

6.2.2 Coping mechanisms and perceived efficacy with regard to gender distribution

Table 20 indicates the frequency of different coping mechanisms according to 11 categories as expressed by the boys and the girls respectively.

Table 20

Frequencies of Coping Mechanisms with Regard to Gender Distribution

Coping mechanisms	Boys coping (n=80)	% Boys coping	Girls Coping (n=72)	% Girls coping	Total coping	% Tot coping
Primary control						
Direct problem solving	13	16.3	8	11.1	21	13.8
Problem-focused crying	2	2.5	6	8.3	8	5.3
Problem-focused aggression	5	6.3	0	0.0	5	3.3
Problem-focused avoidance	28	35.0	13	18.1	41	27.0
Subtotal primary control strategies	48	60.1	27	37.5	75	49.4
Secondary control						
Social/spiritual support	20	25.0	27	37.5	47	30.9
Emotion-focused crying	0	0.0	2	2.8	2	1.3
Emotion-focused aggression	0	0.0	0	0.0	0	0.0
Cognitive avoidance	2	2.5	3	4.2	5	3.3
Pure cognition	0	0.0	1	1.4	1	0.7
Subtotal secondary control strategies	22	27.5	33	45.9	55	36.2
Relinquished control						
Doing nothing	7	8.8	12	16.7	19	12.5
Don't know	3	3.8	0	0.0	3	2.0
Subtotal relinquished control strategies	10	12.6	12	16.7	22	14.5
Total	80	100.2	72	100.1	152	100.1

- Not all percentages add up to 100 due to rounding; not all subtotal percentages add up to the sum of the subcategory percentages due to rounding..

The following rank orders were obtained for the 3 most frequent coping mechanisms with regard to gender distribution (see Table 20).

Rank order	Coping Mechanisms (Boys)	Coping Mechanisms (Girls)
1.	Problem-focused avoidance	Social/Spiritual support
2.	Social/spiritual support	Problem-focussed avoidance
3.	Direct problem solving	Doing nothing

To ascertain whether the gender differences were statistically significant, the Mann-Whitney Test was utilised and the results are shown in Table 21.

Table 21

Comparisons for the Gender Differences in Participants' Coping Mechanisms: Mann-Whitney Test results

Coping mechanisms	Mann-Whitney U	Z	p
Primary control			
Direct problem solving	2732.000	-.914	.361
Problem-focused crying	2712.000	-1.603	.109
Problem-focused aggression	2700.000	-2.150	.032*
Problem-focused avoidance	2392.000	-2.342	.019*
Secondary control			
Social/spiritual support	2520.000	-1.659	.097
Emotion-focused crying	2800.000	-1.496	.135
Emotion-focused aggression	2880.000	.000	1.000
Cognitive avoidance	2832.000	-.573	.566
Pure cognition	2840.000	-1.054	.292
Relinquished control			
Doing nothing	2652.000	-1.469	.142
Don't know	2772.000	-1.654	.098

* p < 0.05

From Table 21 it is evident that there was a statistically significant difference between the boys and the girls in their expressed coping mechanisms in the categories **problem-focused-aggression** and **problem-focused avoidance**. The boys expressed making significantly more use of both these coping mechanisms than the girls did.

Table 22 indicates the frequency of perceived efficacy according to 3 categories for the boys and the girls.

Table 22

Frequencies in Percentages of Participants' Perceived Efficacy with regard to Gender Distribution

Perceived coping	Boys Coping (n=80)	% Boys Coping	Girls Coping (n=72)	% Girls Coping	Total Coping	% Total Coping
Effective coping	47	58.8	47	65.3	94	61.8
Ineffective coping	17	21.3	12	16.7	29	19.1
Uncertain	16	20.0	13	18.1	29	19.1
Total	80	100.1	72	100.1	152	100

From Table 22 it can be deduced that both boys (58.8%) and girls (65.3%) perceived their coping mechanisms as effective more than being ineffective or uncertain.

To ascertain whether the gender differences were statistically significant, the Mann-Whitney Test was utilised and the results are shown in Table 23.

Table 23

Comparisons for the Gender Differences in Participants' Perceived Efficacy: Mann-Whitney Test Results

Perceived coping	Mann-Whitney U	Z	p
Effective coping	2692.000	-.824	.410
Ineffective coping	2748.000	-.716	.474
Uncertain	2824.000	-.304	.761

According to the Mann-Whitney Test Results, there were no statistically significant differences between the perceived efficacy results of the boys and the girls.

6.2.3 Coping mechanisms and perceived efficacy with regard to cultural distribution

Table 24 indicates the frequency of different coping mechanisms according to the 11 categories as expressed by the white, coloured and black participants respectively.

Table 24*Frequencies of Coping Mechanisms with regard to Cultural Distribution*

Coping mechanisms	White (n=48)	% of Total	Col. (n=59)	% of Total	Black (n=45)	% of Total	Total	% of Total
Primary control								
Direct prob. Solving	10	20.8	6	10.2	5	11.1	21	13.8
Problem-focused cry.	0	0.0	5	8.5	3	6.7	8	5.3
Problem-focused aggr.	2	4.2	1	1.7	2	4.4	5	3.3
Problem-focused avoid	10	20.8	20	33.9	11	24.4	41	27.0
Subtotal primary control strategies	22	45.8	32	54.3	21	46.6	75	49.4
Secondary control								
Social/spiritual support	15	31.3	16	27.1	16	35.6	47	30.9
Emotion-focused cry	1	2.1	1	1.7	0	0.0	2	1.3
Emotion-focused aggr.	0	0.0	0	0.0	0	0.0	0	0.0
Cognitive avoidance	4	8.3	1	1.7	0	0.0	5	3.3
Pure cognition	1	2.1	0	0.0	0	0.0	1	0.7
Subtotal secondary control strategies	21	43.8	18	30.5	16	35.6	55	36.2
Relinquished control								
Doing nothing	4	8.3	9	15.3	6	13.3	19	12.5
Don't know	1	2.1	0	0.0	2	4.4	3	2.0
Subtotal relinquished control strategies	5	10.4	9	15.3	8	17.7	22	14.5
Total	48	100.0	59	100.1	45	99.9	152	100.1

- Not all percentages add up to 100 due to rounding; not all subtotal percentages add up to the sum of the subcategory percentages due to rounding

The following rank orders were obtained for the three most frequent coping mechanisms with regard to cultural distribution (see Table 24).

Rank order of coping mechanisms

White group	Coloured group	Black group
1. Soc./spiritual support	Problem-focused avoid	Soc./spiritual support
2. Problem-focused avoid*.	Soc./spiritual support	Problem-focused avoid.
3. Direct problem solving*	Doing nothing	Doing nothing

*both at the 2nd rank order

To ascertain whether the culture differences were statistically significant, the Kruskal-Wallis Test was utilised and the results are shown in Table 25.

Table 25

Comparisons for the Cultural Differences in Participants' Coping Mechanisms: Kruskal-Wallis Test Results

Coping mechanisms	Kruskal-Wallis	p
Primary control		
Direct problem solving	2.901	.234
Problem-focused crying	4.038	.133
Problem-focused aggression	.771	.680
Problem-focused avoidance	2.485	.289
Secondary control		
Social/spiritual support	.849	.654
Emotion-focused crying	.877	.645
Emotion-focused aggression	.000	1.000
Cognitive avoidance	5.802	.055
Pure cognition	2.167	.338
Relinquished control		
Doing nothing	1.192	.551
Don't know	2.594	.273

As can be seen in Table 25, there were no significant differences in the coping mechanisms utilised by the different cultural groups.

The following table represents the perceived efficacy of the white, coloured and black participants with regard to the coping mechanisms they utilised.

Table 26

Frequencies of Participants' Perceived Efficacy with regard to Cultural Distribution

Perceived cope	White (n=48)	% of Total	Coloured (n=59)	% of Total	Black (n=45)	% of Total	Total	% of Total
Effective cope	33	68.8	35	59.3	26	57.8	94	61.8
Ineffective cope	5	10.4	12	20.3	12	26.7	29	19.1
Uncertain	10	20.8	12	20.3	7	15.6	29	19.1
Total	48	100.0	59	99.9	45	100.1	152	100

- Not all percentages add up to 100 due to rounding

From Table 26 it can be deduced that all participants, irrespective of cultural differences, perceived their coping mechanisms as effective more than being ineffective or uncertain. When compared within groups, it seems as if the participants from the black cultural

group perceived the utilisation of their coping mechanisms more often as ineffective (26.7%) than as uncertain (15.6%). This tendency is contrasted within the other two groups.

The Kruskal-Wallis Test was utilised in order to ascertain whether the differences regarding perceived efficacy amongst the three cultural groups were statistically significant. The results are shown in Table 27.

Table 27

Comparisons for the Cultural Differences in Participants' Perceived Efficacy: Kruskal-Wallis Test Results

Perceived coping	Kruskal-Wallis	p
Effective coping	1.435	.488
Ineffective coping	4.045	.132
Uncertain	.515	.773

From the results in Table 27 it is evident that no significant differences pertaining to perceived efficacy could be found amongst the different cultural groups.

6.2.4 Coping mechanisms and perceived efficacy with regard to SES distribution

Table 28 provides a summary of the participants' responses regarding coping mechanisms within the three different socio-economic status groups, namely the low, middle and upper groups.

Table 28*Frequencies of Participants' Coping Mechanisms with regard to SES*

Coping mechanisms	Low SES	% Low	Middle SES	% Middle	Upper SES	% Upper	Total SES
<i>Primary control</i>							
Direct problem solving	7	13.7	5	15.6	9	13.0	21
Problem-focused crying	4	7.8	2	6.3	2	2.9	8
Problem-focused aggression	2	3.9	2	6.3	1	1.4	5
Problem-focused avoidance	17	33.3	5	15.6	19	27.5	41
Subtotal primary control strategies	30	58.8	14	43.8	31	44.9	75
<i>Secondary control</i>							
Social/spiritual support	14	27.5	8	25.0	25	36.2	47
Emotion-focused crying	0	0.0	2	6.3	0	0.0	2
Emotion-focused aggression	0	0.0	0	0.0	0	0.0	0
Cognitive avoidance	0	0.0	0	0.0	5	7.2	5
Pure cognition	0	0.0	0	0.0	1	1.4	1
Subtotal secondary control strategies	14	27.5	10	31.3	31	44.9	55
<i>Relinquished control</i>							
Doing nothing	5	9.8	7	21.9	7	10.1	19
Don't know	2	3.9	1	3.1	0	0.0	3
Subtotal relinquished control strategies	7	13.7	8	25	7	10.1	22
Total	51	100	32	100.1	69	99.9	152

Note: SES = Socio-economic status

- Not all percentages add up to 100 due to rounding; not all subtotal percentages add up to the sum of the subcategory percentages due to rounding.

From Table 28 the following coping patterns emerged as the top three respectively when ranking the different groups' coping mechanisms in response to their primary fears:

Rank order of coping mechanisms

Low SES group	Middle SES group	Upper SES group
1. Problem-focused avoidance	Soc./spiritual support	Soc./spiritual support
2. Soc./spiritual support	Doing nothing	Problem-focused avoid.

3. Direct problem solving Problem–focused avoid*. Direct problem solving
- Direct problem solving*

- both at the 3rd rank order.

To ascertain whether the SES differences were significant, the Kruskal–Wallis Test was utilised and the results are shown in Table 29.

Table 29

Comparisons for the SES differences in Participants' Coping Mechanisms: Kruskal-Wallis Test Results

Coping mechanisms	Kruskal-Wallis U	p
Primary control		
Direct problem solving	.122	.941
Problem-focused crying	1.507	.471
Problem-focused aggression	1.669	.434
Problem-focused avoidance	3.130	.209
Secondary control		
Social/spiritual support	1.713	.425
Emotion-focused crying	7.550	.023*
Emotion-focused aggression	.000	1.000
Cognitive avoidance	6.178	.046*
Pure cognition	1.203	.548
Relinquished control		
Doing nothing	3.239	.198
Don't know	2.592	.274

Note: SES = Socio-economic status

*p<0.05

The results from Table 29 show significant differences amongst the three groups regarding the coping mechanisms **emotion-focused crying** and **cognitive avoidance**.

Upon further investigation, the pairwise Mann-Whitney Tests post hoc comparisons indicated the following significant differences amongst the three SES groups: the middle SES group made significantly more use of emotion-focused crying as a coping mechanism than the upper group (U=1035; p=.037). Cognitive avoidance was found to be used significantly more in the upper SES group as a coping mechanism, contrasted to its usage in the low SES group (U=1632; p=.051).

Table 30 represents the perceived efficacy of the low, middle and upper socio-economic status groups with regard to the coping mechanisms the participants utilised.

Table 30

Frequencies of Participants' Perceived Efficacy with regard to SES distribution

Perceived coping	Low SES	% Low	Middle SES	% Middle	Upper SES	% Upper	Total SES	% Total
Effective coping	29	56.9	22	68.8	43	62.3	94	61.8
Ineffective coping	15	29.4	4	12.5	10	14.5	29	19.1
Uncertain	7	13.7	6	18.8	16	23.2	29	19.1
Total	51	100	32	100,1	69	100	152	100

Note: SES = Socio-economic status

From the results in Table 30 it is evident that all participants, irrespective of SES distribution, perceived their coping mechanisms more as useful than being ineffective or uncertain. When the participants' results pertaining to the latter two are compared within groups, it appears that the participants from the low SES group perceived their coping more as ineffective (29.4%) than as uncertain (13.7%). This is in contrast with the results of the middle and upper SES groups, whose results indicate that the participants perceived their coping mechanisms more as being uncertain than as being ineffective.

To ascertain whether the differences amongst the SES groups were statistically significant, the Kruskal-Wallis Test was utilised. The results are shown in Table 31.

Table 31

Comparisons of Participants' Perceived Efficacy with regard to SES Distribution: Kruskal Wallis Test Results

Perceived coping	Kruskal-Wallis U	P
Effective coping	1.182	.554
Ineffective coping	5.329	.070
Uncertain	1.693	.429

Note: SES = Socio-economic status

According to Table 31, there were no significant differences amongst the three SES groups' results.

6.2.5 Coping mechanisms and perceived efficacy with regard to community violence comparisons

Table 32 indicates the frequencies of different coping mechanisms according to the 11 categories as expressed by the low, medium and high groups pertaining to community violence risks.

Table 32

Frequencies of Participants' Coping Mechanisms with regard to Community Violence Comparisons

Coping mechanisms	Low	% Low	Medium	% Medium	High	% High	Total
Primary control							
Direct problem solving	13	15.9	6	13.6	2	7.7	21
Problem-focused crying	2	2.4	3	6.8	3	11.5	8
Problem-focused aggression	3	3.7	2	4.5	0	0.0	5
Problem-focused avoidance	21	25.6	11	25.0	9	34.6	41
Subtotal primary control strategies	39	47.6	22	50.0	14	53.8	75
Secondary control							
Social/spiritual support	26	31.7	14	31.8	7	26.9	47
Emotion-focused crying	2	2.4	0	0.0	0	0.0	2
Emotion-focused aggression	0	0.0	0	0.0	0	0.0	0
Cognitive avoidance	5	6.1	0	0.0	0	0.0	5
Pure cognition	1	1.2	0	0.0	0	0.0	1
Subtotal secondary control strategies	34	41.4	14	31.8	7	26.9	55
Relinquished control							
Doing nothing	8	9.8	8	18.2	3	11.5	19
Don't know	1	1.2	0	0.0	2	7.7	3
Subtotal relinquished control strategies	9	11.0	8	18.2	5	19.2	22
Total	82	100	44	100	26	99.9	152

- Not all percentages add up to 100 due to rounding; not all subtotal percentages add up to the sum of the subcategory percentages due to rounding

According to Table 32, certain coping patterns emerged when ranking the three groups' results:

Rank order of coping mechanisms

Low-risk group	Medium-risk group	High-risk group
1. Soc./spiritual support	Soc./spiritual support	Problem-focused avoid.
2. Problem-focused avoid.	Problem-focused avoid.	Soc./spiritual support
3. Direct problem solving	Doing nothing	Doing nothing*
		Problem-focused crying*

* Both at the 3rd rank order

To ascertain whether the differences were significant, the Kruskal-Wallis Test was utilised and the results are shown in Table 33.

Table 33

Comparisons for the Community Violence Differences in Participants' Coping Mechanisms: Kruskal-Wallis Test Results

Coping mechanisms	Kruskal-Wallis	p
Primary control		
Direct problem solving	1.099	.577
Problem-focused crying	3.555	.169
Problem-focused aggression	1.130	.568
Problem-focused avoidance	.929	.628
Secondary control		
Social/spiritual support	.233	.890
Emotion-focused crying	1.719	.423
Emotion-focused aggression	.000	1.000
Cognitive avoidance	4.384	.112
Pure cognition	.854	.653
Relinquished control		
Doing nothing	1.873	.392
Don't know	5.485	.064

There appeared to be no significant differences amongst the three groups' results, as can be seen in Table 33.

Table 34 represents the perceived efficacy results of the low, medium and high groups pertaining to community violence risks.

Table 34

Frequencies of Participants' Perceived Efficacy with regard to Community Violence Comparisons

Perceived coping	Low	% Low	Medium	% Medium	High	% High	Total	% Total
Effective coping	53	64.6	26	59.1	15	57.7	94	61.8
Ineffective coping	11	13.4	11	25.0	7	26.9	29	19.1
Uncertain	18	22.0	7	15.9	4	15.4	29	19.1
Total	82	100	44	100	26	100	152	100

From the results in Table 34 it is evident that all participants, irrespective of community violence risk distribution, perceived their coping mechanisms more as useful than as being ineffective or uncertain. When the participants' results pertaining to the latter two are compared within groups, it appears that the participants from the low-risk group perceived their coping more as uncertain (22%) than as ineffective (13.4%). This is in contrast with the results of the medium- and high-risk groups, whose results indicate that the participants perceived their coping mechanisms more as being ineffective than as being uncertain.

To ascertain whether the differences amongst the community violence risk groups were statistically significant, the Kruskal-Wallis Test was utilised. The results are shown in Table 35.

Table 35

Comparisons for the Community Violence Differences in Participants' Perceived Efficacy: Kruskal Wallis Test Results

Perceived coping	Kruskal-Wallis	P
Effective coping	.598	.742
Ineffective coping	3.715	.156
Uncertain	.948	.622

From the results of Table 35 it can be deduced that there are no significant differences amongst the three community violence risk groups.

6.2.6 Parents' perception of their children's coping mechanisms and perceived efficacy

Table 36 provides a summary of the **parents** of the participants' perception of their children's coping mechanisms and perceived efficacy in response to the latter's primary fears.

Table 36

Frequencies of Parents' Perception of Coping Mechanisms and Perceived Efficacy for All Participants

Coping mechanisms	Total	% Total coping	% Effective coping	% Ineffective coping	% Uncertain coping			
Primary control								
Direct problem solving	3	2.0	3	2.0	0	0.0	0	0.0
Problem-focused crying	36	23.7	17	11.2	9	5.9	10	6.6
Problem-focused aggression	0	0.0	0	0.0	0	0.0	0	0.0
Problem-focused avoidance	28	18.4	17	11.2	5	3.3	6	3.9
Subtotal primary control strategies	67	44.1	37	24.4	14	9.2	16	10.5
Secondary control								
Social/spiritual support	44	28.9	35	23.0	3	2.0	6	3.9
Emotion-focused crying	4	2.6	2	1.3	0	0.0	2	1.3
Emotion-focused aggression	1	0.7	0	0.0	1	0.7	0	0.0
Cognitive avoidance	0	0.0	0	0.0	0	0.0	0	0.0
Pure cognition	0	0.0	0	0.0	0	0.0	0	0.0
Subtotal secondary control strategies	49	32.2	37	24.3	4	2.7	8	5.2
Relinquished control								
Doing nothing	6	3.9	2	1.3	1	0.7	3	2.0
Don't know	30	19.7	2	1.3	0	0.0	28	18.4
Subtotal relinquished control strategies	36	23.6	4	2.6	1	0.7	31	20.4
Total	152	99.9	78	51.3	19	12.6	55	36.1

- Not all percentages add up to 100 due to rounding; not all subtotal percentages add up to the sum of the subcategory percentages due to rounding

From Table 36 the following results for the parents' perception of their children's coping mechanisms and perceived efficacy in response to the latter's primary fears were established:

According to the parents, when most participants were scared they utilised social/spiritual support as a coping mechanism (28.9%), followed by problem-focused crying (23.7%), don't know (19.7%) and problem focused-avoidance (18.4%).

Social/spiritual support was perceived as by far the most effective coping mechanism (35%), while problem-focused crying was perceived as the most ineffective (5.9%) and don't know as the most uncertain (18.4%) coping mechanism.

Although parental perception was not a specific focus area of this dissertation, the results (Table 36) were added to broaden the scope of understanding childhood fears and coping in the broader ecosystemic context. The results in Table 36 were not statistically investigated further. They will, however, be used primarily to compare globally with those of the participants and be discussed in Chapter 7.

6.2.7 Coping mechanisms and perceived efficacy in relation to certain frequently expressed fears

A selection of the four most frequently utilised coping mechanisms and perceived efficacy will be described in relation to the four most frequently expressed fears by all participants in Tables 37 to 40.

Table 37 indicates the frequencies of four coping mechanisms and perceived efficacy in relation to participants' expressed fears in the wild animal category.

Table 37

Frequencies of Coping Mechanisms and Perceived Efficacy Related to Fear Category: Wild animals

Coping mechanisms	Freq. of coping	Total coping	% of Total coping	% Effective coping	% Ineffect. coping	% Uncertain coping
Direct problem solving	2	21	9.5	100.0	0.0	0.0
Problem-focused avoid	20	41	48.8	45.0	30.0	25.0
Social/spiritual support	24	47	51.1	87.5	4.2	8.3
Doing nothing	7	19	36.9	14.3	71.4	4.3

From the results in Table 37 it is evident that, upon comparing the results of the four most frequently utilised coping mechanisms in relation to all the participants' fears expressed in the wild animals category, the participants preferred social/spiritual support as a coping mechanism and most participants (87.5%) who resorted to this mechanism perceived the usage thereof as effective. In dealing with animal fears, it appears that coping via problem-focused avoidance is experienced by 45% of the participants as effective, but also by 30% as an ineffective way of coping, while 25% of the participants experienced it as uncertain.

Table 38 indicates the frequencies of four coping mechanisms and perceived efficacy in relation to participants' expressed fears in the real people category.

Table 38

Frequencies of Coping Mechanisms and Perceived Efficacy Related to Fear Category: Real People

Coping mechanisms	Freq. of coping	Total coping	% of Total coping	% Effective coping	% Ineffect. coping	% Uncertain coping
Direct problem solving	5	21	23.8	80.0	0.0	20.0
Problem-focused avoid	4	41	9.8	50.0	25.0	25.0
Social/spiritual support	3	47	6.4	100.0	0.0	0.0
Doing nothing	4	19	21.1	0.0	25.0	75.0

According to Table 38, the results indicate that, when afraid of real people, participants resorted to a variety of coping mechanisms. All the participants who made use of social or spiritual support perceived it as being effective in addressing their fears. The coping mechanism of direct problem solving is perceived as effective by 80% of the participants, following by 50% of the participants perceiving problem-focus avoidance as being effective. Doing nothing to their fear of real people is perceived as either ineffective (25%) or uncertain (75%).

Table 39 indicates the frequencies of four coping mechanisms and perceived efficacy in relation to participants' expressed fears in the fantasy people category.

Table 39

Frequencies of Coping Mechanisms and Perceived Efficacy Related to Fear Category: Fantasy People

Coping mechanisms	Freq. of coping	Total coping	% Total coping	% Effective coping	% Ineffect. coping	% Uncertain coping
Direct problem solving	4	21	19.0	75.0	25.0	0.0
Problem-focused avoid	7	41	17.1	57.1	14.3	28.6
Social/spiritual support	7	47	14.9	57.1	14.3	28.6
Doing nothing	9	19	47.4	44.4	33.3	22.2

- Not all percentages add up to 100 due to rounding

The results in Table 39 show that when scared of fantasy people, most participants who resorted to direct problem solving perceived it as an effective coping mechanism (75%), while 25% perceived it as being ineffective. Problem-focused avoidance and seeking of social or spiritual support are perceived as equally being effective (both 57.1%), ineffective (both 14.3%), as well as uncertain (both 28.6%). Doing nothing seems to follow the same pattern of perceived efficacy distribution (44.4% effective; 33.3% ineffective and 22.2% uncertain) as problem-focused avoidance and seeking social or spiritual support.

Table 40 indicates the frequencies of four coping mechanisms and perceived efficacy in relation to participants' expressed fears in the **dark, night, bad dreams** category.

Table 40

Frequencies of Coping Mechanisms and Perceived Efficacy Related to Fear Category: Dark, Night, Bad Dreams

Coping mechanisms	Freq. of coping	Total coping	% Total coping	% Effective coping	% Ineffect. coping	% Uncertain coping
Direct problem solving	2	21	9.5	50.0	0.0	50.0
Problem-focused avoid	3	41	7.3	66.7	0.0	33.3
Social/spiritual support	2	47	4.3	100.0	0.0	0.0
Doing nothing	1	19	5.3	0.0	100.0	0.0

From Table 40 it is clear that of the two participants who utilised direct problem solving as a coping mechanism in relation to the fear of the dark, night, bad dreams, one of

them (50%) perceived it as effective, while the other one (50%), perceived it as uncertain. The same pattern of perceived efficacy regarding problem-focused avoidance as a coping mechanism is evident (66.7% perceived efficacy and 33.3% uncertain coping). In contrast, when participants utilised social or spiritual support as a coping mechanism, it is perceived as effective, while the participant who chose doing nothing perceived it as ineffective coping (see Table 40).

In the following chapter the results will be discussed.

CHAPTER 7

DISCUSSION

The discussion of the results will be broadly divided into the two foci of the research, namely, the content and number of the preschoolers expressed fears, and the coping mechanisms and perceived efficacy in response to their fears. Each focus will firstly be discussed according to the results for all participants. This will be followed by a discussion of the results for each focus for the independent variables: gender, culture, socio-economic status (SES), and community violence risk comparisons. In addition, parental perception of children's fears, coping mechanisms and perceived efficacy, compared to the children's own views, will be discussed briefly.

7.1 Content and number of expressed fears

The content and number of fears will be discussed in terms of the results for all participants, followed by the results pertaining to gender, culture, SES, as well as community violence risk comparisons. Additionally, parental perception of children's fears, compared to the children's own views, will be discussed briefly. The following systematic pattern of discussion will be followed for each variable: rank order patterns emerging from primary and total fear profiles will firstly be compared. Thereafter, significant differences within the primary and total fear profiles of each variable will be discussed. Lastly, the number of fears will be commented upon.

7.1.1 Content and number of expressed fears for all participants

The content of the preschoolers' expressed fears in general (see Table 1) was largely similar to results being reported in the existing body of literature. Similarities appear especially with regard to the **wild animal fear category**. The latter fears were reported as being the most prominent of all the primary as well as the total fears. It appears that the fear of snakes was the most frequent response, with the lions and crocodiles next in order. These results are also consistent with those of previous South African empirical

research, although the rank order for the three most frequently mentioned animal fears differ slightly (Burkhardt, 2002; Keller, 2001; Martalas, 1999).

The prominence of the reported fear of snakes within the wild animal category is in accordance with results from previous research such as reported by Bowd (1983), Derevensky (1979), Maurer (1965), Muris, Merckelbach and Collaris (1997), Muris, Merckelbach and Meesters et al. (1997), Muris, Merckelbach and Gadet et al. (2000), and Slee and Cross (1989).

The fear of snakes appears universally among children of different nationalities and is also reported to be cross-culturally consistent within the same country (Burkhardt, 2002). Explanations for this phenomenon can be found within psychodynamic, social-learning as well as cognitive developmental theories. However, from an ecosystemic point of view, taking into account the practical realities of South Africa, known for its diverse snake population (Broadley, 1983), the fact that Stellenbosch is surrounded by hills and that snakes are in abundance particularly during the hot summer months (Burkhardt, 2002), as well as the role of snakes in cultural beliefs and practices (Mokgoatsana, 1999), it can be concluded that the fear of snakes is an example of a normal realistic fear with survival values.

The participants' drawings of snakes (Addendum K1) varied from simple line drawings (participant No. 96) to very specific types of snakes, such as "a cobra" (participant No. 49). Accompanying qualitative descriptions (see Addendum I1) mostly varied between broad categorical distinctions, such as "a small one" or "a big one".

Children mostly refer to the origin of these fears, which was discussed voluntarily and informally, as something that they experienced ("I have really seen it in the zoo", "...on TV", "...in the road", "...in the bushes" "...a movie").

There appear to be interesting and notable similarities and differences in the participants' profiles when **comparing the content of primary fears with the content of total fears** (the latter being a combination of primary and additional fears).

Similarities regarding the first five fear categories, irrespective of rank orders of these categories, are evident. The five categories (in primary fear rank order) include wild animals, fantasy people, real people and dark, night, bad dreams, as well as domestic animals. The only difference between the primary fears and total fears profiles exists with regard to the category of insects being ranked fifth, with the category domestic animals, in the participants' primary fears profile.

According to Gullone (2000) it appears that **animal fears** are common in young children, as is constantly reported even in the earlier studies, such as those by Derevensky (1974), Jersild et al. (1933), Lentz (1985a; 1985b) and Maurer (1965). With regard to the content of fears as reported in the two similar South African studies (Keller, 2000; Martalas, 1999) **wild animal** fears also predominated by far.

In addition to the wild animals, **domestic animals** also featured as one of the five most frequently reported response categories for both primary and total fear categories. Interestingly, these results in general comply with the study by Derevensky (1979), where self-report data with regard to fears of normal (aged 6 to 12) and exceptional children (age 7 to 19) were compared. The snake was reported as being the most feared animal overall, with a 36% endorsement of the responses; the following two most feared animals, according to the results, were the lion and tiger; next in order were the domestic animals namely, dogs and cats followed by insects (bees) (Derevensky 1979).

In the present study, the most frequently expressed fear within the domestic animal total fear category was overwhelmingly comprised of the fear of dogs, followed by cats, cows and a horse, donkey and sheep respectively (see Table 1 and section 6.1.1). Extracts of some of the drawings of cats and dogs in the domestic animals category are depicted in Addendum K2. Qualitative descriptive responses for the domestic animal category (see Addendum I2) were found to be similar in content (being mainly defined as either "big" or "small") as for the above-mentioned wild animal category. It is, however, important to bear in mind that, overall, domestic animal fears comprised less than 7% (4.7% of primary fears and 6,7% of total fears) of the participants' expressed fear profile (see Table 1).

As was being the case with domestic animals, the fear of insects accounts for only 4,7% of the primary fears (see Table 1). The content of the insects category consists mainly of spider fears. It appears as if spiders were mostly described as being “big ones” (see Addendum I3). Accompanying drawings (Addendum K3) confirm this notion. Normative spider fears among children are well documented and researched (amongst others by Burkhardt, 2002; Keller, 2001; Martalas, 1999; Muris, Merckelbach and Gadet et al., 2000; Muris, Merckelbach & Mayer et al., 2000). Other primary insect fears include bugs and bees (see Addendum K3 for an extract of the drawings).

With regard to primary fear responses, the **fantasy people** category consists overwhelmingly of ghosts. The latter are described (see Addendum I7) as being “big, black” (participants No. 104 and No. 114), or “white thing” (participant No. 145) or “small” (participant No. 142). An extract of some of the drawings of ghosts as well as other fantasy characters are provided in Addendum K7. Other fantasy people that were mentioned as scary were monsters, followed by the devil; a boogyman; giants; dracula. The other fantasy characters, namely a tokeloshe (see drawing Addendum K7, participant No. 56), a cannibal (see drawing Addendum K7, participant No. 10), batman and an alien were mentioned only once (see Addendum I7 for an exhaustive list of qualitative descriptions).

With regard to the category **real people**, a wide variety of characters, such as friends, mothers, sisters, brothers, a tramp, burglar, bad guy, thief, robbers, someone, a person, a face, gangster, “dishonest”, and ghostman (see Addendum I6) emerged. An extract of some of the drawings of real people is attached in Addendum K6. Qualitatively, this is the most elaborate category.

The researcher found it a challenge to distinguish accurately between expressed fear responses pertaining to the categories fantasy or real people. An example is participant No. 147’s response (see Addendum I6) referring to “ghost-man”. Upon further investigation, the participant indicated that this was the name of a real person living in the community.

The last overlapping category refers to the fears pertaining to the **dark, night, bad dreams** (see Addendum I8 for a qualitative summary). According to Table 1, this category of fears is ranked second when taking the total fears into account and ranked fourth place with regard to primary fears. These fears are well documented as being common among children (Bauer, 1976; Derevensky, 1979; Draper and James, 1985; Jersild and Holmes, 1935a; Lentz, 1985b; Maurer, 1965; Sipes et al., 1985; Slee and Cross, 1989; Mooney, 1985; Mooney et al., 1985; Muris, Merckelbach & Gadet et al. (2000); Muris et al. (2001). In the present study it was noticeable that participants were not eager to draw their fears pertaining to the dark, night or bad dreams. Three of the few drawings can be seen in Addendum K8 depicting the fear of darkness when the lights go out (participant No. 19); a little boy running upstairs to his parents' room in the dark (participant No. 20) or just general darkness (participant No. 57).

A total **number** of 429 fears were expressed, with an average of 2,8 fears per participant, ranging from 1 to 9. This average per child corresponds with the results of a similar interview-based study undertaken in the Western Cape, South Africa, (Keller, 2001). Studies elsewhere such as those by Eme and Schmidt (1987) and Maurer (1965), also reported an average of between 2 and 4 to 5 fears per child. It is important to note that the results of the present study correspond with those of Keller (2001), who obtained her data from a low to middle socio-economic status area and found the average number of fears to be 2.9 fears per participant with a range between 1 to 10. In contrast, Martalas (1999), whose target group was preschoolers from a middle to high socio-economic status group, reported a much higher average number (4.77) of fears per participant, with a range between 1 to 12. It appears as if the popular view that children from a lower socio-economic tend to display more fears in general is challenged in the present study. This aspect will again be addressed with regard to the findings relating to culture, SES and community violence.

7.1.2. Content and number of expressed fears with regard to gender distribution

Upon comparing the expressed fear profiles of the boys and girls, certain similarities emerged. The rank order for the content of the first three frequently mentioned primary fears – wild animals, fantasy people and real people – is the same for both sexes (see Table 2).

With regard to the category real people, the present data do not support the finding by Martalas (1999) that girls displayed significantly more fears of real people than boys. With regard to the total fear profile (see Table 4), concurrence between the rank orders of the two sexes is limited to the category wild animals, the most frequently mentioned fear among all the participants. Apart from the shared rank order position of the category wild animals, similarities were found with regard to the other top four fear categories: fantasy people, real people, dark, night, bad dreams and domestic animals. The rank order position for these categories, however, differed with regard to the two gender groups.

A statistically significant difference was found between the boys and girls in their **primary fear** profiles with regard to the category **insects** (see Table 3). It appears that the girls expressed significantly more fears than the boys in this category. Of the six girls who expressed primary fears in the insects category, three named spiders, two bugs and one a bee as the object of their fears (see Addenda I3 for a qualitative description). These results pertaining to the category of insects were, amongst others, also found in the study by Sipes et al. (1985). Martalas (1999), however, reported spiders to be the dominant insect, but found boys to report slightly more fears (although not significantly so) in this category.

Upon comparison of the **total fear** profiles of both sexes (see Table 5), a statistically significant difference was found in the category **dark, night, bad dreams**, where the girls expressed more fears than the boys. These results correspond with the results of an older study by Lapouse and Monk (1959), whereas the most recent study by Muris et al. (2001) revealed mostly similar results for boys and girls. In the present study fears expressed within the dark, night, bad dreams category ranged from very concrete fears

such as being afraid when “the lights go out and it is dark” (Addendum K8 participant No. 19) to relatively abstract expressions of being afraid and “running upstairs in the dark to parents’ room” (see Addendum K8 participant No. 20’s response).

There was, however, no significant difference in the average **number of fears** expressed between the boys and girls, although the boys’ average was 2.9 fears per participant, which is slightly higher than the 2,8 fears per participant for the girls. This finding corresponds with that of several other authors (Rende & Plomin, 1991; Ross, 1981; Van Eeden, 1989) who have reported no gender differences pertaining to the expressed fears in young children.

7.1.3. Content and number of expressed fears with regard to cultural distribution

An interesting pattern emerged with regard to the content of the primary fears expressed by the three cultural groups (see Table 6). The three fears most frequently mentioned by the three groups were similar in content, namely, wild animals (placed first by all three groups), real people (ranked second by both the white and black participants and third by the coloured participants) and fantasy people (ranked second by the coloured participants and third by both the white and black participants). With regard to the category of real people fears, the present study’s results are in contrast with those of Martalas (1999), who found that coloured and Asian children express significantly more fears of real people than the children of other cultural groups do. She, however, cautions against generalisation based on a small sample size (the black participants only comprise 9.26% of the total sample).

The category dark, night, bad dreams does not feature as one of the first five primary fears of the black participants. Insect fears are ranked fifth for both the white and black groups, but not for the coloured group. Being alone as a primary fear category is rated amongst the rank order of the first five primary fears and seems to be applicable only for the white participants. Likewise, the primary fear of physical harm category is ranked only amongst the five top fears for the coloured participants. Two primary fear categories that were only reported for the black participants are domestic animals and injury to others.

According to Table 8, similarities with regard to the content of the five most frequently mentioned total fears for the three cultural groups were found within the categories wild animals (ranked first by all three groups), real people (ranked respectively third by the white, fourth by the coloured and third by the black participants); and dark, night, bad dreams (ranked second by the white, third by the coloured and fourth by the black participants).

With regard to the **primary fear** profile of the three groups of participants, a significant difference was found amongst the cultural groups with regard to the category **being alone**. The white participants expressed significantly more fears than the coloured and black participants (see Table 7). According to Addendum I10, responses in this category varied from being “alone in a room” (participant No. 2); “alone in the dark” (participant No. 4); “to be forgotten at school” (participant No. 12); “to be left alone at home in the day” (participant No. 129). Addendum K10 provides the drawing by participant No. 64, a coloured girl, of being scared that a family member might go to jail and that she will be alone at home. Interestingly, the participants who expressed fears in the total fears category belong either to the white group (all boys) or the coloured group (all girls). If the construct of being alone is expanded to include separation fears, another two white boys (see Table 8) can be added to the above category.

According to Table 9, significant differences were found with respect to the three cultural groups’ **total fears** in the three categories **domestic animals**, **fantasy people** and **dark, night, bad dreams**.

Within the category **domestic animals** the black participants expressed significantly more fears than the white participants. The content of the black participants’ fears mainly include dogs (see Addendum I2) and responses varied from “dog that is very evil” (participant No. 65) to “small one” (participant No. 82) and “big one” (participants No. 86, 96, 108). In conversation with participants on the topic of why they are scared of small dogs, participants explained that the small dogs usually bark and in response the big dogs will follow. It was also interesting that none of the black participants who expressed domestic animal fears owned pets. In contrast, most of the white participants

are quite familiar with the concept of having domestic animals as household pets. In Addendum K2, some of the drawings of participants' fears pertaining to domestic animals are presented.

Referring to the category **fantasy people** (see Tables 8 & 9) it is evident that the coloured participants expressed significantly more fears than the black children. According to Addendum I7, ghosts are portrayed as by far as the most frequently mentioned fantasy people as being mostly feared.

Pertaining to the fears within the category **dark, night, bad dreams**, (see Tables 8 & 9) it is clear that the white participants expressed significantly more fears than the black participants. These results are intriguing in the sense that night-time fears are reported to be relatively common in all normal children (Muris et al., 2001) and across all cultures (Robinson et al., in Berk, 1996).

One explanation that can be offered for this phenomenon in the present study that certain cultural groups display more night-time fears than other groups, might be based on Muris et al.'s (2001) finding that night-time fears are heterogenous in nature and that it is a matter of categorisation by the researcher. Night-time fears are found to consist of categories such as fear related to personal safety, fear associated with separation or loss of others, fear of imaginary creatures, fear of scary dreams and fear of the dark (Mooney, 1985; Mooney et al., 1985). Findings in the present study might thus be a reflection of the researcher "not asking the right questions", seeing that participants were not asked about the content of their fears at night or their bad dreams. One option to compensate would have been for the researcher to ask the participants upon expressing fears within each of the other categories: "Do you think about it at night / dream about it?" In order to be methodologically consistent, the above was not incorporated for the present study and children's immediate verbatim verbalisations were categorised.

Another explanation for results in the dark, night, bad dreams category that might according to the present researcher be more applicable to the present study is the influence of the practical realities such as extreme poverty. Especially the black children as a group reflect more of the low socio-economic status realities of overcrowded living

conditions in informal settings than is the case with the other two cultural groups. Ironically, these overcrowded conditions (none of the black participants reported sleeping alone at night) might lead to a sense of “not being alone at night”, resulting in fewer night-time associated fears.

The **average number** of fears expressed by the white and the coloured participants was approximately 3.0 per participant, while the black participants expressed an average of 2.4 fears. Although the differences are not statistically significant, this tendency for a certain group of children to express fewer fears raised particular questions. One explanation for this phenomenon that was raised in conversation with Peter Muris (University of Maastricht, July, 2002) was that, according to research on the origins of fear, theoretically it could be hypothesised that information, as pathway to fear in childhood, plays a major role in the number of fears. Since the black participants in the group were mainly from the lower socio-economic status, lack of information as a result of fewer resources could have contributed to fewer fears. The fact that primary school black children display more fears than, for example, their white counterparts, could be explained on the same grounds, namely that once children “go out there” to school environments where they get exposure to the bigger context through more information, their fears increase.

Another explanation for the phenomenon might lie in the methodology used, whereby the black children could have to a certain extent felt threatened in being actually interviewed directly by a third person (the translator). Everything possible, however, was done to put the children at ease and the researcher, being sensitive towards the possibility of these types of hindrances, found that the number of “shy” or “verbally inhibited” children was approximately similar across the different cultures.

7.1.4 Content and number of expressed fears with regard to SES distribution

The following primary fears, ranked amongst the five most frequently expressed fears, were found to be similar in content for the three SES groups, namely wild animals, real people, fantasy people (see Table 10).

The same three categories emerged with regard to the rank order of total fears for the three SES groups (see Table 12). In addition, the category dark, night, bad dreams, was also ranked amongst the five most frequently mentioned total fears for the three SES groups.

Significant differences were found with regard to the participants' **primary fear** profiles with respect to the categories **domestic animals** and **dark, night, bad dreams** (see Table 11). These differences were confirmed in the content of the three SES groups' **total fears** expressed (see Table 13). Both the low and middle SES groups expressed significantly more fears with regard to the domestic animals fear category than the upper SES group. The upper SES group expressed significantly more fears in the category dark, night, bad dreams than the low SES group. Both these tendencies could partially be explained on the same grounds as for the cultural differences (see discussion in 7.1.3).

The average **number of fears** expressed by the low SES group was 2.5; 3.0 for the middle SES group, and 3.0 for the upper SES group. These averages are very similar to the averages of the number of fears expressed within the three cultural groups, with the white and coloured groups mainly representing the upper and middle SES groups and the black participants mainly representing the low SES group.

7.1.5 Content and number of expressed fears with regard to community violence risk distribution

The following fear categories were ranked by all three community violence risk groups as being part of the top five most frequently expressed primary fears: wild animals, real people, and fantasy people (see Table 14). The same fear categories, with an added dark, night, bad dreams category, emerged with regard to the total fears for the three groups (see Table 16). In the primary fears rank order, however, the dark night, bad dreams category of fears, did not emerge as one of the top five fears for the high-risk group. In the total fears rank order, the category fantasy people did not emerge as being one of the top five frequently expressed fears for the high-risk group regarding community violence.

According to Table 15, there were **no significant differences** amongst the three groups concerning their **primary fears**. In contrast, significant differences were evident with regard to the **total fear profile** within the categories: **fantasy people** and **dark, night, bad dreams** (see Table 17).

The fear of the **dark, night and bad dreams** is a prominent feature in the total fear profile of the low-risk group of participants. The profile of this group of participants corresponds mainly with the following: girls when taking gender into account (Table 5), the white participants, when taking the total fear profile of the three culture groups into account (Table 9) and the upper socio-economic status group, when taking SES into account (Tables 11 and 13). The profiles of the female, white, upper socio-economic status group participants typically match those of the participants that were assigned to the low-risk group regarding exposure to community violence.

Seen against the background of the above profile and taking additional data on the number of people living together ranging from 2 to 13 (Chapter 5) into account, it can be expected that participants from more affluent backgrounds are more likely to sleep alone (or with one sibling) in their own rooms at night, thereby being more “at risk” of experiencing fears of the dark, night and bad dreams. This is illustrated (see Addendum K8, participant No. 20), by the drawing and verbal reporting of a “little boy, when scared at night, running from his own room on the ground floor upstairs to his parents’ room”. Poorer children, on the other hand, are used to sleeping together often in overcrowded houses or informal settings with a range of other people, such as parents, siblings and the extended family. When scared at night, they can easily resort to people near them for physical or emotional comfort and nurturing.

An interesting tendency emerged with regard to the category fantasy people when comparing the frequency of participants’ total fears with regard to community violence risks. Both the low-risk and medium-risk groups expressed significantly more fears than the high-risk group (see Tables 16 & 17) when comparing the participants’ total fear profile. This “lack” of fantasy people fears found with regard to the high-risk group of participants ties in with the notion that children who are exposed to poverty and high

incidences of violence in their immediate environment are deprived of normal developmentally age-appropriate stimulation. It is postulated that children living under harsh conditions have less exposure to the manageable story monsters and child-friendly “scary” television characters, such as for example batman (participant No. 54) and giants (participants No. 30 and 40) as mentioned by participants of the low- and medium-risk groups (see Addendum I7 for an exhaustive list of all participants’ verbal responses with regard to the category fantasy people). Harsh realities are not conducive to stimulating creativity.

Qualitatively, it was insightful to compare children’s verbal elaborations, as well as the details of their drawings with regard to fears for fantasy people (see Addendum I7 for extracts of children’s verbatim responses) with those of real people (see Addendum I6 for extracts of children’s verbatim responses). Children from the low SES, high-risk violence environment presented with few fantasy fears and few elaborations (see Addendum I7). Participants No. 59 and 98 refer only to “ghosts” without any elaboration. Participant No. 104 described her ghost as “a big black man”, while participant No. 114 also described a “black ghost”; participant No. 142 elaborated on her fear of a small ghost as being “afraid that it will bite me”. In contrast, it was noticeable that children from the same group (low SES; high-risk violence environment) could immediately recall and describe with detailed elaborations the real people that they fear (see Addendum I6). Participant No. 87 described a real person nicknamed Dishonest as “starting fires and drinking...”, while participant No. 147, a little black girl (see Addendum L for extracts of interviews), described ghost-man as the neighbour living “next to our house”. Participant 130 (see Addendum I6) immediately recalled and described with great intensity her fear of a man called “Guy Fawkes” who is “old and he wears a mask.” She told the researcher how this person “does bad things” to children. Her story was verified with the teacher who acted as child-friendly translator.

The average **number of fears** expressed by both the low- and medium-risk groups was 3.0 per participant, with an average of 2.4 per participant for the high-risk group. Interestingly, these averages again in general correspond with the average numbers of the three cultural groups, as well as the SES groupings, as discussed in point 7.1.4.

Most of the differences found can be explained in terms of Bronfenbrenner's ecosystem theory (1986). The micro-, meso-, exo- and macrosystems of the participants living in low socio-economic and high-risk violence communities impact differently on the children's day-to-day living than, for example, that of children from the middle and upper SES groups or low- and medium- violence risk groups.

7.1.6 Content and number of expressed fears with regard to parental perception

According to the results presented in Table 18, the parents' perception of their children's fears differed substantially from the children's reports (see Table 1). On comparing the rank order results of the two tables pertaining to the frequency of fears assigned to certain categories, **primary fear data from the parents** show the following: dark, night, bad dreams were the most prominent fear category, followed by other (miscellaneous) fears, as well as wild animal fears (both of the second rank order), physical harm third, and being alone and real people fears fourth and fifth respectively.

The above parents' primary fear data is in total contrast with the rank order for the **children's primary fear reports** (see Table 1). The latter's primary fear profile, in declining rank order, are as follows: wild animals; fantasy people; real people; dark, night, bad dreams; as well as domestic animals and insects (the latter two both of the fifth rank order).

Interestingly, apart from the category real people (only reported in the primary fears rank order, Table 18), the parents reported similar top five fear categories for both their primary and total fears, although the rank order of the total fears on the third, fourth and fifth level differed slightly from those of the primary fears. Whereas the first two categories correspond (both dark, night, bad dreams and wild animals), other fears are ranked third, with being alone and physical harm ranked fourth and fifth respectively in the total fears rank order (Table 18).

It might be significant that the rank order for the children's total fear data pertaining to dark, night, bad dreams, and wild animal fear categories correspond with the reversed rank order for the parents' first two primary fear reports. The parents' results (see Table 18) yielded no further similarities with regard to the children's total fear data (Table 1). The present data confirm previous research results showing that parent and child reports often diverge substantially (Muris et al. 2001). Stallings and March (cited in Muris et al., 2001) emphasised that, although parents can be an important source of additional information, the children should always be treated as the primary informant in the case of low parent-child agreement.

The parents reported an average of 1.6 fears per participant, which is fewer than the average of 2.8 expressed by the participants themselves. The present results revealing an underestimation by parents of the number of their children's fears confirm the results of previous studies (Keller, 2001; Lapouse & Monk, 1959; and Muris et al., 2001).

7.1.7 Conclusion on content and number of expressed fears

The content and number of fears were grouped into 15 categories and discussed firstly in terms of the results for all participants, followed by the results pertaining to gender, culture, SES, as well as community violence risk comparisons. The participants' fear profiles were analysed with regard to primary and total fear categories (the latter also includes the participants' additional fears expressed) for each independent variable.

With regard to the **content of all the preschoolers' expressed fears**, the largest proportion of participants reported having animal fears, especially wild animal fears (38.5% of total fears), showing that this is a relatively common type of fear in normal children between the ages 5 to 7 (see Table 1). Other high-frequency fear categories (which comprises 5% or more of the total frequency of fears) that emerged are the fears of the dark, night, bad dreams (10.7% of total fears); fantasy people fears (10.5% of total fear profile); real people fears (9.6% of total fears); domestic animal fears (6.7% of total fears); and fear of physical harm (5.6% of the total fears).

Significant differences in fear content emerged with regard to the following independent variables:

Gender differences

- According to the primary fear profile (see Table 3), the girls expressed significantly more fears than the boys with regard to the **insect** fears category. The girls also displayed significantly more fears than the boys in the **dark, night, bad dreams** category when the total fears are compared (see Table 5).

Cultural differences

- A comparison of the three cultures' primary fear profile show that the white participants expressed significantly more fears than the coloured and black participants with regard to the category **being alone** (see Table 7). When the total fears differences are compared, significant differences emerged with regard to three categories, namely, that the black participants expressed more fears regarding **domestic animals** than the white participants. The coloured participants expressed significantly more **fantasy people** fears than the black participants, whilst in the **dark, night, bad dreams** category, the white participants expressed significantly more fears than the black participants (see Table 9).

Socio-economic status differences

- Both the primary (see Table 11) and total fears (see Table 13) profiles for the three SES groups show significant differences with regard to the fear categories **domestic animals** and **dark, night, bad dreams**. Both the low and middle SES groups expressed significantly more fears with regard to the domestic animals fear category than the upper SES group. The upper SES group expressed significantly more fears in the category dark, night, bad dreams than the low SES group.

Community violence risk distribution differences

- No significant differences were found amongst the low-risk; medium-risk, and high-risk groups' primary fears profile (see Table 15). With regard to the participants' total fears, significant differences were found with regard to the fear categories **fantasy people** and **dark, night, bad dreams** (see Table 17). With regard to the category fantasy people, the low-risk violence group expressed significantly more fears than the high-risk violence group; the medium-risk violence group also expressed significantly more fears than the high-risk group. In the category dark, night, bad dreams, the low-risk violence group expressed significantly more fears than the medium-risk violence group.

A **total number** of 429 fears were expressed, ranging from 1 to 9 per participant. The overall sample showed an average of 2.8 fears per participant. No significant differences in the number of fears were found with regard to gender, culture and SES distributions. The only significant difference in comparing the number of fears for different groups emerged for the community violence risk distribution. Participants of the low-risk group expressed significantly more fears than participants of the high-risk group (see discussion of results pertaining to Table 16).

Lastly, the **parents' perception** of their children's fears (Table 18) were compared with those of the children's own views. Parents perceptions of the content and number of their children's fears differed hugely from those expressed by the children.

7.2 Coping mechanisms and perceived efficacy

Participants' coping mechanisms and perceived efficacy in response to their fears will be discussed in terms of the results for all participants, followed by the results pertaining to gender, culture, SES and community violence risk comparisons. Parental perceptions will be addressed briefly, seeing that this was an issue that only emerged during the course of the research and was not part of the main focus and aims of the study. Finally, a description of the four most frequently utilised coping mechanisms and their perceived efficacy will be discussed in relation to all the participants' four most frequently expressed fears.

7.2.1 Coping mechanisms and perceived efficacy for all participants

According to the results in Table 19, it appears that, when they are scared, most participants utilised social/spiritual support as a coping mechanism, followed by problem-focused avoidance and direct problem solving. The first two coping mechanisms, namely social/spiritual support and problem-focused avoidance, were also found by Muris et al. (2001) to be most frequently utilised in relation to children's night-time fears.

In the present study social/spiritual support as a secondary control mechanism, proved to be most frequently utilised and is also evaluated as the most efficacious coping mechanism by all participants. This finding confirm the results of Tremewan and Strongman's study (1991).

Interestingly, when comparing broad categories (primary control strategy, secondary control strategy and relinquished control), contrasting results are found in that the primary control strategy is preferred above the secondary control strategy and also found alone to be more efficacious than the secondary control strategies alone. This tendency supports the findings for the group of 6-year-olds researched by Band and Weisz (1988).

The present researcher agrees with the conclusion of Band and Weisz (1988) that children as young as 6 years of age are aware of stress (or "fears" in the present study) and are able to make coping efforts, as well as to evaluate the efficacy of those efforts. In the present study (see Table 19) only 14.5% of the participants resorted to relinquished control ("doing nothing" or "don't know" responses). With regard to comparing perceived efficacy, social/spiritual support was found to be the most effective coping mechanism, while doing nothing was perceived to be the most ineffective, and problem-focused avoidance as the most uncertain coping mechanism. The latter ties in with the notion proposed by Ollendick et al. (2001) that avoidance strategies tend to be associated with the development of a higher frequency of fears or even their persistence.

7.2.2 Coping mechanisms and perceived efficacy with regard to gender distribution

According to Table 20, gender **similarities** were found with regard to the ranking of **coping mechanisms**: both groups preferred social/spiritual support, as well as problem-focused avoidance as the top two most frequently used coping mechanisms (for the girls, the rank order was found to be social/spiritual support first, followed by problem-focused avoidance, while the opposite rank order was found for the boys). The finding that girls reported more frequently the coping mechanism of social/spiritual support than the boys did (although not statistically significantly different) is consistent with the results of Muris et al. (2001) in one of the very few studies addressing gender differences pertaining to coping and efficacy in young children.

Statistically **significant differences** were found between the boys and girls in their expressed coping mechanisms within the categories: problem-focused aggression and problem-focused avoidance (see Table 21). The boys more frequently reported coping with their fears by means of the above two coping mechanisms than the girls. It is postulated that gender-role expectations might influence the choice of coping mechanisms, on which grounds boys tend to resort more to male-oriented aggression and avoidance mechanisms than the girls. More research, however, needs to be done to verify this hypothesis.

The finding indicative of significant differences between gender groups is in contrast with the research of Tremewan and Strongman (1991), who indicated that the results for the male and female participants were of such a similar form that they were combined for subsequent analyses.

In terms of the **perceived efficacy** of their coping mechanisms, both groups perceived their coping mechanisms as helpful, thus referring to them as effective for reducing their fears, rather than as being ineffective or uncertain (Table 22). These results correspond with research done by Muris et al. (2001). There were no statistically significant differences between the perceived efficacy results for the gender groups (see Table 23).

7.2.3 Coping mechanisms and perceived efficacy with regard to cultural distribution

The top two preferred coping mechanisms are similar for the three cultural groups (see Table 24). Both the white and black participants preferred social/spiritual support, followed by problem-focused avoidance as coping mechanisms, although the white participants showed an equal preference for utilising problem-focused-avoidance and direct problem solving. Most coloured participants resorted firstly to problem-focused avoidance as coping mechanism, followed by social/spiritual support.

There were **no significant differences** in the coping mechanisms applied in response to their fears (see Table 25), as well as the perceived efficacy (see Table 27) for the three cultural groups.

With regard to **perceived efficacy** (see Table 26), all participants, irrespective of cultural differences, perceived their coping mechanisms as effective, more than being ineffective or uncertain. No significant differences could be found pertaining to perceived efficacy amongst the different cultural groups (see Table 27).

7.2.4 Coping mechanisms and perceived efficacy with regard to SES distribution

From the results in Table 28 it is evident that the most frequently utilised coping mechanism for the low SES participants was problem-focused avoidance, while both the middle and upper SES groups preferred social/spiritual support.

Significant differences were found amongst the three SES groups regarding the coping mechanisms **emotion-focused crying** and **cognitive avoidance** (see table 29). Emotion-focused crying was reported as being utilised significantly more as coping mechanism by the middle socio-economic status group compared to the other two groups. Seeing that a relatively small sample of only two participants resorted to this coping mechanism, no further generalisations can be made.

Cognitive avoidance was found to be used significantly more in the upper SES group than in the low SES group as a coping mechanism. Cognitive avoidance as a coping mechanism reflects a relatively advanced level of cognitive functioning. Participant No. 4, for example, responded “ I ignore it and watch TV and play”; while participant No. 23 stated: “... think it away and held my teddy close” (see Addendum J8). From a developmental psychological perspective, it may be interesting to investigate the relation between participants’ cognitive functioning and their choice of coping mechanisms.

With regard to **perceived efficacy** (see Table 30), all participants, irrespective of SES differences, perceived their coping mechanisms as effective, more than being ineffective or uncertain. It is noticeable, however, that the participants from the low SES group perceived their coping mechanisms more as ineffective than as uncertain. This is in contrast with the participants of the middle and upper SES groups, who perceived their coping mechanisms more as being uncertain than as being ineffective. No significant differences, however, were found with regard to perceived efficacy for the three SES groups (see Table 31).

7.2.5 Coping mechanisms and perceived efficacy with regard to community violence risk distribution

When grouping the participants according to exposure to community violence risks, the profile of most frequently used coping mechanism by the high-risk group (see Table 32 for rank orders of coping mechanisms) corresponds with that of coping mechanisms used by the low SES group (compare rank orders deduced from Table 28). Both the low-risk and medium-risk groups resorted to social/spiritual support as the most frequently used coping mechanism (see Table 32), which corresponds with the profile of coping mechanism preferences for the upper and middle SES groups (see Table 28). However, no significant differences were found in the coping mechanisms utilised amongst the three community violence risk groups (see Table 33).

No significant differences were found upon comparing the perceived efficacy of the coping mechanisms for the three community violence risk groups (see Tables 34 and 35).

7.2.6 Coping mechanisms and perceived efficacy with regard to parental perception

According to the rank order results deduced from Table 36, parental perceptions of children's coping mechanisms show a preference for social/spiritual support, followed by problem-focused crying, don't know and problem-focused avoidance.

Social/spiritual support was perceived as by far the most effective coping mechanism, while problem-focused crying was perceived as most ineffective and "don't know" as the most uncertain coping mechanism.

Interesting similarities with the children's own reports of coping mechanisms and perceived efficacy are evident (see Table 18). The children's reports correspond with the parents' reports regarding the utilisation of social/spiritual support as the most frequently resorted to coping mechanism. This is in line with the comparable results reported by Muris et al. (2001).

7.2.7 Frequently utilised coping mechanisms, perceived efficacy, and fear categories

The four most frequently utilised coping mechanisms and perceived efficacy (see Table 19) were described in relation to the four most frequently expressed fears for all participants (see Table 1). The coping mechanisms direct problem solving; problem-focused avoidance; social/spiritual support, and doing nothing and perceived efficacy were cross-tabulated for the category wild animals (see Table 37); real people (see Table 38); fantasy people (see Table 39), and dark, night, bad dreams (see Table 40).

A tendency that emerged with regard to **direct problem solving** was that it was perceived as mostly effective by participants when dealing with wild animal fears (100%) and real people fears (80%). For the latter, the rest of the responses were perceived as uncertain (20%). As coping mechanism with regard to fantasy people (see Table 39), direct problem solving was perceived as effective by 75% of the participants. With

regard to the category dark, night, bad dreams, 50% of the participants perceived direct coping as effective and 50% as uncertain (see Table 40). It can thus be deduced that direct problem solving is perceived as a more effective coping mechanism in relation to reality based fears, than to fears that are less concrete, such as fantasy people and night-time fears.

On the other hand, **problem-focused avoidance** seemed to be perceived as a more effective coping mechanism in relation to dark, night, bad dreams (66.7%; see Table 40) and fantasy people (57.1%; see Table 39) than in relation to the more realistic fear categories such as wild animals (only 45%; see table 37) and real people (50%; see Table 38) than, for example, direct problem solving.

Social or spiritual support as a coping mechanism seemed to be perceived as more effective overall rather than as being ineffective or uncertain. With regard to the categories real people (see Table 38) and dark, night, bad dreams (see Table 40), it was perceived as 100% effective.

The mechanism of **doing nothing** is consistently perceived as either being more ineffective (71.4% with regard to wild animals, see Table 37; 100% with regard to dark, night, bad dreams, see Table 40; 33.3% with regard to fantasy people, see Table 39) or uncertain (75% with regard to real people, see Table 38) than effective.

7.2.8 Conclusion on coping mechanisms and perceived efficacy

Participants' coping mechanisms and perceived efficacy in response to their fears were discussed firstly in terms of the results for all participants according to 11 categories (see Table 19). After this the results pertaining to gender, culture, SES, as well as community violence risk comparisons were discussed on the same basis. Parental perceptions were addressed only briefly, seeing that this was an issue that only emerged during the course of the research and was not part of the initial focus and aims of the study. Finally, a description of the four most frequently utilised coping mechanisms and their perceived efficacy were discussed in relation to the four most frequently expressed fears expressed by all participants.

With regard to the profile for **all participants**, **social/spiritual support** was found to be the most frequently utilised, as well as perceived **effective** coping mechanism in response to their fears.

Certain tendencies emerged with regard to the following independent variables:

Gender differences

- According to the results in Table 21, significant differences were found between the boys reporting making more use of the coping mechanisms problem-focused aggression and problem-focused avoidance than the girls. There were no statistically significant differences between the perceived efficacy results for the gender groups (see Table 23).

Cultural differences

- No significant differences could be found in the coping mechanisms or perceived efficacy amongst the white, coloured and black participants (see Tables 25 & 27).

Socio-economic status differences

- Significant differences were found amongst the three SES groups with regard to emotion-focused crying and cognitive avoidance (see Table 29). Emotion-focused crying was reported as being utilised significantly more as coping mechanism by the middle socio-economic status group compared to the other two groups. Cognitive avoidance was found to be used significantly more in the upper SES group than in the low SES group as a coping mechanism. No significant differences, however, were found with regard to perceived efficacy for the three SES groups (see Table 31).

Community violence risk distribution

- No significant differences were found in the coping mechanisms utilised amongst the three community violence risk groups (see Table 33). Similarly, no significant

differences were found upon comparing the perceived efficacy of the coping mechanisms for the three community violence risk groups (see Table 34).

Parents' perception of their children's coping mechanisms and perceived efficacy (see Table 36) were compared with the children's own views (see Table 19). Similarities with the children's own reports of coping mechanisms and perceived efficacy are evident (see Table 18) regarding the utilisation of social/spiritual support as the most frequently resorted to coping mechanism.

Lastly, the **four most frequently utilised coping mechanisms** namely, direct problem solving; problem-focused avoidance; social/spiritual support; and doing nothing as well as **perceived efficacy**, were described in relation to the **four most frequently expressed fears**, namely the categories wild animals; real people; fantasy people, and dark, night, bad dreams (see Tables 37 to 40). Emerging patterns were discussed.

Chapter 8 presents a summary of the main findings, recommendations for future research, as well as a critical review of the study.

CHAPTER 8

SUMMARY OF FINDINGS, RECOMMENDATIONS AND CRITICAL REVIEW

The main findings will be summarised in this chapter, followed by recommendations for future research, as well as a critical review of the research study.

8.1 Main findings

The main findings of the study will be presented with regard to the following two broad foci: content and number of fears and coping mechanisms and perceived efficacy. They will be grouped into findings relating to the existing body of knowledge, new findings and, lastly, their implications for the South African context.

8.1.1 Findings with regard to content and number of expressed fears

The content and number of fears were grouped into 15 categories and discussed firstly in terms of the results for all participants, followed by the results pertaining to gender, culture, SES, as well as community violence risk comparisons. The participants' fear profiles were analysed with regard to primary and total fear categories (the latter also includes the participants' additional fears expressed) for each independent variable. In addition, findings concerning the number of fears as well as parental perceptions of the children's fears are reported.

8.1.1.1 Findings relating to the existing body of knowledge

- With regard to the **content of all the preschoolers' expressed fears**, the largest proportion of participants reported having animal fears, especially wild animal fears (38.5% of total fears) showing that this is a relatively common type of fear in normal children between the ages 5 to 7 (see Table 1). Other high-frequency fear categories (which made up 5% or more of the total frequency of fears) that emerged are the fears of the dark, night, bad dreams (10.7% of total fears);

fantasy people fears (10.5% of total fear profile); real people fears (9.6% of total fears); domestic animal fears (6.7% of total fears); and fear of physical harm (5.6% of the total fears). This is in accordance with findings of inter alia Bauer (1976), Bowd (1983), Derevensky (1974; 1979), Keller (2001), Martalas (1999), Maurer (1965), Muris, Merckelbach and Collaris (1997); Muris, Merckelbach and Meesters (1997); Muris, Merckelbach and Gadet et al. (2000), and Slee and Cross (1989).

- The following **significant differences** in fear content that emerged can be related to other research findings. According to the primary fear profile (see Table 3), **gender differences** became evident: the girls expressed significantly more fears than the boys with regard to the **insect** fears category. This supports findings by inter alia Sipes et al. (1985). The girls also displayed significantly more fears than the boys in the **dark, night, bad dreams** category when the total fears are compared (see Table 5). The latter finding corresponds with the results of an older study by Lapouse and Monk (1959).
- A **total number** of 429 fears were expressed, ranging from 1 to 9 per participant. The overall sample showed an average of 2.8 fears per participant. This average per child corresponds with the results of a similar interview-based study undertaken by Keller (2001) in the Western Cape, South Africa. No significant differences in the number of fears were found with regard to gender, culture and SES distributions.
- Lastly, the **parents' perception** of their children's fears (Table 18) were compared with the children's own views. As was found in the literature (see Chapter 7), parents' perceptions of the content and number of their children's fears differed hugely from those expressed by the children. The latter supports findings by inter alia Keller (2001), Lapouse and Monk (1959), and Muris et al. (2001).

8.1.1.2 New findings

As far as the researcher could establish, the following significant differences found amongst the groups relating to culture, socio-economic status and violence risk comparisons in the present study have not been addressed in the existing body of literature to date.

- A comparison of the three **cultures'** primary fear profile shows that the white participants expressed significantly more fears than the coloured and black participants with regard to the category **being alone** (see Table 7). When the total fears differences were compared, significant differences emerged with regard to three categories, namely, **domestic animal fears, fantasy people** and **dark, night, bad dreams**. It was found that the black participants expressed more fears regarding **domestic animals** than the white participants did. The coloured participants expressed significantly more **fantasy people** fears than the black participants, whilst in the **dark, night, bad dreams** category, the white participants expressed significantly more fears than the black participants (see Table 9).
- The primary (see Table 11) and total fears' (see Table 13) profiles for the three **SES groups** show significant differences with regard to the fear categories **domestic animals** and **dark, night, bad dreams**. Both the low and middle SES groups expressed significantly more fears with regard to the domestic animals fear category than the upper SES group. The upper SES group expressed significantly more fears in the category **dark, night, bad dreams** than the low SES group.
- No significant differences were found amongst the community violence low-risk; medium-risk, and high-risk groups' primary fears profile (see Table 15). With regard to the participants' **total fears**, significant differences were found concerning the fear categories **fantasy people** and **dark, night, bad dreams** (see Table 17). With regard to the category fantasy people, both the low-risk and medium-risk violence groups expressed significantly more fears than the high-risk

violence group. In the category **dark, night, bad dreams**, the low-risk violence group expressed significantly more fears than the medium-risk violence group.

- The only significant difference in comparing the **number of fears** for different groups emerged for the **community violence risk distribution**. Participants of the low-risk group expressed significantly more fears than participants of the high-risk group (see Table 16 and discussion 6.1.5).

8.1.1.3 Implications for the South African context

It is comforting to find that, despite the difficult South African socio-political realities that produce “enormous socio-economic problems” including poverty, homelessness and exposure to violence (Duncan & Van Niekerk, 2001, p. 327), the group of 5- to 7-year-old preschoolers mainly expressed the same developmentally appropriate fear content profile that can be found elsewhere in the world (Morris & Kratochwill; 1991; Reed et al. 1992).

From insights gained by the study with regard to significant differences found amongst groups of participants, the notion proposed by Slee and Cross (1989) that the child’s understanding of the environment is related to the context in which the child lives is confirmed. This implies that children’s fears do not depend solely on development, but they also reflect the child’s understanding of the world, which in turn is affected by, for example, the culture in which a child lives, as well as factors such as socio-economic status and community violence risks, which were taken into consideration in the present study. A finding that illustrates the above is, for example, the fear of domestic animals, which was found to be prominent in the black participants (see Table 8). It is noteworthy that none of the black participants who expressed fears of domestic animals such as cats and dogs owned pets. In contrast, it became evident from informal conversation that most of the white participants are quite familiar with the concept of having domestic animals as pets and also expressed few fears within this category.

The finding that, although the black participants tended to report the fewest number of fears, no statistically significant differences were evident in the total number of fears

reported by the three cultural groups, poses an intriguing question when it is compared with the findings of a fear study of 404 children between 8 and 12 years of age undertaken by Burkhardt (2002) in the same area and at the same time as the present study. The results for the older children yielded totally opposite results to those of the younger group of children from the present study. Amongst other findings, Burkhardt (2002) reported the number and level of fears for the three cultural groups to be the highest for the black South African children, followed by the coloured South African children, while the white South African children displayed the lowest number and level of fears. Burkhardt (2002) also reported that the fear of crime or crime-related aspects featured among the ten most common fears for all children, regardless which of the two instruments, namely, the Fear Survey Schedule for Children Revised (FSSC-R) or the Free Option Method (FOM) was used.

The questions arose as to what is happening in the transitional phase from early childhood to middle childhood and what can be done preventatively in the early childhood phase?

Many answers could be offered to explain the above phenomenon. However, in order to better understand children throughout all their developmental phases, one of the key answers certainly relates to having knowledge of children's emotions, preferably in personal conversation and listening to them expressing themselves "in their own words". Taking into account, for example, that most parents either do not know what their children are scared of or speak for their children with regard to the contents of their fears (see Table 18), it seems as if there is a need for prevention programmes aimed at disseminating the knowledge generated to caregivers, parents and significant others. When addressing information on expected fear content, it is also of vital importance to supply parents and caregivers with information regarding children's psychological functioning during a particular developmental stage. Taking into account the limitations and challenges of the participants' functioning in the preoperational period (Piaget, 1951), it is evident from the present research findings that children even as young as 5 years of age are able and willing to express their fears in a child-friendly environment (see discussion of the cognitive developmental perspective in 4.4). Increasing cognitive development during the 5- to 7-year age range brings about changes such as, for

example, an understanding of the concept of cause and effect. This could result in the child being more able to anticipate potentially negative outcomes and for children in the age group of approximately 7-years to increasingly broadening the range of fear-provoking stimuli (Muris et al., 2001).

There is also a need for programmes aimed at facilitating children's socio-emotional development directly. The methodology used to elicit children's fears proved to be suitable for even the youngest of the preschoolers and contributed significantly towards motivating children to express scary thoughts in their own words (see discussion in 4.1). This supports findings by inter alia Borke (1971), Denham and Couchoud (1990), Tremewan and Strongman (1991), and Liwag and Stein (1995). Young children's cognitive and socio-emotional functioning and related skills to address and direct their own fears are often underestimated by adults. This notion is evident, firstly, in the shortage of fear data for this age group and, secondly, in the amount of information generated from research sources other than those reported by the children themselves (as reported, for example, by Gullone, 2000). Researchers such as Ollendick and King (1991) and Muris et al. (2001) found exposure to negative information as the most prominent pathway to fear. This emphasises the need for programmes aimed at proactively guiding the psychological development of children, even as young as five years old. Special emphasis on the recognition of and coping with the potentially debilitating effects of unnecessary anxiety and fears will not only be mentally empowering during the early childhood stage, but has the potential to make a significant contribution towards the prevention of future psychological problems and, eventually, impacting positively on adult mental well-being.

8.1.2 Findings on coping mechanisms and perceived efficacy

Participants' coping mechanisms and perceived efficacy in response to their fears were grouped in terms of the results for all participants according to 11 categories (see Table 19). Findings relating to all participants' coping, perceived efficacy and parental perceptions that confirm the existing body of knowledge will be highlighted in 8.1.2.1. The findings concerning gender, culture, SES and community violence risk comparisons yielded interesting new insights and are reported in 8.1.2.2. Other new findings with

regard to the four most frequently utilised coping mechanisms and their perceived efficacy in relation to all the participants' four most frequently expressed fears are also reported in 8.1.2.2.

8.1.2.1 Findings relating to the existing body of knowledge

- With regard to the profile for **all participants**, **social/spiritual support** was found to be the most frequently utilised, as well as perceived **effective** coping mechanism in response to their fears. This is in accordance with findings by inter alia Muris et al. (2001), and Tremewan and Strongman (1991).
- **Parents' perception** of their children's coping mechanisms and perceived efficacy (see Table 36) were compared with the children's own views (see Table 19). Similarities with the children's own reports of coping mechanisms and perceived efficacy are evident (see Table 18) regarding the utilisation of **social/spiritual support** as the most frequently resorted to coping mechanism. This supports findings by inter alia Muris et al. (2001).

8.1.2.2 New findings

As far as the researcher could establish, the following significant differences found amongst the groups relating to culture, socio-economic status and violence risk comparisons in the present study have not yet been addressed in the existing body of literature.

- According to the results in Table 21, significant **gender** differences were found between the boys reporting making more use of the coping mechanisms **problem-focused aggression** and **problem-focused avoidance** than the girls did. There were no statistically significant differences between the perceived efficacy results for the gender groups (see Table 23).

- **No significant cultural differences** could be found in the coping mechanisms or perceived efficacy amongst the white, coloured and black participants (see Tables 25 and 27).
- Significant differences were found amongst the three **SES groups** with regard to **emotion-focused crying** and **cognitive avoidance** (see Table 29). Emotion-focused crying was reported as being utilised significantly more as coping mechanism by the middle SES group compared to the other two groups. Cognitive avoidance was found to be utilised significantly more in the upper SES group than in the low SES group as a coping mechanism. No significant differences, however, were found with regard to perceived efficacy for the three SES groups (see Table 31).
- **No significant differences** were found in the coping mechanisms utilised amongst the three **community violence risk** groups (see Table 33). Similarly, no significant differences were found upon comparing the perceived efficacy of the coping mechanisms for the three community violence risk groups (see Table 34).

Lastly, the **four most frequently utilised coping mechanisms**, namely, direct problem solving; problem-focused avoidance; social/spiritual support; and doing nothing as well as **perceived efficacy** were described in relation to the **four most frequently expressed fears**, namely the category wild animals; real people; fantasy people, and dark, night, bad dreams (see Tables 37 to 40).

A tendency that emerged with regard to **direct problem solving** was that it was perceived as mostly effective by participants when dealing with wild animal fears and real people fears. For the latter, the rest of the responses were perceived as uncertain. As coping mechanism with regard to fantasy people (see Table 39), direct problem solving was perceived as effective by 75% of the participants. With regard to the category dark, night, bad dreams, 50% of the participants perceived direct coping as effective and 50% as uncertain (see Table 40). It can thus be deduced that direct problem solving is perceived as a more effective coping mechanism in relation to reality

based fears than to fears that are less concrete, such as fantasy people and night-time fears.

On the other hand, **problem-focused avoidance** seemed to be perceived as a more effective coping mechanism than, for example, direct problem solving in relation to dark, night, bad dreams (see Table 40) and fantasy people (see Table 39) compared to their relation to the more realistic fear categories such as wild animals (see Table 37) and real people (see Table 38).

Social or spiritual support as a coping mechanism seemed to be perceived as more effective overall rather than as being ineffective or uncertain. With regard to the categories real people (see Table 38) and dark, night, bad dreams (see Table 40), it was perceived as 100% effective.

The mechanism of **doing nothing** is consistently perceived as either being more ineffective than effective with regard to wild animals (see Table 37); dark, night, bad dreams (see Table 40;) and fantasy people (see Table 39). It was found to be perceived as more uncertain than effective with regard to real people (see Table 38).

8.1.2.3 Implications for the South African context

One outstanding characteristic of the coping and perceived efficacy profiles of both participants (see Table 19) and parents (see Table 36) is the emphasis on the utilisation of social/spiritual support and the perception of it as an effective coping mechanisms in response to fear. This implies that support seeking carries weight among both children and parents and ties in with the notion of supplying knowledge to the caregivers, as mentioned in 8.1.1.3.

Another tendency that emerged that the researcher found quite interesting for children of this young age was their perceived efficacy pertaining to “doing nothing”, which does not help or make a difference as a coping mechanism (Table 19). Upon enquiring from them how they know this, the researcher learnt from participants (very typical!) that it is “just like that”.

Another interesting finding was that perceived efficacy tended to be stable across the gender distribution, the three cultures, SES groups and the community violence risk comparison groups. The importance of this finding should be investigated in future coping research and should also be emphasised in planning preventative coping programmes for the young ones.

8.2 Recommendations

In this section recommendations for future research will be made.

- In order to address questions such as the one posed in 8.1.1.3, a longitudinal, follow-up study with the participants of the present study is indicated.
- Three aspects that needed to be addressed in combination with fears, coping and perceived efficacy research are the influence of temperament types and the intellectual as well as language functioning of the participants.
- Research on the origins of young children's fears can provide valuable information to be incorporated into programmes addressing these fears in a preventative or therapeutic way.
- On the same basis that the parents' views on the participants' fears, coping mechanisms and perceived efficacy were investigated, the caregivers/teachers needed to be included in future research.
- In order to generalise findings and gain a better understanding of the South African preschooler, this research should be replicated in other provinces or settings.
- The findings, as well as the richness of drawings amongst this age group, is challenging material with regard to compiling a fear schedule for young children.

8.3 A critical review of the study

The research was conducted with the primary aims of

- determining the content and number of expressed fears of a selected group of preschool children in the Stellenbosch region; and
- determining the coping mechanisms and perceived efficacy in response to the expressed fears of the selected group of preschool children in the Stellenbosch region.

The secondary aims were:

- to establish whether there were differences in the content and number of expressed fears of the selected group of preschool children in the Stellenbosch area and, if so, with which biographical variables they correlate; and
- to establish whether there were differences in the coping mechanisms and perceived efficacy in response to expressed fears amongst the preschool children in the Stellenbosch area and, if so, with which biographical variables they correlate.

8.3.1 Aspects of the study that the researcher found challenging

- The first issue that sprang to mind was the language issue and the limitation that the researcher was not able to converse in Xhosa. This was compensated for as far as possible by using two translators, namely a child-friendly caretaker who was known and respected by all children and a student with Honours in Psychology and fluent in Xhosa. In addition, video or audio-recordings were made of each participant's interview. Although the researcher put a great deal of

effort into verifying the transcriptions, the possibility does exist that some of the finer nuances could be lost in the translation process.

- The interviews were found to be long-winded and challenging in some cases (see, for example, extracts of interviews in Addendum L). It was sometimes difficult to stay on the topic, seeing that some children do have a lot to say and tell!
- Children's favourite stories, especially their own creations that were linked to coping with their fears (asked to be told afterwards to normalise the impact of the fear scenario) is a rich source of information that was under-utilised in the study.

8.3.2 Aspects of the study that added to its value

- The method used can be regarded as suitable for young children. Most children could relate to their drawings of that which they feared and converse easily on the topic whilst drawing. This medium, utilised within a child-friendly environment, was not perceived as threatening by any of the participants (this issue was followed-up with all the participants, as well as teachers, when they were available for conversation).
- A strength of the methodology was to divide the content of fears into primary and total fear categories. This provided important information regarding rank ordering of fears within the two categories.
- Parental perceptions added an important additional dimension to the analysis of the participants' fear, coping and efficacy profiles. It also contributed towards the ecosystemic approach of involving different systems that may impact on the child's development.

- The research contributed much towards providing information for the Western Cape, South African context to serve as an indication of what can be expected from the average 5- to 7-year-old with regard to fears, coping and perceived efficacy. Such knowledge could lead to preventative measures being taken timeously to avoid or diminish pathology (Muris, Merckelbach, Mayer & Prins, 2000), thus contributing towards children's overall psychological well-being.
- As advocated by Dibrell and Yamamoto (1986) the child's viewpoint need to be incorporated into caring systems, professional practice and social policies before any meaningful contributions can be made towards developing and optimising human potential.

In conclusion, it can be said that much is to be gained from a better understanding of children by listening to them and, in the words of Geraldine van Buren (in Davel, 2000) on the rights of the child: "creating a child-friendly culture... implies.... walking the journey with the child's eyes" (p. 205). A better understanding of young children's fears can help the caregivers to accompany them on this journey.

References

- African National Congress (1994). *Reconstruction and development programme*. Unmanbanu Publication.
- Agras, S., Sylvester, D., & Olinveau, D. (1969). The epidemiology of common fears and phobias. *Comprehensive Psychiatry*, 10, 151-156.
- Aitken, R.C.B., Lister, J.A., & Main, C.J. (1981). Identification of features associated with flying phobias in aircrew. *British Journal of Psychiatry*, 139, 38-42.
- Aldwin, C.M. (1994). *Stress, coping and development. An integrated perspective*. New York: The Guilford Press.
- Altshuler, J.L., & Ruble, D.N. (1989). Developmental changes in children's awareness of strategies for coping with uncontrollable stress. *Child Development*, 60, 1337-1349.
- American Psychiatric Association (1994). *Diagnostic and statistical manual of mental disorders*, (4th ed.). Washington: American Psychiatric Association.
- Angelino, H., Dollins, J., & Mech, E.V. (1956). Trends in the "fears and worries" of school children as related to socio-economic status and age. *Journal of Genetic Psychology*, 89, 263-276.
- Bam, J., & Visser, P. (undated). *A new history for a new South Africa*. Cape Town: Kagiso Publishers.
- Bamber, J.A. (1974). The fears of adolescents. *Journal of Genetic Psychology*, 125, 127-140.
- Band, E.B., & Weisz, J.R. (1988). How to feel better when it feels bad: Children's perspectives on coping with everyday stress. *Developmental Psychology*, 24(2), 247 – 253.

- Bauer, D.H. (1976). An exploratory study of developmental changes in children's fears. *Journal of Child Psychology, 17*, 69 - 74.
- Berk, L.E. (1996). *Infants and children. Prenatal through middle childhood* (2nd ed.). Boston: Allyn and Bacon.
- Bernzweig, J., Eisenberg, N., & Fabes, R.A. (1993). Children's coping in self and other relevant contexts. *Journal of Experimental Child Psychology, 55*, 208-226.
- Biersteker, L., & Robinson, S. (2000). Socio-economic policies: Their impact on children in South-Africa. In D. Donald, A. Dawes, & J. Louw (Eds.), *Addressing childhood adversity* (pp. 26-59). Cape Town: David Philip.
- Borke, H. (1971). Interpersonal perception of young children: Egocentrism or empathy. *Developmental Psychology, 5*, 263-269.
- Bouldin, P., & Pratt, C. (1998). Utilising parent report to investigate young children's fears: A modification of the Fear Survey Schedule for Children-II: A research note. *Journal of Child Psychology and Psychiatry, 39*(2), 271-277.
- Bowd, A. (1983). Children's fears of animals. *Journal of Genetic Psychology, 142*, 313-314.
- Bowlby, J. (1973). *Attachment and loss. Separation: Anxiety and anger*. (Vol. 2). New York: Basis Books.
- Brems, C. (2002). *A comprehensive guide to child psychotherapy* (2nd ed.). London: Allyn and Bacon.
- Broadley, D.G. (1983). *Fitzsimons snakes of Southern Africa*. Goodwood, Cape Town: National Book Printers.
- Bronfenbrenner, U. (1979). *The ecology of human development*. Cambridge, MA: Harvard University Press.

- Bronfenbrenner, U. (1986). Ecology of the family as context for human development: Research activities. *Developmental Psychology, 22*(6), 723-742.
- Burgess, A.W., & Hartman, C.R. (1993). Children's drawings. *Journal of Child Abuse and Neglect, 17*, 161-168.
- Burkhardt, I.K-E. (2002). *Fears in a selected group of middle childhood South African children: A cross-cultural study*. Unpublished master's thesis. University of Stellenbosch.
- Cantor, J., & Hoffner, C. (1990). Children's fear reactions to a televised film as a function of perceived immediacy of depicted threat. *Journal of Broadcasting and Electronic Media, 34*(4), 421-442.
- Compas, B.E. (1987). Coping with stress during childhood and adolescence. *Psychological Bulletin, 101*, 393-403.
- Compas, B.E., Banez, G.A., Malcarne, V., & Worsham, N. (1991). Perceived control and coping with stress: A developmental perspective. *Journal of Social Issues, 47*, 23-24.
- Compas, B.E., Connor-Smith, J.K., Saltzman, H., Thomsen, A.H., & Wadsworth, M.E. (2001). Coping with stress during childhood and adolescence: Problems, progress, and potential in theory and research. *Psychological Bulletin, 127*(1), 87-127.
- Craig, G. J. (1996). *Human development* (7th ed.). New Jersey: Prentice-Hall.
- Croake, J.W. (1969). Fears of children. *Human Development, 12*, 239-247.
- Dadds, M.R., Spence, S.H., Holland, D.E., Barrett, P.M., & Laurens, K.R. (1997). Prevention and early intervention for anxiety disorders: A controlled trial. *Journal of Consulting and Clinical Psychology, 65*(4), 627-635.

- Dancey, C.P., & Reidy, J. (2002). *Statistics without maths for Psychology. Using SPSS for Windows* (2nd ed.). London: Prentice Education Limited.
- Davel, C.J. (2000). *Introduction to child law in South Africa*. Western Cape, RSA: The Rustica Press.
- Davey, G.C.L. (1992). Characteristics of individuals with fear of spiders. *Anxiety Research*, 4, 299-314.
- Davey, G.C.L. (1993). A comparison of three cognitive appraisal strategies: The role of threat devaluation in problem-focused coping. *Personality and Individual Differences*, 14, 535-46.
- Davey, G.C.L. (1997). A conditioning model of phobias. In G.C.L. Davey (Ed.). *Phobias: A handbook of theory, research and treatment*, (pp. 301-22). Chichester: Wiley.
- Davey, G.C.L., Burgess, I., & Rashes, R. (1995). Coping strategies and phobias: The relationship between fears, phobias and methods of coping with stressors. *British Journal of Clinical Psychology*, 34, 423-34.
- Dawes, A., & Donald, D. (1994). Understanding the psychological consequences of adversity. In A. Dawes & D. Donald (Eds.), *Childhood and adversity: Psychological perspectives from South African research* (pp. 1-27). Cape Town: David Philip Publishers (Pty) Ltd.
- Denham, S.A., & Couchoud, E.A. (1990). Young preschoolers' understanding of emotions. *Child Study Journal*, 30(3), 171-192.
- Derevensky, J.L. (1974). What children fear. *McGill Journal of Education*, 9, 77-85.
- Derevensky, J.L. (1979). Children's fears: A developmental comparison of normal and exceptional children. *The Journal of Genetic Psychology*, 135, 11-21.
- Derevensky, J., & Coleman, E.B. (1989). Gifted children's fears. *Gifted-Child-Quarterly*, 33(2), 65 – 75.

- Dibrell, L.L., & Yamamoto, K. (1986). In their own words: Concerns of young children. *Child Psychiatry and Human Development*, 19(1), 14-25.
- Dong, Q., Xia, Y., Lin, L., Yang, B., & Ollendick, T.H. (1995). The stability and prediction of fears in Chinese children and adolescents: A one year follow-up. *Journal of Child Psychology and Psychiatry*, 36(5), 819-831.
- Dong, Q., Yang, B., & Ollendick, T.H. (1994). Fears in Chinese children and adolescents and their relations to anxiety and depression. *Journal of Child Psychology and Psychiatry*, 35(2), 351-363.
- Dooley, D. (1995). *Social research methods* (3rd ed.). New Jersey: Prentice-Hall.
- Draft White Paper (1996). *Government Gazette: Republic of South Africa*. Vol. 368 no. 16943, 2 February. Pretoria: Government Printer.
- Draper, T.W., & James, R.S. (1985). Preschool fears: Longitudinal sequence and cohort changes. *Child Study Journal*, 15(2), 147-156.
- Duffy, K.G., & Wong, F.Y. (1996). *Community psychology*. New York: Allyn and Bacon.
- Duncan, N. & Rock, B. (1997). The impact of political violence on the lives of South African children. In C. De La Rey, N. Duncan, T. Shefer & A. Van Niekerk (Eds.), *Contemporary issues in human development: A South African focus* (pp. 133-155). Johannesburg: International Thompson Publishing.
- Duncan, N., & Van Niekerk, A. (2001). Investigating in the young for a better future: A programme of intervention. In M. Seedat, (Ed.) N. Duncan, S. Lazarus (Cons. Eds). *Community Psychology. Theory, method and practice* (pp. 325-340). Cape Town: Oxford University Press.
- Dunn, M. (2001). *The validity of the Developmental Test of Visual-Motor Integration in a selected pre-school sample in the South African context*. Unpublished master's thesis. University of Stellenbosch.

- Du Toit, S.J., & Kruger, N. (1991). *Die kind: 'n Opvoedkundige perspektief*. Durban: Butterworths.
- Eisen, A.R., & Kearney, C.A. (1995). *Practitioner's guide to treating fear and anxiety in children and adolescents. A cognitive-behavioural approach*. London: Jason Aronson Inc.
- Eisenberg, N., Fabes, R.A., Bernzweig, J., Karbon, M., Poulin, R., & Hanish, L. (1993). The relations of emotionality and regulation to preschoolers' social skills and sociometric status. *Child Development, 64*, 1418-1438.
- Elbedour, S., Shulman, S., & Kedem, P., (1997). Children's fears: Cultural and developmental perspectives. *Behaviour Research and Therapy, 35*, 491-496.
- Ellis, A. (1962). *Reason and emotion in psychotherapy*. New York: Stewart.
- Eme, R., & Schmidt, D. (1978). The stability of children's fears. *Child Development, 49*, 1277-1279.
- Erikson, E.H. (1963). *Childhood and society*. (2nd ed.). New York: W.W. Norton and Company Incorporated.
- Fabes, R.A., & Eisenberg, N. (1992). Young children's coping with interpersonal anger. *Child Development, 63*, 116-128.
- Ferrari, M. (1986). Fears and phobias in childhood: Some clinical and developmental considerations. *Child Psychiatry and Human Development, 17*(2), 75-87.
- Field, A.P., & Davey, G.C.L. (2001). Conditioning models of childhood anxiety. In W.K. Silverman & P.D.A. Treffers (Eds.), *Anxiety disorders in children and adolescents: Research, assessment and interventions* (pp. 187-211). New York: Cambridge University Press.

- Field, T., Alpert, B., Vega-Lahr, N., Goldstein, S., & Perry, S. (1988). Hospitalization stress in children: Sensitizer and repressor coping styles. *Health Psychology, 7*, 433-445.
- Fields, L., & Prinz, R.J. (1997). Coping and adjustment during childhood and adolescence. *Clinical Psychology Review, 17*(8), 937-976.
- Fischer, M., Rolf, J., Hasazi, J.E., & Cummings, L. (1984). Follow-up of a preschool epidemiological sample. Cross-age continuities and prediction of later adjustment with internalizing and externalizing dimensions of behaviour. *Child Development, 55*, 137-150.
- George, D., & Mallery, P. (1999). *SPSS for windows. Step by Step. A simple guide and reference*. Boston: Allyn and Bacon.
- Govender, K., & Killian, B.J. (2001). The psychological effects of chronic violence on children living in South African townships. *South African Journal of Psychology, 31*(2), 1-11.
- Graham, J., & Gaffan, E.A. (1997). Fear of water in children and adults: Etiology and familial effects. *Journal of Behavioural Research Therapy, 35*(2), 91-108.
- Graziano, A.M., DeGiovanni, I.S., & Garcia, K.A. (1979). Behavioural treatment of children's fears: A review. *Psychological Bulletin, 86*, 804-830.
- Gullone, E. (1996). Developmental psychopathology and normal fear. *Behaviour Change, 13*, 143-155.
- Gullone, E. (2000). The development of normal fear: A century of research. *Clinical Psychology Review, 20*(4), 429 - 451.
- Gullone, E., & King, N.J. (1992). Psychometric evaluation of a Revised Fear Survey Schedule for Children and Adolescents. *Journal of Child Psychology and Psychiatry, 33*(6), 987-998.

- Gullone, E., & King, N.J. (1993). The fears of youth in the 1990's: Contemporary normative data. *The Journal of Genetic Psychology, 154*, 137-153.
- Gullone, E., & King, N.J. (1997). Three-year follow-up of normal fear in children and adolescents aged 7 to 18 years. *British Journal of Developmental Psychology, 15*, 97-111.
- Hampe, E., Noble, M., Miller, L.C., & Barrett, C.L. (1973). Phobic children at two years posttreatment. *Journal of Abnormal Psychology, 82*, 446-453.
- Harris, D.B. (1963). *Goodenough–Harris Drawing Test Manual*. San Antonio: The Psychological Corporation. Harcourt Brace & Co.
- Hickson, J., & Kriegler, S. (1991). Childshock: The effects of apartheid on the mental health of South Africa's children. *International Journal for the Advancement of Counseling, 14*, 141-154.
- Howell, D.C. (1999). *Fundamental statistics for the behavioral sciences* (6th ed.). London: Brooks/Cole Publishing Company.
- Ingman, K.A., Ollendick, T.H., & Akande, A. (1999). Cross-cultural aspects of fears in African children and adolescents. *Behaviour Research and Therapy, 37*, 337-345.
- Izard, C.E. (1977). *Human emotions*. New York: Plenum Press.
- Jersild, A.T., & Holmes, F.B. (1935a). *Children's fears*. New York: Teachers College Press
- Jersild, A.T., & Holmes, F.B. (1935b). Some factors in the development of children's fears. *Journal of Experimental Education, 4*, 133-141.
- Jones, E.A. (1988). Parent perceptions of children's fears. *Elementary School Guidance and Counseling, 23*, 10-15.
- Kamphaus, R.W., & Pleiss, K.L. (1991). Draw-a-person techniques: Test in search of a construct. *Journal of School Psychology, 29*, 395-401.

- Keller, S.R. (2001). *Selfgerapporteerde vrese van 'n geselekteerde groep voorskoolse kinders in 'n lae tot middle sosio-ekonomiese statusgebied*. Unpublished master's thesis. University of Stellenbosch.
- King, N.J., Hamilton, D.J., & Ollendick, T.H. (1988). *Children's phobias: A behavioural perspective*. Chichester: John Wiley & Sons.
- Kirkpatrick, D.R. (1984). Age, gender and patterns of common intense fears among adults. *Behaviour Research and Therapy*, 22, 141-150.
- Klein, D.F. (1981). Anxiety conceptualized. In D.F. Klein & J. Rabkin (Eds.), *Anxiety: New research and changing concepts*. (pp. 235-65). New York: Raven Press.
- Koppitz, E.M. (1986). *Psychological evaluation of children's human figure drawings*. New York: Grune & Stratton.
- Kruger, D. (1989). *An introduction to phenomenological psychology*. Cape Town: Juta & Company.
- Kruger, M-J. (1997). *Die verband tussen kindertekeninge en skoolprestasie van plattelandse Tswana-skooltoetreders*. Unpublished master's thesis. University of Pretoria.
- Kvale, S. (1983). The qualitative research interview: A phenomenological and a hermeneutical mode of understanding. *Journal of Phenomenological Psychology*, 14(2), 171-196.
- La Greca, A.M., & Lemanek, K.L. (1996). Assessment as a process in pediatric psychology. *Journal of Pediatric Psychology*, 21(2), 137-151.
- LaFreniere, P.J. (2000). *Emotional development. A biosocial perspective*. USA: Wadsworth, Thomson Learning.
- Lapouse, R., & Monk, M.A. (1959). Fears and worries in a representative sample of children. *American Journal of Orthopsychiatry*, 29, 803-818.

- Lazarus R.S., & Folkman, S. (1984). *Stress, appraisal, and coping*. New York: Springer.
- Lefrancois, G.R. (2001). *Of children: An introduction to child and adolescent development* (9th ed.). USA: Wadsworth, Thomson Learning.
- Lentz, K. (1985a). Fears and worries of young children as expressed in a contextual play setting. *Journal of Child Psychology and Psychiatry*, 26(6), 981-987.
- Lentz, K. (1985b). The expressed fears of young children. *Child Psychiatry and Human Development*, 16(1), 3-13.
- Liwag, M.D., & Stein, N. (1995). Children's memory for emotional events: The importance of emotion related retrieval cues. *Journal of Experimental Child Psychology*, 60, 2-31.
- Loevinger, J. (1976). *Ego development: Conceptions and theories*. San Francisco: Josey-Bass.
- Loevinger, J. (1985). Revision of the Sentence Completion Test of Ego Development: *Journal of Personality and Social Psychology*, 48, 420-7.
- Loevinger, J. (1993). Measurement of personality: True or false. *Psychological Inquiry*, 4, 1-16.
- Louw, D.A., Van Ede, D.M., & Louw, A.E. (1998). *Human development*. Pretoria: Kagisho Tertiary.
- Mandela, N. (1993). *Nobel peace prize acceptance speech*. Retrieved January, 14, 2002, from the World Wide Web: <http://www.co.za/mandela/children>.
- Marks, I. (1987). The development of normal fear: A review. *Journal of Child Psychology and Psychiatry*, 28(5), 667-697.
- Martalas, A. (1999). *An exploratory study of the expressed fears of preschool children*. Unpublished master's thesis. University of Stellenbosch.

- Maurer, A. (1965). What children fear. *The Journal of Genetic Psychology*, 106, 265-277.
- Menzies, R.G., & Clarke, J.C. (1995). The etiology of phobias. A nonassociative account. *Clinical Psychology Review*, 15, 23-48.
- Meyer J., Loxton, H., & Boulter, S. (1997). A systems approach to the enhancement of self-concept. In C. De la Rey, N. Duncan, T. Shefer, & A. Van Niekerk (Eds.), *Contemporary issues in human development: A South African focus* (pp. 110-127). Johannesburg: International Thompson Publishing.
- Milgrom, L.C., Mancl, L., King, B., & Weinstein, P. (1995). Origins of childhood dental fear. *Journal of Behaviour Research and Therapy*, 33(3), 313-319.
- Miller, L.C., Barrett, C.L., & Hampe, E. (1974). Phobias of childhood in a pre-scientific era. In A. Davids (Ed.), *Child personality and psychopathology: Current topics* (pp. 89-134). New York: John Wiley & Sons.
- Miller, L.C., Barrett, C.L., Hampe, E., & Noble, H. (1972). Factor structure of childhood fears. *Journal of Consulting and Clinical Psychology*, 39(2), 264-268.
- Mokgoatsana, S. (1999). The phallic snake: A Sepedi creation narrative. *South African Journal of African Languages*, 19(3), 155-158.
- Mooney, K. (1985). Children's nighttime fears: Ratings of content and coping behaviours. *Journal of Cognitive Therapy and Research*, 9(3), 309-319.
- Mooney, K.C., Graziano, A.M., & Katz, J.N. (1985). A factor analytic investigation of children's nighttime fear and coping responses. *The Journal of Genetic Psychology*, 146, 205-215.
- Morris, R.J., & Kratochwill, T.R. (1983). *Treating children's fears and phobias: A behavioural approach*. New York: Pergamon.

- Morris, R.J., & Kratochwill, T.R. (1991). Childhood fears and phobias. In T.R. Kratochwill & R.J. Morris (Eds.), *The practice of child therapy*, (2nd ed.), (pp. 76-114). New York: Pergamon.
- Muris, P., Merckelbach, H., & Collaris, R. (1997). Common childhood fears and their origins. *Behaviour Research and Therapy*, 35, 929-937.
- Muris, P., Merckelbach, H., Gadet, B., & Moulart V, (2000). Fears, worries, and scary dreams in 4- to 12-year-old children: Their content, developmental pattern, and origins. *Journal of Clinical Child Psychology*, 29(1), 43-52.
- Muris, P., Merckelbach, H., & Lujten, M. (2002). The connection between cognitive development and specific fears and worries in normal children and children with below-average intellectual abilities: A preliminary study. *Behaviour Research and Therapy*, 40(1), 37-56.
- Muris, P., Merckelbach, H., Mayer, B., & Prins, E. (2000). How serious are common childhood fears? *Behaviour Research and Therapy*, 38, 217-228.
- Muris, P., Merckelbach, H., Meesters, C., & Van Lier, P. (1997). What do children fear most often? *Journal of Behavior Therapy and Experimental Psychiatry*, 28, 263-267.
- Muris, P., Merckelbach, H., Ollendick, H., King, J. & Bogie, N. (2001). Children's nighttime fears: Parent-child ratings of frequency, content, origins, coping behaviors and severity. *Behaviour Research and Therapy*, 39, 13-28.
- Muris, P., Schmidt, H., Engelbrecht, P., & Perold, M. (2002). DSM-IV defined anxiety disorder symptoms in South-African children. *Journal of the American Academy of Child and Adolescent Psychiatry*, 41, 1-9.
- Muris, P., Van Brakel, A., & Meesters, C. (1998). Coping styles, anxiety and depression in children. *Psychological Reports*, 83, 1225-1226.

- Mussen, P.H., Conger, J.J., & Kagan, J. (1974). *Child development and personality*. New York: Harper & Row.
- Nalven, F.B. (1970). Manifest fears and worries of ghetto vs middle-class suburban children. *Psychological Reports*, 27, 285-286.
- Neal, A.M., & Turner, S.M. (1991). Anxiety disorder research with African Americans: Current status. *Psychological Bulletin*, 109, 400-410.
- Neal, A.M., Lilly, R. S., & Zakis, S. (1993). What are African American children afraid of? *Journal of Anxiety Disorders*, 7(2), 129 - 139.
- Newman, B.M., & Newman, P.R. (1999). *Development through life. A psychosocial approach* (7th ed.). California, USA: Wadsworth Publishing Co.
- Nietzel, M.T., Bernstein, D.A., & Russell, R. L. (1988). Assessment of anxiety and fear. In M. Hersen & A.S. Bellack (Eds.), *Behavioural assessment: A practical handbook* (3rd ed.), (pp.280-312). New York: Pergamon.
- Ollendick, T.H. (1983). Reliability and validity of the Revised Fear Survey Schedule for Children. *Journal of Behaviour Research and Therapy*, 21(6), 685-693.
- Ollendick, T.H. (1998). Panic disorder in children and adolescents: New developments, new directions. *Journal of Clinical Child Psychology*, 27, 234-45.
- Ollendick, T.H., Hagopian, L.P., & King, N.J. (1997). Specific phobias in children. In G.C.L. Davey (Ed.), *Phobias. A handbook of theory, research and treatments* (pp. 201-255). Chichester, England: Wiley.
- Ollendick, T.H., & King, N.J. (1991). Origins of childhood fears: An evaluation of Rachman's theory of fear acquisition. *Behaviour Research and Therapy*, 29, 117-123.

- Ollendick, T.H., King, N.J., & Frary, R.B. (1989). Fears in children and adolescents: Reliability and generalizability across gender, age, and nationality. *Behaviour Research and Therapy*, 27, 19-26.
- Ollendick, T.H., Langley, A.K., Jones, R.T., & Kephart, C. (2001). Fear in children and adolescents. Relations with negative life events, attributional style, and avoidant coping. *Journal of Child Psychology and Psychiatry*, 42(8), 1029-1034.
- Ollendick, T.H., Matson, J.L., & Hessel, W.J. (1985). Fears in children and adolescents: Normative data. *Behaviour Research Therapy*, 23(4), 465 - 467.
- Ollendick, T.H., Yang, B., Dong, Q., Xia, Y., & Lin, L. (1995). Perceptions of fear in older children and adolescents: The role of gender and friendship status. *Journal of Abnormal Child Psychology*, 23, 439-452.
- Ollendick, T.H., Yang, B., King, N. J., Dong, Q., & Akande, A. (1996). Fears in American, Australian, Chinese, and Nigerian children and adolescents: A cross-cultural study. *Journal of Child Psychology and Psychiatry*, 37, 213-220.
- Ollendick, T.H., Yule, W., & Ollier, K. (1991). Fears in British children and their relationship to manifest anxiety and depression. *Journal of Child Psychology and Psychiatry*, 32(2), 321-331.
- Papalia, D.E., & Olds, S.W. (1986). *A child's world: Infancy through adolescence*. New York: McGraw-Hill Book Company.
- Pearlin, L.I., & Schooler, C. (1978). The structure of coping. *Journal of Health and Social Behavior*, 19, 2-21.
- Peterson, L., Harbeck, C., Charney, J., Farmer, J., & Thomas, A.M. (1990). Children's coping with medical procedures: A conceptual overview and integration. *Behavioural Assessment*, 12, 197-212.
- Piaget, J. (1951). *Play, dreams and imitation in childhood*. London: Routledge & Kegan.

- Pillay, A., & Lockhat, R. (2001). Models of community mental health services for children. In M. Seedat (Ed.), N. Duncan, & S. Lazarus (Cons. Eds.), *Community Psychology: Theory, methods and practice. South African and other perspectives* (pp. 87-106). Cape Town: Oxford University Press.
- Pillay, A.L., Naidoo, P., & Lockhat, M.R. (1999). Psychopathology in urban and rural/peri-urban children seeking mental health care. *South-African Journal of Psychology*, 29, 178-183.
- Pratt, K.C. (1945). A study of the fears of rural children. *Journal of Genetic Psychology*, 67, 179-194.
- Pretorius, N. (2000). *Aspects of parenting styles and the expressed fears of a selected group of pre-school children*. Unpublished master's thesis. University of Stellenbosch.
- Pretorius, T.B. (1995). *Inferential statistics: Hypothesis testing and decision-making*. Cape Town: Percept Publishers.
- Rachman, S. (1977). The conditioning theory of fear acquisition: A critical examination. *Behaviour Research and Therapy*, 15, 375-378.
- Rachman, S. (1998). *Anxiety*. East Sussex, UK: Psychology Press Ltd., Publishers.
- Reed, L.J., Carter, B.D., & Miller, L.C. (1992). Fear and anxiety in children. In C.E. Walker & M.C. Roberts (Eds.), *Handbook of clinical psychology* (2nd ed.), (pp. 237-260). New York: John Wiley & Sons.
- Rende, R.D., & Plomin, R. (1991). Child and parent perceptions of the upsettingness of major life events. *Journal of Child Psychology and Psychiatry*, 32(4), 627-633.
- Richter, L.M., Griesel, R.D., & Wortley, M.E. (1989). The Draw-a-Man test: A 50 - year perspective on drawings done by black South African children. *South African Journal of Psychology*, 19(1), 1-5.

- Roberts, N., Vargo, B., & Ferguson, H.B. (1989). Measurement of anxiety and depression in children and adolescents. *Psychiatric Clinics of North America*, 12, 837-859.
- Robertson, B. (1988). Behind the smile: Township children under stress. *South African Outlook*, 118, 96-99.
- Rock, B. (Ed.). (1997). *Spirals of suffering*. Pretoria: HSRC Publishers.
- Ross, A. (1981). *An investigation into the importance of the quality and quantity of the mother-child relationship in preschool children*. Unpublished master's thesis. University of the Witwatersrand, Johannesburg.
- Rudenberg, S.L., Jansen, P., & Fridjhon, P. (1998). The effect of exposure during an ongoing climate of violence on children's self-perceptions, as reflected in drawings. *South African Journal of Psychology*, 28(2), 107-115.
- Russel J.A. (1990). The preschooler's understanding of the causes and consequences of emotion. *Journal of Child Development*, 61, 1972-1881.
- Ryall, M.R., & Dietiker, K.E. (1978). Fear word choice in preschoolers. *Journal of Behaviour Therapy and Experimental Psychiatry*, 9, 189-190.
- Sarafino, E.P. (1986). *Fears of childhood: A guide to recognizing and reducing fearful states in children*. New York: Human Science Press Incorporated.
- Sattler, J.M. (1992). *Assessment of children* (3rd ed.). San Diego: Jerome M. Sattler, Publisher, Incorporated.
- Shand, D.M. (1994). *Assessment and treatment of anxiety in primary school children*. Unpublished doctoral dissertation, University of South Africa, Pretoria.
- Shepherd, M., Oppenheim, B., & Mitchell, S. (1971). *Childhood behaviour and mental health*. London: University of London Press.

- Sipes, G., Rardin, M., & Fitzgerald, B. (1985). Adolescent recall of childhood fears and coping strategies. *Psychological Reports, 57*, 1215-1223.
- Slee, P.T., & Cross, D.G. (1989). Living in the nuclear age: An Australian study of children's and adolescents' fears. *Child Psychiatry and Human Development, 19*(4), 270-278.
- Spence, S.H., & McCathie, H. (1993). The stability of fears in children: A two-year prospective study: A research note. *Journal of Child Psychology and Psychiatry, 34*(4), 579-585.
- Staley, A.A., & O' Donnell, J.P. (1984). A developmental analysis of mothers' reports of normal children's fears. *The Journal of Genetic Psychology, 144*, 165-178.
- Stevenson-Hinde, J., & Shouldice, A. (1995). 4.5 to 7 years: Fearful behaviour, fears and worries. *Journal of Child Psychology and Psychiatry, 36*(5), 1027-1038.
- Tennant, A.S. (1986). *Visual-motor perception: A correlative study of specific measures for pre-school South African children*. Unpublished master's thesis. University of Port Elizabeth.
- Tikalsky, F.D., & Wallace, S.D. (1988). Culture and the structure of children's fears. *Journal of Cross-Cultural Psychology, 19*(4), 481-492.
- Tremewan, T., & Strongman, K.T. (1991). Coping with fear in early childhood: Comparing fiction with reality. *Journal of Early Child Development and Care, 71*, 13-34.
- Van der Merwe, S.E., & Jacobs, L.J. (1992). *Die interpretasie van kindertekeninge*. Pretoria: Academica
- Van der Zanden, J.W. (1997). *Human development* (6th ed.). New York: Mc Graw-Hill.
- Van Eeden, C. (1989). *Kinderangs: 'n Kruiskulturele psigologiese ondersoek*. Unpublished master's thesis, University of Potchefstroom.

- Vandenberg, B. (1993). Fears of normal and retarded children. *Psychological Reports*, 72, 473-474.
- Vorster, M-H., & Brand., H.J. (1995). The validity of the Developmental Test of Visual-Motor integration in the South African context: A pilot study. *The South African Journal of Occupational Therapy*, 25(2), 28 - 33.
- Walbot, H.G., & Scherer, K.R. (1986). How universal and specific is emotional experience? Evidence from 27 countries on five continents. *Social Science Information*, 25(4), 763-795.
- Westenberg, P.M., Siebelink, B.M., & Treffers, P.D.A. (2001). Psychosocial developmental theory in relation to anxiety and its disorders. In W.K. Silverman & P.D.A. Treffers (Eds.), *Anxiety disorders in children and adolescents: Research, assessment and interventions* (pp. 72-86). New York: Cambridge University Press.
- Wicks-Nelson, R. & Israel, A.C. (1984). *Behaviour disorders of childhood*. Englewood Cliffs, N.J.: Prentice-Hall.
- Wierzbicka, A. (1986). Human emotions: Universal or culture-specific? *American*
- Yatt, S. (1996). *Divorce therapy for preschool children*. Unpublished master's thesis, Rand Academic University (formerly Rand Afrikaans University), Johannesburg.

ADDENDUM A**PRESCHOOLS: INFORMATION LETTER**

At the University of Stellenbosch, **research** is currently being undertaken to the content of **preschool children's normal experiences of fear and coping mechanisms**. Fear is a normal part of children's experience of life. That which children fear is generally influenced by their environment and changes as they develop.

The information gathered from the research will be aimed at better understanding and helping, if necessary, children of the age group that falls between five and seven years. The final aim is to utilize this information to the benefit of other children in South Africa.

Should the parent/ guardian give consent, the child would, on a one to one basis, be asked to draw, talk and complete a child friendly test. The whole session would not exceed one hour and would take place during school hours on the school premises. The session will be recorded to be transcribed at a later stage

The parents/guardians will be asked to complete a biographical questionnaire of one page.

It would be preferable if you do not discuss anything regarding the research with the children prior to the research date. Should you be interested, arrangements can be made to discuss the findings of the group during a general feedback session

It will be highly appreciated if **arrangements** with regard to a first visit from the researcher prior to the test date in order to create rapport and other logistics could **be finalised during a meeting on**

.....2000.

during which I will be happy to answer any questions that you may have.

Your assistance in the above regard will be highly appreciated and it is hoped that your participation in this research will be of benefit to both yourself and the children.

Should you at any time wish to contact me, I may be reached at (021) 808 3452.

I thank you in advance for your co-operation.

Your sincerely

Mrs Helene Loxton

Lecturer: Department of Psychology
University of Stellenbosch

ADDENDUM B**PARENTS / GUARDIANS: INFORMATION LETTER**

Dear Parent / guardian

At the University of Stellenbosch, **research** is currently being undertaken to the content of **preschool children's normal experiences of fear and coping mechanisms**. Fear is a normal part of children's experience of life. That which children fear is generally influenced by their environment and changes as they develop.

The information gathered from the research will be aimed at better understanding and helping, if necessary, children of the age group that falls between five and seven years. The final aim is to utilize this information to the benefit of other children in South Africa.

To this end, this letter is a friendly, enthusiastic request to you as parents of a child who falls within the age target group of this study, to allow your child to participate in the research project. **Complete anonymity is assured and no information that will be used for research purposes will be able to be related directly back to your child in his/her personal capacity**. In reporting the research results, the children are referred to only by aspects such as gender and age.

Should you give consent, your child would, on a one to one basis, be asked to draw, talk and complete a child friendly test. The whole session would not exceed one hour and would take place during school hours on the school premises. The whole session will be recorded to be transcribed at a later stage.

Arrangements for the specific day will be made with

Ms Ofpre-primary.

It would be preferable if you do not discuss anything regarding the research with your child prior to the research discussion. Should you be interested, arrangements can be made to discuss the findings of the group during a general feedback session.

Yours sincerely

Helene Loxton

Lecturer
Department of Psychology, University of Stellenbosch
Private Bag X1
Matieland
7602
SOUTH – AFRICA
Tel: (021) 808 3452 Fax: (021) 808 3584

ADDENDUM C

PARENTS / GUARDIANS : PERMISSION

TITLE OF RESEARCH PROJECT:

EXPRESSED FEARS AND COPING STRATEGIES OF A SELECTED GROUP OF PRESCHOOL CHILDREN.

REFERENCE NUMBER: APPENDIX C / ENG.

DECLARATION OF PARENT / GUARDIAN

I, the undersigned,

in my capacity as parent / guardian (delete what is not applicable)

of (child)

from
(address)

A. confirm that

- 1. my child is invited to participate in the above-mentioned research project, run by Ms Loxton from the Department of Psychology, University of Stellenbosch.
- 2. I understand that**
 - 2.1 the objective of the project is to investigate both the fears of preschool children and their individual ways of coping with them;
 - 2.2 my child will spend approximately one hour with the researcher, talking, drawing and completing tests. The interview will be tape-recorded. The researcher has experience with young children and will make the experience as enjoyable as possible for your child. He/she will in no way be forced to do or say anything to which he/she has not agreed or which would not be in his/her best interests;
- 3. the session with my child will be conducted at the preprimary school / day care centre and there are no physical dangers / risks involved in the research;
- 4. the researcher undertakes to contact me should she feel uneasy or concerned about anything my child says or does in the session;
- 5. the information obtained is confidential and will be used in the following way: It will form part of a doctoral study which will probably be published in an academic journal. However no information will in any way be identified with my child.

6. the researcher undertakes to provide a general feedback session about the overall results of the group of children after the project has been completed and should the parties involved desire it.
7. that I may refuse / my child may refuse to participate in the project and that such a refusal will not disadvantage me or my child in any way;
8. participation in the project involves no financial costs;
9. I am not forced or coerced in any way to agree to my child's participation in the project and I understand that we are free to withdraw from the project at any stage.
10. The above information has been explained to me by in Afrikaans, English, Xhosa (delete what is not applicable). I am conversant in the language / it has been adequately translated for me by and I have been granted the opportunity to ask questions which were adequately answered.

B. I hereby voluntarily agree to my child's participation in the abovementioned project.

Confirmed at
.....on.....2000...

Signed: Witness:
.....

DECLARATION OF / FOR RESEARCHER

I,, confirm that I:

1. explained the information in this document to
.....
and/or his/her representative
.....;
2. I invited him/her to inquire about anything that was not clear to him/her;
3. the discussion was conducted in Afrikaans, English or Xhosa and that no translator was used*/ Dr/Mr/Msacted as translator.

Signed at on2000....

Researcher/Research
assistant.....

Witness:

*Delete what is not applicable

ADDENDUM D**PARENTS / GUARDIANS: BIOGRAPHICAL DATA OF PARTICIPANT**

1. Name and surname of child
2. Date of birth
3. Gender

male	female
------	--------
4. Home address
5. Parents marital status

married	living together	single	separated	divorced
---------	-----------------	--------	-----------	----------
6. Child lives with

both parents	mother	father	other – specify	<input type="text"/>
--------------	--------	--------	-----------------	----------------------
7. Siblings

number	<input type="text"/>	brothers	<input type="text"/>	sisters	<input type="text"/>	ages	<input type="text"/>
--------	----------------------	----------	----------------------	---------	----------------------	------	----------------------
8. Language of

child	<input type="text"/>	mother	<input type="text"/>	father	<input type="text"/>	other - specify)	<input type="text"/>
-------	----------------------	--------	----------------------	--------	----------------------	------------------	----------------------
9. Occupation of

mother	<input type="text"/>	father	<input type="text"/>	other	<input type="text"/>
--------	----------------------	--------	----------------------	-------	----------------------
10. Highest education of

mother	<input type="text"/>	father	<input type="text"/>	other	<input type="text"/>
--------	----------------------	--------	----------------------	-------	----------------------
11. Number of people living in house together
12. Workers per household
13. Does your child go to aftercare?

YES	NO
-----	----
14. If no, who looks after him/her at home?
15. Do you have a television at home?

YES	NO
-----	----
16. What is your child's favourite television program
17. Approximately, how many hours per day does your child spend watching television?
18. Approximately, how many hours per day do you spend with him/her watching television?

19. What is your child **most scared or afraid of** at this stage?

20. What does he/she **usually do** when being scared or afraid?

21. **Does this** way of coping mentioned in 20 **help him/her?**

YES	NO
-----	----

ADDENDUM E**MOTIVATIONAL TALK FORMAT**

1. Hello, my name is and your name is.....?
2. How old are you
3. I enjoy talking to children and would like to talk to you to-day.
4. Tell me what you like doing here at school.
5. Do you like drawing?
6. To-day we will be talking and drawing. Here is some paper, a pencil and a rubber.
7. I will also write while we talk and this machine will be on. Do you know what this is? It is a recorder. I want to remember everything you tell me to-day and that is why I'll be recording what you tell me.
8. Everything that you tell me will be between us. I'm not going to tell anybody what **you** tell me here to-day.
9. (At the end of the interview). Would you like to listen to your voice on the recorder?

ADDENDUM F**SEMI-STRUCTURED INTERVIEW FORMAT**

1. All of us are sometimes afraid or scared of things.
2. Do you know what it means to be afraid of something?
3. Please make a drawing of that which you are afraid of and while you're drawing it, please tell me what you are drawing.
4. Why are you afraid of.....?
5. Have you seen.....?

Questions 4 and 5 will not always be asked. It will be asked to prompt conversation with the participant, if necessary. If the response to question 3 is negative, the following question will be asked:

6. What is he/she afraid of ? (pointing towards the Draw-a-man drawing)
or alternatively
7. What are the children in your class afraid of?
8. Can you tell me what scared you most?
9. What did you think and do when it happens?
10. How did you think that would help or make things better?
11. Did it work / helped you?

Sigamoney Manicka
Naicker



PROVINSIALE ADMINISTRASIE WES-KAAP

Onderwysdepartement

PROVINCIAL ADMINISTRATION WESTERN CAPE

Education Department

ULAWULO LWEPHONDO LENTSHONA KOLONI

ISEbe leMfundo

036404

403-6370

13/2/10

Dear Ms Helene Loxton
Department of Psychology
University of Stellenbosch
Fax: 8084499

Dear Ms Loxton

RESEARCH PROPOSAL: Expressed fears and coping mechanisms of a selected group of preschool children

Your application to conduct the above-mentioned research at schools in the Western Cape has been approved subject to the following conditions.

- Principals, teachers and learners are under no obligation to assist you in your investigation.
- Principals, teachers, learners and schools should not be identifiable in any way from the results of the investigation.
- You make all arrangements concerning your investigation
- Your work should not disrupt the functioning of the school during school hours.
- The investigation is not conducted during the fourth school term
- There are no financial implications for the Western Cape Education Department.
- A photocopy of this letter is submitted to the principal of each school where the intended research is to be conducted.
- A brief summary of the content, findings and recommendations is provided to the Director: Curriculum Management (Research Section).
- The Department receives a copy of the completed report/dissertation/thesis addressed to:

The Director: Curriculum Management
(Research Section)
Western Cape Education Department
Private Bag 9114
CAPE TOWN 8000

We wish you success in your research

Kind regards

HEAD: EDUCATION

DATE: 9 MAY 2000

ADDENDUM H**The Numerical Occupation Classification Scale**

(Adapted from Tennant, 1986)

Classification of Breadwinner's Occupation

Occupation Classification	Score
Highly qualified professional, executive, administrative and technical occupations	9
Professional, administrative and managerial workers	8
Commercially independent	7
Lower qualified administrative, technical and clerical with limited supervisory responsibility	6
Skilled workers and artisans with trade qualifications	5
Routine clerical and administrative workers, service and sales workers	4
Semi-skilled production and manual workers	3
Unskilled production and manual workers	2
Not economically active or productive	1
No response	0

Classification of Breadwinner's Education

Father's Education	Score
Attended university	7
Trained at Post-matric level (not university)	6
Matric	5
Apprenticeship	4
Junior Certificate	3
Primary School	2
No education	1
No response	0

Classification of Socio-economic Status

	Lower	Middle	Upper
White	2-10	11-13	14-16
Coloured	2-6	7-10	11-16
Indian	2-6	7-10	11-16
Black	2-5	6-10	11-16

ADDENDUM I

ADDENDUM I1: WILD ANIMALS FEARS

ID	Gender	Culture	Ses	Category	Primary	Additional	Qualitative	Origin of Fears
3	B	1	M	Snake	✓		Small	7
				Lion		✓		13
				Crocodile		✓	Only saw jaws	7
6	B	2	M	Snake	✓		Small	7
9	B	1	M	Snake		✓		
				Gorilla		✓		
11	B	1	M	Snake	✓			9
				Crocodile		✓		
				Lion		✓		
13	B	1	U	Lion	✓		When it roars it looks as if it can eat you	8
14	G	1	U	Lion	✓			7
15	B	2	L	Snake	✓		Cobra Snake	10
				Crocodile		✓		
				Rhino		✓		
16	G	1	U	Jackal	✓			7
				Wolf		✓		
17	G	1	U	Snake	✓			7
18	G	2	U	Elephant	✓			8
				Crocodile		✓		
20	B	1	U	Lizard		✓	Movement	
				Chameleon		✓	Opening mouth	
21	G	1	U	Snake	✓			7
				Bear		✓		
				Lion		✓		
22	G	1	U	Snake	✓			7
23	B	1	U	Crocodile	✓		When in water	7
				Lion		✓		
				Cheetah		✓		
				Hyena		✓		
				Wolf/Jackal		✓✓		
25	B	1	U	Lion		✓		
26	B	1	U	Lion	✓			8 & 7
29	G	1	M	Snake	✓		Small	7
31	B	2	L	Snake	✓		Small	7
				Crocodile		✓		

ID	Gender	Culture	Ses	Category	Primary	Additional	Qualitative	Origin of Fears
				Lion		✓		
35	B	1	U	Snake		✓	Small	
39	G	1	U	Snake		✓	Cobra	
44	G	1	U	Snake	✓		Big	7
45	G	1	U	Snakes		✓	Big one - python	
				Baboons		✓	Big one	
				Crocodile		✓		
48	G	1	U	Snakes	✓		Small ones	7
				Crocodiles		✓		
				Hippo		✓		
49	G	1	U	Snake	✓		Cobra	6
50	G	2	U	Cheetah	✓		Small one	7
				Lion		✓		
53	B	2	M	Crocodile	✓			8
54	B	1	M	Ostrich	✓			7
				Owl		✓		
55	B	2	U	Lion	✓			7
57	G	2	M	Snakes		✓		
59	B	1	L	Snake		✓		
				Elephant		✓		
				Lion		✓		
60	B	2	L	Lion	✓			8
				Wolf		✓		
61	B	2	L	Snake	✓		small	7
61	B	2	L	Crocodile		✓		
				Eagle		✓		
				Tiger		✓		
64	G	2	U	Snake		✓		
				Tiger		✓		
66	B	2	M	Squirrel		✓		
69	G	2	M	Lion	✓			8
				Ostrich		✓		
				Mouse		✓		
70	B	2	U	Elephant	✓		“that walk loud”	7
				Lion		✓		
71	G	3	M	Lion	✓			8
72	B	2	U	Lion		✓		
75	B	2	U	Snake	✓		Small one	7
				Lion		✓		
				Elephant		✓		

ID	Gender	Culture	Ses	Category	Primary	Additional	Qualitative	Origin of Fears
				Bear		✓		
				Crocodile		✓		
77	G	2	M	Snake	✓		Small one	7
				Ape		✓		
				Jackal		✓		
				Bear		✓		
				Crocodile		✓		
				Birds		✓	Big ones	
				Bats		✓		
80	B	2	M	Crocodile	✓		Big one	9
				Bear		✓		
				Gorilla		✓		
				Lion		✓		
81	B	2	M	Lion	✓			7
83	G	2	L	Tortoise	✓			7
84	G	2	L	Crocodile	✓			1
				Snake		✓	Big one	
86	G	2	L	Snake	✓		Small one	7
				Rhino		✓		
				Ape		✓	Small one	
88	B	3	L	Tiger		✓		
				Lion		✓		
89	G	3	M	Snakes		✓		
90	B	1	L	Lion		✓		
94	B	2	U	Elephant	✓			10
				Lion		✓		
				Giraffe		✓	Not the baby one	
96	G	2	U	Snake	✓			7
				Lion		✓		
97	G	3	U	Crocodile		✓		
99	B	2	U	Snake	✓			7
				Lion		✓		
				Buck		✓		
				Lizard		✓		
100	B	3	U	Lion	✓			7
				Snake		✓		
				Cheetah		✓		
				Tiger		✓		
101	G	2	U	Tiger	✓			7
103	G	2	U	Lion		✓		
105	B	2	L	Lion	✓			8

ID	Gender	Culture	Ses	Category	Primary	Additional	Qualitative	Origin of Fears
106	B	3	L	Lion	✓			7
				Snake		✓	Long snake	
107	B	2	U	Baboon/ Gorilla		✓✓		
108	B	2	U	Wolf	✓		Small one	7
				Snake		✓	Big one	
109	B	3	L	Crocodile		✓		
				Snake		✓		
110	G	3	L	Lion	✓			7
				Baboon		✓		
111	G	3	L	Snake	✓		He was asleep	7
113	B	3	L	Snake	✓		Big one	7
				Lion		✓	Looks as if he can bite	
115	B	3	L	Snake	✓			7
116	G	3	L	Tortoise	✓			7
117	B	1	L	Snake		✓	Big one	
				Crocodile		✓	Big one	
119	G	3	U	Snakes	✓		Small ones	8
121	B	3	L	Snake	✓			7
126	B	3	U	Snake	✓			8
				Lion		✓		
127	B	3	L	Baboon	✓			7
				Snake		✓		
128	B	3	L	Snake	✓			8
129	B	1	U	Snakes		✓	Small ones	
132	G	3	M	Snake	✓			7
133	G	3	L	Baboon	✓		Small one	7
134	G	3	L	Snake		✓	Big one	
135	B	3	L	Lion	✓		Big one	7
				Bear		✓		
137	G	2	M	Snake		✓	Dead snake	
138	B	3	L	Lion	✓			7
				Snake		✓	Big one	
140	G	3	L	Tiger		✓		
				Baboon		✓		
141	B	3	L	Snake	✓		Big one	8
142	G	3	L	Lion		✓		
				Tiger		✓		
143	G	3	U	Lion		✓		
144	B	3	L	Tiger	✓			8
				Lion		✓		

ID	Gender	Culture	Ses	Category	Primary	Additional	Qualitative	Origin of Fears
146	B	1	U	Crocodile		✓		
147	G	3	L	Baboon		✓		
148	G	3	M	Snake	✓		Small one	7
150	B	3	L	Ape		✓	On TV	
151	B	3	L	Snake	✓		Big one	7
				Lion		✓		
152	G	3	L	Snake	✓		Big one	7

ADDENDUM 12: DOMESTIC ANIMALS FEARS

ID	Gender	Culture	Ses	Category	Primary	Additional	Qualitative	Origin of Fears
3	B	1	M	Dog		✓	Bulldog	7
9	B	1	M	Dog	✓		Alsation (Lady)	7
29	G	1	M	Dog		✓		
31	B	2	L	Dog		✓		
65	B	2	M	Dog	✓		“dog that is very evil”	7
66	B	2	M	Horse		✓		
69	G	2	M	Cat		✓		
71	G	3	M	Dog		✓		
				Cat		✓		
80	B	2	M	Cow		✓	Cow knew him	
82	G	2	L	Dog	✓		Small one	7
				Cat		✓	Small one	
83	G	2	L	Sheep		✓		
86	G	2	L	Dog		✓	Big one	
				Cat		✓		
89	G	3	M	Dog	✓			7
				Cat		✓		
96	G	2	U	Dog		✓	Big one	
97	G	3	U	Dog		✓	Little dog	
100	B	3	U	Dog		✓	Big dog	
108	B	2	U	Dog		✓	Big dog	
122	B	3	L	Cow	✓			13
127	B	3	L	Donkey		✓		
131	G	3	L	Dog	✓			7
134	G	3	L	Dog	✓		Big one	7
144	B	3	L	Dog		✓		
147	G	3	L	Cat		✓	Small one	
148	G	3	M	Dog		✓	Small one	
149	G	2	U	Dog		✓		

ADDENDUM I3: INSECTS FEARS

ID	Gender	Culture	Ses	Category	Primary	Additional	Qualitative	Origin of Fears
12	G	2	U	Bee	✓		Allergic thereof	7
17	G	1	U	Spider		✓		
39	G	1	U	Spider	✓			7
41	G	1	U	Bug	✓			7
45	G	1	U	Spider	✓		Big ones	7
47	B	1	M	Spider		✓	Big ones	
49	G	1	U	Spider		✓	Black one with red dot	
59	B	1	L	Bug		✓		
65	B	2	M	Ladybird		✓		
88	B	3	L	Spider	✓			8
93	B	2	M	Spider		✓		
97	G	3	U	Spider		✓		
137	G	2	M	Spider	✓		Small one	7
				Bee		✓	Afraid it might sting her	
143	G	3	U	Bug	✓		Big bug	7

ADDENDUM I4: SEA / WATER ANIMALS FEARS

ID	Gender	Culture	Ses	Category	Primary	Additional	Qualitative	Origin of Fears
5	B	1	U	Shark		✓		8
7	B	1	U	Shark	✓		Big	7
34	G	1	U	Shark		✓	Mega shark	
45	G	1	U	Shark		✓	Big ones	
				Whale		✓	Normal whale	
70	B	2	U	Fish		✓	Big fish	
78	B	2	U	Shark		✓		
85	B	2	U	Shark		✓		
				Hammer fish		✓		
109	B	3	L	Fish		✓		
118	B	3	U	Fish	✓			7

ADDENDUM I5: FANTASY ANIMALS FEARS

ID	Gender	Culture	Ses	Category	Primary	Additional	Qualitative	Origin of Fears
9	B	1	M	Ape		✓	In roof and under bed	
59	B	1	L	Dragon		✓		
				Dinosaur		✓		
71	G	3	M	Dinosaur		✓		
103	G	2	U	Dinosaur	✓		Saw <u>real</u> one in bushes	8
109	B	3	L	Dinosaur	✓		Enormous	7
119	G	3	U	Dinosaur		✓	Fat, fat one	
120	B	1	U	Monster	✓		Small one	11
				Dinosaur		✓	Big one	
66	B	2	M	Animal ghost	✓			7

ADDENDUM I6: REAL PEOPLE FEARS

ID	Gender	Culture	Ses	Category	Primary	Additional	Qualitative	Origin of Fears
2	G	2	M	Friends		✓		4
				Dishonest		✓		7
				Tramp		✓		7
4	B	1	U	Sister		✓	Ugly with him	7
				Doctor		✓		12
8	G	1	U	Burglar	✓			7
13	B	1	U	Brother		✓	tease	
15	B	2	L	Sister		✓		
19	G	1	M	Sister		✓	tease	
20	B	1	U	Burglar		✓		
24	B	1	U	Thief	✓			9
28	G	1	M	Mother		✓		
29	G	1	M	Brother	✓		Hurt her	7
33	G	2	U	Mother	✓		Frighten her	1
36	B	1	U	Bad guy		✓		
43	G	1	U	Robbers	✓			8
46	G	1	U	Bad guy	✓			8
52	G	1	M	Thief	✓			7
57	G	2	M	Sister		✓	“sister switches off light”	
58	B	2	L	Dishonest	✓			7
63	B	2	U	Someone	✓		“Pedats”	1
64	G	2	U	Dishonest		✓		
71	G	3	M	Dishonest		✓		
73	B	2	U	Gangster	✓			7
76	B	2	U	Ghostman	✓		Black jacket, red eyes, hat, said his name is Keenan, an ugly man	7
79	B	2	L	Someone		✓		
87	B	3	L	Dishonest	✓		Starts fires & drink	7
89	G	3	M	Person		✓	Friend of parents	
91	B	1	U	Boy	✓		Little boy	7
97	G	3	U	Brother		✓		
102	G	2	U	Brother		✓		
122	B	3	L	Person		✓		
124	G	3	L	Face	✓		Seen eyes and nose	7

ID	Gender	Culture	Ses	Category	Primary	Additional	Qualitative	Origin of Fears
125	G	3	L	Person	✓		A white person	7
127	B	3	L	Person		✓	A rasta man	
130	G	3	L	Person	✓		Man named "Guy Fawkes" Big and old and he wears a mask	7
132	G	3	M	Children		✓	Underfed children on TV	
140	G	3	L	Gangster	✓			7
145	G	2	M	Norman/Morgan	✓	✓	Knocks every day on window	
147	G	3	L	Ghost-man	✓		Small and black	7

ADDENDUM I7: FANTASY PEOPLE FEARS

ID	Gender	Culture	Ses	Category	Primary	Additional	Qualitative	Origin of Fears
1	G	2	U	ghost	✓			7
6	B	2	M	monster		✓		7
10	B	1	U	cannibal	✓			3
				ghost		✓		
30	B	1	U	giant	✓			13
				devil		✓		
35	B	1	U	monster		✓		
37	G	1	U	ghost		✓		
40	B	1	U	giant	✓			10
42	G	2	U	monster	✓			8
48	G	1	U	devil		✓		
53	B	2	M	ghost		✓		
54	B	1	M	Batman		✓		
56	B	2	U	Tokoloshe	✓			2
				ghost		✓		
59	B	1	L	ghost		✓		
64	G	2	U	ghost	✓			7
67	B	2	M	dracula	✓			9
68	G	2	M	ghost	✓			7
72	B	2	U	ghost	✓			13
				dracula		✓		
75	B	2	U	ghost		✓		
78	B	2	U	ghost	✓			2
				monster		✓		
79	B	2	L	ghost	✓			2
				monster		✓		
				alien		✓		
85	B	2	U	ghost	✓			8
90	B	1	L	ghost	✓			7
				monster		✓	Long neck, sharp teeth	
93	B	2	M	ghost	✓		No veins	12
95	G	2	U	ghost	✓			4
97	G	3	U	ghost	✓			11
				boogy man		✓		
98	G	3	L	ghost	✓			6
102	G	2	U	boogy man	✓		Long, fat legs & feet	1
104	G	3	L	ghost	✓		Big black man	3
107	B	2	U	ghost	✓		Small one	11

ID	Gender	Culture	Ses	Category	Primary	Additional	Qualitative	Origin of Fears
114	G	3	L	ghost	✓		Black ghost	10
136	B	1	L	Intruder ghost	✓			7
142	G	3	L	Ghost	✓		Afraid it will bite her small ghost	8
145	G	2	M	Monster	✓			7
				Ghost		✓	White thing	
146	B	1	U	Ghost	✓			11
149	G	2	U	Ghost	✓			7

ID	Gender	Culture	Ses	Category	Primary	Additional	Qualitative	Origin of Fears
125	G	3	L	Sleep		✓		
129	B	1	U	Dream	✓			11
132	G	3	M	Dream		✓		
136	B	1	L	Dream		✓		
139	G	3	L	Dream		✓	At night	
142	G	3	L	Night		✓		
145	G	2	M	Bad dreams		✓		
146	B	1	U	Dream		✓	Bad dreams that scares him	
148	G	3	M	Dream		✓	Scares him	

ADDENDUM I10: BEING ALONE

ID	Gender	Culture	Ses	Category	Primary	Additional	Qualitative	Origin of Fears
2	G	2	M	Alone		✓	Alone in room	7
4	B	1	U	Alone	✓		Alone in dark	7
12	G	2	U	Alone		✓	To be forgot at school	
35	B	1	U	Lost/alone	✓		To be left alone at home in the day	7
47	B	1	M	Being alone	✓		Own room	7
64	G	2	U	Being alone		✓	Scared that someone might go to jail and that she will be alone	
129	B	1	U	Being alone		✓		

ADDENDUM I11: SEPARATION FROM PARENTS FEARS

ID	Gender	Culture	Ses	Category	Primary	Additional	Qualitative	Origin of Fears
5	B	1	U	Separated	✓			13
20	B	1	U	Separated		✓		

ADDENDUM I12: MEDICAL FEARS

ID	Gender	Culture	Ses	Category	Primary	Additional	Qualitative	Origin of Fears
12	G	2	U	Hospital		✓		

ADDENDUM I13: PHYSICAL HARM TO SELF

ID	Gender	Culture	Ses	Category	Primary	Additional	Qualitative	Origin of Fears
2	G	2	M	Accident	✓			7
4	B	1	U	Stitches		✓		12
12	G	2	U	Allergy		✓		
28	G	1	M	Noise	✓		As naughty	1
29	G	1	M	Hurt		✓	Does it alot	
30	B	1	U	Hurt		✓		
46	G	1	U	Killing her		✓		
51	G	1	U	Steal her	✓		Someone wants to steal her	7
59	B	1	L	Mom hit him	✓			7
62	G	2	M	Illness	✓		“scared, because she’s not right.”	1
63	B	2	U	Tree fall on him		✓		
70	B	2	U	Fall from roof		✓		
				Dad hit him		✓		
74	G	2	U	Car hit her	✓			12
				Dad hit her		✓	“because it’s sore”	
79	B	2	L	Getting hurt		✓	Take away and kill	
84	G	2	L	Getting hurt		✓	People will push her into warm water	
88	B	3	L	Poison		✓		
89	G	3	M	Being beaten Dad will hurt		✓ ✓	Dad beats her when she makes a noise	
97	G	3	U	Harm		✓	Gets killed	
121	B	3	L	Getting a scoulding		✓		
125	G	3	L	Getting burned		✓	Hot water	
129	B	1	U	Getting a hiding		✓	When naughty	

ADDENDUM I14: INJURY TO OTHERS

ID	Gender	Culture	Ses	Category	Primary	Additional	Qualitative	Origin of Fears
25	B	1	U	Sister hurt	✓		Kicked by horse	7
36	B	1	U	Fire crackers		✓	Big ones	
				Bombs		✓		
62	G	2	M	Shooting		✓	“shoot near them”	
73	B	2	U	Shooting		✓		
87	B	3	L	Violence		✓	Shooting	
112	G	3	L	Fire- /explosion	✓			7
137	G	2	M	Hitting		✓		
139	G	3	L	Baby’s noise	✓		Neighbour’s child	7

ADDENDUM I15: OTHER FEARS

ID	Gender	Culture	Ses	Category	Primary	Additional	Qualitative	Origin of Fears
7	B	1	U	Swim		✓	Cannot see far	13
24	B	1	U	Videos		✓	"Scary" videos	
36	B	1	U	Noises		✓		
				Movies		✓	"Scary" movies	
37	G	1	U	Video		✓	"Scary" video	
42	G	2	U	Cartoons		✓	"Scary" cartoons	
43	G	1	U	Movies		✓	"Bad movies"	
55	B	2	U	Movies		✓	"evil movies"	
56	B	2	U	Dolly		✓	"dolly with the red eyes"	
59	B	1	L	Ghost stories		✓		
69	G	2	M	Being born		✓	"puppies being born"	
102	G	2	U	Scary TV		✓	"ugly stories"	
125	G	3	L	School		✓	To go to school	
				Bath		✓	To get a bath at home	
137	G	2	M	TV		✓	Sees snakes when she watches TV	
141	B	3	L	TV		✓	Seen snakes	
150	B	3	L	TV	✓		Ape on TV	8

ADDENDUM J4: PROBLEM-FOCUSSED AVOIDANCE

ID	Gender	Culture	Ses	Qualitative	Efficacy
10	B	1	U	Lie on bed with teddybear and put blanket over head	3
13	B	1	U	Went away into room	1
15	B	2	L	Hide under bed	1
18	G	2	U	Put blanket over head	1
21	G	1	U	Ran away	3
22	G	1	U	Ran away home	3
31	B	2	L	Put blanket over head	3
33	G	2	U	Hide under blanket	3
35	B	1	U	Didn't tell anyone	1
36	B	1	U	Hide under blankets, didn't tell anyone	1
37	G	2	U	Put head under blankets	1
55	B	2	U	Stood behind mom	1
59	B	1	L	Hide under blankets	2
60	B	2	L	Changed channels	1
68	G	2	M	Ran away and hid herself	1
70	B	2	U	Ran to mom	2
72	B	2	U	Hide under bed	1
74	G	2	U	Ran away on pavement	1
76	B	2	U	Ran away	1
79	B	2	L	Closed door	2
81	B	2	M	Ran away	1
86	G	2	L	Didn't say	2
89	G	3	M	Went home, to bed	3
93	B	2	M	Hide under bed	1
94	B	2	U	Hide in his bed	3
99	B	2	U	Went to mom in bed	1
105	B	2	L	Hide under blankets	1
107	B	2	U	Slept with parents	3
117	B	1	L	Hide his face	1
127	B	3	L	Ran away	2
129	B	1	U	Slept with parents	1
130	G	3	L	Ran away	2
131	G	3	L	Ran away, to mom	1
135	B	3	L	Ran away, to teacher	2
136	B	1	L	Lie with mom	1
138	B	3	L	Ran away, kept silent	3
143	G	3	U	Ran home	1
144	B	3	L	Ran away	2
148	G	3	M	Ran away	3
150	B	3	L	Shut his eyes	1
151	B	3	L	Hide away	2

ADDENDUM J5: SOCIAL / SPIRITUAL SUPPORT

ID	Gender	Culture	Ses	Qualitative	Efficacy
1	G	2	U	Ran to mom	2
6	B	2	M	Ran to mom	1
8	G	1	M	Thought about it and ased for mom	1
11	B	1	M	Went to dad	1
12	G	2	U	Phoned parents, went to grother	1
14	G	1	U	Talked to mom	1
16	G	1	U	Lie with mom	1
19	G	1	M	Went to mom	1
20	B	1	U	Did something	1
26	B	1	U	Ran to dad	1
27	G	2	U	Went to parents	1
30	B	1	U	Pray to God	3
40	B	1	U	"Father Christmas is a very kind man"	1
41	G	1	U	Ran away and it helped	1
43	G	1	U	Told mom	1
45	G	1	U	Called dad	1
47	G	1	M	Called parents	1
48	G	1	U	Told mom	1
50	G	2	U	Tell anybody	1
53	B	2	M	Told friends	3
61	B	2	L	Woke mom and told her	1
64	G	2	U	Ran to mom and told her	1
67	B	2	M	Prayed	3
75	B	2	U	Told mom	1
77	G	2	M	Ran to dad	1
78	B	2	U	Told mom	2
80	B	2	M	Jesus will help him	1
97	G	3	U	Talked to mom	1
100	B	3	U	Tan to teacher	1
102	G	2	U	Told parents	2
103	G	2	U	Ran to mom	1
104	G	3	L	Told mom	3
106	B	3	L	Told teacher	1
108	B	2	U	Ran to dad	1
110	G	3	L	Told friend	1
111	G	3	L	Told mom	2
112	G	3	L	Told mom	1
113	B	3	L	Told mom	1
116	G	3	L	Told mom	1

ADDENDUM K

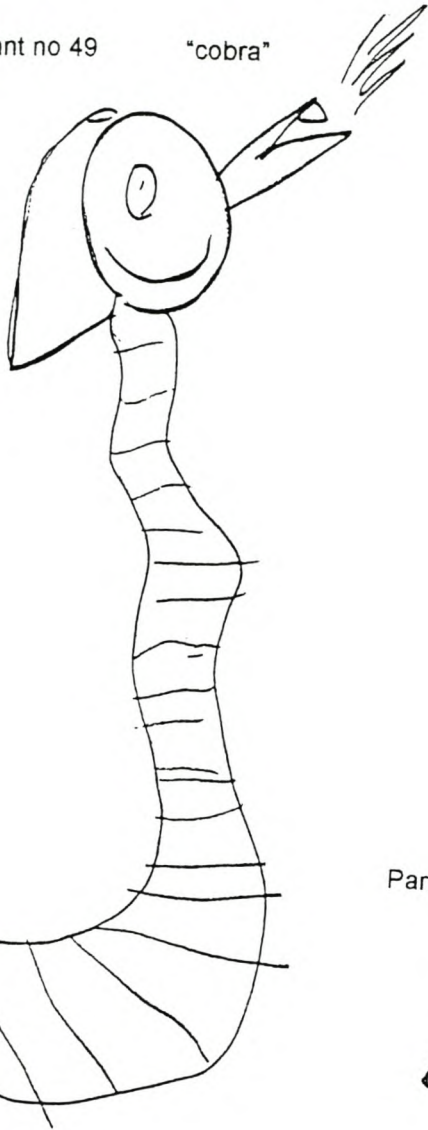
EXTRACTS FROM DRAWINGS

1. Addendum K1: Wild Animals (1)
2. Addendum K1: Wild Animals (2)
3. Addendum K2: Domestic Animals
4. Addendum K3: Insects
5. Addendum K4: Sea / Water Animals
6. Addendum K5: Fantasy Animals
7. Addendum K6: Real People (1)
8. Addendum K6: Real People (2)
9. Addendum K7: Fantasy People (1)
10. Addendum K7: Fantasy People (2)
11. Addendum K7: Fantasy People (3)
12. Addendum K8: Dark, Night, Bad Dreams
13. Addendum K9: Natural Phenomena
14. Addendum K10: Being Alone
15. Addendum K13: Physical Harm
16. Addendum K15: Other Fears

Addendum K1: Wild Animals (1)

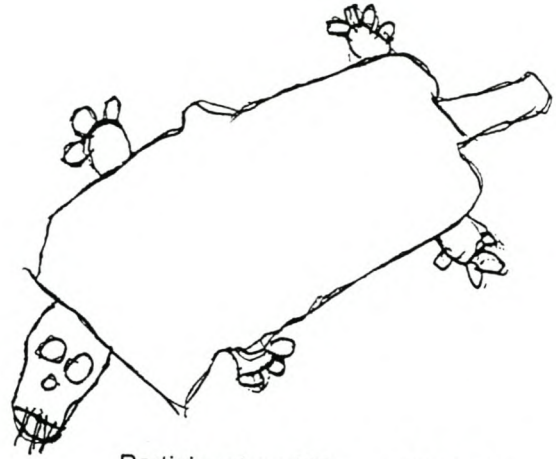
Participant no 49

"cobra"



Participant no 80

"crocodile"



Participant no 138

"snake"



Participant no 152

"snake"



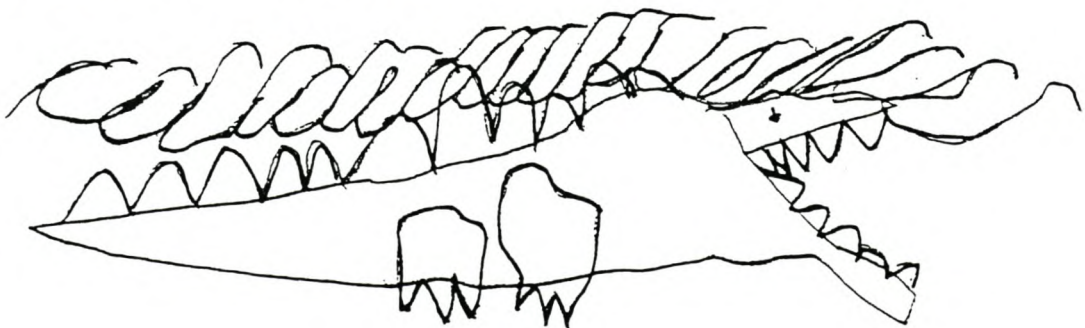
Participant no 96

"snake"



Participant no 23

"crocodile"



Addendum K1: Wild Animals (2)



Participant no 50

"cheetah"

Participant no 60

"lion"



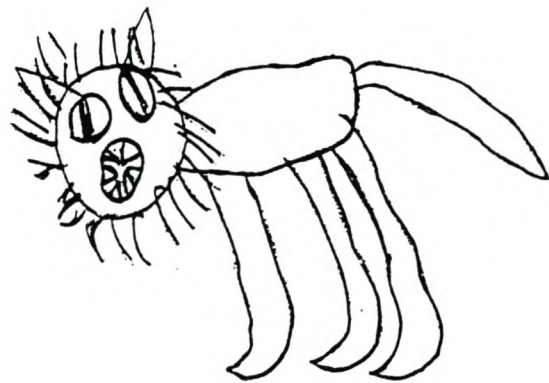
Participant no 55

"lion"



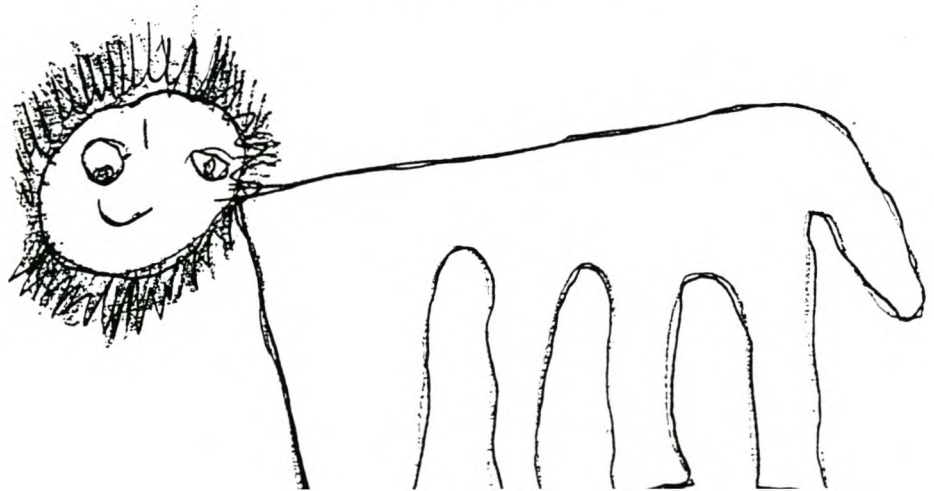
Participant no 13

" a lion roaring"



Participant no 71

"lion"



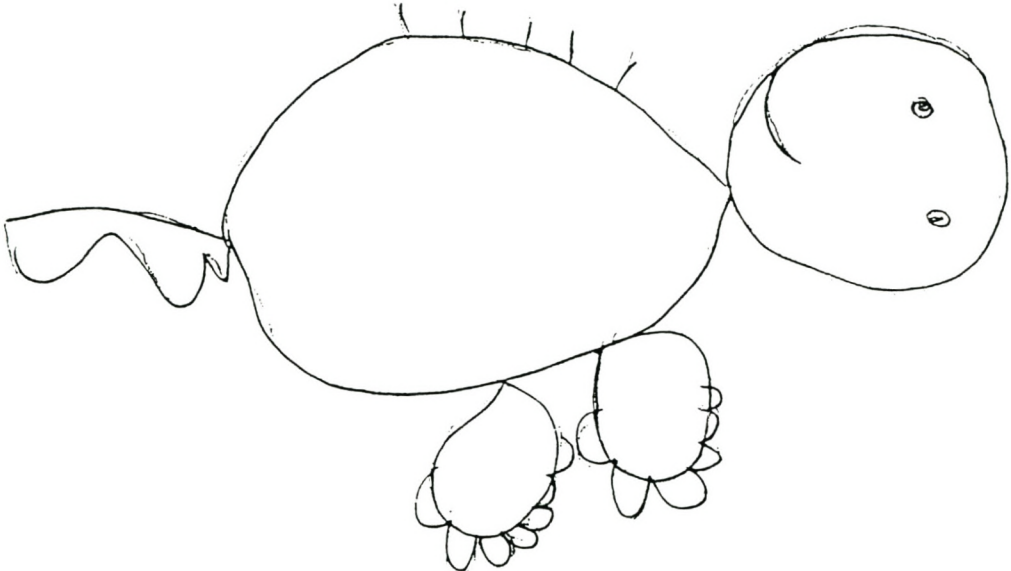
Participant no 60

"wolf"

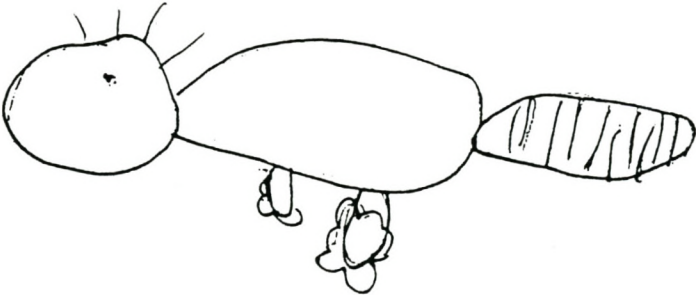


Addendum K2: Domestic Animals

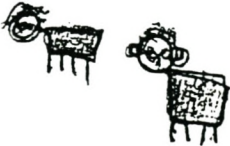
Participant no 69 "cat"



Participant no 69 "a small dog"



Participant no 82 "dog"

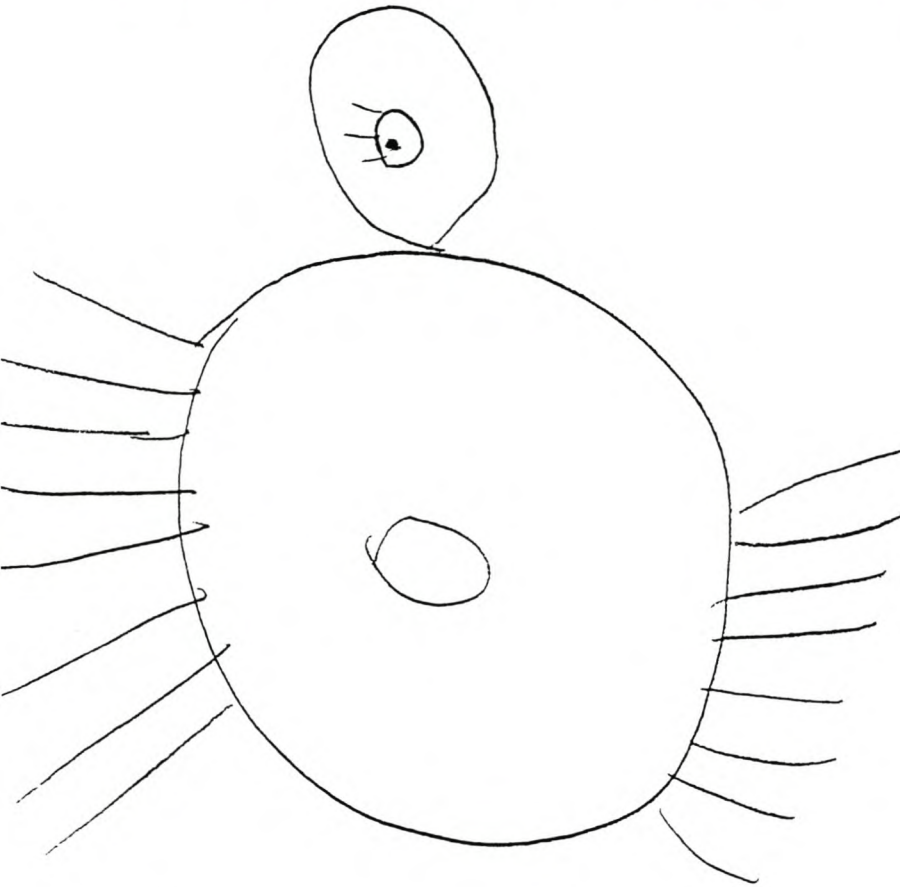


Participant no 82 "cat"

Addendum K3: Insects

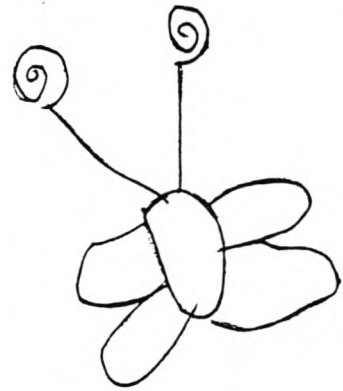
Participant no 49

"a spider.... black one with a red dot"



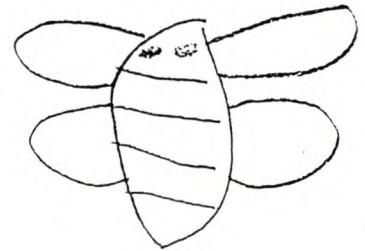
Participant no 41

"a bug"



Participant no 137

"a bee"

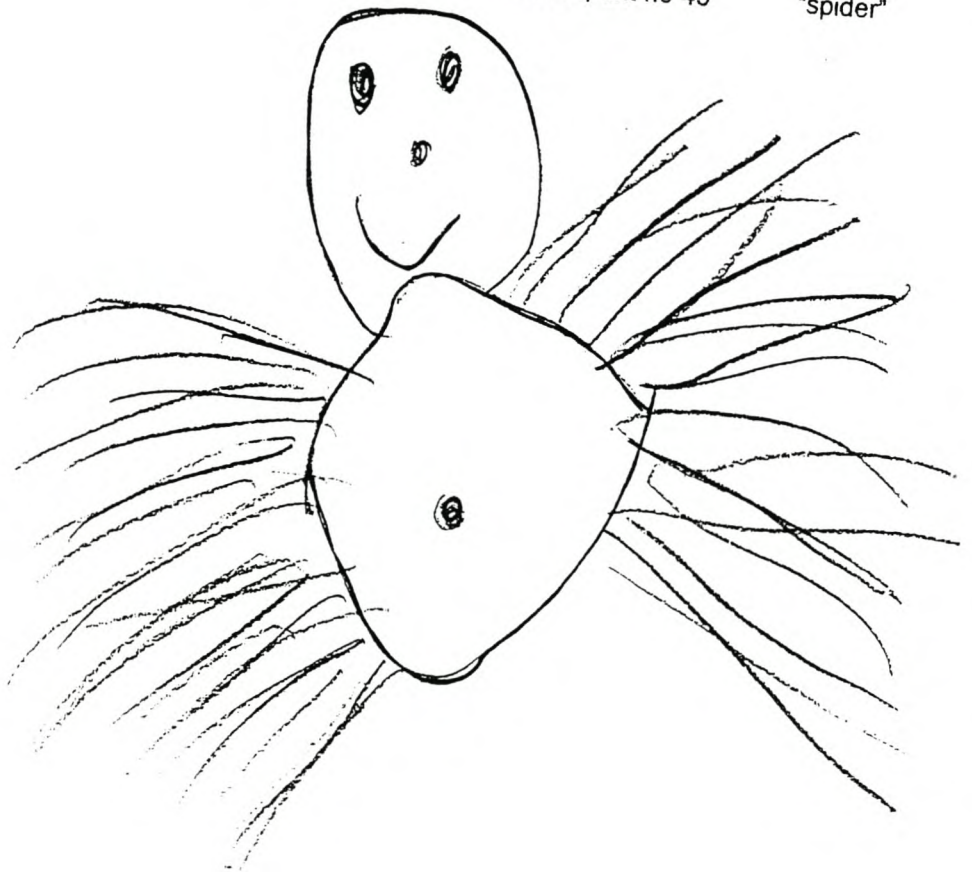


Participant no 45

"spider"

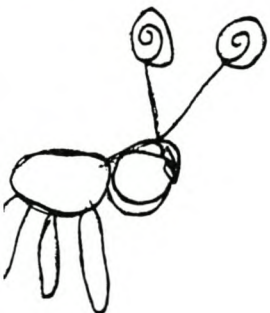
Participant no 88

"spider"



Participant no 41

"another bug"



Addendum K4: Sea / Water Animals

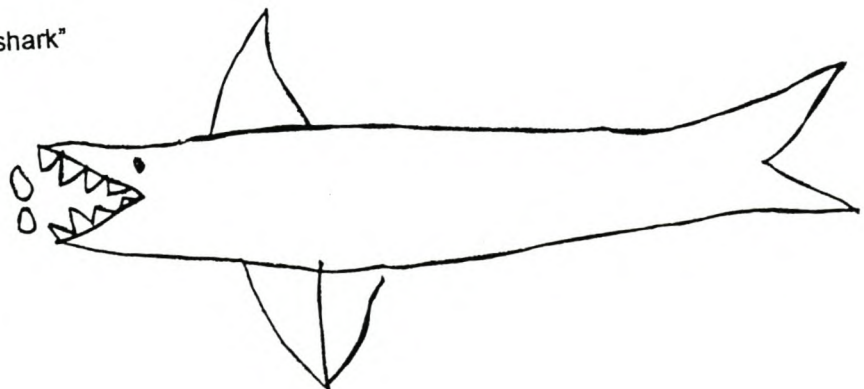
Participant no 45

"a big shark and a normal whale"



Participant no 34

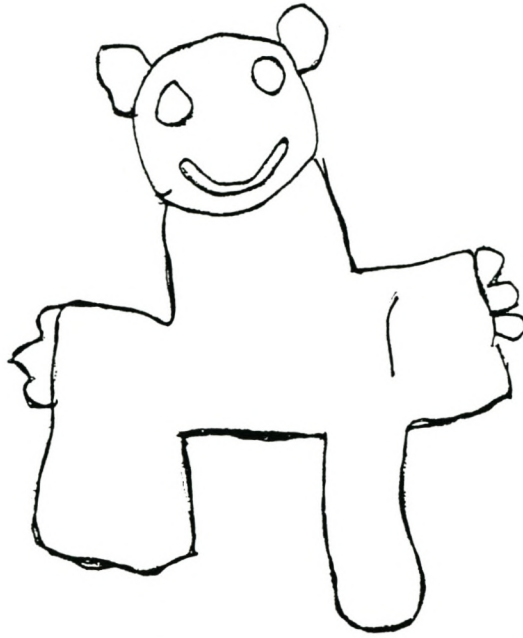
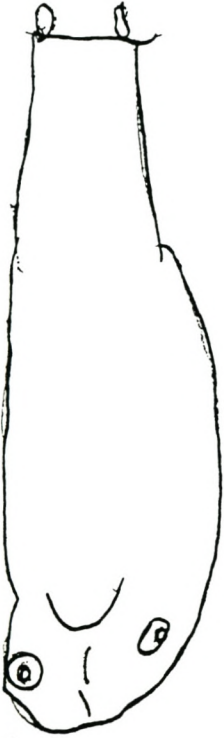
"a mega shark"



Addendum K5: Fantasy Animals

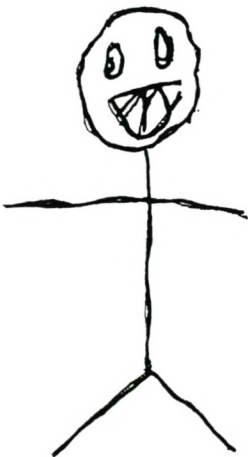
Participant no 119

"a fat, fat dinosaur"



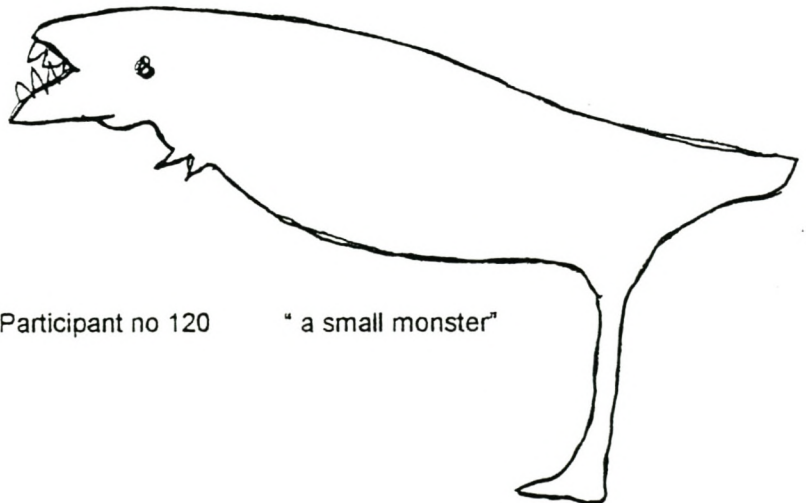
Participant no 9

"an apein the roof and under the bed..."



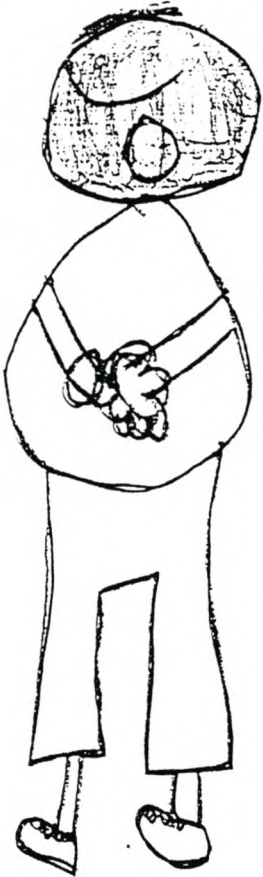
Participant no 120

" a small monster"

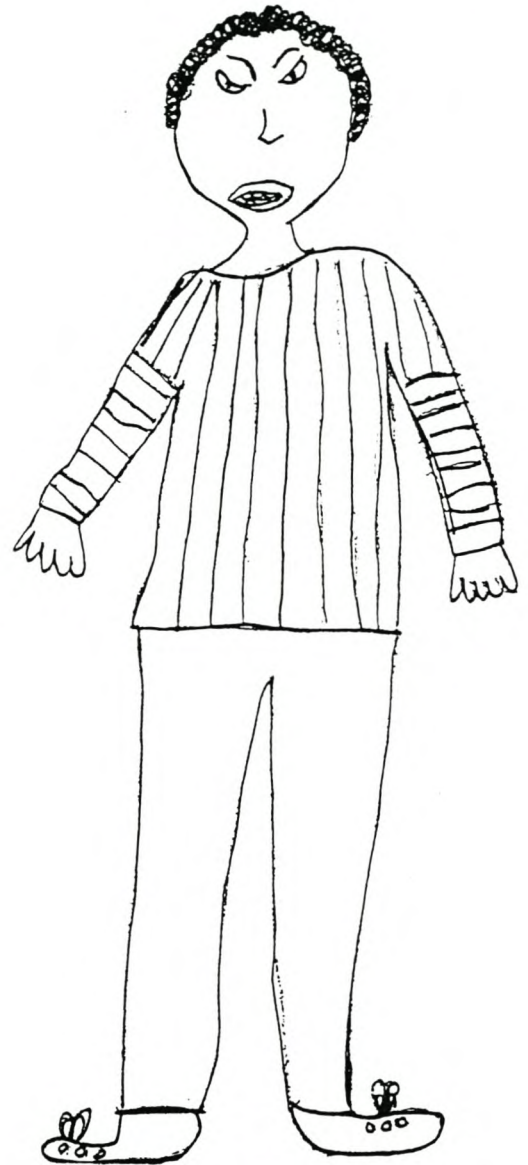


Addendum K6: Real People (1)

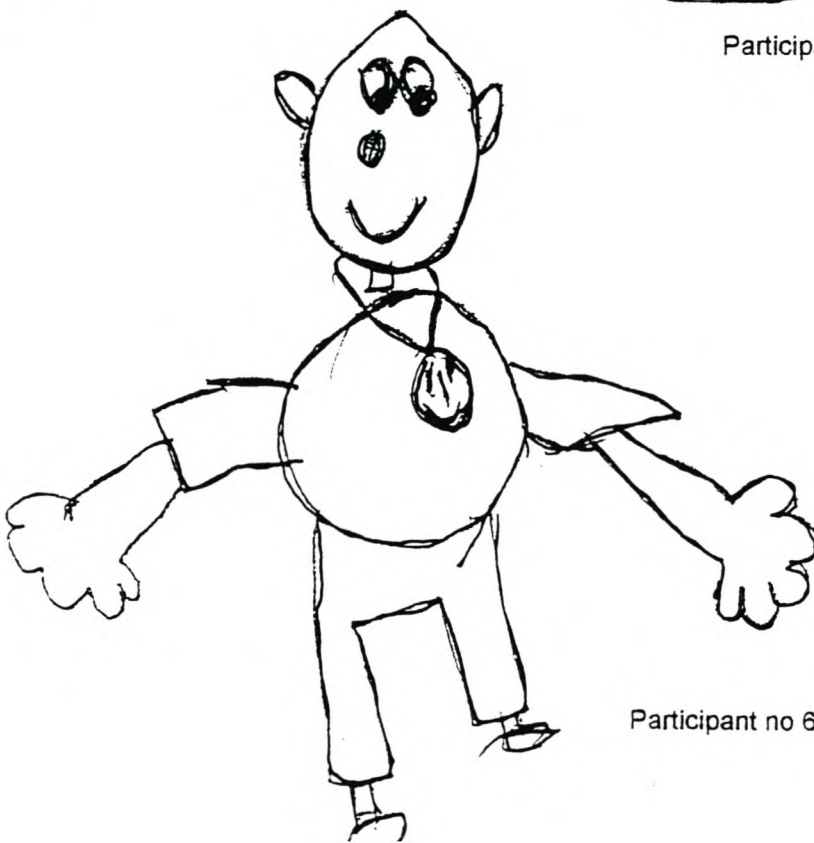
Participant no 64 "a man who wants to kill you..."



Participant no 87 "criminal"

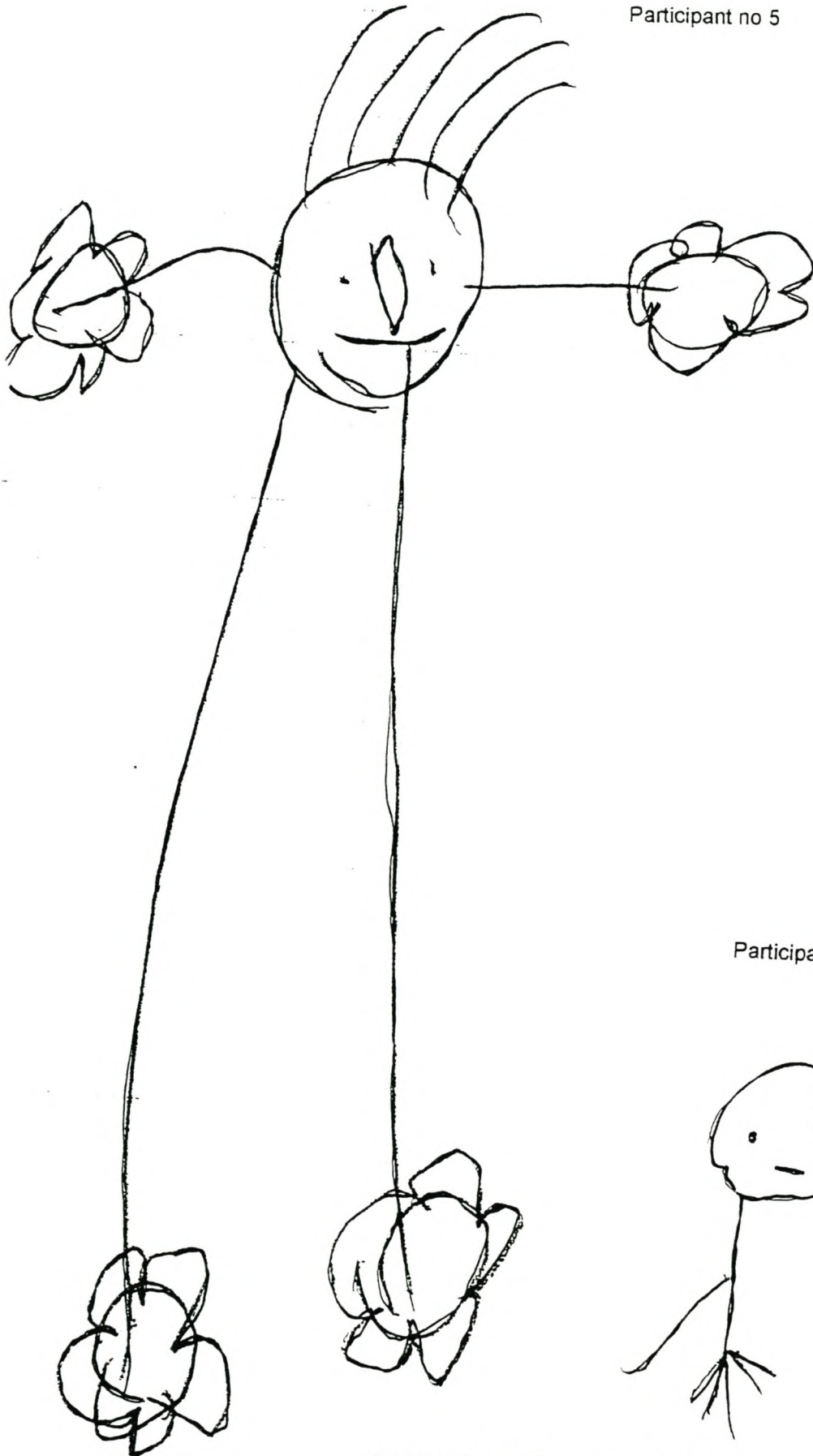


Participant no 46 "Bad guy"



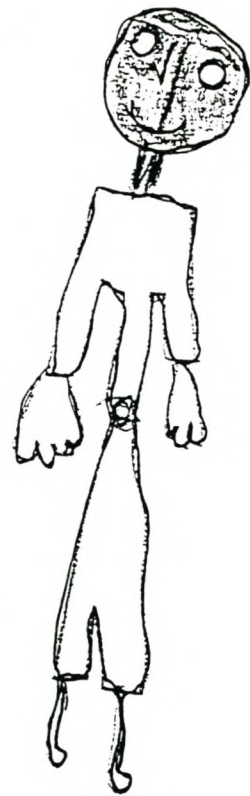
Participant no 64 "criminal"

Addendum K6: Real People (2)



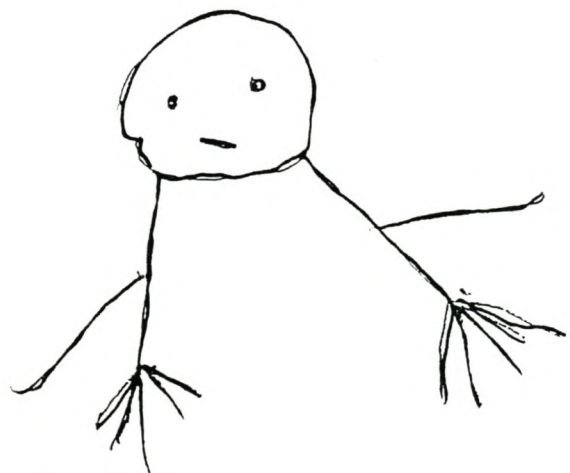
Participant no 5

"father...who boxes.."



Participant no 72

"criminal"



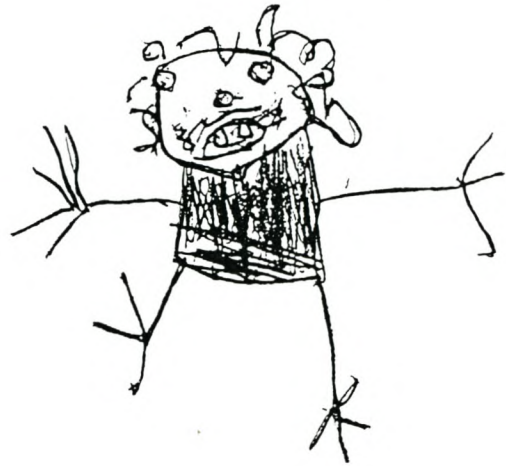
Participant no 140

"a gangster"

Addendum K7: Fantasy People (1)

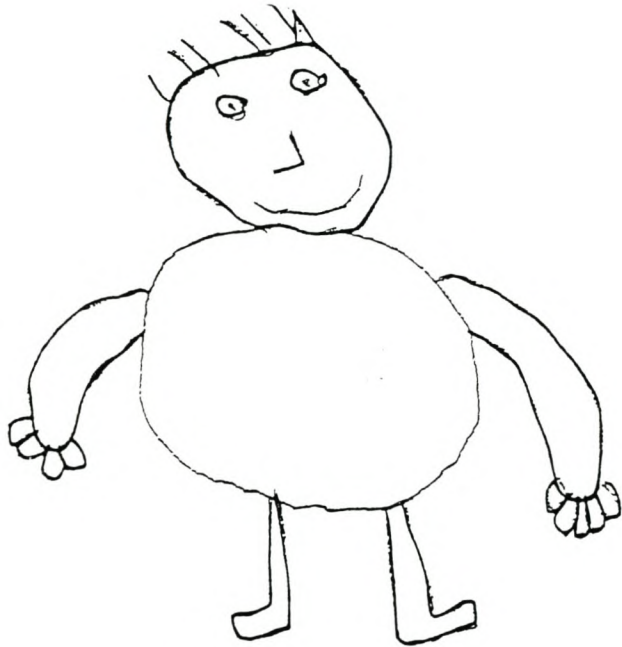
Participant no 98

"a ghost"



Participant no 56

"Thokkeloshe"

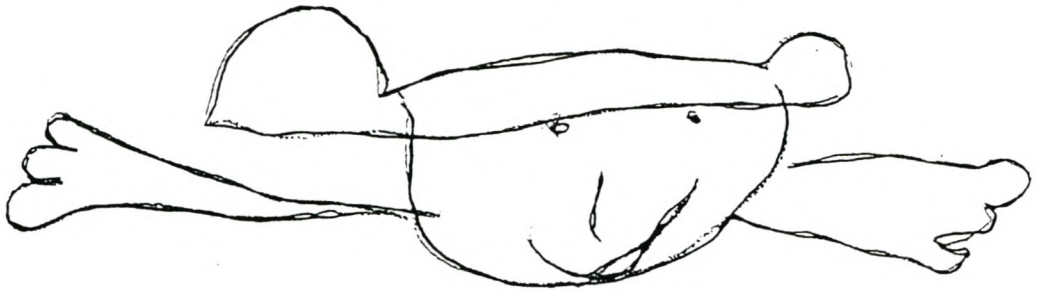


Participant no 145

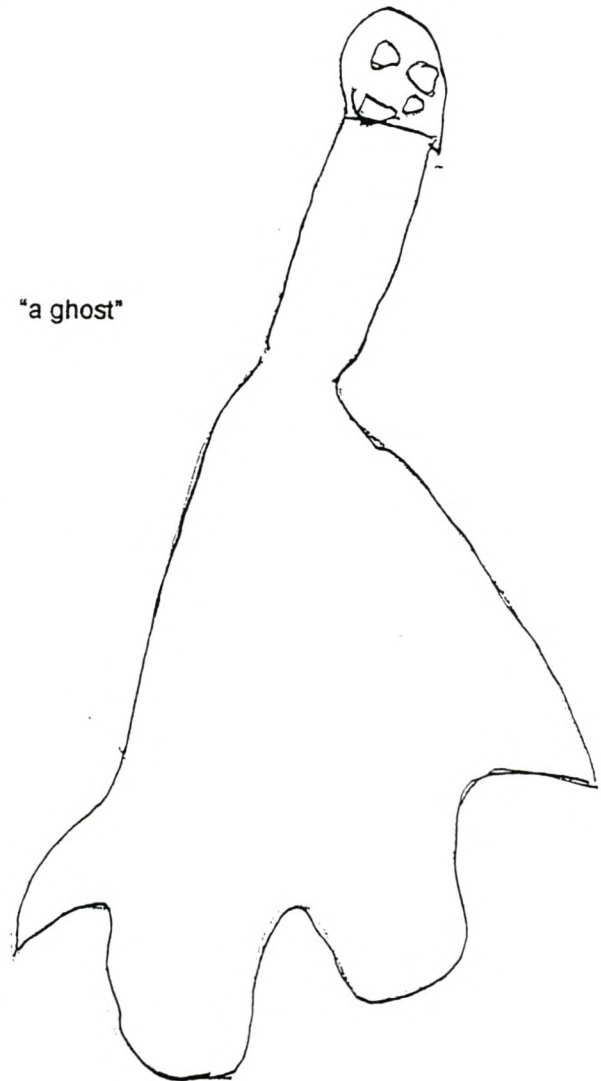
"a monster"

Addendum K7: Fantasy People (2)

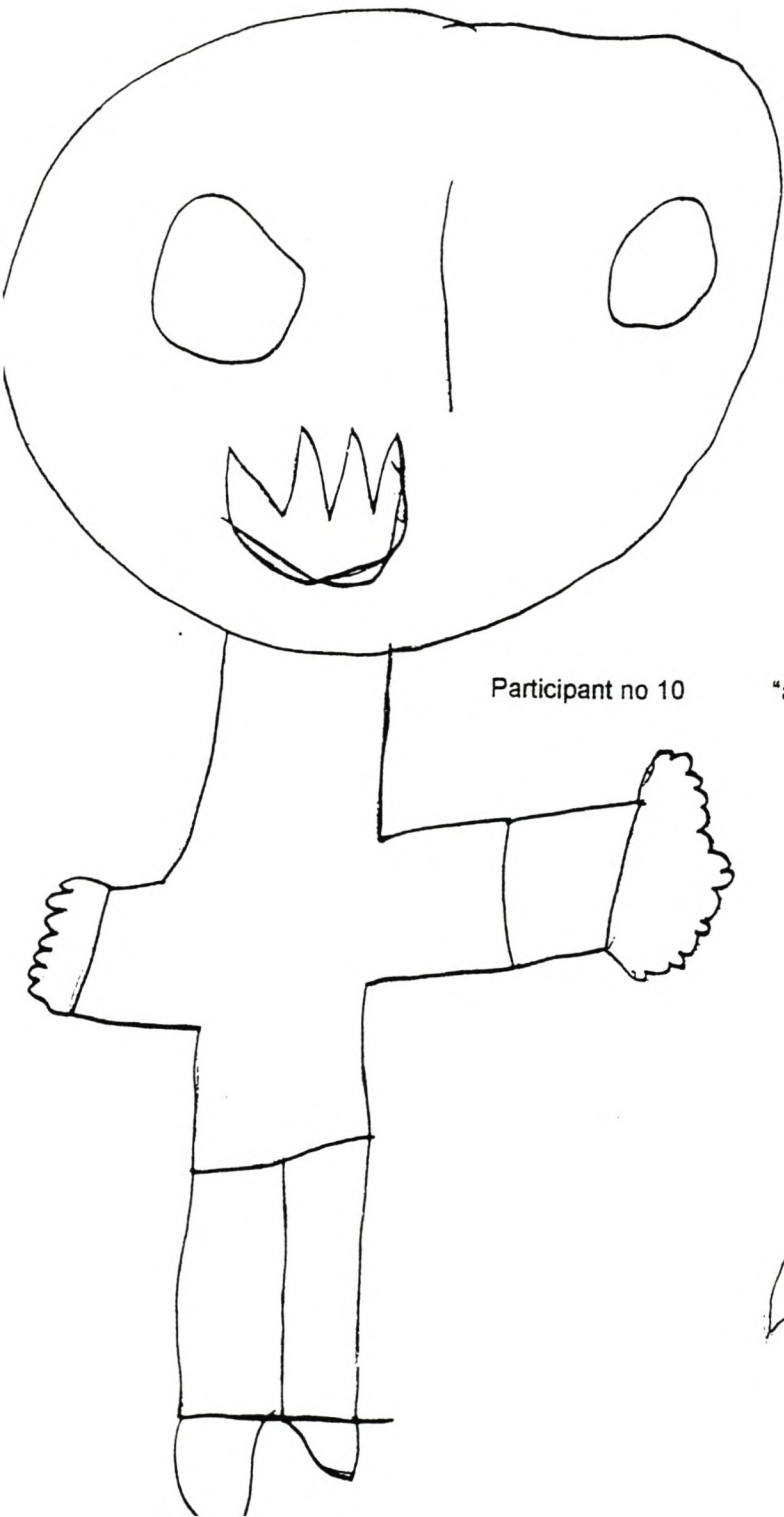
Participant no 107 "a ghost"



Participant no 90 "a ghost"



Participant no 10 "a ghost"



Addendum K7: Fantasy People (3)

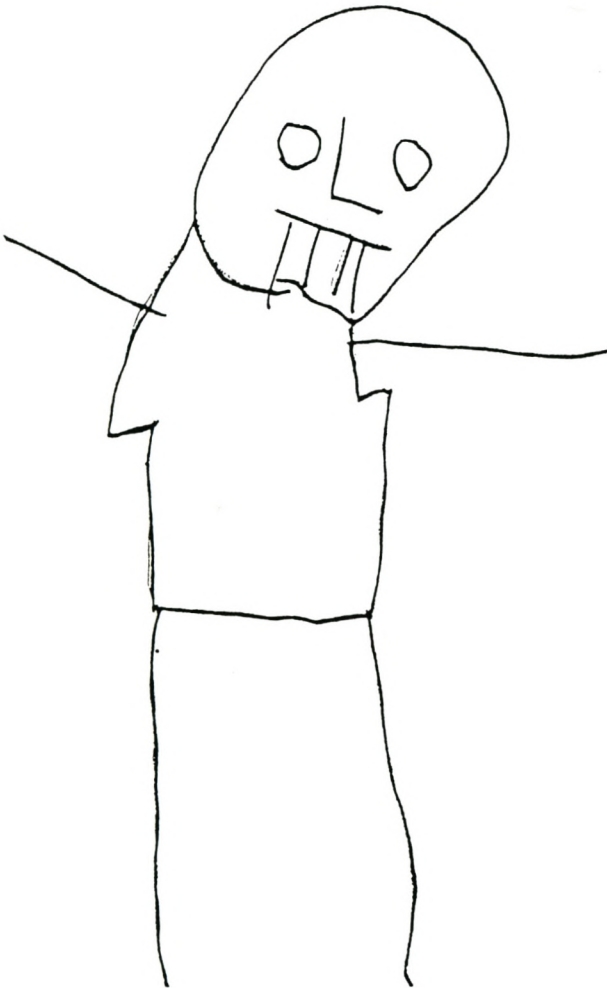
Participant no 79

"decapitated Johnnie"



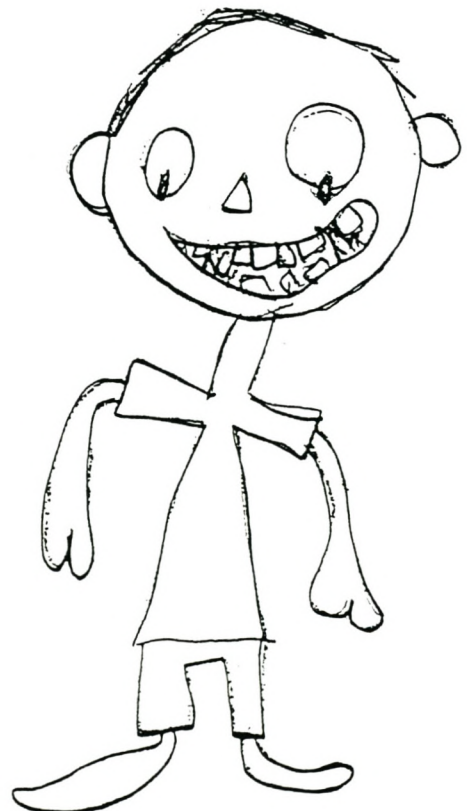
Participant no 10

"cannibal"



Participant no 67

"Dracula"



Addendum K8: Dark, Night, Bad Dreams

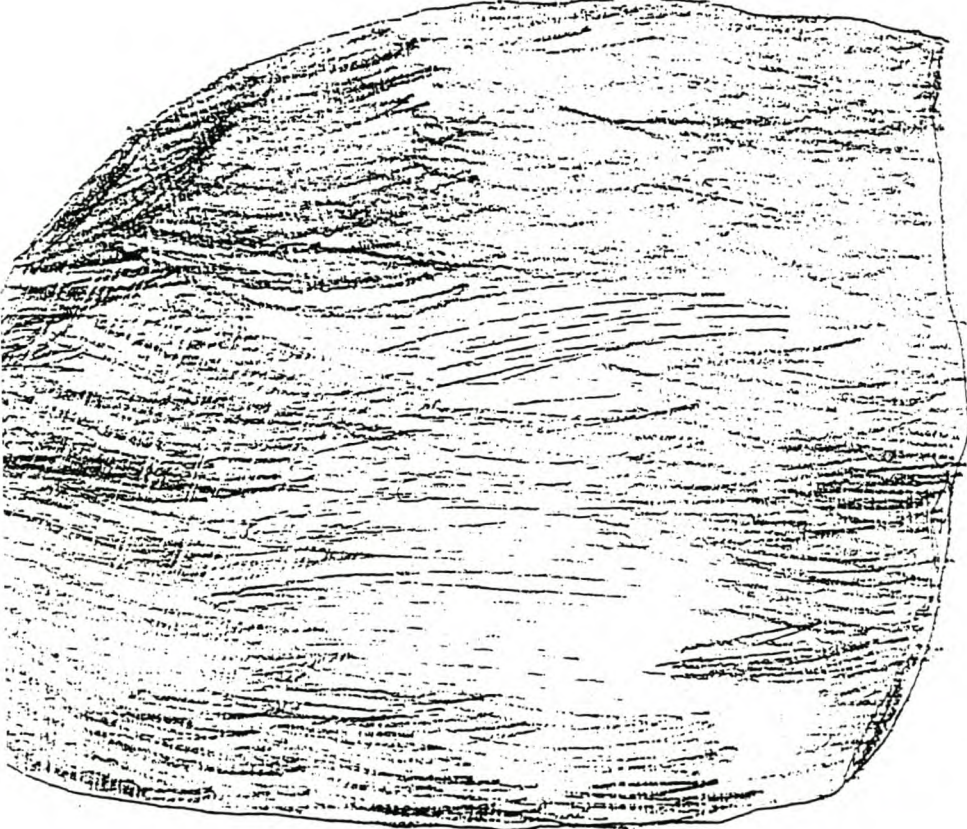


Participant no 19

"the lights going out ...it is dark.."

Participant no 20

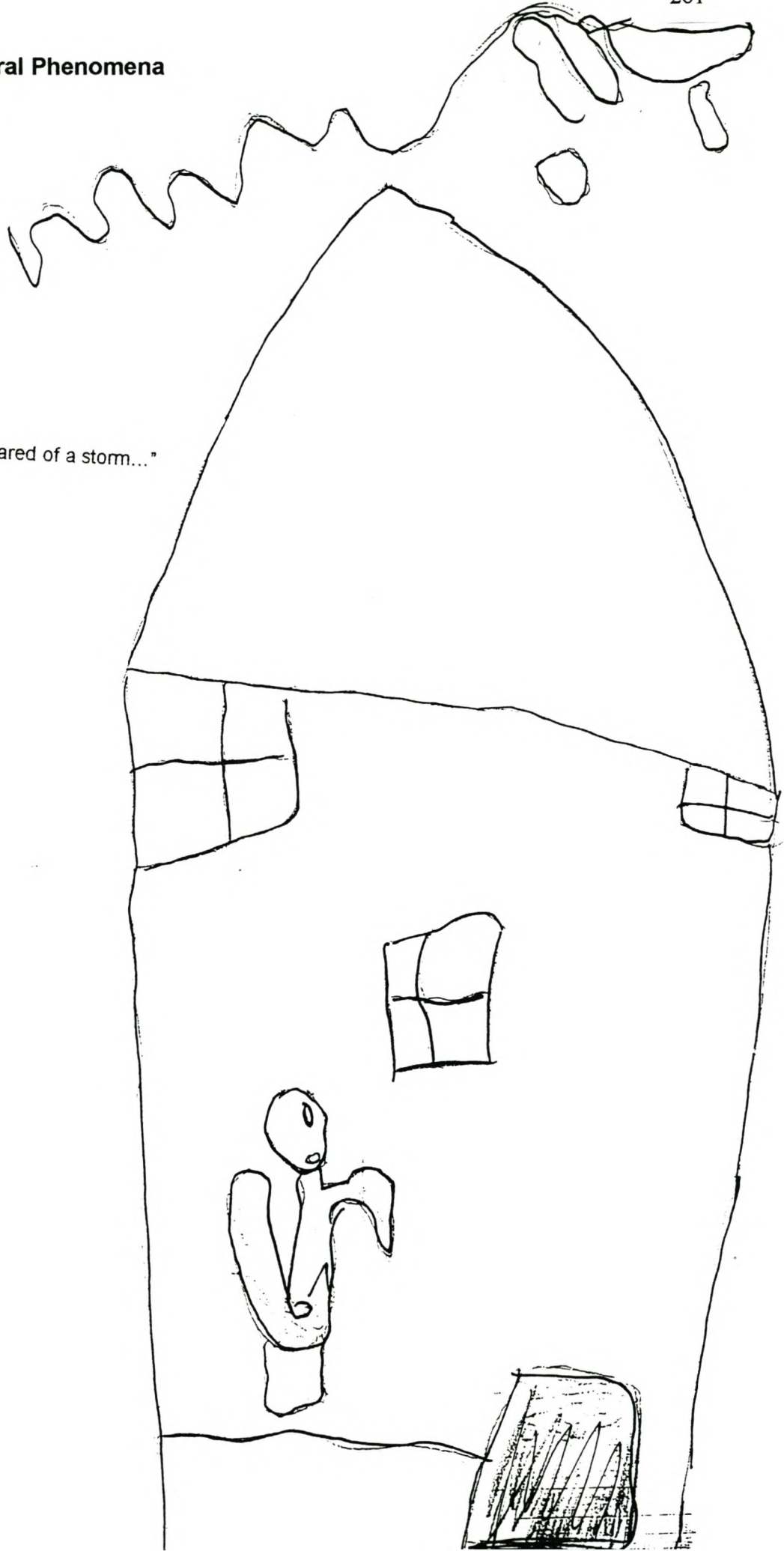
"little boy running upstairs in the dark..."



Participant no 57

"dark"

Addendum K9: Natural Phenomena

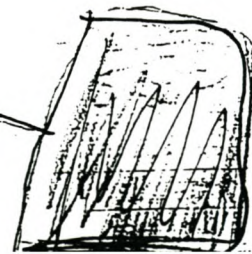
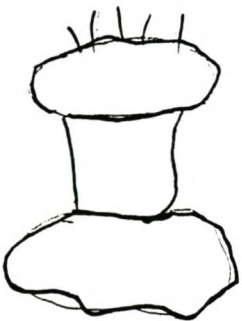


Participant no 92

"M is scared of a storm..."

Participant no 112

"Fire"



Addendum K10: Being Alone

Participant no 64

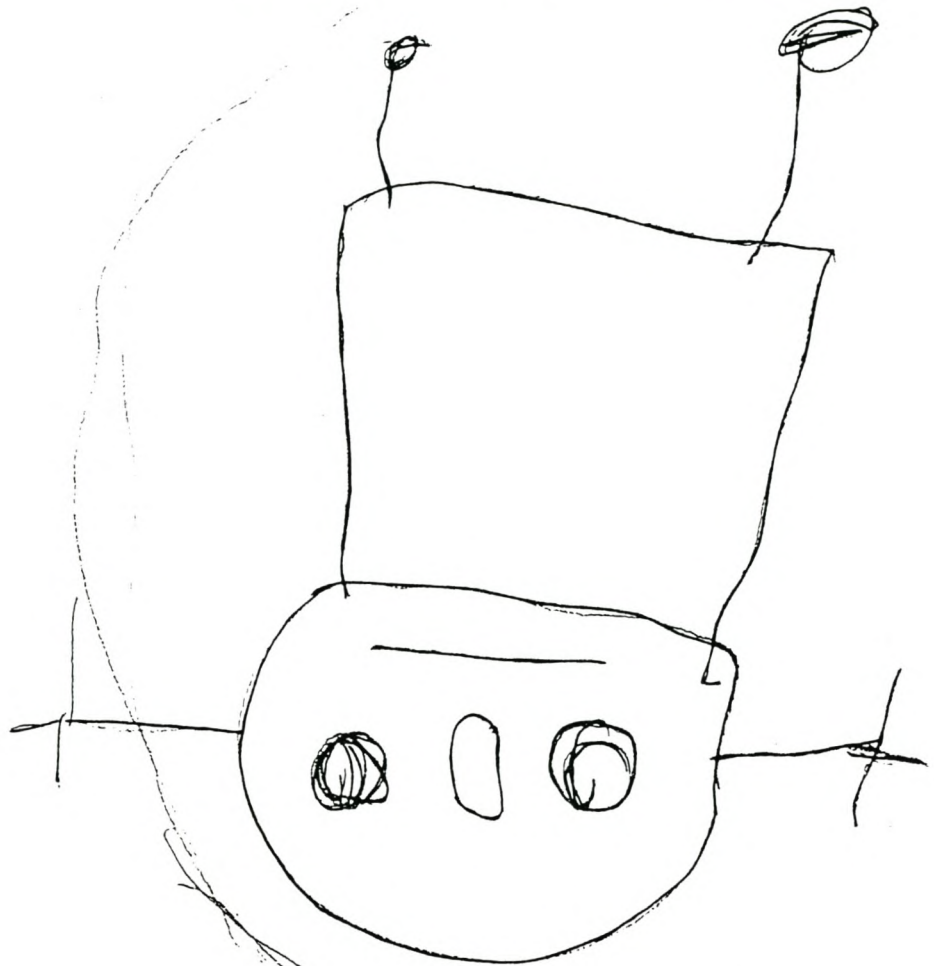
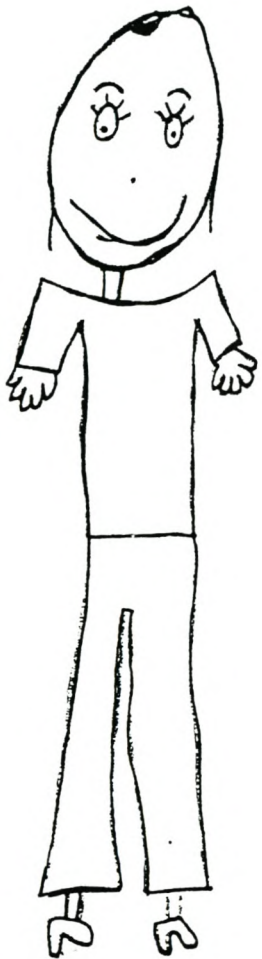
"scared that someone in the family will go to jail and she will be alone..."



Addendum K13: Physical Harm

Participant no 62

"scaredbecause I'm not right..."



Participant no 28

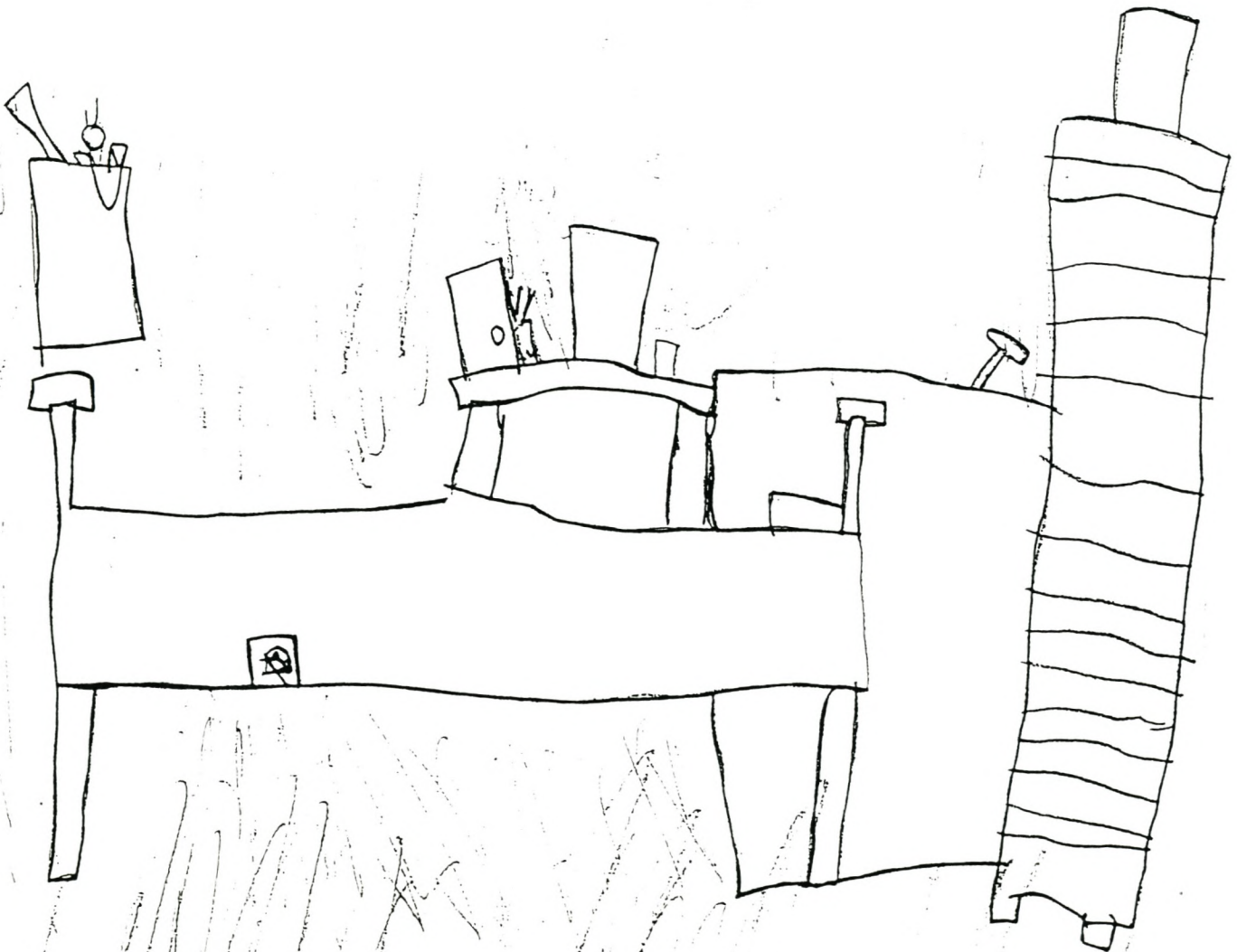
"mom scolding me when I am naughty..."



Addendum K15: Other Fears

Participant no 36

"scary movies"



ADDENDUM L

EXTRACTS FROM INTERVIEWS

- 1. Participant No. 109: Male; black; low SES**
- 2. Participant No. 147: Female; black; low SES**
- 3. Participant No. 148: Female; black; middle SES**
- 4. Participant No. 3: Male; black; middle SES**
- 5. Participant No. 2: Female; coloured; middle SES**
- 6. Participant No. 40: Male; white; upper SES**
- 7. Participant No. 43: Female; white; upper SES**

Participant No. 109 (male; black; low SES)

What is your name?

T....

And how old are you?

Five.

Do you know what it is to be scared of something?

Yes.

Have you been scared before?

Yes.

Do you know what it is that you are scared or afraid of?

A dinosaur.

Are you afraid of a dinosaur?

Yes.

Can you draw a dinosaur?

Yes.

Have you seen that dinosaur?

Yes.

Where?

In Stellenbosch.

In Stellenbosch?

To the zoo.

And what did you do when you saw it?

I looked at the dinosaur.....and the.....and the.....crocodile. And we looked at the snake.

And when you saw this dinosaur, were you afraid of him?

No, I'm not scared. I went like this.....cha!

Oh, you threw him with a stone?

Yes!

So you were`nt afraid of him?

No.

And is there something else that you are scared of?

Yes.

What is that?

A fish, a snake and a crocodile.

Did you see them at the zoo as well?

Yes.

And what did you do when you saw them? Were you afraid of them when you saw them?

The other people were scared.

Do you like stories?

Yes, my brother tells me stories.

Do you have a favourite story?

Yes, the lion.

Do you watch TV?

Yes.

What is your favourite TV program?

Shaka Zulu.

Participant No. 109

"dinosaur"



Participant No. 147 (female; black; low SES)

My name is, what is your name?

A.....

How old are you?

Six.

A, most children are afraid of things at some time in their lives. Do you know what you are afraid of?

A ghost.

Where did you see the ghost?

Next to our house.

What does the ghost look like?

He is black and small.

Can you draw this ghost?

Yes.

Does this ghost live in Kayamandi?

Yes.

What did he do?

He wanted to bite me.

And what did you do?

I ran to my mom.

And what did your mom say?

That I must stay inside the house.

Did it help to stay inside?

Yes, I weren't afraid anymore.

Does this ghost have a name?

No.

Is there anything else that you are afraid of?

A cat.

Where did you see the cat?

At our neighbour's house.

Can you draw the cat?

Yes.

Is it a small or a big cat?

A small one.

What do you do when you see the cat?

I get scared and I cry.

What do you do then?

I go to my mom.

What does your mom say then?

That she's gonna take the cat outside.

Do you feel better then?

Yes, then I'm not scared anymore.

Do you think about the ghost and the cat when you go to sleep at night?

Yes.

Do you tell anyone about it?

I tell my mom.

Is there anything else that you are afraid of?

A baboon.

Where did you see the baboon?

On TV.

What did you do when you saw the baboon?

I told my mom.

What did your mom say?

She said that the baboon can't bite me, because it's just a picture.

Do you watch TV?

Yes.

What is your favourite TV program?

Generations and Days.

Do you like stories?

Yes, my mom tells me stories.

Do you have a favourite story?

Yes.

What is it's name?

Red riding hood and the jackal and the wolf.

Can you tell us this story?

Yes.

Little red riding hood was on her way to her grandma when she met the wolf who was also going to her grandma. The wolf knocked on the door and the grandma asked: " Who is it? " And the wolf said: " It's little red riding hood! " And the grandma opened the door and the wolf ate the grandma and climbed into her bed. And then little red riding hood came and....knock, knock, knock on the door. And then the wolf asked with the grandma's voice: " Who's there? " And then little red riding hood went in.

That's a very nice story. Thank you.

Participant No. 147

“ a ghost “ and “a cat”



Participant No. 148 (female; black; middle SES)

My name is, what is your name?

T.....

How old are you, T..?

Six.

Do you know that a lot of children are afraid of things?

Yes.

What are you afraid of?

Nothing.

Nothing?

No.

OK, this little girl (the picture) is afraid of something. What is she afraid of?

She`s not afraid.

And your friends, are they afraid of something?

They are afraid of a snake.

Where did you see the snake?

At the zoo.

Were you afraid when you saw the snake?

No, I was not afraid, but my friend was scared.

And the little girl, is she afraid of the snake?

No, she`s not afraid.

And what is the girl`s name?

Nolundi.

Can you draw the snake for us?

Yes.

When you saw this snake, were you afraid of him?

No.

What did the other children do when they saw this snake?

They were frightened.

And what did they do?

They said: " Joeeee!"

Is there anything else that you are afraid of?

No.

Is there something in Kayamandi that you are afraid of?

A ... dog..... a small dog.

Can you draw a dog?

Yes.

Where did you see this dog?

At our neighbours.

And what do you do when this dog is barking at you?

I run away.

Where do you run to?

To our house and my mom.

What do you tell your mom?

I tell her that the dog is chasing me.

And what did your mom say?

Oh dear, my child, just sit here. Then I feel better.

Do you think a lot about dogs?

Yes.

And at night, do you dream about the dog?

Yes.

What do you do then?

I tell my mom.

And what does your mom say?

That I like to dream.

Is there anything else that you are afraid of?

No.

Do you watch TV?

Yes.

And which program do you like most?

Isidumo.

And do you like stories?

Yes.

Does your mom tell you stories?

I watch stories on TV.

Can you tell us a story?

Yes. My grandma saw that I was ill and she told me to go and sleep, because she is going to take me to the clinic. She dressed herself and when we arrived at the clinic, one of the nurses came to us. They took me to the doctor and gave me two injections, one on each arm. They gave me medicine and then we went home. When we were at home, my grandma said not to play outside, because it's too cold. I had to lie in my hot bed and my grandma gave me some medicine and food and then she went to fetch some water. When she came back, she put on the stove for me to get warm. She asked me how I felt and I said I felt better. She said I can't go outside, I have to stay in the house. She gave me my blanket and my slippers and I sat beside the stove. When it was dark, I went to sleep with my grandma, but she gave me some medicine before we went to sleep. During the night, my grandma woke up and saw one of the children jumping through the window. Grandma went out to look for the child. She found him outside.

Does your mom tell you stories?

No.

Does grandma tell you stories?

Yes.

Do you stay with your grandma or your mom?

I stay with my mom.

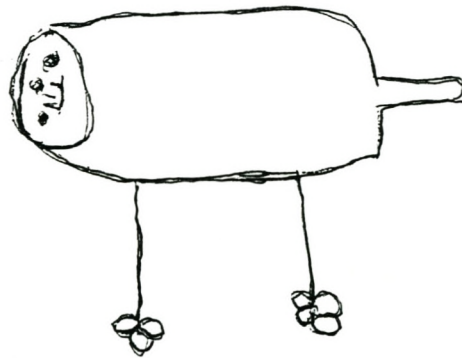
Did you enjoy telling this story?

Yes.

T....., thank you very much.

Participant No. 148

“ a snake” and “a dog”



Participant No. 3 (male; white; middle SES)

R...., do you know that all of us get frightened of things sometimes? Children are also afraid of certain things. Do you know what you are afraid of?

A lion.

A lion?

Yes.

Can you draw a lion?

No.

Tell me, have you seen a lion before?

Haven't seen one anywhere.

Nowhere?

Uh – huh.

Now why are you scared of him?

Because I'm afraid he'll eat me.

Really?

Uh – huh.

And then when you get so afraid, what do you do?

Then I run away.

Where do you run to?

Up in a tree.

Really? Then you climb out the tree?

Uh – huh.

And does it help?

Yes.

And tell me, is there anything else you're afraid of?

Yes, a snake.

A snake?

Uh – huh.

Can you draw me a snake?

Yes.

Tell me, where did you see the snake?

At the game park.

At the game park?

Yes, and at the snakepark. It was a small snake that laid there by the road, but my dog didn't eat him, but I took him.

The snake?

Yes! It's a real snake, but he's dead.

O! The snake was dead.

I stabbed him to death.

With what?

With a knife.

Wow but you're brave! And were you still afraid?

Uh – huh.

And then, did you touch the snake?

Yes, but there has still just come blood out of him.

Really? Tell me, do you still think of this snake?

Uh – huh.

Was it a big or a small snake?

A small snake. His mom ran away.

Really?

His mom was afraid of the car. The car drove over him and killed him.

Oh! And tell me, R..., is there something else you're afraid of?

No.

Nothing else?

Just a crocodile.

A crocodile? Have you seen one?

No.

Then where do you hear of the crocodile?

At the game park. He hid in the bushes, but I didn't see him. I just saw his mouth.

Was he in the water?

No, he was in the grass. You also get this small crocodiles.

Oh. Because they're babies, hey?

Yes.

And tell me what did you do when you were so afraid of him?

And then he didn't see me and then he looked at the bears.

Oh, then he looked at the bears?

Yes, next to the one bear there is no more bears.

Really ?

Uh – huh. Today is my dad's birthday. I'm having my birthday after my dad.

When is your birthday?

I don't know.

But one of these days?

Yes.

Oh, but that's nice! Now tell me, is there anything else you're afraid of?

A bulldog.

Did you see one before?

No.

Never?

I've seen a picture of one.

And does it look like a dangerous dog to you?

Yes.

And what do you do when you are afraid of the bulldog?

But if he chases me, then I run away up in a tree. But he is too slow and I am fast.

Oh, it sounds to me as if you can climb a tree well.

At the school where the other lady come to fetch me, then there is such a tree... then I climb him...then the children can't know where I am.

You're good! Then you're surely very swift.

Uh – huh.

R, do you like stories?

No.

Don't you like stories?

I just like a Bible story. I have a Bible story book.

Do you want to tell the story?

No, I can't remember it.

Can you remember the story's name?

No.

Does mommy and daddy tell stories?

Just my mom.

And do you like watching television?

Yes.

And what's your favourite TV programme?

Uhmmm....Pokemon. Pokemon has such a round thing. I still have it in my mom's car.

Really?

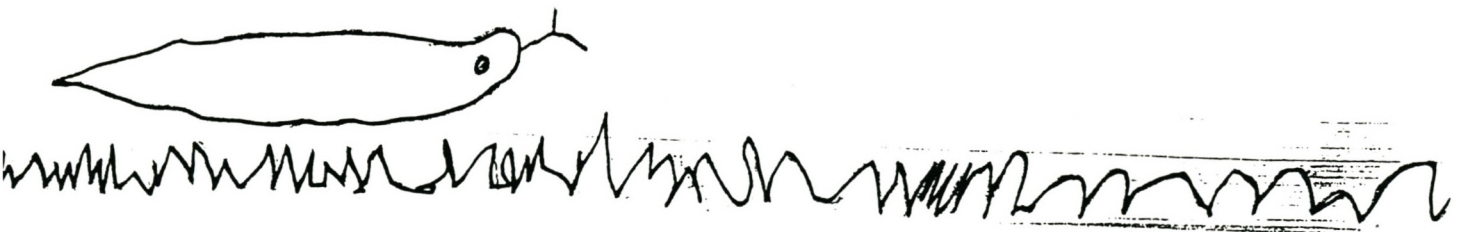
My mom drives a white car.

That's nice. Is there anything else you would like to draw?

No.

Participant No. 3

“ a snake”



Participant No. 2 (female; coloured, middle SES)

E..., do you know that all people are afraid of things sometimes, right?

Yes.

All children are afraid too. What are you afraid of?

If someone makes a sound like a lion in the dark.

Like a lion in the dark? Has someone done this to you before?

Yes.

My goodness, and then, what did you do?

I tell my mom and then she gives my friends a hiding.

So it is your friends that do this to you?

Yes.

Are you afraid of something else?

When I'm alone in my room at night and nobody is there and I must go to the toilet.

Oh, what do you do then?

Then I sleep and I wake up and I cry and open the door and go to my grandma. Then my mother is there and she closes the door.

Tell me, do you sleep alone in your room?

Yes.

And grandma sleeps there too?

Yes.

And does it help you when you go to grandma?

Yes.

What does grandma tell you then?

Grandma says I must close the door when I'm alone and not leave it open like that.

So, at night when you go to sleep you must close the door so that you won't get frightened, right?

Yes.

What other things do you think of when you're lying there? What are you afraid of?

If I have to walk alone at night....say for instance I have to walk to my grandma and a thief catches me.

Does mommy also tell you to be careful in the dark?

Yes.

And are there any other things that you're afraid of?

Yes.

Like what?

If I have to go home alone and if I go through the door then a thief waits just as I go through the door and then he catches me and drives away with me.

So you are afraid of a thief, right?

Yes.

And tell me, did it ever happen to anyone you know?

Yes, to my brother.

And what did you do?

We called the police and they found him.

Wow, and nothing happened to him?

Yes, nothing happened to him, they just gave him drugs.

Goodness! Now then, how did it happen? Do you know how it happened?

No.

How old is your brother, E..?

He is still a baby.

But that is a terrible thing to go through. And you all had a big fright, right?

Yes, we had a big fright and then we looked after him.

Were you with other friends when it happened?

Yes, I was with my mom and dad.

Oh, so your mommy and daddy were with you..

Yes.

Now tell me, what are you the most afraid of?

If I get hit by a car.

If you get hit by a car? Can you make a drawing perhaps?

Yes.

Tell me, have you seen someone get hit by a car before?

Yes.

Who was it?

Some other girl.

Where did it happen, E...?

That day when we walked to the shop, then she got hit by a car.

Did she get hurt very bad?

Yes, her leg had to be cut off.

Was it long ago or when did it happen?

Long ago.

E..., did you talk to anyone about it then?

Yes, with my mommy and my daddy.

And did it help you, the talking?

Yes.

Do you still think about it often?

Yes.

And what do you do then?

I go to my bed and then I cry.

Do you tell mommy or grandma to comfort you perhaps?

Yes.

And does it help when they comfort you?

Yes.

E..., is there anything more that you would like to draw?

Yes.

Do you want a new paper?

Yes.

O.K. *You can draw anything you want. What is it?*

A hobo.

Where did you see this hobo?

There where we went to the shop. He asks people for money.

And do you get frightened of this hobo?

Yes.

And what did you do then?

I hold tight to my mommy's arm

And are you afraid when you walk alone and you see the hobo around there?

Yes.

And do you think of the hobo?

Yes.

E..., do you like stories?

Yes.

Which story do you like most?

Little Red Ridinghood.

Can you tell us the story of Little Red Ridinghood?

One day there was a girl and her name was Little Red Ridinghood. Then it was her birthday and her grandma came to visit her. Then her grandma baked her a birthday cake and she gave her a red 'mutton'. She liked the red 'mutton' very much. Then grandma was in her house and someone knocked at the door. And grandma said: "Who's there?" And then the wolf said: "It's Little Red Ridinghood. I bought some food for grandma." Then wolf ate grandma. And then he put on grandma's clothes. Then Little Red Ridinghood arrived and wolf said: "Who's there?" And Little Red Ridinghood said: "It's Little Red Ridinghood, grandma." And wolf said: "Come in." And Little Red Ridinghood went in. And Little Red Ridinghood asked: "Grandma, why are your eyes so big?" "So that I can see better, my child." "Grandma, why are your ears so big?" "So that I can hear better, my child." "Why is grandma's nose so big?" "So that I can smell better, my child." "And why is grandma's mouth so big?" "So that I can eat you better!" Little Red Ridinghood got a big fright and she saw that it was wolf and he swallowed her. Not long after that a woodpecker came and he cut-cut the wolf's stomach open while he was sleeping. And then Little Red Ridinghood and Grandma came out of the wolf's stomach and Little Red Ridinghood and Grandma ate grandma's food.

That's lovely. Does grandma tell stories?

Yes.

And mommy?

Yes.

And daddy?

Daddy sits by the fireplace and reads stories to me.

Oh, but that is wonderful. And tell me, do you like watching TV?

Yes.

Which TV programme do you like most?

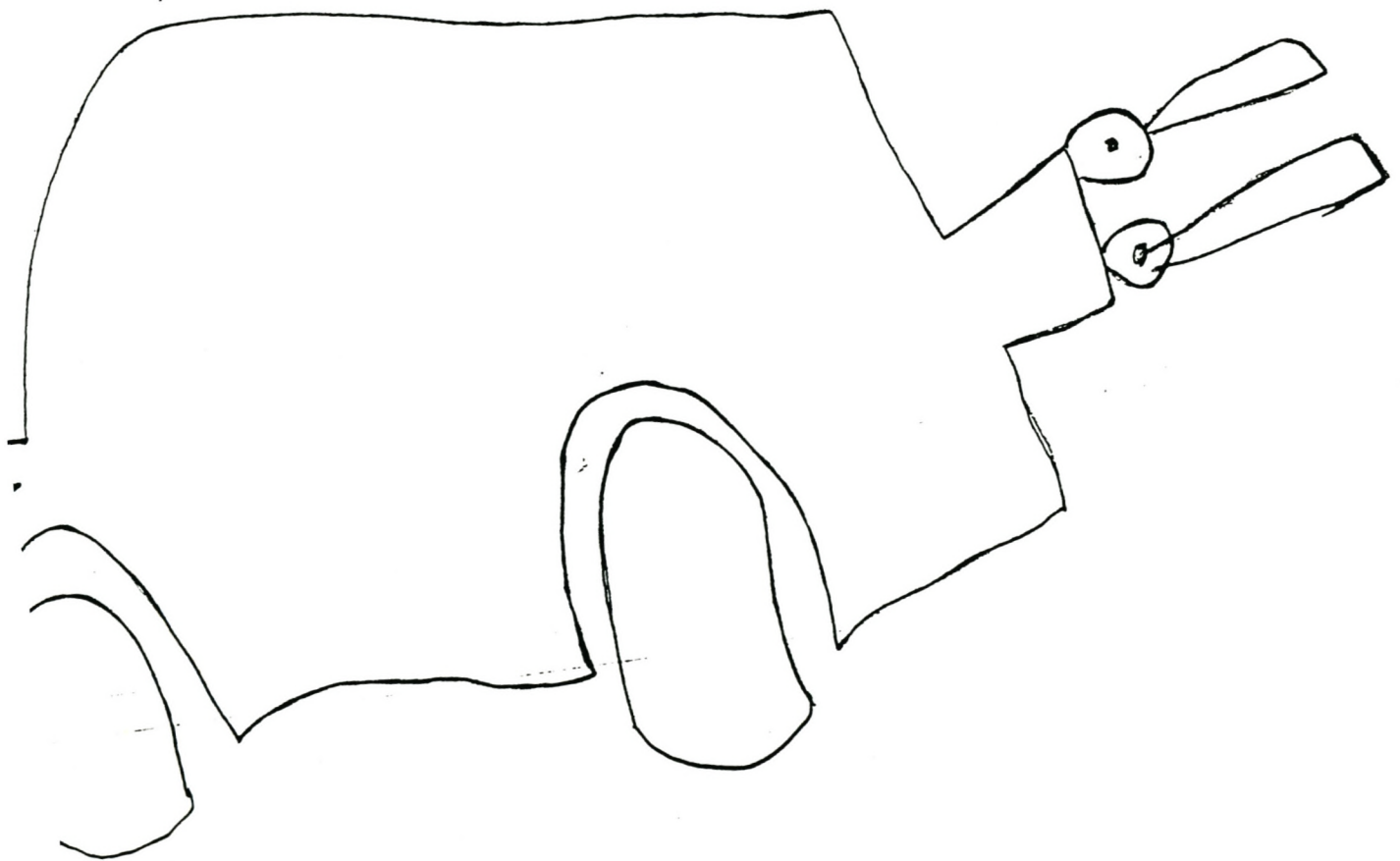
Children's programmes.

And which children's programmes, E...?

Winnie the Pooh and Small Kids.

Participant No. 2

“ a car”



Participant No. 40 (male; white; upper SES)

What is your name?

A....

How old are you?

Six.

Tell me, do you know what it is to be scared of something?

It feels like you`re getting frightened.

And do you know what you are scared of?

A giant.

A giant?

Yes, but I know they don`t exist.

Can you draw a giant?

Yes.

You can draw a giant for me now.

(He draws.)

Have you seen this giant?

No, I just drew him.

OK, but why are you scared of him?

Because they`re very big....they`re very, very big. That`s why I`m scared of them...and they can eat you.

Can they eat you?

Yes.

Who told you that?

I know that.

Oh.

Giants can smell where you are.

Hmmm.

That`s all.

OK.

I can now listen to both of those. (Pointing towards the tape recorder.)

OK. (*Listening to what he said.*)

Do you know of anything else that you are scared of?

Uhhh, that`s all.

OK.

I`ll tell it into the both of those. (Pointing towards the tape recorder.)

OK. (*Speaking to the tape recorder.*)

Do you know of anything else that you are scared of?

That`s all.

Only giants?

Hmmm.

Nothing else?

Uh-uh, I`m not scared of a lion.

OK. *Have you seen a lion?*

I`ve seen father Christmas in real life.

Where?

At my father`s work.

Oh.

I`d like to draw a picture of him!

Anytime.

Ho – ho – ho!

Is that father Christmas?

He sometimes does that.

OK.

I`ll use another one.

Yes, that`s too big again. You must remember to start there so it`s not too big again. (He draws another father Christmas, because the previous one was too big for the paper.)

Do you like stories?

Stories?

Yes.

Yes.

And do you have a favourite story? A story that you like most?

Uhhh, no.

Nothing?

I like everything.....all the stories...very much. Some I don't like.

OK, but can you think of one you like?

Uhhh.....Jack and the beanstalk.

Yes, there's a giant in that story, isn't there?

Yes, and I like Batman.

Yes?

And also Superman...and I also like..... Batman and Robin.

Yes?

And I also like Beauty and the Beast.

Yes, that's a nice story. I also like that one.

I want to go to the loo.

OK, you can go. (He goes.)

Does your mommy and daddy tell you stories?

They read in the books.

When?

Uhhh...they read me...and the Bible some... most of the times... at bedtime.

And other stories?

Sometimes they read me a book.

And do you like the Bible stories?

Uhhh, not a lot.

Not a lot?

I only like the activity parts.

OK. And do you watch TV?

Yes, but now I know that Pokémon is bad.

Yes, so you don't watch it anymore?

I do watch it.

OK, but you will be cautious?

It's what they say... have evil powers, but it's not evil powers, it's just something they do... carate chup.....it's just an attack.....I'll tell you why they're having an attack... to... an opponents that can beat that... uhmm... person that's trying to hurt them... then... that person that's trying to hurt the other person... dies.

Oh.

Or looses mostly.

OK, so you like Pokémon?

Yes.

Is it the story you like most on TV?

Yes.

OK. And are there other things you like too.....to watch on TV?

Batman.....and I also like.....Batman and Robin.....and that other one, Batgirl... and I also like... stories of Jesus on the TV.

OK, would you like to draw me another picture?

Hmmm... Yes, of my dog.

OK, anytime. And your dog's name is?

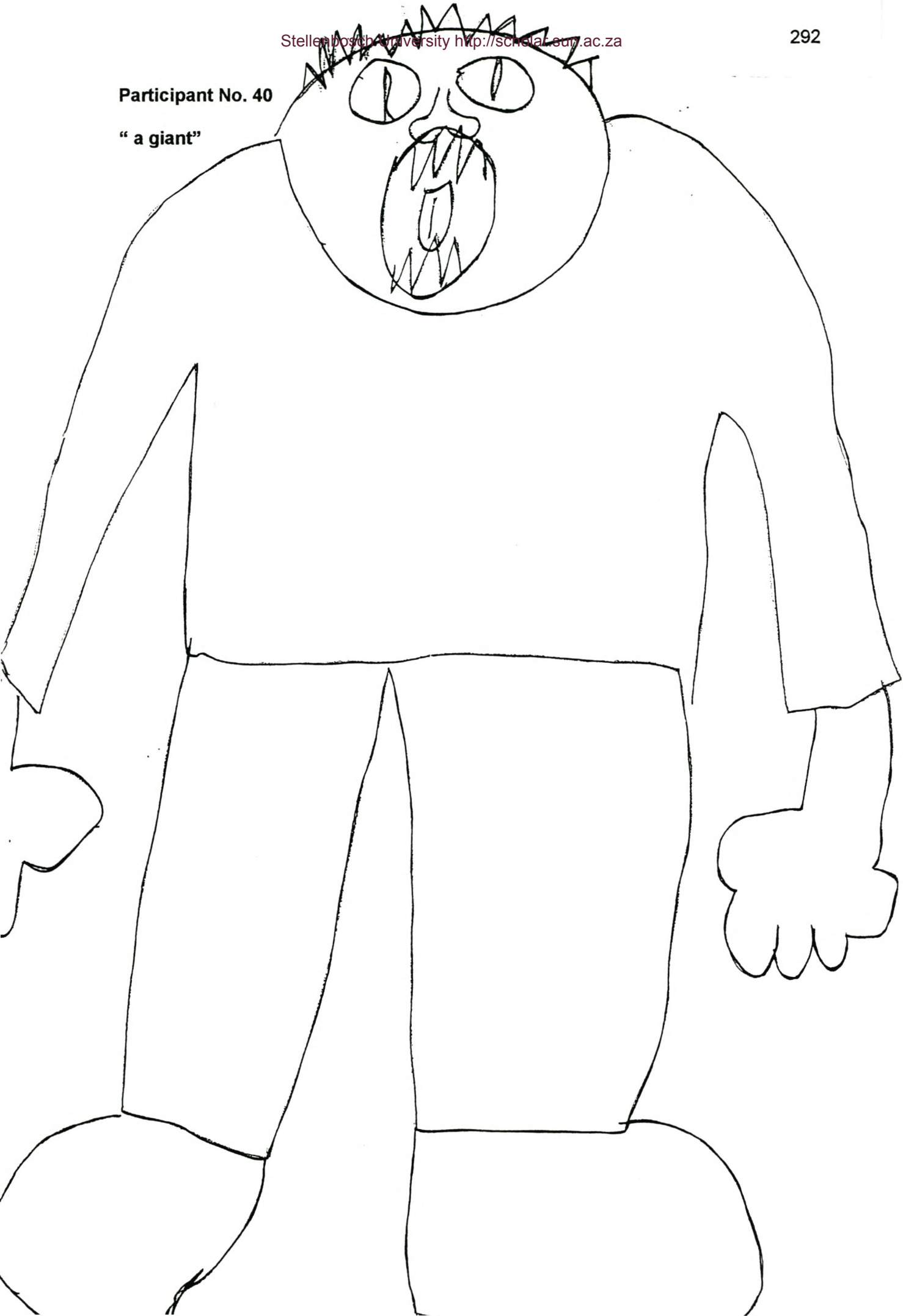
Rex. I can, I can.....now I draw like that. (He writes his dog's name down.)

And it means?

King.

Participant No. 40

“ a giant”



Participant No. 43 (female; white; upper SES)

What is your name?

L....

And how old are you?

Six.

L..., tell me, do you know what it is to be scared of something?

No, I don't know.

Don't you know. OK, do you know what it is to be happy?

No.

OK, when you're happy, you smile and you like what you see. OK, but when you're scared, there's something that you are afraid of (non-verbal expression).

Do you understand now?

Yes.

It's not a nice feeling when you're scared. Do you know that all children are sometimes scared of things.

Yes, but not all of them.

Do you know of something that you are scared of?

No, I'm not scared of anything.

You're not scared of anything?

When our house had some robbers.

Did you have a robbery?

Just once.

And were you scared of the robbers?

Yes. In the morning when the window was broken.

Oh, when the window was broken. Tell me L..., did you see the robbers?

Uh-uh.

And what did you do when you were scared? When you saw that broken window?

I just told my mommy.

Did you feel better after that?

Yes.

Is there anything else that you are scared of?

No.

Do you sometimes think about these robbers?

Not really.

So you are not scared anymore? You know they can't hurt you.

Yes.

Is there something on TV that you are scared of?

Only bad movies make me scared.

OK, bad movies. Yes, that's not nice. These bad movies, when you watch them and you get scared, what do you do?

I just don't watch it anymore.

That's good. And that make you feel better?

Yes.

And is there anything else that you are scared of on TV?

No.

Nothing?

Yes.

Tell me L..., do you like stories?

Yes.

And do you have a favourite story?

No.

Not really?

Uh-uh.

Can you think of one that you like?

The story where people is living in houses.

And do you know the name of the story?

No.

What is the story about?

It's just about people living in houses.

Do you want to tell the story?

No.

OK, that's fine. And tell me, do mommy and daddy tell you stories?

No.

Do you watch TV?

Not so much.

But do you have a favourite program on TV?

Uhhmm, no.

Nothing?

Only movies.

What kind of movies do you like?

All of them.

OK. Is there anything you would like to draw here? You can draw anything you like.

OK. (She drew a little flower at the bottom of the page.)