



# Measuring sharenting behavior: Validity and reliability of the Turkish version of the sharenting evaluation scale

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## Abstract

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**Aim:** Sharenting, the act of parents sharing content related to their children on social media, has become a prevalent practice in today's digital age. However, concerns have been raised about the potential privacy violations and risks that this behavior may expose children to. This study aimed to investigate sharenting behaviors among Turkish parents and validate the Turkish version of the Sharenting Evaluation Scale (SES).

**Materials and Methods:** Following World Health Organization guidelines, the original SES was translated into Turkish. The scale's content validity was evaluated by experts before being administered to 276 Turkish parents.

**Results:** The overall reliability of the scale was determined to be 0.855, which indicates its strong reliability. To further enhance the scale's reliability, the tenth item was removed after examining item-total statistics, resulting in an improved Cronbach's alpha of 0.87 for the total scale. Subscale reliability was also satisfactory, with values of 0.92 for implications, 0.64 for social behavior, and 0.68 for self-control. Confirmatory Factor Analysis (CFA) was employed to assess the construct validity of the scale. The chi-square test indicated a significant fit ( $p < 0.001$ ,  $\chi^2/df = 241.1/100 = 2.411$ ), supporting the scale's reliability and measurement ability.

**Conclusion:** The Turkish version of the 16-item SES demonstrated good reliability and validity, making it a valuable tool for assessing sharenting behaviors among Turkish parents. By utilizing this scale, healthcare professionals and researchers can gain crucial insights into parental sharing practices on social media and better understand the potential risks and implications for children's privacy and safety.



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## Introduction

Sharenting has become increasingly popular due to technological advances, with many parents sharing posts related to their children on social media sites [1,2,3]. This practice has led to a new definition of "sharenting," where parents share sensitive content about their minors on social media [4].

The frequency of sharenting practices differs among countries and even within regions of the same country. For example, in a Turkish study, 81.4% of parents shared information about their children [5]. Akpınar et al. (2020) found that 72% of mothers shared their children's nude

photos near the sea and pool, and nearly 50% shared photos containing their children's identity data on social media [6]. Another study confirmed that 59.3% of parents had shared information about their children on social media [2]. The C. S. Mott Children's Hospital National Poll on Children's Health (2015) found that 56% of mothers and 34% of fathers shared information about their children on social network sites [7]. Additionally, another study showed that 30% of parents were sharing their children's photos every day [8]. In the United Kingdom, a research study found that 75% of parents who accessed the internet at least once a month shared their children's photos. Kopecky et al. (2020) confirmed that 70-80% of parents shared privacy data related to their children on social media [9]. In conclusion, the digital footprint of children is widespread in our country and around the world.

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Sharenting practices can have negative consequences for children. Parents may create a new digital identity for their children without consulting them by sharing content related to their children, such as information, photos, and videos, on social media. This behavior has been defined as digital kidnapping [10]. Moreover, parents may put their children at risk of child abuse and cyberbullying by sharenting. Several studies have shown that most parents share inappropriate pictures of their children on social network sites [1,2,9]. This practice may cause the children to feel disturbed and embarrassed by violating their privacy. Additionally, children may be uncomfortable with their parents taking and publishing their photos [11]. Children expressed that their parents should obtain more frequent consent regarding posts related to them [12]. Verswijvel et al. (2019) conducted a study on 817 adolescents and found that most adolescents disapprove of sharenting [13]. Despite an awareness of the risks posed by sharing children on social media in Turkey and around the world, many parents still share posts about their children on these platforms. Sharenting practice brings many problems, such as the violation of the child's right to be forgotten, the violation of the child's privacy, and the vulnerability of the child to abuse [3,14,15].

Romero-Rodríguez et al. (2022) developed the "Sharenting Evaluation Scale" to assess the degree of sharenting in the adult population [16]. The final scale, consisting of 17 items, has three sub-dimensions: implication, social behavior, and self-control. The implication sub-dimension has been related to infractions of the child's privacy, violation of the Child Protection Act, formation of a digital identity, digital kidnapping, long-term impact on children, and risks of being vulnerable to pedophilia. Social behavior sub-dimension has been related to parents gaining appreciation and admiration of their parenthood through sharing their children's activities and experiences on social media and creating a digital social environment. Although this practice may reduce the feeling of loneliness of partially isolated parents, it may cause negative consequences, such as social comparison, inappropriate sharing of content, and child-centered advertisements leading to the commercialization of children [17,18,19,20]. The last dimension of SES has been related to self-control and mobile addiction. Most parents share information related to their children on social media [5,21,22]. Some research studies have shown that parents are not aware of the privacy violations caused by sharenting practices [23]. In conclusion, Romero-Rodríguez et al. (2022) found this scale to be a reliable tool with good psychometric properties. However, there is no tool available to evaluate the degree of sharenting among Turkish parents. Therefore, we conducted a Turkish validity and reliability study of the "Sharenting Evaluation Scale."

## Materials and Methods

The current study conducted a validity and reliability study of the Turkish version of the SES. We obtained permission from the corresponding author of the original study, Romero-Rodríguez, via email, to develop a Turkish version of the SES.

## Participants

A cross-sectional study design was used to validate the scale in Turkish. The current study followed the 10:1 approach, which is often recommended [24]. According to this approach, the sample size should be at least 10 times (1:10) the number of items on the scale. Therefore, a minimum of 170 participants was required to obtain a sufficient sample size for this 17-item scale. The study was conducted between November 1, 2022 and December 1, 2022. Online consent was obtained from all participants prior to the study. A pilot study was conducted with 30 participants. Among the 431 parents who applied to our pediatric outpatient clinic, 277 had never engaged in sharenting, and only one parent declined to participate. The remaining 276 participants completed an online questionnaire developed using Google Forms. The data of parents who engaged in sharenting and those who did not were analyzed separately as part of a second study. The study protocol received approval from the local ethics Committee (Baskent University Institutional Review Board and Ethics Committee) and the legal representatives of the children provided informed consent prior to their participation in the study. Research has been conducted in accordance with the Helsinki Declaration.

## Measurements

### Sharenting evaluation scale

Romero-Rodríguez et al. (2022) developed the "Sharing Evaluation Scale" to assess the degree to which adults share information about children on social media [16]. The scale is scored on a 6-point Likert scale (0 = never; 1 = rarely; 2 = sometimes; 3 = often; 4 = very often; 5 = always). The scale consists of 17 items that are grouped into three factors: implications, social behavior, and self-control.

- Factor 1: Self-control (items 1-4, score range: 0-20)
- Factor 2: Social behavior (items 5-10, score range: 0-30)
- Factor 3: Implications (items 11-17, score range: 0-35) Items 10-17 are reverse-coded. The score range of the SES is 0-85: 0-20 (normal), 21-39 (mild), 40-69 (moderate), and 70-85 (severe). Higher scores indicate a higher risk of sharenting practices.

The SES was originally validated among 146 Spanish adults (Romero-Rodríguez et al., 2022). Cronbach's alpha for the total scale was 0.76, and for the subscales, it was 0.87 for implications, 0.69 for social behavior, and 0.67 for self-control.

### Internet addiction test

Romero-Rodríguez et al. (2022) used the "Internet Addiction Test" as a confirmatory test of the Sharenting Evaluation Scale. Therefore, we used the "Internet Addiction Test" in our study. The Internet Addiction Test (IAT) was developed by Young (1998) to assess internet addiction in individuals [25]. Balta and Horzum (2008) found that the

Turkish version of the IAT was reliable and had good psychometric properties [26]. The IAT is scored on a 6-point Likert scale, with responses ranging from "never" to "always." Responses are scored from 0 (never) to 5 (always). The score ranges are 19-48 points for average internet use, 49-78 points for occasional problematic internet use, and >79 points for frequent problematic internet use. Higher scores indicate a higher level of internet addiction.

*Procedure*

*Translation of the SES into Turkish*

The original Sharing Evaluation Scale (SES) was initially developed in English. To make the scale available for Turkish-speaking participants, it was translated into Turkish following the guidelines provided by the World Health Organization (WHO). These guidelines ensured that the translation maintained the same meaning and content as the original version, without any plagiarism or unauthorized use of the source material. The translation process involved several steps, including forward translation, backward translation, and pilot testing to ensure the accuracy and reliability of the Turkish version of the scale. The objective was to create a culturally adapted and linguistically equivalent version that could be used effectively in Turkish-speaking contexts. Cognitive debriefing is an essential step in the research process where a pre-test face-to-face interview is conducted with parents who represent the study population. In this stage, 30 parents from each age group participated. During the interviews, no questions were found to be misunderstood or misinterpreted by the parents. Only a few minor clarifications were needed, which were addressed promptly to ensure the clarity and comprehensibility of the questionnaire. The cognitive debriefing process helped validate the questionnaire and confirmed that it effectively captures the intended information without any plagiarism or unauthorized use of previous works.

*Data analysis*

Analysis in the current study were performed using IBM SPSS version 25.0 and SPSS AMOS version 25.0 (IBM Corp, Armonk, New York, USA). The normal distribution assumption was tested using the Shapiro-Wilk and Kolmogorov-Smirnov tests, and the scale scores did not meet this assumption. Item analysis was performed by examining the means, standard deviations, and item-total statistics for each item. Construct validity was determined using confirmatory factor analysis (CFA) and divergent validity methods. Internal consistency was assessed using Cronbach's alpha and Spearman-Brown coefficients obtained through the split-half method. The Kruskal-Wallis test was used to compare scale scores between more than two groups, while the Mann-Whitney U test was used for comparisons between two groups. The Spearman correlation coefficient was used to examine the relationships between variables. The statistical significance level was set at  $p < 0.05$ .

**Results**

Most of the participants were mothers (91.3%), and 8.7% (n=24) were fathers, aged between 22 and 58 years

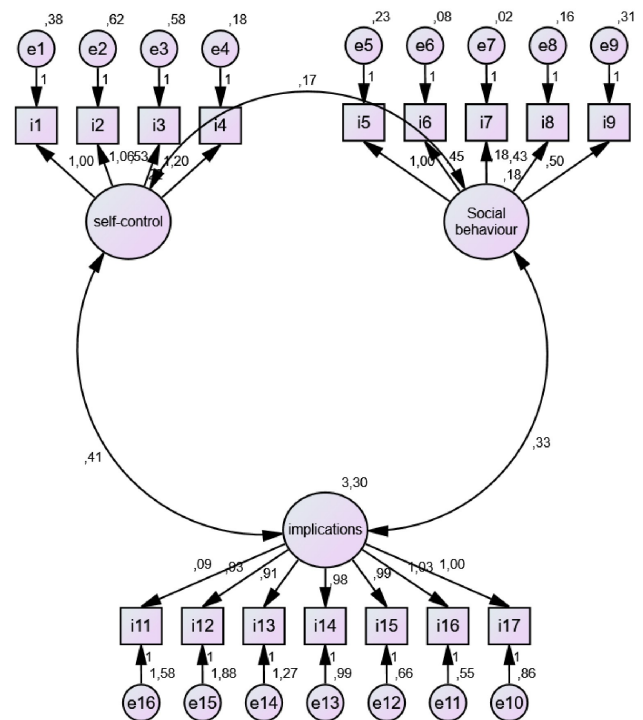
(M=37.9, SD=6.29). Most parents (n=257) shared information about their children, with 5.4% sharing information about their cousins and only 1.5% sharing information about stranger children. Table 1 presents the sociodemographic data of the parents and their sharenting practices.

*Descriptive statistics*

The total score of SES for the parents was  $27.3 \pm 13.3$ . The subgroup mean scores for the Sharenting Evaluation scale were as follows:  $22.1 \pm 11.2$  for the implication subgroup,  $3.2 \pm 2.2$  for the self-control subgroup, and  $5.5 \pm 1.6$  for the social behavior subgroup. There was no significant relationship between SES, subscale scores, and sociodemographic factors of the parents ( $p > 0.05$ ). Before validity and reliability assessments, item analysis was performed on the scale items. Based on the item-total statistics, the 10th item was removed from the Turkish version of SES (see Table 2). Cronbach's alpha for the total scale was 0.87, and for the subscales, it was 0.92 for implications, 0.64 for social behavior, and 0.68 for self-control. Validity and reliability analyses were conducted on the remaining 16 items.

*Construct validity*

Confirmatory Factor Analysis (CFA) was used to determine the construct validity of the scale. The chi-square test was significant ( $p < 0.001$ , chi-square/df =  $241.1/100 = 2.411$ ), but the value was less than 5, indicating a good fit. The goodness of fit statistics was above 0.85. The CFI=0.936, TLI=0.923, GFI=0.901, AGFI=0.866, RMSEA=0.072, and RMR=0.07, which is lower than 0.08. The CFA results indicated that the scale had sufficient



**Figure 1.** Path diagram for the SES scale ( $\chi^2 = 241.1$ ;  $df = 100$ ;  $p$  value  $< 0.001$ ).

**Table 1.** Parents' sociodemographic data and sharenting features.

Parents' Sociodemographic Data		n (%)
Mother		252 (91.3)
Father		24 (8.7)
Age	<35 years	94 (34.0)
	35-50 years	173 (62.7)
	>50 years	9 (3.3)
Job	Private sector	91 (33.0)
	Health employeer	43 (15.6)
	Engineer-Mimar	37 (13.4)
	Teacher	29 (10.5)
	Official	28 (10.1)
	Housewife	26 (9.4)
	Academician	12 (4.3)
	Lawyer	10 (3.6)
Marital status	Married	254 (92.0)
	Divorced	22 (8.0)
Income status	5500 TL	6 (2.2)
	5501-11.000 TL	72 (26.1)
	11.001-16.500 TL	69 (25.0)
	Over 16.501 TL	129 (46.7)
Working status	I am not working	65 (23.5)
	Part time	27 (9.8)
	Full time	184 (66.7)
Education status	Primary school graduate	2 (0.6)
	Secondary school graduate	1 (0.4)
	High school graduate	33 (12.0)
	Undergraduate graduate	173 (62.7)
	Graduate	67 (24.3)
Number of kids	1	155 (56.2)
	2	112 (40.6)
	3	9 (3.2)
Parents' Sharenting Features		
Sharing Content Related to Children on Social Media	Information	25 (9.1)
	Photo	165 (59.8)
	Video	7 (2.5)
	Information-photo-video	79 (28.6)
The relationship between the parents and the child whose photo was shared	Child	257 (93.1)
	Nephew, cousin	16 (5.8)
	Shared no relationship	3 (1.1)
Frequency of sharenting	Less once a month	214 (77.6)
	2-3 times a month	47 (17.0)
	Once a week	7 (2.5)
	2-3 times a week	8 (2.9)

model fit for construct validity (see Figure 1). This study used the  $\chi^2/sd$  ratio (CMIN/DF) used to determine the model-data fit, with a value of 2.411, indicating a good fit. The other fit indices were above 85%, indicating a good fit [27].

#### Reliability assessment

Cronbach's alpha coefficient ( $\alpha$ ) was used to assess the internal consistency and reliability of the SES for each

subscale (Table 2). The overall reliability of the scale was 0.855, indicating that the scale was highly reliable. For each dimension, the reliability was: implications ( $\alpha = 0.917$ ), social behavior ( $\alpha = 0.485$ ), and self-control ( $\alpha = 0.680$ ). The  $\alpha$  value of social behavior was low, but removing item 10 increased the reliability to 0.640. Cronbach's  $\alpha$  for the total scale was 0.87, and for the three subscales, it was 0.92, 0.62, and 0.68 (see Table 2). The split-half method was used to examine the internal consistency re-



**Table 2.** Cronbach alpha values of the scale's total and subscales.

	After removing 10 <sup>th</sup> Item	
	$\alpha$ values	$\alpha$ values
Sharenting Evaluation Total	0.855	0.871
Factor 1: Implications	0.917	0.917
Factor 2: Social behaviour	0.485	0.640
Factor 3: Self-control	0.680	0.680

**Table 3.** Spearman's correlations.

Relation	Sperman's rho correlation coefficient	p values
SES - Implication	0.950	<0.001*
SES - Social behavior	0.510	<0.001*
SES - Self control	0.534	<0.001*
Implication - Social behavior	0.340	<0.001*
Implication - Self control	0.316	<0.001*
Social behavior - Self control	0.518	<0.001*

\*: p&lt;0.05.

liability of the 16-item version, with a Spearman-Brown coefficient of rSB 0.951, indicating excellent internal consistency.

This study evaluated the relationship between SES, sub-dimensions, and internet addiction test scores using the Spearman correlation coefficient. Although there was a significant linear relationship between SES and the Internet Addiction Scale, the correlations were between 14.8% and 21.5%, indicating divergent validity. This study examined the correlation coefficients (r) and corresponding p-values between the Sharenting Evaluation Scale and its subscales (Implications, Social Behavior, and Self-control) with the Internet Addiction Test. The total scale of the Sharenting Evaluation Scale showed a positive correlation with the Internet Addiction Test ( $r=0.185$ ,  $p=0.002$ ). Among the subscales, Implications ( $r=0.148$ ,  $p=0.014$ ), Social Behavior ( $r=0.215$ ,  $p<0.001$ ), self-control ( $r=0.151$ ,  $p=0.012$ ) and had positive correlations with the Internet Addiction Test.

Table 3 presents the Spearman's correlation coefficients and corresponding p-values for the relationships between subscales of the SHarenting Evaluation Scale (SES). The SES showed a strong positive correlation with Implication ( $r = 0.950$ ,  $p < 0.001$ ), and moderate positive correlations with Social Behavior ( $r = 0.510$ ,  $p < 0.001$ ) and Self-control ( $r = 0.534$ ,  $p < 0.001$ ). There was also a moderate positive correlation between Implication and Social Behavior ( $r= 0.340$ ,  $p < 0.001$ ) and Implication and Self-control ( $r= 0.316$ ,  $p < 0.001$ ). Additionally, a moderate positive correlation was found between Social Behavior and Self-control ( $r= 0.518$ ,  $p < 0.001$ ). These significant correlations indicate strong associations between the SES and its subscales.

In conclusion, the Turkish version of the SES was found to be a valid and reliable measurement tool for Turkish parents. Confirmatory factor analysis was used to construct

the validity of the scale, the Cronbach  $\alpha$  coefficient was used to determine reliability, and the Spearman-Brown coefficient was obtained by the split-half method to provide additional evidence for reliability.

## Discussion

Sharenting poses a significant risk of violating children's privacy and making them vulnerable to abuse. However, there is currently no Turkish scale available to assess the extent of sharenting. This study aimed to fill this gap by validating the Turkish version of the Sharing Evaluation Scale (SES). Previous research by Hinojo-Lucena et al. (2020) revealed that parents not only sharing pictures of their own children but also of their relatives and friends [28]. In contrast, Romero-Rodríguez et al. (2022) found that 9.6% of participants shared photos of children they had no relationship with on social media [16]. In our study, only three parents shared pictures of unrelated children, which may be attributed to cultural differences or the limitations of our sample. The homogeneous nature of our sample, with parents sharing similar sociodemographic characteristics, might have contributed to the lack of significant relationships between sociodemographic factors and sharenting. Nevertheless, future studies with more diverse populations are necessary to validate these findings.

The present study aimed to evaluate the reliability and validity of the Turkish version of the Sharing Evaluation Scale (SES) through rigorous statistical analyses. To assess the scale's internal consistency, we calculated Cronbach's alpha coefficient, which measures the reliability of items in a scale. During the initial analysis, the social behavior subscale showed lower reliability. However, after removing item 10, the reliability of this subscale significantly improved, indicating that item 10 might not have been contributing effectively to the measurement of social behavior related to sharenting. Additionally, we examined the item-total correlations, which assess the extent to which individual items are related to the overall scale score. The findings demonstrated that the implications subscale was strongly associated with sharenting, signifying its significance in capturing relevant aspects of parents' sharing behavior on social media.

Furthermore, we conducted confirmatory factor analysis (CFA) to validate the factor structure of the SES in the Turkish context. The results of CFA provided support for the factorial validity of the scale, indicating that the items within each subscale were adequately related to their underlying constructs. Of particular interest was the positive correlation observed between the implications-social behavior and social behavior-self-control subscales, which corroborated findings from previous research. This finding suggests that parents who engage in more sharenting practices may be less inclined to exercise self-control over their social media sharing behavior, possibly due to perceived benefits or social pressures associated with sharing their children's information online.

In conclusion, the comprehensive evaluation of the Turkish version of the Sharing Evaluation Scale (SES) confirmed its reliability and validity as a valuable tool for assessing

sharenting behaviors among Turkish parents. Its successful implementation can provide healthcare professionals and researchers with valuable insights into parental sharing practices on social media, enabling a better understanding of the potential risks and implications for children's privacy and safety. The 16-item Turkish version of the SES has demonstrated its effectiveness and ease of application during well-child visits, making it a practical tool to identify sharenting behaviors and protect children from potential digital footprints.

Nevertheless, it is essential to acknowledge the limitations of our sample and the scope of our investigation. Further research is warranted to explore additional factors that may influence sharenting behaviors and to validate the scale in more diverse populations, ensuring its robustness and generalizability across different cultural contexts. By addressing these aspects in future studies, we can enhance our understanding of sharenting practices and develop more targeted interventions to promote responsible and informed sharing behaviors among parents in the digital age. Another significant limitation of our research is the limited number of fathers included in the study. To address this issue, future studies should aim to have larger sample sizes that include a more representative number of fathers. Furthermore, it is important to acknowledge that our research is limited by the inclusion of parents who share less than once a month. Therefore, there is a need for further studies that evaluate the scale we used with parents who share more frequently in order to obtain a more comprehensive understanding.

## Conclusion

The comprehensive evaluation of the Turkish version of the Sharing Evaluation Scale (SES) confirmed its reliability and validity as a valuable tool for assessing sharenting behaviors among Turkish parents. Its successful implementation can provide healthcare professionals and researchers with valuable insights into parental sharing practices on social media, enabling a better understanding of the potential risks and implications for children's privacy and safety. The 16-item Turkish version of the SES has demonstrated its effectiveness and ease of application during well-child visits, making it a practical tool to identify sharenting behaviors and protect children from potential digital footprints. By utilizing this measurement, health professionals can identify parents who engage in risky sharenting behavior, thereby helping to prevent violations of children's rights in the digital world.

## Disclosure statement

All authors declare no conflict of interest.

## Data availability

The datasets generated and/or analyzed during the current study are available from the corresponding author on request.

## Ethical approval

We obtained permission from José-M. Romero-Rodríguez, the corresponding author of the SES study before conducting the study. The study protocol received approval from

the local ethics Committee (Baskent University Institutional Review Board and Ethics Committee) and the legal representatives of the children provided informed consent prior to their participation in the study. Online and verbal consent was obtained from all participants. The study adhered to the principles outlined in the Declaration of Helsinki and followed Good Clinical Practice guidelines.

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