

**AN EVALUATION OF THE SOCIAL SUPPORT NETWORK COMPONENT OF
THE PILOT CHAMP STUDY IN KWADEDANGENDLALE, SOUTH AFRICA**

By

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ABSTRACT

This study explored the social networks and social support of parents in Embo and Molweni, two villages of KwaDedangendlale outside Durban. The study is part of a larger South African project, CHAMP-SA (Collaborative HIV/AIDS Adolescent Mental Health Project). CHAMP-SA is an adaptation of CHAMP which originated in the USA. CHAMP works with pre-adolescents and their families in addressing parenting issues with the aim of re-establishing the adult protective shield for these children. The current study evaluates the social network component of the pilot phase of CHAMP-SA. The first part of the current study was quantitative and employed a repeated measures quasi-experimental design intervention with both the experimental and control groups. The second, qualitative part used individual interviews to interrogate the results of the quantitative data. Content analysis was used to determine what factors impeded or enhanced the process of social networking. Bronfenbrenner's Systemic Ecological Theoretical Model was used to understand these at a personal, interpersonal and community level.

DECLARATION

Unless otherwise indicated in the text, I, **Nkosikhona Nicholas Colvelle** (Student Number 200200078) do hereby declare that this dissertation represents my own work.

Signature.....

Date

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CHAPTER 1

INTRODUCTION

“Umuntu wumuntu ngabantu”, is an IsiZulu saying which literally translated means ‘a person is a person through other people’. This is a central theme in the current study, which is part of the larger, Collaborative HIV/AIDS Prevention and Adolescent Mental Health Project in South Africa (CHAMP-SA).

CHAMP-SA is an adaptation of the US-based CHAMP programme, notably in Chicago and New York. The CHAMP programme has also been used in Trinidad and Tobago (Bell, Flay and Paikoff, 1993). In South Africa, it has been implemented in three sites in 2002: two semi-rural areas (Embo and Molweni) of KwaDedangendlale, near Hillcrest outside Durban; and Cato Crest, an urban informal settlement in Cato Manor, Durban. The current study focuses its attention in the two semi-rural areas of KwaDedangendlale.

Most programs deal with information giving and HIV/AIDS awareness campaigns about the transmission and prevention of the pandemic. While this route might be useful to a certain extent, very few interventions involve children with their caregivers in prevention activities (Eaton, Flishera & Aarob, 2003). CHAMP is a family-based prevention program aimed at promoting health and preventing HIV/AIDS risk exposure in preadolescent children (McCormick, McKeman-McKay, Wilson, McKinney, Paikoff, Bell, Baptiste, Coleman, Gillming, Madison & Scott, 2000), primarily through the provision and the strengthening of the adult protective shield for children

especially in relation to HIV and AIDS. This is done by working with both the family (parents and children), and the community to empower families in such areas as improving communication between parents and their children, helping parents and children identify risky areas and situations, and providing parents and children with social support networks. CHAMP's intervention is developmentally inclined, targeting pre-adolescents on the basis that they are at a stage before the beginning of sexual behavior and puberty transition (Bell, Flay & Paikoff, 1993).

McCormick, et al. (2000) argue that intervention programs that are focused on AIDS prevention often have to deal with three obstacles in communities. The first obstacle is about securing community involvement and this is often fraught with lack of trust and uncertainty. Next comes the burden of reducing tension between researchers who are often outsiders and community residents, with the aim of establishing equality amongst all parties. The third is the development of culturally and contextually relevant programs that are defined to be so by community participants, ensuring that culturally sensitive issues are taken into cognizance. CHAMP does all this by working with communities in developing a programme that responds to their distinctive challenges and needs as they relate to AIDS prevention among adolescents. It achieves this through collaboration between academics and community members.

In raising their children, parents need a helping hand from community resources. In order to get support, one has to establish and maintain healthy relationships with others; that is, one has to have a healthy social network that would include family, friends, neighbours and schools (Pinderhughes, Nix, Foster & Jones, 2001; Heaney & Israel, 1997; Glanz, Lewis & Rimer, 1997). CHAMP-SA focused on a variety of aspects related to parenthood and raising children. One aspect, which is the

focus of the current study, was on social networks. The aim of the current study was to evaluate whether participants perceived the CHAMP-SA program to have been effective in increasing or improving their social support networks.

CHAPTER 2

LITERATURE REVIEW

INTRODUCTION

This chapter provides definitions of terms such as social networks, social support, social support networks, social cohesion, social capital, as well as perceived and received social support. It also reviews studies that have been conducted in the area of social networks and social support.

DEFINITION OF TERMS

A social network is defined as a structure of interpersonal relations that tie individuals together (Garbarino, 1983). Heaney and Israel (1997) referred to social networks as a person-centered web of social relationships. A social network consists of a series of formal and informal ties between the central actor and other actors in a circle of acquaintances. These definitions concur with each other in that they include interpersonal relationships as their main theme. Treadwell, Leach and Stein (1993) define social networks as individuals' perceptions of both how they feel about their relationship with significant others in their life and how they think those others feel about that relationship.

Social support is defined as the means by which people give assistance to each other. (Gottlieb, 1983; House & Kahn, 1985). Heaney and Israel (1997) defined social support as a product of, and as one of the important functions of social relationships. Colletta (1981) defined social support as the: "emotional or instrumental assistance which helps cushion the individual against the harmful

effects of stressful events and which facilitates physical and psychological well-being and effective role performance” (p.191). According to Joseph (1999), social support refers to the complex and dynamic interpersonal processes that help to protect against the development of problems in physical and mental health. Moran, Ghate and van der Merwe (2004) defined social support as something that refers to social relationships with both individuals and institutions and have the potential of providing emotional and practical support. In their definition they added that these relationships are known to play a big role in parenting.

A social support network is therefore defined as the interconnected relationship that provides durable patterns of interaction, interpersonal relations, nurturing, and reinforcements for coping with daily life (Garbarino, 1983). Social support networks include kin and nonkin and professional and nonprofessional relationships as well as both instrumental and socioemotional support (Gottlieb, 1983; Wellman, 1981).

Social cohesion refers to mutual trust among neighbours combined with the willingness to intervene on behalf of the common good. There is evidence that rates of violence are lower in neighborhoods with higher social cohesion (Sampson, Raudenbush & Felton, 1999). Buckner (1988) defined social cohesion in terms of the attraction to neighbourhood, neighbouring and the psychological sense of community.

According to Procidano (1992), perceived social support is the subjective evaluation of the quality of support received or available. Sarason, Pierce, Bannerman and Sarason (1993) defined perceived social support as a feeling that one is cared for and valued by other people.

McCaskill and Lakey (2000) reviewed literature on perceived support and they found that high perceived social support and low social undermining have been consistently linked to positive mental health in a wide range of populations.

Putnam (2000) defines social capital as the collective value of all social networks and the inclinations that arise from these networks to do things for each other. Fukuyama (1995) also defines social capital as the existence of a certain set of informal values or norms shared among members of a group that permit cooperation among them. Robison, Schmid and Siles (2002) define the term as a person's or group's sympathy toward another that may produce a potential benefit, advantage, and preferential treatment beyond that expected in an exchange relationship. These definitions concur with each other in that they all mention the presence of interaction or relationships, with a common goal.

The main theme of the definitions is the necessity of the presence of others in an individual's social life to facilitate and promote good health. This theme is concurrent with the aforementioned IsiZulu saying *Umntu wumuntu ngabantu*. There is also great consensus among authors that the member of a network should feel that the support received is beneficial for them in order to appreciate and reciprocate it (McCaskill & Lakey, 2000; Sarason, Pierce, Bannerman & Sarason, 1993). This is what CHAMP seeks to inculcate in the families and communities: the sense of unison.

LITERATURE REVIEW

This section begins with the discussion of social cohesion bearing in mind, and with the assumption that, for people to form social ties and give or receive support there needs to be some form of cohesion in their community and society. Discussion of social networks, social capital and social support follows thereafter.

Social cohesion refers to a sense of belonging to a common community with shared values, interpretations and challenges and has economic, political and socio-cultural dimensions. The usual premise is that social cohesion is a good thing, so it is conveniently assumed that further elaboration is unnecessary (Kearns & Forrest, 2000). Yet, if public institutions and public policies are to work towards a goal of greater social cohesion, then greater clarity and consensus about its meaning and effects are required. According to Kearns and Forrest (2000), the essential part of the concept is that a cohesive society 'hangs together'; all the component parts somehow fit in and contribute to society's collective project and well-being; and conflict between societal goals and groups, and disruptive behaviours, are largely absent or minimal.

Kearns and Forrest (2000) suggest that the concept of social cohesion can be explored further by breaking it down into a number of elements. The constituent dimensions of social cohesion are: common values and a civic culture; social order and social control; social solidarity and reductions in wealth disparities; social networks and social capital; and territorial belonging and identity.

Social cohesion can also be understood by the role it plays in our society from a point of view of its impact on the individual, the family or neighbourhood and the society at large. At the personal level, Bollen and Hoyle (1990) argue that early usage of cohesion examined individual "forces" assumed to influence members to remain a part of the group. However, it is unclear which forces are most important or how many forces should be measured to ascertain cohesion. Bollen and Hoyle (1990) assert that individual forces can vary from group to group and member to member, thus making it difficult to devise a measure that permits generalization across groups.

Bollen and Hoyle (1990) therefore suggested a way of dealing with this problem. They believed that operationalising cohesion would allow the subjects to use their own perceptions of why the group is important to them. These perceptions can be expressed along several dimensions such as satisfaction, task cohesion, instrumental value of the group, etc. Their proposed measure tries to capture two dimensions of perceived cohesion in groups: sense of belonging and feelings of morale. According to Bollen and Hoyle (1990), belonging comprises both cognitive and affective elements developed through experiences with the group, and morale is a global affective response associated with belonging to the group.

Family or neighbourhood level captures Buckner's work which understands cohesion as three dimensional. Buckner (1988) used this approach to create an instrument to measure neighbourhood cohesion. The first dimension he coined *sense of community* and had to do with the feelings of belonging to the neighbourhood. The second dimension, *attraction to neighbourhood*, involves how one feels attracted to living in their neighbourhood. Lastly, the *degree of interaction* within the neighbourhood deals with how one visits with one's neighbours in their homes.

At the societal level, social cohesion describes a positive characteristic which deals with the relationships among members of that society. McCracken (1998) indicates that trust allows members of that society to follow the norms defined by the culture which strengthens dependability and social capital, the latter being the capability that arises from the prevalence of trust in a society or in certain parts of it (Fukuyama, 1995). Social cohesion therefore describes a positive characteristic of a society, dealing with the relationships among members of that society.

When the community utilizes and values social networks in their daily routines, this yields a positive impact on the social cohesion of that particular community (Berkman, 1995). The connectedness formed by strong ties amongst community members and neighbourliness, dictates unity and the fight towards a common goal, which is helping another person. Berkman (1995) argues that communities that are characterized by a strong bond often find it easy to exercise any form of social control. Deviance among these communities is often minimal since values and cultural norms are still held with high regard. Community members act in unison when disciplining deviants irrespective of whether they are blood relatives of the offender or not. Berkman (1995), drawing from Durkheim's work, makes mention of societies plagued by suicide. He argues that this form of deviance from social norms relates to the level of social integration or lack thereof, of the group. In these situations, Berkman (1995) alleges that social control and norms are weakened.

Heaney and Israel (1997) believe that there is a positive relationship between social networks and social support, and health. Social networks and social support can enhance one's ability to access new contacts and information, and to identify and solve problems. Conversely, individuals' health status will influence the degree to which they are able to maintain and mobilize a social network.

Moran, et al. (2004) reckon that support for parents comes from a variety of sources, often grouped into informal (from family, friends and neighbours), semi-formal (often community-based organizations), and formal support (organized services that are often needs-led and provided by the statutory sector and voluntary sector). Informal ties include those ties held between family, kin, friends and neighbours, whereas formal ties include ties to voluntary associations and the like.

Therefore, strengthening social networks and enhancing the exchange of social support may increase a community's ability to acquire its resources and solve problems. Social networks link organizations and individuals with each other and enable the community to function in a healthy way. Similar views have been expressed by others: Gottlieb (1983) believes that social support can play a central mediating role in preventing disease, maintaining health, and insulating people from stressors; Jankowski and Videka-Sherman (1996) maintain that confidant relationships cannot only diminish the impact of life stress and promote well-being, but also decrease vulnerability to disease, emotional distress, and psychological symptoms during crises.

Social capital is supplied by individuals who have sympathy for others. Robison et al. (2003) write that social capital may vary from mild sympathy to strong empathy, in which one may not be able to differentiate between one's and others' well-being. Social capital has the capacity to produce *socio-emotional goods* (Robison, et al., 2003). Socio-emotional goods, according to Robison et al. (2003), refers to the expressed emotions between persons that validate or provide information that

increases self-awareness and self-regard. People exchange socio-emotional goods when interacting, and by so doing invest in social capital.

Social capital is found in most relationships and social networks. Therefore, social networks can be used to describe certain patterns of relationships, or briefly, where one's social capital resides. Putnam's (1995) study of American life drew a distinction between the different types of social networks likely to support social capital. Putnam identified neighbourhood networks, something he described simply as 'good neighbourliness', as promoting social capital.

Different kinds of social capital can be found within networks. Putnam (2000) speaks of bonding and bridging social capital as the two main concepts of social capital. Bonding involves multiple and intimate ties or the value assigned to social networks between homogenous groups or individuals who hold common core values. Bridging on the other hand, refers to the linkage of individuals with diverse experiences, values and backgrounds. Bonding social capital involves trust and reciprocity in closed networks, and helps the process of 'getting by' in life on a daily basis (Woolcock, 2000). 'Getting ahead' in contrast, is facilitated through bridging social capital involving multiplex networks which may make accessible the resources and opportunities which exist in one network to a member of another. Linking social capital involves social relations with those in authority, which might be used to garner resources or power (Narayan, 1999).

The current study sought to evaluate whether the CHAMP programme was able to increase bonding or bridging social capital by improving social networks.

Moran, et al. (2004) argue that social support is associated in complex ways with coping with parenting. Ghate and Hazel (2002) also argue that the absence of social support can lead to emotional, mental and physical ill health, which may impact on the ability to cope with parenting. Social support, according to Heaney and Israel (1997), is intentionally given with a view to providing help to the recipient. Linking people with social networks may help them to interpret events or problems in a more positive, and constructive way.

Previous research has described four types of supportive behaviours or acts (Heaney & Israel, 1997). First, emotional support is said to involve the provision of empathy, love, trust and caring. Having at least one strong close relationship is an essential predictor of good health and affective support is most strongly and constantly linked with good health and well-being (Heaney & Israel, 1997). Secondly, instrumental support deals with the provision of tangible help and services that directly aids a person in need. Thirdly, informational support is the provision of advice, suggestions and information that one can use to access help and solve problems. Lastly, appraisal support involves the provision of information that can be used for self-evaluation. This could include constructive feedback, affirmation and social comparison.

It should be noted that one cannot easily separate these types of support. As one gives the one type of support, the other one is also automatically received (Heaney & Israel, 1997). The types of social networks and social support that enhance the well-being and health of an individual, differ according to age or developmental stage of the person receiving support (Heaney & Israel, 1997).

“In addition, people who are experiencing a major life transition or stressor benefit from different types of support during the different stages of coping with the stressor” (Heaney & Israel, 1997; p.190). For example, a bereaved person in denial and shock may benefit from a closely knit and protective environment which provides strong emotional support. The same individual who has accepted the death of their loved one may benefit from more wide spread networks that provide new ties and different kinds of support.

Many studies in the area of social support have focused on its effects and impact on the individual’s emotional life. According to Heaney and Israel (1997), a number of studies have shown that the degree and nature of one’s social relationships affect one’s health. Mood disturbances in particular have been the target of these studies with particular attention given to female parents or caregivers (Colletta, 1981; Turner, Sorenson & Turner, 2000).

Colletta (1981) found that young mothers tended to be more affectionate when they are engulfed with high levels of support, whereas low levels resulted in hostility, indifference and rejection of their children. Emotional support tended to predict the adolescent mother’s behaviour.

Rhodes, Ebert and Fischer (1992) explored the role of mentors in promoting young African-American mothers' emotional well-being. They found that the presence of a mentor in a mother's support network appears to be associated with lower levels of depression.

Pinderhughes et al. (2001) observed that living among unemployed neighbours influences parents' behaviours negatively. That is, they show less warmth and higher levels of harsh discipline and restrictive control. Lack of tangible or material support also has an influence on parental warmth. This, according to Pinderhughes et al. (2001) could eventually lead to physical abuse of children.

Fudge, Neufeld and Harrison (1997) found that parents or caregivers who belonged to diverse social networks reported more satisfaction and little or no conflict with the support they received. On the other hand, parents with mainly kin-dominated social networks reported little satisfaction and more conflict.

Li, Seltzer and Greenberg (1997) examined how certain types of social support, namely social participation, emotional support and caregiving support, were related to depressive symptoms among caregivers. Their findings suggested that social support does not have uniform effects. Rather, the type of stressor, the type of social support and the individual context interact to result in the specific effect of support (Li et al., 1997).

Research has also shown that perceived social support is highly correlated with measures of self-esteem and self-concept (Aseron, Sarason & Sarason, 1992). Sarason, Sarason and Pierce (1990) proposed that when individuals feel that they are being cared for and valued, they develop

confidence in their abilities to deal with events and in the availability of others to give aid when it is needed. Moran, et al. (2004) mention that most interventions aiming at enhancing the social support networks of parents have focused mainly on its role in the parenting of infants and pre-school children. Heaney and Israel (1997) propose at least four categories of interventions related to social networks and social support:

Enhancing existing social network linkages to change the attitudes and behaviours of the support recipient, support provider or both. This is done by training network members in skills of support provision and training focal members in mobilizing and maintaining social networks. Existing network members are identified and the subsequent intervention is consistent with the established norms and styles of interaction. *Developing new* social network linkages when the existing networks are small, overused or when there is none. Enhancing networks through the use of *indigenous natural helpers*. These individuals are network members to whom others turn for advice, support, and any kind of help. Interventionists should be able to identify these individuals from the community to avoid conflicting ideas and interests. Enhancing networks through *community problem-solving*: identifies and resolves community problems by enhancing the community's ability to solve its own problems, increasing the community's role in making decisions that will benefit the community and in resolving specific problems. A combination of all these four types can also be used.

THEORETICAL FRAMEWORK

The current study makes use of an ecological systemic understanding of risk behaviour. Bronfenbrenner originated the theory in 1979. He used this theory in studying human behaviour and development. This theory looks at a person's development within the context of system of relationships that forms his or her environment. The theory proposes that development occurs in the context of complex systems that influence, impact and direct development (Albrecht & Miller, 2001). These systems are said to be dynamic as is the human being's development within them (Bronfenbrenner, 1979). Bronfenbrenner argues that the interaction between factors of a person's biology, the immediate family/community environment, and the societal landscape fuels and steers development.

There are four systems identified by Bronfenbrenner as contributing to the development of the human being (Albrecht & Miller, 2001). These are the microsystem, mesosystem, exosystem and the macrosystem. The microsystem is composed of the person as a child, and the sociocultural context of the family, including values, cultural practices, previous caregiving experiences, and reciprocal relationships between the child and her parents or frequent caregivers. The microsystem includes all the activities and interactions in the person's immediate environment (Albrecht & Miller, 2001). Bukakto and Daehler (1995) note that this is the immediate environment provided in such settings as the home, school, workplace and the neighbourhood. According to Berk (2000) the microsystem is the layer closest to the person and contains the structures with which the person has direct contact. This system constitutes the personal level factors of the framework.

The mesosystem includes connections between the person and family, and the neighbourhood and other settings that foster development (Albrecht & Miller, 2001). Berk (2000) argues that this layer provides the connection between the structures of the person's microsystem. Bukakto and Daehler (1995) contend that development in this system is provided by the interrelationships among the various settings of the microsystem. Albrecht and Miller (2001) further note that the educational context and the interface between cultural, religious, ethnic, family composition, racial and socioeconomic backgrounds are part of the mesosystem. This forms part of the interpersonal level factors of discussion for this framework.

The third system proposed by Bronfenbrenner is the exosystem. This system according to Albrecht and Miller (2001) is composed of the community and includes values and practices of schools, religious organizations, community agencies and social groups. The exosystem defines the larger social system in which the person does not function directly. Berk (2000) and Bukakto and Daehler (1995) argue that the structures in this layer impact the person's development by indirectly interacting with some structure in her microsystem. Examples of such structures according to Berk (2000) are parents' workplace schedules or community-based resources. This is where community level factors of influence will be discussed.

The macrosystem is composed of the broader society including economic resource allocation, business practices, employment, health and education priorities, government policies, demographic trends and technological changes (Albrecht & Miller, 2001). The priority given to people by the community is usually evident at this level.

Bukakto & Daehler (1995) argue that in Bronfenbrenner's ecological systems theory, major historical events and the broad values, practices and customs promoted by a culture are represented in the macrosystem level. Berk (2000) contends that this is the outermost layer in the person's environment and is comprised of cultural values, customs and laws. This system deals with the societal level factors of development.

Howes (2000) proposed a model for social development that builds on Bronfenbrenner's ecological systems theory. The primary difference in this social development theory lies in the centrality of relationships in understanding development. Howes' re-conceptualization moves attachment relationships with extended family members, alternative caregivers, and peers closer to the person, into the microsystem (Albrecht & Miller, 2001). It also places emphasis on the influence of a network of relationships, than simply the mother-child or parent-child relationship, which is more consistent with the child's experiences.

Howes (2000) argues that the relationships between the family and their childcare arrangements are added to the social context (mesosystem) of the person. Influences from relationships with the family and the relationship between the person and the quality of the childcare arrangements are considered key variables in the person's social development, and as much, are socializing agents.

At the exosystem level, Howes (2000) places the influence of culture as it is understood and enacted by the child's caregivers. Children are said to learn important lessons about how adults view their cultural background and features. These lessons are learnt through caregivers'

understanding, interpretation and enactment of caregiving routines, and they influence social development.

Howes (2000) places society at the macrosystem level, where social policy, racism, sexism, and beliefs about gender roles influence the social development of the person. A person's primary caregivers operate within these societal expectations, influencing how the person's social development proceeds.

In order to explain human behaviour at the societal level the subject matter of Social Capital theory was borrowed. Social capital according to Portes (1998) is the ability to garner benefits through membership in social networks and social structures. Howe and Shiell (2000) differentiate between two components of social capital. The relational element is when an individual enjoys some relation by virtue of being a member of a group. The material element on the other hand is when one claims the use of resources due to their membership to a social network or social structure (Howe & Shiell, 2000). Petersen (2002) posits that people are likely to adopt health-enhancing lifestyles if they feel supported, if they can trust and if they are involved in social matters.

Given the interdependency between the different levels, while an intervention to improve social networks such as CHAMP is situated at the interpersonal level of influence, influences operating at other levels such as personal, community and societal may however mediate the capacity of the programme to improve parental monitoring. This ecological systemic model thus provides a useful theoretical framework for understanding these factors in the evaluation of the CHAMP program.

The model gives an overall view of the person from growth as a child to adulthood. It captures every step and aspect of the person's development. CHAMP deals with a developing individual, who is at a transitional stage from childhood to adolescence. It is imperative to understand where this individual is coming from in terms of development, and where they are going to.

Bronfenbrenner's theory provides us with that luxury of looking at the person holistically in one framework. This framework compliments the principles of CHAMP as a program which among other things seeks to protect the developing individual using the protective shield of parents.

In a preliminary pilot study with parents/caregivers in KwaDedangendlale one of the issues that emerged regarding the raising of children was the lack of social networks and community cohesion, which made it difficult for parents/caregivers to protect their children against risky behaviour.

The aim of this study was:

- To evaluate the social network component of the pilot CHAMP-SA program in KwaDedangendlale, South Africa.

The objectives were:

- To determine whether there was an improvement in the perceived social support and social networks of caregivers immediately after the intervention (outcome-based objective).
- To understand the personal, interpersonal and community level factors which enhanced or impeded the provision of social support and social networks among caregivers (process-based objective).

- To further interrogate the findings obtained from the analysis of the quantitative component of the study.

CHAPTER 3

RESEARCH METHODOLOGY

INTRODUCTION

This chapter looks at evaluation research, which forms the foundation of the current study. It also outlines methods utilized in collecting and analyzing data as well as the aims and objectives of the study.

EVALUATION RESEARCH

Evaluation is the systemic acquisition and assessment of information to provide useful feedback about some object (Trochim, 2002). The word “object” in this case can refer to a program, policy, activity and so on. Among other things the course of this study involved collecting data, sifting through data, making judgements about the validity of the information and the inferences derived from it. This process concurs with the above definition of evaluation work.

The current study undertook both the formative and the summative evaluation forms. Trochim (2002) argues that formative evaluation involves the delivery of the program, the quality of its implementation and the assessment of the personnel, procedures, and inputs. Process evaluation falls under this form of evaluation and includes the investigation of the process of delivering the program. The larger study of which the current study forms part, undertook this component of the evaluation process.

Summative evaluation on the other hand, examines the effects or outcomes of the program delivery, determining the overall impact of the causal factor (Trochim, 2002). Outcome evaluation, which was also conducted in this study, falls under summative evaluation and investigates whether the program caused demonstrable effects or not.

Simon-Morton, Greene and Gottlieb (1995) assert that the importance of evaluation lies in the fact that it provides feedback necessary for improving the effectiveness of the program. It provides information, which indicates to the researchers if the program should be modified or discontinued.

In analyzing the methods of evaluation used for AIDS prevention programs, MacPhail (1998) argues that current evaluation methods are limiting in that they over-rely on quantitative outcome data. Much as the measures used give proof of an intervention leading to a desired impact or lack of it, they do not inform the researcher of the dynamics which have accounted for the outcomes. Methods of evaluation often ignore process evaluation strategies in favor of outcome ones. The current study focuses on both quantitative outcome measures as well as qualitative process evaluation in addressing the limiting factors outlined above.

CHAMP works with families in embarking upon issues related to HIV/AIDS prevention among preadolescents. The significance of this study is thus based on its target group (preadolescents), the level of prevention that it addresses (family-level intervention) and the types of evaluation it conducts (outcome evaluation).

RESEARCH DESIGN

A quasi-experimental pre and post intervention design was employed for the quantitative phase of the study. In quasi-experiments unlike true experiments, the intervention is done in an actual field and not in a controlled laboratory setting (Neuman & Wiegand, 2000). Although quasi-experimental designs do not allow the same degree of certainty about cause-and-effect relationships as an experiment does, a well designed quasi-experiment can offer convincing evidence regarding the effects of one variable on another (Breakwell, Hammond & Fife-Schaw 2000). Unlike true experimental designs, quasi-experiments do not necessarily have to manipulate independent or other variables for the outcome of their intervention (Breakwell, et al., 2000).

For the qualitative phase of the study, in-depth individual interviews were used to interrogate the findings of the quantitative data. Babbie and Mouton (2001) maintain that by combining quantitative and qualitative data one can capitalize on the strengths of each and ensure higher quality data.

SAMPLE

The sample was conveniently drawn from two areas of KwaDedangendlale, namely Embo and Molweni. These are semi-rural villages about 40 kilometers outside Durban. Participants were selected into the study by their availability to complete the 13 week long CHAMP intervention program. The total sample consisted of 95 women. Efforts were made to include fathers/male caregivers in the study but were unsuccessful. Only mothers/female caregivers volunteered to participate. All subsequent use of the term 'parent' refers to 'mother/caregiver/guardian'.

For the quantitative phase of the study, initially there were 25 participants in the Embo experimental group and 25 in the control group. In Molweni there were also 25 participants in the experimental group and 25 in the control group. Five participants from the posttest control group, dropped out off the sample and the final total sample was reduced to 95 participants. The reasons for the drop-out of participants could not be established since attempts to contact them for the posttest session, were unsuccessful. For the qualitative phase of the study there were five participants from each experimental group. The distribution of the participants by name of place, name of school, and test type is given in the Frequency Tables below.

Table 3.1: Name of Place

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Embo	42	44.2	44.2	44.2
	2 Molweni	53	55.8	55.8	100.0
	Total	95	100.0	100.0	

Table 3.2: Name of School

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Embo Gwadu Zenex	42	44.2	44.2	44.2
	2 Molweni Dawede	53	55.8	55.8	100.0
	Total	95	100.0	100.0	

Table 3.3: Test Type

		Testtype			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 pretest	53	55.8	55.8	55.8
	2 posttest	42	44.2	44.2	100.0
	Total	95	100.0	100.0	

DESCRIPTION OF METHODS

Procedure

Quantitative data

Pre and post-intervention quantitative measures were obtained one week before and one week after the 10 week CHAMP program. The questionnaires were completed in the schools where the CHAMP program was conducted. Access to these schools had been arranged via the local community structures, and in consultation with the community gatekeepers. Informed consent and confidentiality was discussed with all participants. Parents who could not read and write were assisted in completing the questionnaires by the trained facilitators (all postgraduate psychology students) who also conducted the CHAMP program.

Instruments

Social Networks Inventory

This is an eleven-item Likert-type self report scale developed by Treadwell, Leach and Stein (1993), drawing from the social atom construct and theory by Moreno (1932, 1936). The scale requires participants to list three individuals that they consider most significant in their lives and who are close to them in terms of their availability and supportiveness (Appendix 5).

It assesses social networks by measuring the test-takers' perceptions of how they feel about their relationships with significant others in their lives. It has strong test-retest reliability (0.92; $p < 0.01$) and alternate form reliability (Moulton, Blake & Frucker, 1960; Hlebec & Ferligoj, 2002). It also has reported face, content and construct validities (i.e. psychological 0.95, collective 0.79, individual 0.78 all at $p < 0.01$ and ideal 0.73; $p < 0.05$, which they combine to give an overall SNI index of 0.92; $p < 0.01$), and good predictive or criterion validity and convergent validity (Schroeder, Schwarzer & Endler, <http://www.fuberlin.de/gesund/publicat/spouses8.htm>. Accessed on 21/09/2004).

Qualitative data

Qualitative data was collected using face-to-face semi structured interviews. Semi structured interviews were conducted to interrogate the findings of the quantitative measure. All interviews were conducted in IsiZulu, which is the language most participants were comfortable with. Interviews were audio taped with the permission of the participants. Data was then transcribed into English.

Data Analysis

The Statistical Package for Social Sciences (SPSS) was used to compare mean differences between the experimental and control groups on pre- and post-intervention (Repeated Measures ANOVA). Thematic analysis was used to analyze qualitative data obtained from individual interviews. Thematic analysis focuses on identifiable themes and patterns of living and/or behaviour. The first step is to collect the data. Audiotapes should be collected to study the talk of a session or of an

ethnographic interview. From the transcribed conversations, patterns of experiences can be listed. This can come from direct quotes or paraphrasing common ideas (Terreblanche & Kelly, 1999).

According to Terreblanche and Kelly (1999), the researcher goes through five steps when analysing qualitative data. The first step is *familiarization and immersion* which entails reading the transcripts repeatedly, trying to get used to the content. The second step is *inducing themes* and here the researcher identifies emerging recurrent concepts and arrange them in a certain order of categories. Thirdly is *coding* where data is broken down into labeled sensible pieces of information and given a code. The fourth step is *elaboration* and in this step the analyst examines the themes more closely, compares them and classifies them accordingly. Lastly comes the *interpretation and checking*. In this final step the researcher gives a written account of the analyzed data and checks data for accuracy of interpretation.

Interview content segments (sections that addressed themes in the interview) were identified. Interview segments were then grouped by theme and analyzed to discover the content, subthemes, and other issues.

CHAPTER 4

RESULTS

QUANTITATIVE RESULTS

The Social Network Inventory Scale (SNA) (11-item) was used to quantitatively assess the existence of social networks with the participants. Ninety-five people completed the SNA scale but only seventy-eight responses were valid and 17 were excluded because of missing data. The reliability Cronbach Alpha was .72 for first person, .77 for second person and .76 for third person from the pretest scales. There were no significant reliability changes in the posttest scales (Cronbach's Alpha = .65, .64 and .76 respectively).

The results of the repeated measures analysis using the social network data did not show any significant differences between the experimental and control groups on pretest or on posttest. This means that the program had little to no effect on social networks.

According to the demographics the majority of participants rely on one person's income. Nearly everyone attends religious activities at least once a week. This was reported to be an activity of spiritual support and an extension of their social networks since they also have these services in other areas away from their church bases. However, nearly all participants did not belong to other social or cultural groups.

The quantitative results showed that out of the 95 participants in the sample, most people reported that they turn to their mother as the first person to talk to about their problems and to whom they turn for help. Most participants also reported that the first person they turn to for help is almost always available to them at least 52% of the time. The results also revealed that mothers are always available throughout the day and hence can be regarded as valuable sources of support. The second person(s) reported as a source of support for most participants was the sister and a friend (mostly female) and accounted for about 33.6% in combination. These people were reported to be in the age range of about 30-40 years. At least 14.9% of the participants reported using a third person as a close source of support. In this instance, a sister was mentioned as that source (See Table: 4.1 and Table: 4.2 below).

Table: 4.1 Relationship to Participant

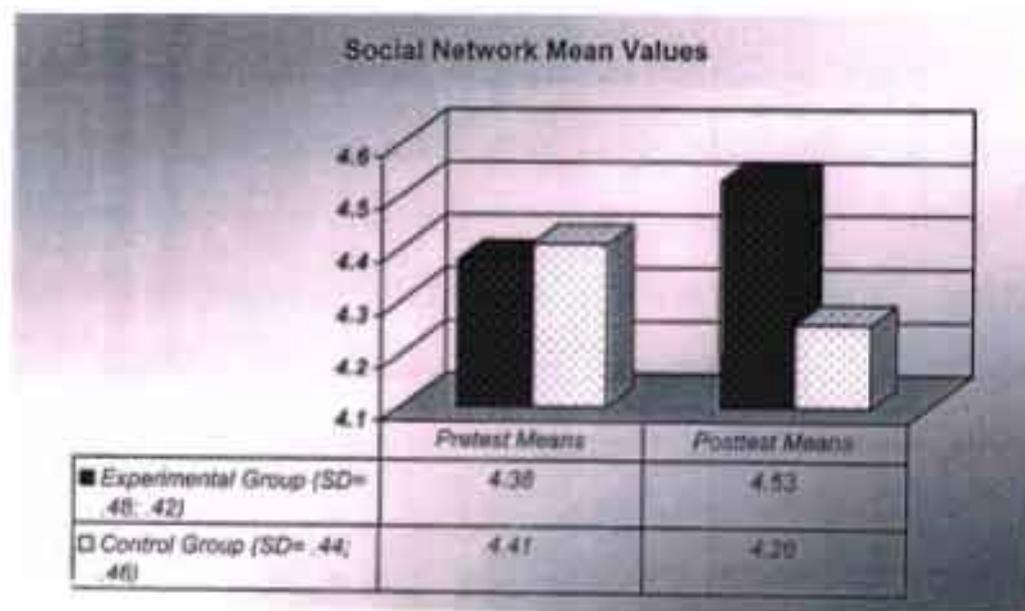
	Relationship	Frequency	Valid Percent (%)
First Person	Mother	23	26.4
	Husband	11	12.6
	Brother	9	10.3
	Sister	10	11.5
	Friend	7	8.0
	Total		60
	Other	35	31.2
	Total	95	100
Second Person	Sister	16	19.5
	Brother	10	12.2
	Friend	16	19.5
	Son	6	7.3
	Cousin	6	7.3
	Total		54
	Other	41	34.2
	Total	95	100
Third Person	Sister	14	19.7
	Brother	11	15.5
	Friend	11	15.5
	Cousin	6	8.5
	Neighbour	5	7.0
	Total		47
	Other	48	34
	Total	95	100

Table: 4.2 Age of Participant

	Age Range	Frequency
First Person	18-35	27
	36-50	36
	51-80	19
	Sub-Total	82
Missing		13
Total		95
Second Person	18-30	30
	31-45	35
	46-75	15
	Sub-Total	80
Missing		15
Total		95
Third Person	18-30	29
	31-45	25
	46-82	16
	Sub-Total	70
Missing		25
Total		95

Comparisons of means for social networks between the experimental and control groups were conducted. Figure 1 below shows an estimation of marginal means for these groups. The experimental group shows a slight improvement, with the darker bar graph, compared to the control group, both at pretest and posttest. Figure 1 presents an illustrative view of the differences between the means and standard deviations (SD = in brackets) for the experimental and control groups. The discrepancy between the means for the experimental group and the control group (pre and post test) show very little variation with only differences of 0.15 for each group. The f-ratio found between these groups was $F(1, 82)$ with $f = 0.00$ and $p = 0.983$. Although this improvement is not significant enough to hold water in interpreting the results, it is somehow an indication that there was some form of change in how participants received the program, and that resulted in some form of positive effect.

Figure 1: Repeated Measures Analysis for Social Networks



QUALITATIVE RESULTS

This section gives an account of the themes that emerged during the face-to-face interviews with participants from Embo and Molweni. These interviews were interrogating the quantitative results of the study. The participants were asked the following questions in the interviews:

1. What do you understand by the term social support networks?
2. What role do you think social support should play in one's life?
3. Have you ever been a member of any program where you had the opportunity to expand the number of people who could support and help you?
4. What do you think was CHAMP's significance and importance in your life?
5. Do you think CHAMP could or should have done anything differently to help empower you?
6. Do you believe that CHAMP was able to help you increase the number of people who can help in the community?
7. Why do you think CHAMP failed to help you improve your social networks?

The interpretation of themes is based on the systemic ecological approach used as a theoretical framework for this study.

PARTICIPANTS' UNDERSTANDING OF SOCIAL SUPPORT AND SOCIAL NETWORKS

Participants understood social support to mean offering help to someone who is in a needy position. They emphasized the point of working in unison as the community in giving a hand to people who are struggling and those who need their problems to be solved. This was mentioned as an action with *ubuntu* in it.

...In my opinion (coughing) as you say the term in my opinion is something that shows ubuntu when people help each other in the community. It shows ubuntu when a person has a particular problem and needs helping and you offer a helping hand.

It was interesting to note that most participants used the rendering of instrumental or tangible support in their definition of the term.

...Lets say your neighbour is short on something like salt or what, and then they come to my home for some I have to give them if I have enough. Yes.

Some participants also mentioned giving love, prayer and just talking as other means of supporting one another.

...It means that you give to someone to help them from what ever problem they may have. Even if they don't have a big problem just to give love or anything to support them emotionally as well with comfort etc...

Most of the time participants mentioned that support is given to someone who is poor, bereaved, needy, having a problem, sick, orphans and anyone who has nobody to take care of them. Family and neighbours were most often named as important support givers as they are almost always available whenever something happened.

... if you're not getting along with your neighbours who is going to help? Neighbours are the ones who see things first when you're in trouble.

THE ROLE OF SUPPORTING EACH OTHER

The giving and receiving of support was said to build friendships in the community and also serves to improve the status of the people by lifting them up.

...it's important because when you help someone you do that to improve their status and condition. Like orphans and other people who are in mourning and people who are sick. So support is important to lift that person and not look down on them.

It was also mentioned that by giving support to someone, one expands the social network and creates more chances of getting support elsewhere.

...Well even I who was offering support I learn a lesson and I'll be able one day to seek support if I meet with some difficulty because I did it for someone. I think that even if it's not the same person I helped but those who witnessed it will be able to offer support to me in case I need some.

FAMILIARITY WITH SOCIAL NETWORKS AND SOCIAL SUPPORT

Most participants reported that they had never been part of any program, organization or club that had offered them support, except for CHAMP. Yet most of the participants were part of some community structures for example, the church, school governing body and community health workers. However, they did not view these structures as providing support for them.

...No I haven't except for CHAMP. Nothing else because here at school I've been part of the school committee which I still am but there is no support.

PERSONAL LEVEL FACTORS

This segment looks at the way the program empowered participants by providing them with skills as individuals.

Enhanced communication skills

The participants felt that CHAMP helped them in a number of ways. They reported that it brought awareness to them about issues relating to raising their children. They mentioned that they felt empowered to talk with children about puberty and other “hard to talk about” subjects like AIDS, sex and death.

...It taught us about teaching kids about sex and telling them what to do under certain circumstances...

and

... it helped a lot even at home the program's lessons are very useful. It helped improve the way I communicate with people even when they are in trouble, it helps them to see you as a friend and be free to approach you with their problems.

and

...Except for the money, it was also to learn from the lessons that changed my life. I used to be very shy and wouldn't speak certain things in public... But after the program I was able to speak without being shy, even with my children.

Increased confidence

Some parents reported having much having confidence in themselves and seeing themselves as leaders.

...I'd say I get skills and I've noticed that when I do things they do happen. It helps a lot in the few talents I had. I can now point a few things in the community which stood because I was part of them. ... I don't know what I can compare it to for the change and transformation it brought to my life... CHAMP helped me a lot in my talent as well which I didn't know I possess. As I said I'm like a leader in the community... I think I'm now very much employable...

and

...Yes I can say so because even with things that I was afraid to talk about before now I just talk without fear.

and

...I think that can make you see other people who need support because one of you will mention that I have a neighbour who needs this kind of support etc. and you can then go and help them. When they tell others that they were helped by you, that way the word is spreading. You can end up being like counsellors in the area. Anyone who needs help can come to you and in the process you include them in your group and extend the number of helpers...

Sharing of parenting

Participants also reported that the program helped them a lot in terms of finding help with raising children. They felt that it was not something one had to do alone but needed support from other people. They felt that CHAMP made things easier for them.

...I discovered the secret of raising my other children who are still growing up and that will make me a better parent for all my children. This was something I paid no attention to.

One parent said:

...Yes it helped me because even if somebody else has a problem with their kids I manage to tell them what they can do to improve. I think it works because if the child persists I sit down with them and they respect me because I'm an outsider. They are bound to take what I said and do it. That way they see that even their parents were right.

INTERPERSONAL LEVEL FACTORS

The themes discussed here were revealed as having had an effect on impeding social networking especially in relation to how people interacted with others in the community. These themes appeared to have affected the building and strengthening of interpersonal relationships.

Lack of commitment and confidence

Most participants felt that their groups were not active enough especially after each weekly meeting.

...CHAMP did well but then people did not spread what they learnt to others in the community which may be why there was no change reflected. That's how I see it...

Some participants felt that their colleagues did not do their homework in time as a result they could not achieve the objectives of the session. Others reported that there was no unity in the groups as they never met outside the program's weekly meetings. They felt that they needed to meet regularly to discuss how they could get support and where.

...I don't think it was CHAMP's problem, not maybe because I'm trying to impress you, but I don't think it's CHAMP's program. It's upon people to know that when they get something they must find means of making it grow...

Others felt that people did not network because they felt inferior and lacked confidence in themselves.

...Some of us have that problem of keeping quiet with good ideas because we're afraid we'd be mocked or laughed at...

Participants' selfishness

Parents further suggested that some participants wanted to keep the program for themselves and not share with other members of the community. This was attributed to being selfish and not wanting to see other people developing and improving to one's level or status. Others feared that if

they told others what they had learned, the others might outstrip them in whatever skills they had acquired.

...because when you help someone sometimes they want to excel and be more than you...

and

...Let's say since I was part of CHAMP when I received the lessons it was just for me and my family and we did not pass it on to others. So we did not do ubuntu by helping others and by making new acquaintances in relation to what we got from CHAMP. I think the problem was that people didn't spread the news to the community and help others which was not what CHAMP taught us.

Small group size

The participants also reported that the experimental group had limited numbers of families (25 families) and this made it difficult to network. They recommended that the program would have benefited had it used the whole community or double the number of participants.

...But we'd be happy if the group including the children increase in order to live a better life... Yes if there were more families it would be better because there are many people who need support. A lot of them.

COMMUNITY LEVEL FACTORS

The following themes were reported to have had an impact on social networks due to the community dynamics affecting whether participants do seek support or not.

Issues of trust and confidentiality

Parents reported that after the program terminated they did not feel secure to reveal their secrets to other members and to people in the community.

...No it wasn't the program it's just the people. There is also a problem of lacking trust amongst people.

and

...Yeah people don't know how to keep secrets so you can't tell anybody about your problems.

and

...Eh ...I can say there is that something from the community and to some of us, that element of lacking trust among each other. You can do everything right but that lack of trust is still there. People still think that if I tell so and so about my problems they'll tell everyone. There is no support there if you still think like that. You're still on your own and the same like before the program and it means that program will not reach the community.

Others also mentioned that they are afraid to ask for support because others might make fun of their situation and gossip about them.

...well others fear that people will broadcast their problems and others don't want people to know that they are not well off. So they keep a low profile... Well others find pleasure in others' misfortunes, which we cannot run away from.

Reliance on tradition

There was also a feeling that most participants who attended the program were elderly people. It was believed that these individuals are still embedded in the way that they were brought up.

...You see like here the time of the program most people who were attending were the old people, who are still holding on to the olden ways of doing things... Others will tell you that they won't be told by children what to do. That's why they were not changed. CHAMP did its best but the people were hard to teach...

OTHER FACTORS

Brevity of champ program

Another theme that was common among participants was that of insufficient time. Parents believed that the period of one week between the last session, which was about social support, and the post intervention assessment was not enough to reflect changes in their networking skills and that it did not give them time to practice what they had learnt.

...No it was very little time. A week is too little, because we were not even sure what to do in that period and then it was over. So if maybe it was a month it would be better...

and

...So they needed that extra time to see if they were indeed transforming. Also because it was the last session it may happen that there wasn't enough time to quickly network. Maybe you were still trying to find a neighbour you can talk to...

Some participants felt that the period of 10 weeks of receiving the program was also not enough because people took long to settle in and understand what was required of them.

...I think it was because of the limited time that they (CHAMP) had to spend here, and that's why maybe they didn't succeed because they had to go elsewhere. That's what I think...

and

...I can also say it was not enough 'cause the way I see it maybe we had to learn parts of that session and maybe set aside a day or two for revision maybe of a task that was given as homework to find out if we managed...

There was no follow-up

Participants further reported that the program terminated and did not come back to see whether people were improving and doing what they were taught or not. They felt that this may have been a contributing factor to the fact that no change was reflected.

...Yes maybe we didn't get enough encouragement from CHAMP that since they were leaving it was left to us to push the information to others... And also CHAMP didn't really have a follow up program to see whether what we are taught we are able to pass on... As far as I'm concerned if there was such a follow up some changes would be seen...

Remuneration

Most participants reported that the reason for the lack of commitment shown by others was because they only came to the program for the remuneration and did not really care about the program.

...Well I think it's because most of us came to the sessions for money. That's it.

and

...I think that maybe to others CHAMP wasn't important. They just came for money and food and then go home. Others did come here to learn and loved CHAMP.

Other parents reported that it would have been better had the money been paid only at the end of the program.

...I think for some they had come to gain knowledge and yet for some it was to gain money. That's what I think. Maybe if the money was given at the end only people who had good intentions about the program would have showed. So when the program terminated the money, to some everything came to an end.

Participants also reported that despite some attempts to start group projects, people would only participate if there was the incentive of a stipend.

...Some of them, I mean because we thought about getting together with some of my colleagues and do maybe beadwork or something. Maybe we can then talk to some organizations about other

material we can use. We wanted to keep in touch so that when the kids reach puberty we are together and we have people we can turn to. When we tried to organize the meeting people asked directly whether there was money. So we got the picture that people think of CHAMP and the money. But we didn't care how many came but then we stopped and thought about this issue of getting the money out of people's heads...

CHAPTER 5

DISCUSSION

The quantitative results showed that there were no significant changes in the social networks of the participants in the experimental groups after the CHAMP-SA intervention. This means that, apparently, parents' social networks did not improve. The activity of seeking help or support is a complex process dependent on numerous factors such as problem type, knowledge and availability of resources. House and Kahn (1985) stated, "We are unable to find a single measure that is so well validated and cost effective that it is to be preferred above others; various measures may be appropriate for various purposes and circumstances" (p.94). Help seeking is mediated and obstructed by numerous factors as well, such as issues of trust and confidentiality, and socioeconomic status to mention a few.

One explanation for the lack of change according to the quantitative data is that the size of the sample was very small. Another problem with the quantitative measure was that the time interval between the intervention (session ten of the programme) and post-intervention measurement was only one week. Moran, et al. (2004) contend that interventions need to be of sufficient duration when considering just what enhancing a parent's social network entails. Change is a process and one week was not sufficient for significant changes to occur.

On the other hand, the qualitative interviews, which were conducted two years after the programme ended, indicated that the CHAMP-SA programme did have some effect. The main reason behind the two year gap between the quantitative and qualitative data collection was to use the qualitative component of this study as a means of qualitative evaluation of the impact of the program after two years of intervention.

Participants reported having disseminated skills and information from the program to a number of people from family to friends and colleagues. They appeared to have also been empowered in strengthening their existing social networks. These were reported to be people closest to them, like family members. Participants also reported that they had better communication skills, skills in raising children and increased self-esteem and confidence. They felt empowered and better prepared to deal with problems relating to child rearing.

Most participants, however, understood social support to mean material or tangible support. Participants said that support is only given to a needy person and they saw themselves as needy and deserving of support. Very few participants mentioned other forms of support like emotional and informational support. While they understood support to mean establishing friendships, this was in order to improve the condition and status of other members of the community. Supporting each other is common practice in rural areas where the extended family is still predominant and the neighbour is regarded as family. Participants largely frowned upon those who belittled others because of their low financial status and emphasized helping those in need for the betterment of the community. They also believed that by giving support to someone, one expands the social network,

thus increasing the opportunities and likelihood of reciprocal support, which according to Kawachi and Berkman (2002) is an indicator of social capital.

Despite the existence of reciprocity and social bonds in these communities, it seems that CHAMP-SA was not successful in reestablishing one important indicator of social capital, namely trust. Most participants said that they could not trust community members.

Lomas (1998) argues that the way we organize society, the extent to which we encourage interaction among people, and the degree to which we trust and associate with each other in caring communities is probably the most important determinant of our health. If community members cannot trust each other, then it is unlikely that they can rely on others to monitor their children.

Because most participants had a limited understanding of the concept of social networks and social support, they reported that they had never been part of any social support structures, other than the church (mentioned in the quantitative data only), before the CHAMP-SA project. This, despite the fact that some participants were members of the school's governing body and others functioned as community health workers (onompilo).

Some participants expressed the view that although the program was well implemented, some of the participants were there for selfish reasons, and did not disseminate what they had learned, in case others made better use of it than them. Participants also said that other participants had tended to keep what they had learnt from CHAMP-SA to themselves because of a lack of confidence and feelings of inferiority, and consequently a fear of being mocked and humiliated.

Participants were paid a stipend for their time and in order to avoid exploitation of participants. Grady (2001) contends that there has been no comprehensive analysis and little attention to the ethics of paying research participants in the literature, yet most analysts maintain that some payment is ethically acceptable, especially if it constitutes reasonable compensation for time and expenses. The ethical acceptability of this practice is partly based on the understanding that reimbursement for time and expenses permits people to participate in research without excessive cost to themselves, either in expenses, lost wages, or both (Grady, 2001). Grady (2001) also maintains that ethical concerns about paying research participants have primarily focused on the need to control the amount of payment and the schedule of payment so that neither constitutes an 'undue inducement' to participate. She further suggests that "undue inducement" is typically thought of as an inducement that would lead individuals to consent to research they would otherwise avoid and that is contrary to their interests.

The stipend, however, seems to have set a precedent. It appeared that participants never met after the program terminated. Some participants reported having attempted to organize meetings but they were always asked whether there was any remuneration. This kind of negative consequence is understandable in a community where poverty and unemployment are pandemic. It is interesting to note that when participants were asked about what they would change in the program, most of them replied that they would keep the program running and increase the remuneration.

CHAPTER 6

CONCLUSION AND RECOMMENDATIONS

This study sought to evaluate the social network component of the CHAMP program in South Africa. The Social Networks Inventory was used as a repeated measure to test for significant differences between the experimental and control group both pre and post intervention. A comparison of means between the experimental and control groups was done both pre- and posttest, which indicated that there was no striking variation. To interrogate the factors that accounted for these results, data obtained from individual interviews were understood within a systemic ecological framework to determine how personal, interpersonal and community levels of influence could have played a role in enhancing or inhibiting the social networks of the participants.

The ecological framework targets for change for all subjects and community systems, and the interactions that are contributing to the development and maintenance of subjects' problems. These include individual, peer group, family, school, work, and community agencies. The ecological systemic model (Bronfenbrenner, 1979) postulates that there is an interaction among multilevel factors and the interaction dynamic is unique. This interaction was clearly observed in the current study. The results from the qualitative process have highlighted how CHAMP-SA can be enhanced to improve the social networks at the community level.

At the personal level, most participants said that they had gained particular skills and felt empowered by the program. However, this was mentioned as a benefit to each individual who participated in the interrogation phase of the current study. This may mean that the program may have failed in trying to restore the sense of community among the participants since those individuals who felt empowered could not unite to empower their community for the benefit of their children. Factors that contributed to this failure are discussed under interpersonal and community level factors below.

The results also indicated that issues that need to be addressed at the interpersonal level are related to lack of commitment, participants' selfishness and the size of the group. Issues leading to this were that some participants lacked the sense of unison and never met outside CHAMP-arranged meetings. This also led to participants wanting to keep the skills learnt from the program for themselves and not sharing with other people. Yet others felt that the group was too small and that limited them in terms of building wider networks.

At the community level, issues related to trust, confidentiality and poverty were mentioned as the main reasons that contributed to the shortcomings of the program's success. Trust issues affected whether people did look for support or not. The duration of the program was also a factor at the interpersonal level. Parents felt that there was not enough time to socialize and familiarize themselves with networking which reciprocally would have helped them develop trust in other community members.

Poverty appeared to be the deciding factor in whether people became part of the program, especially because there was remuneration. This tells the researcher that there may have been misconceptions of the program which was perceived as a means of income rather than a program that would empower them with skills for protecting their children from HIV and AIDS.

IMPLICATIONS OF THE FINDINGS

The findings of the current study seem to have significant implications for the CHAMP-SA program.

- Societal issues like lack of trust and poverty, appear to have an abrasive impact on the building of networks and propagating social capital among community members.
- The fact that the current study was gendered (only females in the sample) despite not being the prominent factor, tells us very little about the pattern of behaviour of the males in terms of social networking and the provision of social support.
- The absence of the father (where there was a father in the household) from CHAMP-SA could create conflict if the female partner introduced divergent, non-traditional ideas regarding child rearing.

RECOMMENDATIONS

- Societal factors like lack of trust are the key to a successful implementation of the program. These need to be maintained and eradicated to get communities to work together for the benefit of their progeny.
- Community needs and socioeconomic status play a big role in whether the program becomes a success or a failure. Poverty often determines whether people will participate or not. While a stipend was an incentive, it could have set a precedent, where participants and other community members may expect remuneration for participation in any efforts to establish neighbourhood groups.
- It appears that participants place much value on material support. Greater emphasis must be made of the importance of non-tangible forms of support.
- Greater effort needs to be made to get a gender-balanced sample to participate in the program. Despite the fact that gender was not an impeding factor in the study, having a more representative sample of both genders would likely inform the role of fathers in childrearing and their support to mothers or female caregivers.

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APPENDICES

APPENDIX 1: Interview Questions

(IsiZulu translation is in block letters.)

A.

Thank you for agreeing to participate in this study. This is a follow-up interview from the intervention, CHAMP of which you were part. Today you will be asked a few questions drawing from the results of the questionnaires you filled in at that time. Just as before, your responses to these questions will be your own honest opinions of the project and nothing will be linked to your person. Try and answer all questions in as much detail and honesty as possible.

SIYABONGA NGOKUTHI UKWAZILE UKUBA YINGXENYE YALENHLOLOVO. LOKHU KUXOXISANA KULANDELA IZIFUNDO ZIKA CHAMP OWABE UYINGXENYE YAZO. NAMUHLELA UZAKUBUZWA IMIBUZO ENGATHENI UKUSUSELA KWIZIPHUMO ZAMA FOMZI WENA KANYE NABANYE ENABE NIWAGCWALISE NGALESO SIKHATHI. NJENGA NAKUQALA-KE, IZIMPENDULO ZAKHO KULEMIBUZO ZIYOGCINWA ZIYIMFIHLO FUTHI ANGEKE ZIBANDAKANYWE NAWE NOMA IGAMA LAKHO. SICELA UPHENDULE NGOKUKHULULEKA NANGOKUTHEMBEKA NGENDLELA EMANGALISAYO.

B.

You will remember that you attended 12 weeks of CHAMP. In those weeks one topic that was discussed concerned ‘Social Networks’ and there was also a game that was played about social networks. This interview refers to that session.

UZOKHUMBULA –KE UKUTHI WABA YINGXENYE YEZIFUNDO ZOHLELO LUKA CHAMP ZAMA SONTA AYISHUMI. KULAWO MASONTO ESINYE SEZIFUNDO SABA SIMAYELANA “NOKUXHASANA EMPHAKATHINI” FUTHI KUNOMDLALWANA OWADLALWA UKUGCIZELELA IPHUZU LOKUXHASANA. LOKHU KUXOXISANA KUMAYELANA NALESO SIFUNDO.

1. In your opinion what do you understand to be meant by the term ‘social networks’?

NGOKUBONA KWAKHO, KUNGABE ITEMU ELITHI “UKUXHASANA EMPHAKATHINI” LISHO UKUTHINI?

2. What role do you think social networks should play in one’s life?

IYIPHI INDIMA OCABANGA UKUTHI “UKUXHASANA EMPHAKATHINI” KUMELE KUYIDLALE EMPILWENI YOMUNTU?

3. In your lifetime do you recall being a member of a programme where you were enabled to expand your ‘social networks’? If yes, what programme was that and how did it empower you in that regard?

EMPILWENI YAKHO YONKE KUNGABE UYAKHUMBULA UYILUNGA LOHLELO OLUTHIZE LAPHO OWANIKEZWA KHONA ITHUBA LOKWENGEZA ABANTU

ABANGAKUXHASA EMPHAKATHINI? UMA KUNJALO, KUNGABE YILUPHI LOLO HLELO KANTI FUTHI LWAKUTHUTHUKISA KANJANI KULEYO NDAWO?

4. What do you think was the significance of CHAMP in your life?
KUNGABE UCABANGA UKUTHI KWABE KUYINI UKUBALULEKA KUKA CHAMP EMPILWENI YAKHO?
5. What do you think CHAMP could have done better to empower you as a person? YINI OCABANGA UKUTHI U-CHAMP KWAKUMELE AYENZE KANGCONO UKUZE AKUTHUTHUKISE WENA NGQO?
6. Do you believe that CHAMP was able to help you expand or strengthen your social networks? If so/not so please elaborate how.
KUNGABE UKHOLELWA EKUTHENI U-CHAMP WAKWAZI UKUKUSIZA EKUTHENI UKHULISE INANI LABANTU ABANGAKUSIZA EMPHAKATHINI? UMA KUNJALO/KUNGENJALO YENABA.
7. Why do you think CHAMP failed to assist you strengthen your social networks? NGOKWAKHO KUNGANI UCABANGA UKUTHI U-CHAMP WEHLULEKA UKUKUSIZA EKUTHENI UQINISE UBUDLELWANE NABANTU ABANGAKUXHASA EMPHAKATHINI?

APPENDIX 2: Sample of Transcripts

MOLWENI FIFTH PARTICIPANT

I= Ok our first question is, in your opinion what does the term social support mean?

P= it means that when a person has a problem you must help them and help others like children who need help. It also means helping people in the community who may also need help in different ways.

I= you mean that someone has to help another if they are in some difficulty?

P= yes, if maybe they are poor or in need of some help.

I= what if you're not poor?

P= it may happen that you need help even if you're poor. You may have a little and just need more so you can ask for help or support in that regard to develop yourself.

I= what role should be played by social support in people's lives? Why is important that people support each other in the community which maybe makes it important in a person's life.

(Child crying)

P= I can say that the role of support is... what can I say. Can you please repeat the question?

I= why is important that we support each other?

P= its important because when you help someone you do that to improve their status and condition. Like orphans and other people who are in mourning and people who are sick. So support is important to lift that person and not look down on them.

(Child crying again)

I = so its important that we try to empower each other.

P= yes. Also when a person has a shop its important to support that person and go to Pinetown and leave your neighbour around.

I= I get your point. So in your whole life has there been a program that has helped you to develop yourself or increase the number of people or institutions that can support you?

P= No I have not been part of any program.

I= ok, so you've not been part of any program that helped you meet people who can develop you in the community. There is this program called CHAMP which was in this community. Were you part of that?

P= yes

I= what do you think was the importance or significance of that program in your life?

P= I can say a lot because we taught a lot. Things like how to prevent the spread of AIDS and how to protect ourselves from this epidemic.

I= so what can you say the program did to your life

P= well CHAMP supported us a lot.... Are you asking with what?

I=yes

P= ok, it gave us knowledge and understanding of a lot of things. Also with our children to understand that if they play with children with a particular disease it is not dangerous just to play. There were other things with which we had no awareness about.

I= so the program was an eye opener.

P= yes we now know a lot of things; that you can help a person with the disease and can eat from where they were eating. It created a lot of awareness.

I= having said all that is good done by the program, what do you think could have been done better to empower or develop you further than what was done?

P= maybe it could have assisted by opening a school where we could be able to help other people and take care of the sick. What can I say? So that we can be a group that does home visits and help those who are sick and help the old aged and people with this pandemic and teach them.

I= so you mean if the program opened an institution for the participants to be able to work from and help others.

P= yes

I= ok, do you mean to support only people who were part of the program or people from outside as well?

P= CHAMP could have helped us because we had knowledge so that we could help others as a group.

I= I get your point. So, eh.... For you as person do you believe that CHAMP helped you increase the number of people who could help you and support you in the community?

P= yes I can it did

I= in what way or what did the program do to help you?

Silence

I= maybe you were known by two people only so what did the program do to help you become known and increase the number of people who can help you.

P= well it helped us... I can say It helped us also with the money As well as teaching us. Also with getting to know the other members that I did not know before the program. I can say that it brought us together as a community. So others who were not part wanted to know what we were doing and we would talk to them and tell them what we do.

I= so you mean the program made you get to know a lot more people and to establish new relationship. So now you can say that so and so from that village is my friend from CHAMP and the people from the community wanted to know about what you do and that brings you together in some way. So would you now go on and say that those people who part of the program are people you can rely on for support?

P= can you repeat the question!

I= So would you now go on and say that those people who part of the program are people you can rely on for support? Were you able to ask for help from them if any was needed?

P= yes even though it's not all of them. Some of them were able to give a hand when asked to. You know this is life other people just change so you can't trust everyone.

I= ok, I spoke earlier about the questionnaires that were filled both before and after as well as the fact that the session on social support was the last session which was followed by filling in measures a week later to evaluate the program. I'd like to find out why CHAMP failed to make it possible for people to network for support from people and institutions?

P= I can that CHAMP... I don't say the program failed it didn't. but maybe we didn't get people who could offer that support. As I've said that people aren't the same. Others may have gone out and looked for support whereas others may have not. As I said that I'd be very happy had the program gave us the chance to meet as a group or as a small committee that would help others and children who are orphaned and those who lack basic services and needs.

I= ok. Let's say that our last session is today that talks about social support. Next week we fill in the questionnaires to check among other things whether people did manage to network for places and people that can offer support when they need any sort thereof. Do you think the period of one week is enough to expect that people would have done that and change?

P= No its not enough

I= how much time could be enough

P= maybe three months

I= so three months after the last session?

P= no not that

I= what were referring to

P= I meant that people be taught for three months about supporting each other which would have catered for others who are also working

I= Is there anything else that you think was the reason for no change?

P= Can you please repeat that?

I= Is there anything else that you think was the reason for no change?

P= I think it was time.

I= what do you mean?

P= I mean that maybe the time should have be more

I= do you mean the hours per day or the overall period of weeks?

P= I think we needed more weeks.

I= is there anything else you'd like to add

P= I think that if the program could return it would be better so that everyone can get enough time to prepare and learn more about these issues and about supporting each other.

I= I hear you. I'd like to thank you for your time and the information you gave us. I know it's the weekend and there's a lot of things to be done so thank you giving us this much of your time.

P= thank you.

THE END!!!!

FIRST PARTICIPANT = EMBO

I = Interviewer

P = Participant

I= Ok, as I said earlier you will remember that in the year 2002/3 you were part of the CHAMP project which ran over 10 weeks. Ok in those 10 weeks one of the sessions was about social support networks and there was also a game that was played to emphasise the point of social networks and social support. This interview is about the theme of that session. Ok, so there is a list of questions I'd like to ask you and I'd like you to respond honestly to all of them and give as much detail as possible. All that we'll be speaking about here is confidential and will not be linked with you or your name.

Ok, our first question is like this, in your opinion what does the term social support networks mean?

P = In my opinion (coughing) as you say the term in my opinion is something that shows ubuntu when people help each other in the community. It shows ubuntu when a person has a particular problem and needs helping and you offer a helping hand. That is what I think social support is. You don't have to look down on somebody because they have a problem and you are not at that time and just leave them be. So as I said its something that shows ubuntu. For us as Africans if a person has a problem its ubuntu to help that person. We must work together to help that person with whatever we can.

I = Ok, ok so you're emphasizing the point of having ubuntu and uniting in whatever you're doing.

P =(Interrupting) Yes in whatever, we must not look down on other but should help solve their problem.

I = Ok, I get that point very clearly. Eh, what role maybe do you think social support should play in one's life?

P = Well what can I say, the role played by support is like do you mean when I ... I help someone with anything or they helping me?

I = (interjecting) Something to that effect.

P= Well it help that person because you find that, let me make an example when my neighbour is ill and is alone with no one to help them I can go there and offer to help. Maybe they were not able to wash themselves and I will help them and prepare food for them to give them strength. You know if you don't eat you don't get strength to wash yourself and prepare food. So that predisposes you to a lot of other diseases. When I help there my neighbour will feel better and find that balance.

I= So, maybe while on that point I gather that you refer much to supporting and helping a person by doing something for them ... if they are unable to do for themselves. So if I hear you well you're stressing the point that a person shouldn't be left alone but should interact with others. How does that help our community?

(Brief silence)

P= Well it helps our community because what can I say. If we are in the community we all ... How can I put it (laughing) clearly. You see in the community we have to pull together and be one. Just by doing that it helps our community. No one can be by themselves in the community. By pulling together as a community we can fight so many things that are troubling us. In the community you know that, let's say if I have something to attend to my neighbours will look after my home until I come back. That in itself helps the community and it shows ubuntu.

I = I get your point. Ok let's move on. In your whole life do you recall being a member of a certain program where you were given a chance to expand the amount of people who can support and help you?

P = Well the only program I've been part of was CHAMP and it was the first and the last so far because nothing else I have been part of except CHAMP..

I = So you've mentioned which program that was, eh how did it help empower you?

P = Well I can say that CHAMP helped me in many ways and in a lot of things. Firstly when we were taught with our children there were things I couldn't just tell a child. Like when a child grows and reaches a stage of puberty, it was difficult for me to tell a child what was going on. That was difficult maybe because my parents never told me about it and it was something like a taboo story. But when CHAMP came and taught us it became easy even... even in the community I am now able to speak to people about certain things and with the neighbours' children I am now able to explain that its something common that when they grow up they'll reach this stage and such things will happen. I tell them what to do and what to expect next. So I talk to my children and my family as well as neighbours about anything especially these days when so many people get sick. Its easy to me now to interact with people since CHAMP'S lessons even about caring for those who are sick I'm no longer scared and its no longer taboo.

I = Ok, I hear you. What do you think was CHAMP's significance and importance in your life?

P = I think that CHAMP's importance was their aim to help us as the community and our children come out and speak about anything. I can say CHAMP helped us a very very very much.

I = Eh, maybe another question comes from the overall program itself. What do you think CHAMP could or should have done better to help improve or empower you as a person?

P = Maybe CHAMP, I'd like... I'd like... I'd wish for CHAMP to return and continue with the program, extend it to others who did not receive it. You see like here where I'm staying I'd like CHAMP to get more people and spread the program to many people and educate those who are still not educated. If it can be a wide spreading program and focus more on puberty and up to when they are actually teenagers to find out what problems are experienced at that time. It should be a continuous thing.

I = To you as you, what do you ... as a person think that if for me CHAMP had done this and that I'd feel more empowered than what was done?

P = For me I ... (laughing) think what I got is enough. I don't know then as the time goes on but for now no I think it has been a very helpful program for me and my family because we now are able to talk a bout a lot things.

I = Ok, do you believe that CHAMP was able to help you increase the number of people who can help in the community?

P = Yes it did. You see if you can talk about anything in the clear and not be afraid, that is good. Unlike before even when I see something I used to be afraid to talk about it now I talk just about anything without fear. Say I have a child and has a problem with the knowledge I got from CHAMP I seat the child down and explain to her/him. When a child has done wrong. You see there are still parents out there who believe that if a child has wronged they must get a hiding without asking why such a thing was done. Now I'm able to speak to those parents and advise them about the importance of talking to their children first and then when its more than enough you can then discipline the child but not too harshly. If you don't want a child to come home late you must first let them know before punishing them.

I = Ok, as I said that our interview is based on the results of the questionnaires that were filled both before and after the 10 weeks of the program. The results were somewhat different. If we compare pre and post test questionnaires it does show significant changes in the social networks of people who were part of the program. So in your opinion why do you think CHAMP failed to help you improve your social networks and garner support?

P= Well I think CHAMP did its work and maybe the problem was with us participants. I think that a person who followed CHAMP's sessions properly did get support. You know some people are given information in the sessions and do not use it outside. So I can't say CHAMP didn't do its work. CHAMP did well but then people did not spread what they learnt to others in the community which may be why there was no change reflected. That's how I see it.

I= So you are saying that the problem was with you the participants who got the program. Maybe you... you... I'd like you to elaborate a bit on what do you think you didn't do right which is what comes out as being no change in your social networking ways?

P= Let's say since I was part of CHAMP when I received the lessons it was just for me and my family and we did not pass it on to others. So we did not do ubuntu by helping others and by making new acquaintances in relation to what we got from CHAMP. I think the problem was that people didn't spread the news to the community and help others which was not what CHAMP taught us.

I= Don't you think it was CHAMP who was unable to give you or to... empower you with skills as to how to pass the information to others and how to network in the community?

P= Well what can I say, maybe we just didn't pay enough attention to what CHAMP taught us and we didn't ask for encouragement that we keep this program in our hearts. Yes maybe we didn't get enough encouragement from CHAMP that since they were leaving it was left to us to push the information to others.

I= Still on that point of encouragement, what kind of encouragement do you mean if you can just pin point things that CHAMP could have done to spur you on?

P = Maybe eh, I can say... I mean we were taught like communication styles between parents and children ...

I = (interjection) Yes.

P=... and that the child should talk to parents if they have problems; that parents should listen to their children (breathing in) ... now we know that so we have to tell others about it. I don't know what I can say but I think it was us who didn't pass it on. And also CHAMP didn't really have a follow up program to see whether what we are taught we are able to pass on.

(Birds chirping)

I= Ok, so maybe it was such follow up steps that if CHAMP had done to...to apply them and come back to check whether people spread it to others and not just for themselves could have made a difference.

(Interjection)

P =as far as I'm concerned if there was such a follow up some changes would be seen ...

I = I hear you

P=...because CHAMP would be able to see who active participants were and who were not (Brief silence)

I = If you consider the period that CHAMP was here, was it enough to... that you could be able to increase your networks. From the first session to session 10 was that enough time for the questionnaires to reflect changes?

P = I think the time was not enough... it was not enough. You see for me I wish CHAMP can just continue and give these sessions and spread its services because we really have problems especially when children reach puberty a lot of problems emerge. By then many children had not reached the stage that when they did CHAMP had gone and many problems started. It would easy had CHAMP been there. You see children start behaving awkwardly in puberty, they don't listen and start acting differently than before. Its then that we feel CHAMP would have helped us more.

I= You are referring more on the children's side...

P = And parents as well (laughing)... and parents too because sometimes parents don't see that their child start behaving like that because of the stage. So as a parent they need to advice their children correctly because some problems arise and as parent you don't know how to handle this and it seems like a child takes over. So as I say we need CHAMP to go on and teach more on this stage. And to tell us exactly what our roles are in this regard and what the child's role is. I think that would have worked out much better. But its not the same as if nothing had happened (laughing) 'cause a lot would have gone wrong. You see now I can proudly say that you remember what we learnt from CHAMP and my child now talks freely with me even when she sees something on the way home she asks and tells what she saw unlike before when she used to be afraid. She even talks about what is happening to her life and makes it easy for me to tell her not to worry and what to do. That was never easy to do before!

I= Eh, earlier you ... you mentioned that in your opinion you felt helped by the program, is there anything else that could have been done to empower you more? Could you be able to also say that ... even in this area of social networks and social support, that CHAMP was able to help you locate help and support?

P= I can say, yes CHAMP has helped me. Now I can easily find someone to help me. People who are closer to me are my family and people who were part of CHAMP. Those when I speak to them do offer help and speak sense since we are both on the same level. We also are able to interact with others who were not part of the program. So those people now feel free to come to us and discuss their issues and we try to solve the problems.

I= OK, Eh (silence)... I think that... you gave most of what you could give except when you know that you want to add something somewhere, you are free to do so.

P= There's nothing much, except that CHAMP should come back (laughing). I'd really like that CHAMP should return and extend its services. As I mentioned earlier it really help us and if it returns we can now be proud and say we do have children. Children too will be proud of their parents.

(Silence)

I= I'd like to thank you a lot for your time, eh I hope that what you gave us today will be a lot of help. It is still a process of trying to repair and try to see how CHAMP can help. You will remember that we promised to return after some time to see how you have been doing comparing from where we left you.

P=Can CHAMP continue with those who are still growing up?

I=Well I think that will be determined by whether we find the program to be successful and helpful in the communities we visited because that is what we do when we evaluate after two years to see if we caused an impact at all in people's lives.

P= It did have an impact (laughing)

I = Thanks a lot my sister!

P =Thank you.

THE END!

APPENDIX 3: Scope and Sequence of CHAMP-SA Family Program

Session 1

Parents' and children's rights and responsibilities

Session 2

Parenting styles

Session 3

Talking and listening

Session 4

Puberty

Session 5

Hard to tell stuff

Session 6

Identifying risk

Session 7

What is HIV/AIDS?

Session 8

Dealing with stigma

Session 9

Surviving loss and bereavement

Session 10

Support networks

APPENDIX 4: Consent Form

Id# _____ Date _____ Facilitator _____

CHAMP Family Program

Family Information Sheet

Child's Name _____

Caregivers Name _____

Family Address _____

Telephone # _____

Please name all the adults that live in the home:

_____ age _____ age _____
_____ age _____ age _____

Please name all the children that live in the home:

_____ birthdate _____ birthdate _____
_____ birthdate _____ birthdate _____
_____ birthdate _____ birthdate _____

If you were to move, please name one relative that would know where you were:

Name: _____ Address _____
Telephone #: _____

If you were to move , please name two more people that would know how to reach you.

Name: _____ Address: _____
Telephone #: _____
Name: _____ Address: _____
Telephone#: _____

What is the CHAMP Family Program?

The CHAMP Family Program is a research project. That means that we gather information from different people to help answer a question or solve a problem. The problem that we are interested in is HIV. We have created a program that may help families keep their children from getting HIV/AIDS. Our research helps us to see if this program works.

We hope that you will help us solve this problem by agreeing to be a part of our project.

Being in CHAMP

If you decide to be in the CHAMP Family Program, you will be asked to answer questions about:

- Yourself and your family
- How you solve problems
- What you do in your free time
- Time you spend with boy and girl friends
- Your experiences in risk situations
- Your feelings about the CHAMP Family Program groups

It will take about 1 1/2 hours to answer these questions. CHAMP staff members will be there to help you understand the questionnaires.

All the group meetings will be videotaped so that we can make sure that the groups are going the way they are supposed to go. You will be on the videotape only if you agree to be videotaped. At these 3 meetings, you will be asked to answer questions about how you think the group is going. It will take about 15 minutes to answer these questions. CHAMP staff members will be there to help you.

Bad Things That Could Happen -- Risks

Some of the questions that we ask may make you feel embarrassed or upset. If you are upset about a question, please let a CHAMP person know and we will try to help you. You do not have to answer any question that you do not want to answer. You can stop being in CHAMP at any time and nothing bad will happen.

Good Things That Could Happen -- Benefits

The time that you spend in CHAMP and the information that you share will help us find out if our program helps children and families keep themselves protected from HIV and AIDS. This information will help us create programs that can keep other families safe and healthy.

Keeping Things Private -- Confidentiality

- What you and your family say and do is private and confidential.
- We will not talk about it with anyone else in your family, your school, or your neighborhood.
- We will tell other group members not to talk about things that are shared in the group. But we can not guarantee that other group members will not share information with people outside of the group.
- Parents and children will not be allowed to look at each other's answers to questions.

- Your name will not appear on any of the paperwork that we use.
- We will give you and your family a code number so that no one will be able to figure out your information.
- No names will be placed on the videotapes that we use to record meetings.
- At the office, all of your information will be locked away.

All of the information that you share with CHAMP will be kept locked away. After the research has ended, the information will be kept for another 7 years. After the 7 years, all of the information will be destroyed except for information that has been especially allowed by you and/or your parent to be used for educational purposes.

When We Can Not Keep Things Private

The only time that we can not keep things private is if we are worried that you are being harmed or that you are harming someone else. If we are worried that you are being abused or neglected, then we have to contact the responsible department. If we are worried that you are harming yourself or someone else, then a supervisor and your parent may be told. We will tell you if someone else must be told what you have shared with us.

Payment For Your Time

Your family will be paid R50.00 every time you and your parent(s) come to a group meeting. If you and your parent(s) complete the program, your family will receive a R200.00 bonus at the final group meeting.

How Long Will CHAMP Last?

CHAMP will last for 4 years. If you agree to participate, then we will ask that you and your parent come back for another group program that is especially for 6th and 7th graders and their parents. We will not talk to you at school or come to your house unless you agree to participate.

Questions?

If you have any questions, concerns, or worries, you can contact Mr. Nkosikhona Colville. He is the program coordinator for CHAMP. His number (031) 2425524.

CHAMP CONSENT

What We Expect of You

1. Attend and take part in each group and family meeting -- both parents and the child. Other household family members are encouraged to attend as often as possible.
2. Complete the family questionnaires and assessments.
3. Let us know if you are having problems with the program.
4. Try to help other families by giving your best advice and support.
5. Tell us if you move.
6. Call us at an agreed upon time if you do not have a phone.
7. Respect others in the group and not talk to others outside the group about what was said there.

What You Can Expect of Us

1. We will provide a program that, if you use it fully, can help your family support one another and talk about important health issues.
2. The program leaders will be available for phone contact between meetings.
3. Everything you tell us stays in the group. We won't tell anyone what you say or do, except for research or safety purposes. Any research information that is published or presented in public will not identify you. If we need to tell someone something regarding you, we will discuss it with you first before anything else is done.
4. We will let you know if we have problems with the way things are going.

ASSENT TO PARTICIPATE IN RESEARCH
Parent Consent Form

1. We are asking you to take part in a research study because we are trying to learn more about how children and families keep themselves protected from the HIV virus.
2. If you agree to be in this study then you will be asked questions about yourself, your family, how you spend your free time, your friendships, and your experiences in situations that could put you at risk for HIV. You may be asked to participate with your family in a CHAMP group.
3. Nothing bad can happen to you if you participate. You might be embarrassed or upset by some of the questions. If you are, then please let a CHAMP person know and he or she will try to help you.
4. If you agree to participate, you will help us find out how to help children and families keep themselves safe and healthy.
5. If you don't want to be in this study, you don't have to participate. Remember, being in this study is up to you and no one will be upset if you don't want to participate or even if you change your mind later and want to stop.
6. You can ask any questions that you have about the study. If you have a question later that you didn't think of now, you can call Mr. Nkosikhona Colville at (031) 2425524 or ask any of the CHAMP staff next time.
7. Signing your name at the bottom means that you agree to be in this study. You and your parents will be given a copy of this form after you have signed it.

I/we , along with my/our daughter/son, _____ , agree to take part in CHAMP. I/we understand that my participation is entirely voluntary and that I/we can withdraw at anytime. If we have questions after today we can call Mr. Nkosikhona Colvelle (031) 2425524.

Parent's signature

Date

Parent's signature

Date

ID# _____ Date _____ Facilitator _____

CHAMP Family Program

Video Consent Form

I/we, _____, authorize CHAMPSA (Collaborative HIV Prevention and Adolescent Mental Health Project-South Africa) to videotape me and my family as we participate in parent, child, and family group meetings. I/we understand that these tapes will be used to evaluate the helpfulness of the groups and the program overall. They are strictly for research purposes and will not be released to anyone outside CHAMP. The tapes will never be identified with my name. Rather, a code number will be used.

I/we understand that I/we can request to see any of the tapes made of me and my family at any time. I can insist that any or all information about my family on the tape be erased.

Should anyone wish to use any videotapes of me or my family for any other purpose than what is described above, I must be contacted first in order to decide if I will give permission. I understand that I can refuse to give permission and this will not affect my participation in the project.

I/we hereby authorize CHAMP staff to edit, erase, copy, or destroy the tape as needed for the uses described above.

Youth

Parent/Legal Guardian

Date

CHAMP Staff Member

CHAMP Family Program

PAYMENT SCHEDULE

A family can earn a **total** of R800.00 for their participation in the 12 meetings of the CHAMP Family Program.

The following is an explanation of *how and when families will be paid* for their participation:

A. There are 12 sessions in the CHAMP Family Program.

B. At the end of each meeting, that parent/s and children both attend, parents will receive R50 (R50 X 12 = R600.00).

C. At the end of the program, only families who have completed the program will receive a bonus of R200.

NOTE: It is important to remember that the amount of money being given to each family depends on that family's attendance.

APPENDIX 5: Social Networks (Adult) Scale

(SNA)

In the boxes below, we would like you to tell us about the most important Adults (18 years old and older) in your life at this time (You do not have to fill in all the boxes). Please complete information for the three (3) most important people that you selected.

2.				
3.				

SNA

For each of the following statements, we'd like you to rate one of the 3 most important people you listed earlier by answering how true the statements are. Please mark your answer with an "X" to tell us whether the statement is always true, true most of the time, sometimes true, hardly ever, or never true about this person. Please place the initials of the first person you chose before the following set of statements. Please remind us of the initials of person number one (1) _____.

1. This person is available when I need him or her.					
2. I tell this person about any important thing that has happened to me.					
3. I let this person know when I'm feeling sad or upset.					
4. This person is always willing to help me in practical ways (loan money, look after my kids).					
5. This person makes me feel good about myself.					
6. This person is a good listener when I'm having problems.					
7. This person often criticizes me.					
8. This person has caused me a lot of problems.					
9. This person helps me set rules for my child (tell him/her what he/she must do and can't do).					
10. This person helps punish my child when he/she misbehaves.					
11. This person would help me if my child had a problem in school or with other kids.					