

LEARNING BRIEF

Communities of Practice for Social Systems Strengthening to Improve Child Wellbeing

Text Messaging as a Tool for Improving Child Wellbeing

NOSOYISO FIKANI, SADIYYA HAFJEJEE AND LEILA PATEL

FEBRUARY 2025



National
Research
Foundation

CSDA
CENTRE FOR
SOCIAL DEVELOPMENT
IN AFRICA





**NDLOVU
CARE GROUP**



basic education

Department:
Basic Education
REPUBLIC OF SOUTH AFRICA



social development

Department:
Social Development
REPUBLIC OF SOUTH AFRICA



GAUTENG PROVINCE
EDUCATION
REPUBLIC OF SOUTH AFRICA



GAUTENG PROVINCE
HEALTH
REPUBLIC OF SOUTH AFRICA



GAUTENG PROVINCE
SOCIAL DEVELOPMENT
REPUBLIC OF SOUTH AFRICA

Key Takeaways

- Text messaging, like for example WhatsApp messaging provides a cost-effective, scalable, and accessible platform for delivering parenting support, especially in low-resource settings.
- Targeted, easy to understand WhatsApp messages may strengthen and reinforce positive parenting practices, improve family communication, and encourage parental involvement in education.
- The group-based format may foster a sense of community, reduce isolation, and enable caregivers to learn from shared experiences.

Introduction

This learning brief explores the lessons learned from implementing a WhatsApp/text messaging intervention aimed at supporting caregivers within a Community of Practice (CoP) project focused on child wellbeing. The intervention was part of a broader effort to enhance caregiving practices and improve child outcomes. In this brief, we describe how we used WhatsApp messaging with a sample of caregivers, sharing simple messages to enhance parenting skills. The messaging focused on caregivers' mental health, parenting strategies, health, education and nutrition.

Text messaging is an accessible and cost-effective means of delivering support and information to caregivers, especially in resource-constrained settings (Hall et al., 2015). This brief is intended for practitioners, policymakers, and researchers concerned with digital health, education and social interventions, social systems strengthening, and innovative strategies for improving outcomes for children and families in the foundation phase of schooling (grades R-3).

The Use of Text Messaging

Text messages have been widely used for delivering support, encouraging behaviour change, and promoting adherence to a range of health-related disorders including tuberculosis, diabetes, depression and eating disorders (Bergam et al., 2024; Lima et al., 2018). Research suggests that such messaging may also be an effective method for delivering parenting information (Richardson et al., 2020). For example, in a systematic review conducted by Richardson et al. (2020) on the impact of health promotion, text messaging on caregiver behaviour and child health outcomes, the authors found that 89% of studies reported significant improvements in caregiver behaviour, while 16% noted positive effects on child outcomes. The majority of studies in this review were however conducted in high income countries, pointing to a need for studies to be conducted in low- and middle-income (LMIC) environments.

Based on their study to assess the feasibility, acceptability, and effectiveness of using WhatsApp groups to deliver parenting and mental health support to caregivers of young children in Tanzania and Zambia, Skeen et al. (2023) note a further gap. They found limited evidence on the effectiveness of digital parenting interventions in LMICs for improving caregiving behaviours, caregiver mental health, and child outcomes (Skeen et al., 2023).

Text messaging is an effective medium to share information as it is accessible, widely used, and cost effective (Hall et al., 2015). This medium is particularly useful for LMIC where access to health and care information is often tested by limited resources, and long distances to healthcare centres (Kumar et al., 2016; Skeen et al., 2023). Additionally, text messaging also enables contact with health service providers, particularly in situations where stigma may limit face-to-face contact. A study in Western Kenya found that using WhatsApp for interventions allowed participants to discuss HIV and AIDS-related concerns openly, without fear of social isolation or losing peer networks and resources (Chory, Callen, Nyandiko et al., 2022). Similarly, a study in Brazil on health follow-up for individuals living with HIV and AIDS found that online communication was crucial for patients' health and their desire to actively engage with healthcare professionals to better manage their condition (Lima et al., 2018). In such cases, these professionals were the only ones with whom patients felt comfortable sharing their achievements.

Beyond healthcare, text messaging has also been used in education. For example, a study conducted in Chile on the use of digital communication between parents and teachers found that adopting digital communication technologies strengthened the link between families and schools (Davila & Prieto, 2024). In this study, parents appeared to be more engaged in their children's education, assisting with homework and the digital space also became a place where parenting experiences were shared (Davila & Prieto, 2024). In their study, assessing the use of WhatsApp messaging in social work practice for child protection, during the COVID-19 pandemic, Pink, Ferguson and Kelly (2022) maintained that "digital social work" is not just a temporary response but an essential and beneficial aspect of future practice, highlighting the importance of hybridity, proactive practice, and digital intimacy. From these research studies, it appears that WhatsApp messaging is likely to remain a crucial component of digital interventions across different fields.

The Community of Practice for Child Wellbeing Study

Drawing on the above promising benefits of using text messages to provide education, and promote behaviour change as well as the limited literature on its efficacy in LMIC, we opted to include this medium as one component of our larger study aimed at enhancing child wellbeing outcomes in South Africa.

The Community of Practice for Child Wellbeing study (herewith referred to as CoP) was initiated by a team of researchers at the University of Johannesburg (UJ) in 2020, in response to the complex challenges facing children in South Africa and the need for a more integrated approach to child wellbeing (Patel et al., 2021). This initiative aimed to strengthen social systems to enhance child wellbeing outcomes in South Africa, bringing together a multidisciplinary and multi-sectoral team of researchers, policy makers and service providers. The CoP adopted a holistic, “whole child” approach, placing children and their families at the centre of an integrated social support system. Data were collected, using a child wellbeing tracking tool (CWTT), from a sample of caregivers and children in the foundation years of school (Grades 0 to 3) over a period of three years.

The CWTT focused on six key domains of child wellbeing, as well as caregiver characteristics and household-level information. The domains assessed were: health, nutrition, economic and material wellbeing, education and learning, protection and care, and psychosocial wellbeing. Based on findings from these assessments, a range of targeted interventions were implemented with caregivers, children and teachers focused on health, education, mental health, and parenting. Additional information about the CoP approach may be found [here](#), while the various CoP interventions may be found [here](#).

The Text Messaging Intervention

The goal of the text messaging intervention was to offer ongoing follow-up support to caregivers who had taken part in the study. This initiative aimed to reinforce key messages and lessons learned during the intervention phase, thereby ensuring that caregivers could continue to apply the knowledge and skills they had gained. It also served to encourage the adoption of positive caregiving practices.

This goal was achieved by sending participating children and families short, thematic messages over a WhatsApp digital platform. The messages were selected based on the fact that they were associated with improvements in child wellbeing in a longitudinal sample of CoP children between 2020 and 2023 (Patel et al., 2023). The messages were also drawn from the Sihleng’ imizi family strengthening intervention manual (Patel, Hochfeld & Chiba, 2021). Lessons learnt from the health, education and social work interventions offered to the children and their families over three years informed the selection of the messages. They were designed to be simple, and easy to understand. The format also encouraged interaction. The messages were aligned to the six key domains of the CWTT mentioned above. The team leaders of each of the domains reviewed and commented on various iterations of the messages. They were refined in consultation with a communications company specialising in development education. The messages were also pre-tested with a small sample of caregivers.

Process and Implementation

The text messaging intervention was implemented in 2024 after all three waves of data were collected. The CoP study sample of 150 caregivers that had participated in the study across all three waves, were included in the sample. A social worker was appointed to contact all caregivers, using the contact numbers that were obtained during the data collection phase. Of these, 80 caregivers responded, while 70 contacts were either duplicates, invalid or went to voicemail. Out of the 80 caregivers reached, 70 agreed to participate, with 66 opting for WhatsApp messaging. The remaining 4 requested SMS, but due to resource limitations, they were not included. Of the 66 invited to join the campaign via WhatsApp, 52 ultimately joined the group.

Once participant details were verified and consent was obtained verbally via phone calls with the participants, a media consulting company, with experience in this area, were engaged and tasked with sending out the messages and collecting responses.

The WhatsApp intervention was designed as a group-based platform where participants received messages on various parenting and family-related topics. Caregivers in the group could respond to these messages, share their thoughts, and engage in discussions with others. Messages were text-based and in English; however, participants were encouraged to respond in any language including text and or voice notes. This format encouraged interaction and enabled participants to view and reflect on responses from fellow caregivers.

The content of the messages was developed by the research team made up of experts and practitioners in the fields of education, nursing, mental health, and social work. A total of 7 messages, with one message sent out per week. Each message was followed by a question to encourage active participation.

In line with research that suggests that individuals are more likely to embrace positive behaviours following temporal markers, such as the beginning of a new week, a phenomenon known as the “fresh start effect” (Trude et al., 2021), messages were sent out on a Tuesday. This timing allowed participants enough time to engage with the content before receiving the subsequent message.

Participants were provided with data bundles at two intervals, enabling them to send and receive text messages without incurring costs. Upon completion of the study, three participants who demonstrated consistent engagement were rewarded with R500 food vouchers as a token of appreciation.

Content of Text Messages

Message 1: *Know your family's strengths, help your child with homework, and talk to teachers. Support your child's curiosity as it boosts their confidence.*

Question: How do you spend time together as a family?

Message 2: *Your health is in your hands. Eat well – avoid fatty, salty foods + drink water. Exercise for 30 min a day. #HealthIsWealth.*

Question: What types of food does your family enjoy?

Message 3: *Reward positive behaviours. Listen and speak to your child. Create a positive space at home and encourage learning.*

Question: What do your children do that makes you proud?

Message 4: *Managing our money better can lessen stress. A budget helps us decide what we want and what we need.*

Question: What does your family budget look like?

Message 5: *Your mental health matters. It's ok to seek help and talk about your feelings. You're not alone. Contact the South African Depression & Anxiety Group 0800 567 567.*

Question: Who do you talk to when you are feeling overwhelmed?

Message 6: *Ask your child to practice reading while you check. Make sure they SOUND out words. Check if they know the meaning of each word. Don't let them rely on pictures.*

Question: When you are reading with your child, how do you check if they understand what they read?

Message 7: *Talk to your child about numbers. Use home experiences like cooking, buying, and the size of something, and use words like 'How many? How much less? Which is more?'*

Question: How do you use numbers in your everyday life with your child?

Findings from the WhatsApp Campaign

In the next section, we share information on our engagement with the participants, including our overall engagement throughout the seven-week program.

Figure 1 below shows the weekly responses from participants.

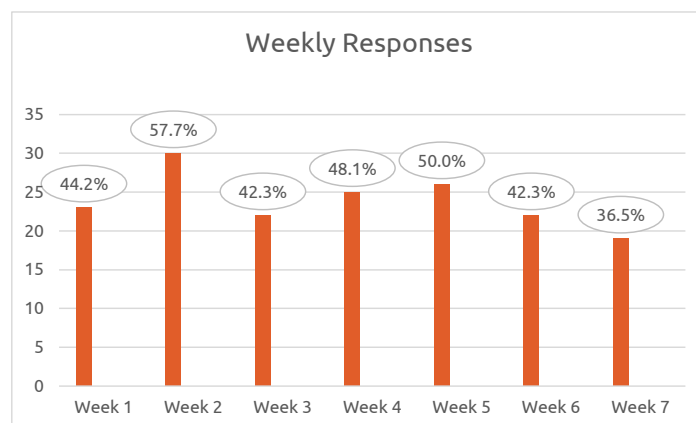


Figure 1
N=52 (total number of participants including the admin)
Weekly responses: Number of responses each week in percentages.

This bar chart illustrates the weekly distribution of responses as a percentage of the total 52 responses. Week 2 had the highest participation, with 57.7% of respondents engaging, while Week 7 saw the lowest participation at 36.5%. Participation fluctuated over the weeks, with Weeks 4 and 5 maintaining relatively high engagement (48.1% and 50.0%, respectively). Weeks 1, 3, and 6 showed similar response rates, lingering around 42%. This visualisation highlights the variation in engagement throughout the campaign, with a peak in Week 2 and a gradual decline toward Week 7. This finding could also reflect the distribution of caregiver interests in the different themes. Towards week 6, eight participants left the group leaving us with N=45.

Feedback from each week/each message

To encourage engagement, each message was followed by a short question. The section below describes the responses received.

Strengthening Involvement in Children's Education

Homework serves as an important link between school and home environments and encourages communication and collaboration between caregivers and children (Syla, 2023). Additional research also notes the positive impacts of caregivers spending time on homework; when caregivers actively participate in homework, it enhances children's self-esteem, encourages positive behaviour, and facilitates communication (Kantova, 2024), while also contributing to positive academic outcomes (Avnet et al., 2019; Otani 2020). We asked caregivers, how they spent time with their children. Twenty-eight caregivers responded to the question. A sample of their responses is provided below.

Participants' responses appear to centre around educational and leisure activities.

Caregivers frequently mentioned helping children with their schoolwork as a primary way of bonding. For example, Caregiver 1 said: *"Most of the time I spent time with my son, I assist him with his school work"*.

Another caregiver 2 commented: *"Most of the time I spend time with my girl I help my child with her homework"*.

Caregiver 3 noted spending time on homework as well as recreational activities: *"Assist with homework, on Saturday I support him on football games cause he's a football player"*.

While Caregivers 4 and 5, mentioned both assisting children with homework and also playing board games, and watching television.

"We do homework together, and we play games together [such as 30 seconds] as a family" (Caregiver 2)

"We do homework together, and watch TV (cartoons)" (Caregiver 3)

Improving nutrition and food choices

Stunting remains a persistent issue in South Africa, affecting a significant proportion of children due to inadequate nutrition and food insecurity (Quamme & Iversen, 2022). At the same time, the rise of obesity among children and adolescents is a growing concern, reflecting a double burden of malnutrition within the country (Azomahou, Diene, & Gosselin-Pali, 2022). These contrasting nutritional challenges highlight the complexity of addressing child wellbeing in diverse socio-economic contexts. For these reasons, we asked caregivers, what types of food were enjoyed in their families. We received 30 responses.

Caregivers in the study frequently mentioned a preference for home-cooked meals, which they perceived as healthier options for their families. For instance, one caregiver noted, *"Most of the time it's home-cooked meals, and we order in twice a month"* (Caregiver 2).

Several caregivers also highlighted the inclusion of traditional foods in their diets. For example, Caregiver 1 shared, *"As for me and my lovely family, most of the time it's lots of starch, a bit of veggies and meat, and traditional food."* This feedback also highlights the reliance on carbohydrates which, when eaten in excess, is considered unhealthy.

Participants also noted that cooking and eating together were important for encouraging family togetherness. One caregiver remarked, *"My family and I do all of the above, and we enjoy it so much as we love bringing people together with food"* (Caregiver 4).

Rewarding Positive Behaviour

Rewarding positive behaviour serves to motivate children, enables a positive environment in the home and also enhances the relationship between caregivers and children (Aslan, 2023; Gkintoni, 2024). This positive outcome is reflected in the

feedback shared by caregivers. We asked caregivers: What do your children do that makes you proud? We received 24 responses, a sample of which included the following:

One caregiver proudly shared, *"What makes me happy is when I ask them to do something, and they do it without complaining 😊😄"* (Caregiver 6).

Another caregiver noted, *"I am proud of the respect and love that he shows not only to family members but also to everyone he meets"* (Caregiver 3).

Similarly, another respondent expressed pride in her child's academic diligence and respectful interactions, stating, *"I am proud of the way he's doing his school work and greeting elders"* (Caregiver 5).

In recognising and rewarding good behaviours, caregivers are not only supporting their children's development but appear to increase feelings of caregiver satisfaction and wellbeing.

Financial Literacy

The responses to the question about family budgets revealed a common theme of financial strain, with most families struggling to meet their basic needs. The overwhelming majority of responses indicated that the family budget was not sufficient to cover all necessary expenses. Many families reported that they could not meet their basic needs, highlighting a significant gap between income and essential costs. We asked caregivers a question: What does your family budget look like? We received 27 responses, a sample of which is included below:

"The budget is not enough to cover the need especially when you're not working" (Caregiver 1)

"The budget is not enough to cover all the needs in the house" (Caregiver 2)

"Money will never be enough nevertheless we have to do our budget...it works fine though...we do every month". (Caregiver 3)

"We try our best to manage our money but the problem is that everything is going higher and higher each day that is why we can't have enough money to make our needs" (Caregiver 4)

"I for me I always balance as I have a fixed account which I save money on every month as I have noticed that come December a lot needs to be done so it will also help me" (Caregiver 5)

It appears that challenging financial conditions make it difficult for caregivers to stick to a budget. Drawing from the Sihleng'imizi programme, families received financial education. However, out of the 45 families who were part of the intervention only 21 families attended at least seven of the sessions (Mbowa et al., 2024). Therefore, caregivers struggling to maintain budget could be result of missing the sessions.

Encouraging Help Seeking

Research highlights the fact that caregiver mental health is significantly influenced by economic challenges and poverty-related stressors, such as low educational attainment, limited income, and inadequate housing (Zhang et al., 2021). Findings from our study showed that during the initial period of the COVID-19 pandemic in Wave 1, 62.5% of participating caregivers displayed symptoms indicative of depression, but by Wave 3, this number had gone down to 31.3% (Mbowa, Patel & Sani, 2024).

Accessing support for mental health conditions in LMIC is often marred by both structural constraints as well as attitudinal barriers; limited access to mental health services as well as the stigma surrounding mental health results in individuals not seeking, or getting help (Benjamin, Vickerman-Delport, & Roman, 2021). Navigating access to external supportive resources is however critical in enabling resilience (Ungar & Theron, 2020). Studies indicate that primary sources of emotional support typically include close family members, friends, and faith-based resources, which play a critical role in alleviating stress (Revens et al., 2021).

This finding is mirrored in our study findings, where caregivers were asked about their sources of support when feeling overwhelmed. The question asked was: Who do you speak to when you are not doing ok? The responses predominantly highlighted reliance on family, friends, and religious institutions. We received 27 responses. For instance, Caregivers 1 and 2, mentioned: *"A family member and someone at church"* (Caregiver 1) and *"A friend"* (Caregiver 2). Only one participant reported turning to a professional counsellor.

"No one" (Caregiver 3)

"I just want strangers and talk to, or I speak to someone at church" (Caregiver 4)

"A friend" (Caregiver 5)

Education

Caregivers were encouraged to help with improving children's numeracy competency by incorporating basic numerical tasks into daily interactions with their children. For instance, caregivers were advised to engage children in counting, measuring ingredients during cooking, or discussing prices during shopping trips. This approach is in line with research that suggests that exposure to numbers at home can positively impact mathematical understanding (Skwarchuk, 2022). Caregivers were asked this question: How do you use numbers in your everyday life with your child? We received 23 responses.

Participants shared how they use these strategies in their households. One caregiver described how numeracy became a part of their daily routine: *"He makes us breakfast. He counts how many slices of bread one wants... Also, I discuss with him the costs of items... He now even asks about the price of cars. We live numbers in the house."*

Another participant shared: *"There's a number game on my phone that we play, and we often play a game where the loser has to count to 100."*

"My kids always count almost everything, example they know how many slices of bread their father do [does] have, up until the youngest cause they all differ and they always play games when you lose you must count until someone loses too to come and take your place in counting, so counting is in our daily lives" (Caregiver 3)

"From time counting seconds, minutes and hours, how many pieces of meat adult can eat, how many young kids can eat, and changing channel by numbers" (Caregiver 4)

"We use numbers to calculate homework. Weeks, days and fruits coz my parents are selling it" (Caregiver 5)

In the above responses, we noted caregivers making learning fun and engaging.

Similarly, the message under the literacy theme focused on enabling children to practise reading, with caregiver support and encouragement. Caregivers were prompted to ensure that reading sessions went beyond word recognition, focusing on comprehension and vocabulary building. Participants were asked how they checked their child's understanding during reading activities. We received 20 responses. One caregiver explained her method:

"When we read in English, I will ask her to explain it to me in IsiZulu to check her understanding." Through this process, the caregiver assessed her child's comprehension while also encouraging the development of her child's language skills.

Other caregivers found innovative ways to integrate reading into everyday life, as one caregiver noted: *"He reads out the subtitles on TV and explains what they mean to us as a family."* In this way, an activity, like watching television, that is typically passive is used as a learning moment.

Another response, *"I ask him in vernacular everything we read in English and also, he writes down while learning in the extra book. It helps him to understand more"*.

From these responses, it appears that caregivers used available resources to improve both numeracy and literacy skills in their children.

Overall experience

From the feedback, it appears that the text messaging was received positively by participating caregivers. Messaging appeared to improve family relations through parental involvement in school, enhanced parenting skills, and created a supportive home environment. In the text responses below, caregivers mentioned how the messages helped them make significant changes within their households, particularly in strengthening family bonds and improving communication, prioritising education and learning. The WhatsApp medium, which allowed participants to respond in the group enabled them to learn from other parents, gain different perspectives, and realise they were not alone in facing challenges, which provided them with practical solutions and emotional support.

Caregiver 1	<i>The messaging had the impact to me and my family and it helped us a lot to make so many changes.</i>
Caregiver 2	<i>The message helped me a lot and my kids. It helped me to realise that my kids' education comes first. It helped me to make a lot of changes in my household.</i>
Caregiver 3	<i>Yes, it was useful learn something from comments 🤔🤔.</i>
Caregiver 4	<i>Yes, the message helped me and my children a lot.</i>
Caregiver 5	<i>Yes, it was useful</i> <i>* *It does have an impact on me and helped me a lot to gain knowledge from people with different views on the same matter, and [find] solutions that help in effectively teaching my child and creating a safe and productive environment for him.</i>
Caregiver 6	<i>Yes, it was useful because I realise that is important to do things together as family and makes [our] bond stronger. I learn a lot from other parents and make improvements [at] home.</i>
Caregiver 7	<i>It was helpful a lot, the response coming from other parents. It was great and I'm the one who was coping [using] some advices from different massages.</i>
Caregiver 8	<i>Yes, it has helped me a lot. Knowing that [I] am not the only one with challenges. It also helps me more on communication with kids.</i>

Implementation issues and challenges

The implementation of this study initially faced several challenges, prompting the involvement of a private consulting company to manage the campaign, as previously mentioned. The team experienced device issues, requiring the use of two devices to accommodate the group chat. Additionally, technical difficulties such as network connectivity and internet data limitations posed challenges. There were several associated costs, including purchasing data, providing food vouchers as tokens of appreciation, and covering the agency's labour expenses. The cost breakdown is as follows: Data incentive of R20 for each participant, given twice: $R20 \times 53 = R1,060$. Therefore, the total cost for data was $R1,060 \times 2 = R2,120$. Vouchers for three lucky winners totalled R1,500 ($R500 \times 3$). Labour costs varied depending on the consulting company's rate.

Emerging Lessons

The WhatsApp group-based approach encouraged a sense of community, enabling the exchange of experiences and promoting shared learning. The group dynamic encouraged active participation and appeared to enhance the overall impact of the intervention.

Language barriers were a significant limitation, as messages were only sent in English, potentially excluding non-English-speaking caregivers from fully engaging with the content. This limitation indicates a need for multilingual support in future iterations to ensure inclusivity.

Managing the high volume of messages was initially challenging for the research team. In order to improve efficiency, a private company with expertise in campaign management was employed. Adequate digital infrastructure, including reliable network systems, secure databases for storing reports, and robust cybersecurity measures, is essential.

Additionally, participant support, such as access to devices and internet data, is crucial. Scaling up similar interventions requires sufficient resources, including human capacity and technological support. A dedicated team should be responsible for sending and receiving messages to ensure smooth communication and engagement.

Participant attrition impacted the ability to maintain consistent engagement with all participants. While there was active engagement from a core group, overall participation rates fluctuated. This fluctuation points to a need for strategies to ensure engagement over time.

Several participants expressed difficulties with budgeting, indicating that future interventions could benefit from integrating financial education components to enhance overall family wellbeing.

The WhatsApp messaging was one of several interventions aimed at strengthening family relationships and enhancing child wellbeing outcomes. Though limited in its reach, we noted that for participating families it made a huge impact.

Conclusion

The WhatsApp text messaging intervention described here was one component of a multi-layered approach aimed at supporting family relationships and child wellbeing. The messages shared were simple, easy to understand and focused on encouraging joint family activities, such as helping with homework, incorporating learning into everyday tasks, eating nutritional meals, managing budgets and accessing support in times of need. Findings suggest that the messages were useful and enabled greater family cohesion. The group platform also encouraged a sense of belonging to a group and shared challenges and experiences.

The use of WhatsApp text messaging provided an accessible, affordable and engaging medium in which to communicate with caregivers, and presents a viable option for integrating into child, family and school-based community level interventions to improve child wellbeing outcomes.

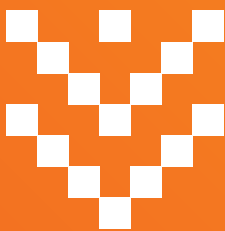
References

- Azomahou, T. T., Diene, B., & Gosselin-Pali, A. (2022). Transition and persistence in the double burden of malnutrition and overweight or obesity: Evidence from South Africa. *Food Policy*, 113, 102303.
- Aslan, N. (2023). Classroom Climate in Early Childhood Education: A Conceptual Framework for Effective Classroom Management. *Universitepark Bulletin*, 12(2).
- Avnet, M., Makara, D., Larwin, K. H., & Erickson, M. (2019). The Impact of Parental Involvement and Education on Academic Achievement in Elementary School. *International Journal of Evaluation and Research in Education*, 8(3), 476-483.
- Benjamin, F., Vickerman-Delpont, S., & Roman, N. (2021). Mental health care services in rural South Africa: a human capabilities approach. *Social Work in Mental Health*, 19(5), 365-380.
- Bergam, S., Sibaya, T., Gethers, C. T., Ndlela, N., Kuzwayo, M., Marconi, V. C., ... & Zanoni, B. C. (2024). WhatsApp-based sexual and reproductive health education for adolescents with perinatally acquired HIV: lessons learned from an mHealth pilot intervention in South Africa. *Sex Education*, 1-15.
- Chory, A., Callen, G., Nyandiko, W. *et al.* (2022). A Pilot Study of a Mobile Intervention to Support Mental Health and Adherence Among Adolescents Living with HIV in Western Kenya. *AIDS Behav* **26**, 232-242 . <https://doi.org/10.1007/s10461-021-03376-9>
- Gkintoni, E., Vantaraki, F., Skoulidi, C., Anastassopoulos, P., & Vantarakis, A. (2024). Promoting physical and mental health among children and adolescents via gamification—A conceptual systematic review. *Behavioral Sciences*, 14(2), 102.
- Jordan, K., Damani, K., Myers, C., & Zhao, A. (2023). The use of SMS and other mobile phone-based messaging to support education at scale: A synthesis of recent evidence. In *Proceedings of the Tenth ACM Conference on Learning@ Scale* (pp. 282-286).
- Kantova, K. (2024). Parental involvement and education outcomes of their children. *Applied Economics*, 56(48), 5683-5698. <https://doi.org/10.1080/00036846.2024.2314569>.
- Kumar, P., Paton, C., &, Kirigia D. (2016). I've got 99 problems but a phone ain't one: Electronic and mobile health in low- and middle-income countries. *Archives of Disease in Childhood*, 101:974-979.
- Haffejee, S., Mbowa, S., & Patel, L. (2023), "An integrated multisectoral and multidisciplinary community of practice collaboration to enhance child wellbeing in South Africa", *Journal of Integrated Care*, Vol. 31 No. 4, pp. 401-416. <https://doi.org/10.1108/JICA-04-2023-0021>
- Lima, I. C. V. D., Galvão, M. T. G., Pedrosa, S. C., Cunha, G. H. D., & Costa, A. K. B. (2018). Use of the Whatsapp application in health follow-up of people with HIV: a thematic analysis. *Escola Anna Nery*, 22(3), e20170429.
- Mbowa, S., Patel, P., & Sani, T. (2024). *Can a family strengthening intervention improve child wellbeing outcomes for early grade learners? Findings from an intervention study in five public schools in Johannesburg. Centre for Social Change in Africa: University of Johannesburg.*
- Otani, M. (202). Parental involvement and academic achievement among elementary and middle school students. *Asia Pacific Educ. Rev.* 21, 1-25. <https://doi.org/10.1007/s12564-019-09614-z>

- Patel, L., Sani, T., & Turton, Y. (2022). *Exemplar of Developmental Social Work in Schools: Using a Community of Practice (CoP) Multi-Disciplinary Approach for Early Grade Learners*. CSDA: University of Johannesburg.
- Patel, L., Pillay, J., Henning, E., Telukdarie, A., Norris, S., Graham, L., Haffeejee, S., Sani, T., Ntshingila, N., Du-Plessis Faurie, A., Zembe-Mkabile, W., Baldry, K., Sello, M., Mbowa, S., Setlhare-Kajee, R., Bezuidenhout, H. and Rhamasodi, R. (2021). *Findings from Wave 1: Tracking Child Wellbeing of Early Grade Learners and their Families*. Centre for Social Development in Africa, University of Johannesburg.
- Pink, S., Ferguson, H., & Kelly, L. (2022). Digital social work: Conceptualising a hybrid anticipatory practice. *Qualitative Social Work*, 21(2), 413-430.
- Quamme, S. H., & Iversen, P. O. (2022). Prevalence of child stunting in Sub-Saharan Africa and its risk factors. *Clinical Nutrition Open Science*, 42, 49-61.
- Richardson, B. P., van der Linde, J., Pillay, B., & Swanepoel, D. W. (2021). Do text messages about health and development in young children affect caregiver behaviour and child outcomes? A systematic review. *Health Education Journal*, 80(2), 225-237. <https://doi.org/10.1177/0017896920965992>
- Skeen, S., Marlow, M., du Toit, S., Melendez-Torres, G. J., Mudekunye, L., Mapalala, E., ... & Tomlinson, M. (2023). Using WhatsApp support groups to promote responsive caregiving, caregiver mental health and child development in the COVID-19 era: A randomised controlled trial of a fully digital parenting intervention. *Digital Health*, 9, 20552076231203893.
- Spaull, N., & Pretorius, E. (2019). Still Falling at the First Hurdle: Examining Early Grade Reading in South Africa. In: Spaull, N., Jansen, J. (eds) *South African Schooling: The Enigma of Inequality. Policy Implications of Research in Education*, vol 10. Springer, Cham. https://doi.org/10.1007/978-3-030-18811-5_8
- Skwarchuk, S. L., Douglas, H., Cahoon, A., LeFevre, J. A., Xu, C., Roy, E., ... & Susperreguy, M. I. (2022). Relations between the home learning environment and the literacy and mathematics skills of eight-year-old Canadian children. *Education Sciences*, 12(8), 513.
- Syla, L. B. (2023). Perspectives of Primary Teachers, Students, and Parents on Homework. *Education Research International*, 2023(1), 7669108.
- Trude, A. C., Martins, R. C., Martins-Silva, T., Blumenberg, C., Carpena, M. X., Del-Ponte, B., & Loret de Mola, C. (2021). A WhatsApp-based intervention to improve maternal social support and maternal—child health in Southern Brazil: The Text-Message Intervention to Enhance Social Support (TIES) Feasibility Study. *INQUIRY: The Journal of Health Care Organization, Provision, and Financing*, 58, 00469580211048701.
- Ungar, M., & Theron, L. (2020). Resilience and mental health: How multisystemic processes contribute to positive outcomes. *The Lancet Psychiatry*, 7(5), 441-448.
- Zhang, S.; Wang, L.; Xian, Y. & Bai, Y. (2021). Mental Health Issues among Caregivers of Young Children in Rural China: Prevalence, Risk Factors, and Links to Child Developmental Outcomes. *International Journal of Environmental Resolution Public Health*, 18, 197. <https://doi.org/10.3390/ijerph18010197>

Suggested Citation:

Fikani, N., Haffeejee, S., & Patel, L. (2025). *Text messaging as a tool for improving Child Wellbeing*. Centre for Social Development in Africa, University of Johannesburg.



Communities of Practice web link:
<https://communitiesforchildwellbeing.org/>