

**Trends in relation to the involvement of biological family in
the lives of children in long-term residential care.**

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Declaration

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

Fairhope Dumile Goba

Date

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Abstract

There are many challenges that face children in residential care. Among those challenges is the little or no interaction between the children in residential care and their biological family. This study investigated if biological family involvement in the lives of children in residential care had any effect on the children's development while they were in care. The study was a comparison between children with biological family involvement and children without any biological family involvement. The comparison focused on two main variables, namely, academic performance and behaviour characteristics. This was qualitative, multiple case study research where triangulation was used as a tool for collecting information. Ten children participated in this study i.e. five children with biological family involvement and five children without any biological family involvement. Data used in this study was collected from children, their housemothers and from children's files. Findings from this research indicated that there was a difference between children with biological family involvement and children without such family involvement in terms of academic performance and behaviour characteristics. Children with biological family involvement performed better academically and displayed fewer negative behaviour characteristic than children without biological family involvement. Findings also suggested there was a need for further research on this topic in order to find ways to assist children in residential care to develop optimally.

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Chapter 1: Introduction

1.1 Introduction

The challenge experienced by many staff members at children's homes is the minimal or lack of involvement of biological family in the lives of children in alternate care. A review of the literature has reiterated that children in residential care often have minimal or no biological family care and support (Ngcobo, 1992; Ogilvie, 2004; Rapholo, 1996;). Research on family reunification theory states that there is a need to involve the child's family while the child is in care as the family has the power to influence the well-being of the child while in care (Thomlison, Mallucio & Abramczyk, 1996). Child care practitioners have been faced with the dilemma of involving the child's family and, at the same time, they need to protect the child from harmful family processes. Therefore, challenges experienced by many staff members at children's homes include how much emphasis to place on the involvement of the biological family in the lives of children in alternate care. This challenge is also faced when there are no traceable family members in the case of children who are abandoned and thus placed in a children's home.

This study intended to interrogate the question: Does biological family involvement play a major part in development of children in residential care, or is it something that can be ignored? Most important in responding to this question was the concern for the child's well-being and the effect that these decisions may have from the child's own perspective. The prevailing knowledge system recommendation has been to include the child's family as an equal partner in raising the child while in residential care (Thomlison *et al.*, 1996). This study explored how children in residential care benefitted, or were harmed, by the involvement of biological family. There is a great need to investigate this phenomenon so as to gain in-depth knowledge about the effect of biological family involvement on children for the purpose of preparing policy development for children's homes in South Africa.

1.2 Background to the study

Research was done at a children's home in the Msunduzi area where the researcher was employed. The children's home had 154 children in its care of whom approximately 70%

(n=108) were abandoned at birth or immediately after birth, and were placed soon after their birth at the children's home. As a result, 102 children had no biological family contact; the only family they knew was at a children's home. The children's home managed to track the biological families of six children who were abandoned and reunited those children with their families.

A small percentage of children at the children's home under study expressed ambivalent feelings about their biological families. For example, children resented the fact that their parents abandoned them, but at the same time desired to know who their parents were. Some children stated that they would love to know their biological family, especially their parents, but at other times, stated that they did not want to meet their biological parents.

The main challenges that face children in residential care include low self-esteem as a result of stigma attached to residential care; behavioural problems, for example, anger, aggression, fighting; inability to take responsibility; poor academic performance; no individual attention due to staff fatigue based on high numbers of children; and experimenting with drugs and alcohol (Ahnert, Pinquart, & Lamb, 2006; Roy & Rutter, 2006; Rutter, 2000; Landsverk, Davis, Ganger, Newton, & Johnson, 1996; Colton & Heath, 1994; Jackson 1994). Identity problems have been identified as another challenge facing children in residential care, as well as for other children who have been placed in alternate care e.g. adoption and foster care. This loss and/or confusion about identity is considered to be a particular difficulty, often termed genealogical bewilderment (Humphrey, 1986).

Thus the second area of research focus was investigation if there was an observable difference between children of similar ages with biological family involvement and those without. The researcher hypothesised that biological family involvement improves the lives of children in residential care and that their lives could improve in terms of academic performance and general behaviour. Children with involved family might have fewer identity problems compared to children without family involvement (Schwartz, 2007).

1.3 Reasons for choosing topic

The rationale for choosing this study was the researcher's interest in children and their development, including the continuous quest to find ways of improving psychosocial services offered to such children. It was hoped that the research results would benefit children at the children's home in terms of it being used to inform policy. The research findings might also assist childcare workers who work in a similar setting as the children's home under study. Depending on the results of this study, the staff of the children home were to continue endeavours to locate the biological parents or relatives and reunifying the family where possible.

Literature on reunification emphasises that biological family involvement is crucial in ensuring a successful reunification service (Biehal & Wade, 1996; Williams, 1996; Muller & Steyn, 1990). According to Muller and Steyn (1990), more and more residential care places have started to involve biological family as partners in the care of their children and, more importantly, families need to be involved before children came to residential care. In fact, there should be a continuum of biological family involvement; that is, before residential care, whilst in care, and after residential care. The researcher was mainly interested in effects of biological family involvement while children were in care.

Past research has mainly focused on the importance of biological family involvement in terms of long-term benefits, that is, during and after reintegration or reunification (Freundlich & Avery, 2005; Biehal & Wade, 1996; Farmer 1996; Fraser, Walton, Lewis, Pecora, & Walton, 1996). Most literature comes from the United Kingdom and America. As a result, the researcher felt there was a gap in terms of research in the African context in Black residential care. Ngcobo (1992) and Freundlich and Avery (2005) found that the majority of Black children in residential care had been abandoned and as a result there was difficulty in tracing families. If this is the case (difficult to trace families), what can be done to assist children in residential care to develop or maintain roots with their ancestors and elders?

According to literature, it would be important for this research to determine not only how biological family involvement works in the development of children in residential care, but also *why* (Rutter, 2000). Another important and challenging factor to consider when addressing the matter of family involvement is the possibility of involving a family in a way that might be detrimental to the well being of the child, for example, involving a parent who was the cause of child removal in the first place through abuse of the child. Based on Noonan and Burke's (2005) research, children from poor families, and children from parents who had experienced physical and mental challenges, were less likely to be united with their families. Researchers have suggested that we should not be content with the fact that a specific family was not conducive to the healthy development of the child, but should rather seek ways to address that situation by helping the family to overcome that challenge (Muller & Steyn, 1990). Fraser *et al.* (1996), as well as Bullock, Little and Millham (1993), further state that placing children without doing anything to rectify the reason for removal only isolated them from immediate risk. Once children had been discharged from care, however, they would go back and might find their families worse or in the same circumstances as they left them; i.e. unchanged or more difficult family situation which would still be difficult for the children to cope with.

1.4. Research problems and objectives: Key question to be asked

- a. What is the role of biological family for children in residential care? According to Ngcobo (1992) and Muller and Steyn (1990), parental involvement needs to be regarded as a child's right. The prevailing literature strongly supports an approach in which minimizing parental and family involvement should be regarded as the last resort in even the most difficult of family circumstances. According to Biehal and Wade (1996), children's contact with relatives and extended family assisted children by providing them with a sense of belonging through identification with their families. Current policy suggests that parents play a key role even when they experience limiting challenges, such as not being able to afford transport to visit their children, or negative attitudes of residential staff; and again at times, are perhaps even unwilling or disinterested in their children. (Berridge & Brodie 1998; Thomlison *et al.*, 1996).

- b. In responding to this research question, an attempt was made to seek triangulation of data; i.e. obtaining data from multiple sources by considering children's perceptions, file records of the children's behaviour and educational progress, and also obtained the housemother's perceptions.
- c. The study was a comparison study between children who were in contact with their biological families and children without such contact. The hypothesis was that children with biological family involvement would do better than children with no biological family involvement in terms of academic performance and behaviour characteristics. The degree of family involvement was measured as the researcher further hypothesised that children whose families were much more involved in their lives would perform better academically and behaved better than children whose families were less involved in their lives. However, since this was a qualitative study there would be very limited generalizability and the study aimed to rather provide an in-depth exploration of the perceived differences between children in alternate care with and without family involvement in their lives.
- d. Based on findings from this research, recommendations are made on how challenges could be addressed, minimized or eliminated.

1.5 Principal theories upon which the research project was constructed

The first theory that guided this research was permanency planning theory. The philosophy behind permanency planning is to emphasize the importance of biological family and raising children in a family setting (Farmer, 1996; Thomlison *et al.*, 1996; Chaloner, 1994; Ngcobo, 1992). Permanency planning encourages that any placement in alternate care should be limited, with a focus on reunifying the family as soon as possible.

The second theory that this research was based on was family reunification concepts. Family reunification theory is concerned with promoting positive growth and development of children based on family values, assumptions and philosophies

(Thomlison *et al.*, 1996). Family reunification refers to the process of reconnecting children with their families of origin (Fraser *et al.*, 1996).

Thomlison` *et al.* (1996) further stated that little is known about the impact of the biological family as a protective factor on children's development while in care.

All family members need to be considered as potential partners – including siblings, relatives, and members of other helping networks. There is a strong suggestion that children's outcomes are directly dependent on their family connections and that the family is a protective factor for the prevention of further difficulties during care, as well as after care through life transitions (Thomlison *et al.*, 1996, p. 486).

This is part of the resiliency theory in which various protective processes assist children who were at risk to become resilient.

1.6 Limits of the study

Only children from this particular Children's Home will be part of the research. Research will further be limited to the children who fit the criteria of the research participants. Research results will not be valid externally thereby not allowing generalisation to all children in residential care but will hopefully give insight to the importance of biological family in the lives of children in residential care. Whether teachers treat children from residential care differently from children who come from families in the communities or foster care families will not be investigated in this study.

The structure of this thesis includes literature review in Chapter 2, research design and methodology in Chapter 3 followed by presentation of results in Chapter 4. Analysis and discussion of results will be in Chapter 5 and the last chapter (Chapter 6) will be conclusion and recommendations based on findings.

Chapter 2: Literature review

2.1 Introduction

“There are currently 243 government and non-government organisation (NGO) run children’s homes nationally... (Speech by the Deputy Minister of Social Development, 2007, July p03).”

As indicated above, in 2007 there were 243 children’s homes (presumably registered) that were caring for children who were in need of alternative care away from their biological families. In South Africa, there are three major categories of children who end up requiring residential care: orphans (mainly due to HIV & AIDS), abused children, and abandoned children. Even though there are many children in residential care, residential care is to be considered as the last resort after all alternatives have been explored (BESG, 2007; Ngcobo, 1992; Muller & Steyn, 1990).

Worldwide there have been a number of challenges that have been associated with children in residential care (Roy & Rutter, 2006; Rutter, 2000; Ngcobo, 1992; Muller & Steyn, 1990; . Even though those challenges are not unique to children in residential care, they seem to be more prominent in children in residential care, foster care and sometimes children in adoptive families who were adopted late. Those challenges include, but are not limited to, lack of biological family involvement while children are in care, poor academic performance at school, and behavioural challenges. This chapter will firstly look at residential care focusing on its place and its functioning. Thereafter, a detailed discussion will be conducted on what research has shown in relation to the three challenges (lack of biological involvement, poor academic performance and behavioural challenges) experienced by children in residential care. In addition, permanency theory and reunification theory will be discussed as they have been adopted and they will later assist in the analysis of results in chapter 5.

2.2 Residential care

It is commonly accepted that one of the primary roles of families is to look after its children by nurturing, loving, and providing a safe and conducive environment for children to grow towards becoming responsible citizens who contribute meaningfully to the society they live in (Ngcobo, 1992). However, some families have experienced difficulties in fulfilling and coping with the demands of this role (Muller & Steyn, 1990). As a result, some children

experience severe abuse such as being physically (e.g. corporal punishment), psychologically (verbally, emotional), socially (neglect) or sexually abused. Abused children grow up (some even died) extremely damaged and are likely to continue the cycle of abuse themselves as adults (Muller & Steyn, 1990). Interventions had to be put in place to assist parents towards fulfilling their role of parenting effectively. The earlier popular intervention for children in danger was to remove them from their families and place them in alternative care other than that of their parents (Paul, 1994; Ngcobo, 1992; Muller & Steyn, 1990).

Children have typically been placed in places of safety for six months as a temporal arrangement while a permanent place for them is found. The social worker presents the case in court and recommends the type of placement that would be best suitable for that child. Often there are three options: adoption, foster care and residential care. Adoption works best for children who are younger. Research has found that older, disabled, Black children and siblings are not easily adopted (Nickman, Rosenfeld, Fine, MacIntyre, Pilowsky, Howe, Derdeyn, Gonzales, Forsythe, Sveda, 2005). Further, Ngcobo (1992) found that there is a shortage of Black adoptive and foster families due to socio-economic explanations. In the USA also, Freundlich and Avery (2005) stated that there is a shortage of foster families wanting to foster children and who have the capacity to do so. However, in recent years in South Africa there has been an increase in the number of Black foster families, due partly to more exposure to foster care and, some argue, partly to economic reasons in that some people foster children for monetary gain (BESG, 2007). So, Black children usually remain with two options of either foster care or residential care.

Although foster care is generally designed to be temporary, children usually end up in foster care for quite a long time (Paul, 1994; Ngcobo, 1992; Muller & Steyn, 1990). This tends to affect their development as they do not belong anywhere. The procedure is that while children are placed in alternative care, the social workers of the placing agency need to work by rendering reconstruction services to the family to try and preserve the family entity. Even though removal assists children by removing them from the immediate danger, it is or should be considered as the last resort (Ngcobo, 1992; Muller & Steyn, 1990). Where removal is unavoidable, children are to be placed first with their relatives (kinship care), with other unrelated people in their communities of origin (foster care), or placed in residential care commonly known as children's homes, institutional or residential care, or orphanages.

2.3 Theoretical framework

Although undesirable, removal of children from their families is sometimes unavoidable.

Thus there will always be some children who need temporary or permanent care away from their families (Muller & Steyn, 1990).

Two theories, namely, permanency theory and reunification theory are principal theories that have been developed to address the issues of children who have been removed from their families and grow up in an environment away from their families. Each theory will be discussed highlighting key issues about the theory such as the origins, purpose and limitations of the theory.

2.3.1 Permanency planning theory

“Permanency planning has shaped the philosophy and practice of child care (Ngcobo 1992, p16).”

Permanency planning surfaced in the United States and the United Kingdom in the 1970's (Muller and Steyn, 1990; Ngcobo, 1992; Paul, 1994). Permanency planning developed as a strategy to address the needs of children who were living away from their families for various reasons. The major children's distress is “drift” or lack of permanence in their living arrangements due to moving from one care arrangement to another (Ngcobo, 1992; Paul, 1994). Children who are adrift are especially the ones in foster care due to the short term nature of foster care arrangements. Although foster care is supposed to be short term it ends up being a permanent status for many children in foster care as children will be moved from one foster care family to another if the relationship does not work out or crisis breaks down. Therefore due to the impermanence of the permanent foster care arrangement children encounter challenges in terms of their identity, sense of belonging, establishing meaningful relationships with people and mastery of developmental tasks (Paul, 1994). Projects such as the Oregon Project (1977), the Alameda Project (1978) and Utah (1994) were used to test the feasibility of the permanency planning theory (cited in Lewandowski & Pierce, 2002; Paul, 1994; Ngcobo, 1992). The projects were successful in reducing backlog of children in long term foster care.

Mallucio, Fein and Olmstead 1986 cited in (Paul, 1994, p40; Ngcobo, 1992, p15) came up with a definition of permanency planning as follows:

Permanency planning is the systematic process of carrying out within a brief time-period, a set of goal-directed activities designed to help children live in families that offer continuity of relationships with nurturing parents or caretakers and the opportunity to establish life-time relationships.

The structure of permanency planning theory incorporates four mechanisms, namely values and theory, programme, methods, and collaboration. Permanency planning values rearing children in a family, reunify the family wherever possible, the importance of the biological family in human connectedness, and the superiority of the attachment between parent and the child (Ngcobo, 1992; Paul, 1994; Muller & Steyn, 1990). Stability of living arrangements, security and continuity of relationships offered by the family has been seen as encouraging positive growth and development in children.

Both psychological and natural parents play a critical role in the child's development. Ties between the child and its biological family have been identified as critical concerning the emotional growth of a child. Rutter in Paul (1994) saw family relationships as lasting throughout the lifetime, even though they tended to change their form and function. The attachment between child and family is encouraged by a reciprocal relationship between a child and its parents. The attachment then creates a bond between parent and child necessary for the child's 'biological, emotional and symbolic sense of connectedness to his/her environment' which shapes the child's fundamental identity (Paul, 1994, p46; Muller & Steyn, 1990). Therefore, separation of children from their parents has been associated with negative impact both on children and parents. Parents usually experience guilt feelings and a sense of inadequacy and children's identity becomes impaired. It can be argued that identity of abandoned children might be severely impaired as there is no link whatsoever with their parents or family.

According to Henry (2005), permanency planning involves preparing the child towards acceptance of alternative placement - residential care in this case - so that the child will accept his or her new family. Henry (2005) further states that five key questions need to be addressed as these five questions address different feelings that are usually associated with

separation from the biological family. The questions are: what happened to me, who am I, where am I going, how will I get there, and when will I belong? The five questions are aimed at attending to the child's feelings of loss, identity, attachment, relationships and claiming or safety (Henry, 2005, p. 201).

Values: Family involvement

Permanency planning theory therefore stresses the importance of contact between parents and children in order to assist both children and parents to deal with the effects of separation (Paul, 1994). It does not matter the quality of nurturing environment provided by alternative placement, the child will be always grappling with his/her identity (Paul, 1994). Some researchers have found that returning home of children in alternative placement was determined by the amount of contact between children and their biological families regardless of the reasons for placing children in alternative care (Paul, 1994). The higher the frequency of contact between a child and family, the better are the chances of child returning home.

Visits by the family to the child fulfilled specific roles in the child's life. Firstly, parent-child attachments are maintained and that helps the child to feel less abandoned by his/her family. Secondly, the family (parents) can be "used a therapeutic tool" (Paul, 1994) in the treatment processes offered by the residential care.

Programmes

The concern here is with designing programs to speed up the process of reunifying the child and its biological family. This includes providing comprehensive attempts to avoid alternative placement by keeping children in their families of origin. It involves prioritising of resources, designing time specific plans, periodic case reviews and collaboration with other relevant and essential stakeholders (Paul, 1994; Ngcobo, 1992; Muller & Steyn, 1990).

Methods

Key to permanency planning theory is "techniques or case management methods" (Paul, 1994) which emphasizes specific practice strategies to be employed while facilitating the permanency plans for the children. These techniques are used in case planning, case

management, therapy and advocacy. Examples of these techniques or methods are contracts or service agreements between parents and residential care staff, time-frame for goal directed activities by parents and social workers, and record-keeping to structure and reinforce decision-making procedures (Paul, 1994; Ngcobo, 1992; Muller & Steyn, 1990). Methods used are highly dependent on the decision-making process.

Active Collaboration

Without active collaboration between the family and the residential care staff, for example, it will be difficult to achieve permanency plans for the children in alternative placement. Paul (1994, p60) described active collaboration as an “essential component in permanency planning.” The nature of collaboration, i.e. quality and extent, could support or make it difficult to achieve permanent plans for children (Muller & Steyn, 1990). Different and relevant stakeholders should work together towards achieving permanency plans for children in alternative placements by being actively involved in family assessment with the aim of making the best decision with regards to the most suitable permanency plan for each child (Paul, 1994; Ngcobo, 1992; Muller & Steyn, 1990).

Children, whether in foster care or residential care, need to have permanency plans drawn for them, a process that is facilitated by designated social workers. Children especially in residential care have been identified as most vulnerable. They are usually older children, could have history of multiple placements and at times come from disorganised families or have no families at all (in case of abandoned children) (Paul, 1994; Ngcobo, 1992).

Barriers to permanency planning

Research has identified a number of barriers towards fulfilment of permanency plans for children in alternative placement. Some of the barriers include habitual focus on the child rather than the whole family, unclear or insufficient commitment to a permanency planning philosophy, budgetary constraints which result in consequences such as inadequate outreach services to parents, and pressure to keep the institution full, the relationship between the residential centre and the referral agency or other community agencies, with inadequate co-ordination of services, lack of adoptive parents, increased paperwork and other administrative tasks (Moodley, 2006; Paul 1994; Ngcobo 1992; Muller & Steyn, 1990; Carlo & Shennum,

1989). Another barrier might be children themselves who might display signs of mistrust and resentment towards caregivers due to previous maltreatment and abuse (Carlo & Shennum, 1989).

Ideally children should be returned to their parents within 6 to 12 months, thereby restoring permanency to the family. In SA, the law allows a maximum of 2 years for rehabilitation of child and family (Children's Act No 38 of 2005). This means that after two years in alternative placement, the child needs to return to his/her biological family (Children's Act No 38 of 2005; Ngcobo, 1992; Paul, 1994; Muller & Steyn, 1990). However, two years has been found to be an unrealistic time frame because of the number of children who continue to stay in residential care after two years. Factors related to the child, his family, residential care and sometimes placing agencies contribute to the extended stay of children in alternate placement (Ngcobo, 1992). The court orders that lapse after two years are renewed until children reach the age of maturity (18 years or more) while still in residential care (Ngcobo, 1992). However, permanent care of children in residential care should not be happening based on the permanency planning theory but the residential care institution needs to be providing treatment towards family reunification. Based on Muller and Steyn (1990), residential care, according to permanency planning theory, has to provide 'rehabilitation' and 'short-term' care to children. The institution becomes the partner in working toward re-entry of the child into family life and thereby becomes a means to a specific goal instead of an end in itself (Muller & Steyn, 1990). Permanency planning theory has also been seen as a foundation theory that integrates other theories in child care (Ngcobo, 1992).

2.3.2 Reunification theory

“All families have the capacity to learn, grow and change... (Fraser *et al.*, 1996, p339)”

The goal of reunification theory is to speed up the process of returning children to their biological families. Fundamental to this theory is that children should grow and be cared for by their biological families. Therefore, family preservation and family support are guiding principles of reunification theory (Fraser *et al.*, 1996). Nevertheless, the decision to reunify the family is based on whether it safe and feasible to do so as child protection is always paramount when working with children (Fraser *et al.*, 1996; Carlo & Shennum, 1989).

Reunification theory aims to provide stability and continuity of care in children by ensuring that children spend minimum time away from their families (Fraser, *et al.*, 1996). The ideal is that while the child has been removed and placed in alternative placement, reconstruction services should be ongoing in a child's family to enable the child to go back to his or her family in the quickest possible time (Noonan & Burke, 2005). Family reunification seeks to strengthen the family by renewal of trust among family members as well as encouraging good family traditions and practices. In cases where reunification is impossible, contact among separated family members should be encouraged and facilitated (Fraser *et al.*, 1996).

Several factors have been identified that seem to work against family reunification. Factors such as children who have experienced multiple placements, children who had been in alternative placement for an extended period of time, children who were older and displaying severe behavioural or emotional challenges (Fraser *et al.*, 1996; Carlo & Shennum, 1989), families with severe problems, financial constraints, territorial disputes among service providers, lack of coordination of services and parental hesitation concerning reunification (Fraser *et al.*, 1996). Freundlich and Avery (2005) observed that reunification of children who were placed in alternative care when they were infants or children placed later during their teenage years and black children occurred at a very slow pace.

Reunification is a challenging and lengthy process which necessitates adjustments from both the biological family and the child as they learn to live together again (Paul, 1994; Carlo & Shennum, 1989). It also requires reunification workers who can actively collaborate with others, treat the family with respect, and believe in the family.

2.4 Educational attainment

Limited studies on the educational outcomes of children in alternative placement has indicated that quite a high number of children in alternative placement perform poorly academically when compared to children of similar characteristics but who reside with their families of origin (Roy & Rutter, 2006; Freundlich & Avery, 2005; Finkelstein, Wamsley & Miranda, 2002; Colton & Heath, 1994). Among many challenges that are faced by children in residential care, performing poorly in education, argues Finkelstein, et al. (2002, p1), "...may have the most serious consequences for their future." It is a common saying that education is

the key to success. Often the more education one has, the higher the prospects for a better job which in turn usually leads to a better lifestyle. Sadly, children in alternative placement such as children's homes due to difficulties with their academics end up dropping out of school early, or are found in special schools and that decreases their prospects of getting a decent job with decent pay (Freundlich & Avery, 2005). Unemployment or earning a low salary is not an unusual phenomenon for children in alternative placement (Freundlich & Avery, 2005).

Reasons for underperformance of children in alternative placement are unclear. However, a number of possible causes have been suggested by different scholars. Possible reasons for low academic achievement of children in alternative placement include early child abuse and neglect; caregivers and social workers putting more emphasis on good behaviour compared to good results (Colton & Heath, 1994); children who are less confident with their own abilities and or are less interested in what they are learning, little or lack of individual attention and attachment due to high number of children per caregiver (Ahnert, Piquart & Lamb, 2006).

Roy and Rutter (2006) saw the combination of both biological and environmental difficulties children experienced prior to alternative care as having an influence on their academic performance while in alternative placement. Also hyperactivity characterised by inattention and over activity usually associated with children in residential care has been seen as one of the reasons children in alternate placement do not generally do well in school (Roy & Rutter, 2006).

Caregivers who feel education is important and encourage early reading in children seem to have a positive influence on the marks of children. Roy and Rutter (2006) further states that delays in early reading has lasting effects because children display inattention even eight years later than when they had been evaluated. In a study by Finkelstein *et al.* (2002), children in that study reported that thoughts of missing home and biological families including worrying about their biological families' wellbeing contributes to their low academic performance, because instead of concentrating in class they will worry about their families. At times feelings of sadness will overwhelm them in class.

2.4.1 Absenteeism

There appears to be a relationship between school attendance and progress at school. Often the rate of attendance for children in alternate care is lower than the rate of school attendance for children raised in their families of origin (Finkelstein *et al.*, 2002). Nevertheless, according to Finkelstein *et al.* 2002, there has been some research that indicates that children placed in alternate placement show improved results after placement. This could be applicable to children who were removed from families that were neglectful of their children's education. In literature, reasons for absenteeism include medical reasons such as regular doctor's appointments, looking after younger siblings (*Ibid*).

2.4.2 Homework

Most children receive homework as part of their learning. Children are expected to get guidance and assistance with their homework from their caregivers or other family members who could assist. In a study that was conducted by Roy and Rutter (2006) on the reading levels of children in alternate placement, they found that regular help with homework benefits children in foster care but not children in residential care. Roy and Rutter (2006) also found that children display inattention especially in relation to challenging tasks that are imposed on them, as well as not immediately rewarding. The possible reasons the researchers give for that inattention is that maybe it is a 'learnt response' that children have developed as a result of growing up and being raised as part of a group, or maybe it could be lack of individual attention in group work when doing class activities. On the other hand, based on Finkelstein *et al.*'s research in 2002, children who participated in their research mentioned that it is their lack of study and lack of completing homework that make them get lower scores compared to other children in families in the community.

2.4.3 School transfer

Children in alternate placements are more likely to change schools frequently compared to children growing up with their biological families. Change of school is usually determined by change of placement. When a child moves from one placement to another, it is high likely that that child will be transferred from one school to another that is closer to where the child is placed. This change of school is often very disruptive because it can happen anytime (Fox & Berrick, 2007; Buchanan, 1995). It does not matter whether it is exam time or not. If it is

anticipated that the child is in danger, then child protection takes precedence over the child's education. As a result, there is agreement that frequent transfers impact children negatively with regards to their educational progress, social networks and emotional development (Fox & Berrick, 2007; Roy & Rutter, 2006; Buchanan, 1995).

2.4.4 Friendship

According to Fox and Berrick (2007) friends are crucial in children's development since friends have a great contribution on the children's wellbeing as well as in the social and emotional development. Children usually develop friends in their neighbourhoods and in school. Often these friendships last a lifetime. However, for children in alternative placements, there is usually a high possibility of movement due to changing circumstances in their placements. Changes of placements are usually disruptive to friendships that a child has created (Buchanan, 1995). Instead of being permanent, relationships end up being short-term. And for many, these disruptions to their friendships have a negative effect on them and their development (Fox & Berrick, 2007).

In addition to disrupted friendships, children in alternate placement often encounter challenges when they bring their friends over for visits. Barriers can be caregivers not welcoming friends or it can be policies of the institution not being friend friendly. In research done by Finkelstein *et al.* (2002) half of the children interviewed indicated that they were not comfortable revealing their foster care status to other children in school because of stigma associated with being raised in foster care. As a result, children in foster care will be shy or be aggressive in order to avoid forming friendships with other children. These children will end up isolated and lonely.

2.5 Behaviour characteristics

“... foster children are at high risk for emotional and behavioural problems. (Leathers, 2003, p53).”

The majority of children in alternative placement are associated with habitual instances of displaying unacceptable and negative behaviour according to some studies that have been conducted on children in out of home care when compared to other children not in care (Colton & Heath, 1994). However, some studies have shown that children with behavioural

problems are more likely to be placed in alternative care (*Ibid*). This might mean that alternative placement might not be the cause of behavioural problems, but rather that children already come to care because of behavioural problems. Nevertheless, this does not explain the case of abandoned children. Interestingly, research has suggested that there is a relationship between behavioural problems and low educational achievement for children in alternate placement (Finkelstein *et al.* 2002, Colton & Heath, 1994). Unlike educational achievement, there seems to be no relationship between the background of children and their behaviour (Colton & Heath, 1994).

2.5.1 Child's feelings about residing at the children's home

Based on Buchanan's (1995) study, for children in alternative placement, stigma is the primary phenomenon children associated with living in care. Children feel that the stigma associated with growing up in a children's home, for example, has a great influence on their self esteem (Buchanan, 1995). According to findings of Finkelstein *et al.* (2002) on children in foster care, those children also reported experiencing stigma associated with being in foster care. As a result, children will withdraw from forming friendships because of fear of being found out. The fear is based on being teased concerning their parents' circumstances such as mental illness, criminal background, drug abuse, poverty, also not having a real mother or father is an issue for children in alternative placement (*Ibid*). These parents' circumstances are usually the ones that contribute or even determine for the child to be removed and be placed in alternative care.

2.5.2 Dealing with challenges

Often children deal with challenges differently according to their individual differences, maturity, upbringing and the nature of the challenge. Some challenges can be resolved by an individual but some challenges require external help. Therefore it is important for a child to have people whom she/he can approach when faced with challenges so as not to feel alone and overwhelmed with problems. Requesting help often requires some level of trust in that person. Children who are placed in kinship care tend to depend on the extended family members for their social, emotional and material support (Fox & Berrick, 2007). In a study that was conducted by Finkelstein *et al.* (2002), children mentioned biological families, foster

families, teachers and other staff members at school as people they talk to about their challenges and only a few children reported that they have no one to turn to when experiencing some difficulties.

2.5.3 Adjustment at children's home

Children removed from their families or from any other form of care to residential care need to be given a chance to adjust to the new environment of that residential placement. Certain mechanisms have been suggested by literature that can be used to make the process of adjustment to the children's home easier. For example, Ngcobo (1992) suggested that children who come to care need to be able bring their personal belongings such as favourite toys, clothes, and photographs to assist with the adjustment process. Secondly, the best time that has been suggested to admit children is before school going children come back from school. Once admitted, children should be given space and time to mourn the separation between them and their biological families (Ngcobo, 1992).

2.5.4 Child participates in decision making

“Although the Act places considerable emphasis on consulting the child, the child's wishes and feelings are not paramount. It is the child's welfare that is paramount.” (Buchanan, 1995, p682).

The above quote is in line with the four objectives of child welfare, where protecting children from harm is the first priority followed by promoting children's well-being, preservation of families and upholding permanency in children's lives (Fox & Berrick, 2007; Moodley, 2006). Even though children are expected to participate in decision-making concerning issues that affect their lives, what is in the best interest of the child (judged by adults) takes paramount importance. Research has found that children report little opportunity allowed to them to learn to make decisions (Freundlich & Avery, 2005; Buchanan, 1995). Even when they did get the little opportunity to make decisions, they do not make concrete decisions (Buchanan, 1995). According to Buchanan (1995, p. 695), “Involving young people in the process of making decisions in all aspects of their lives is good child care practice.” Lack of participation in decision making tends to have long-term negative effects on young people after they have been discharged from care (Freundlich & Avery, 2005). These young people

experience great difficulties with making decisions as they are not used to the procedures of the decision making process due to most of the things being done for them.

2.5.5 Thoughts about biological family

According to research done by Finkelstein *et al.* (2005), children in alternate care experience frequent thoughts about their biological families and that affects concentration at school. Children in alternate care will worry about their separation from their biological family, apprehension regarding biological family, difficulty in adjusting to a new placement including school and worries about the unknown (*Ibid*). So while other children who live with their families are focused on the classroom activities, children from residential care for example will be worrying about their biological families.

2.6 Children's homes

2.6.1 Child preparation before entry into the children's home

The most important aspects to consider before placing children in a children's home is to ensure that the child and his/her family visit the children's home prior to the child being admitted (Ngcobo, 1992). This is very important for the social worker of the placing agency, biological family of the child, as well as the child. Pre-visits enable the child to settle or adjust quickly at the children's home quickly, the external social worker to understand his/her role and the child's family to get to know what is expected of them while their child is in alternative placement. That will encourage partnership between the child's family and staff in residential care (Paul, 1994). It is the duty of the external social worker to arrange the pre-placement visit to the children's home. Usually the child and his family are shown around the children's home while being introduced to the principal of the children's home and the caregiver who will be looking after the child (Ngcobo, 1992).

2.6.2 Reason for being in a children's home known to the child

Some studies that have been done on children in alternate care reveal that a majority of children do not know why they were removed from their families and that seem to affect their development (Fox & Berrick, 2007; Freundlich & Avery, 2005; Muller & Steyn, 1990).

Young people report that that lack of knowledge about reasons for removal from their families affect them negatively. For example, some young people mentioned that they experienced difficulties with regards to their identity and felt that they had no roots (Freundlich & Avery, 2005). As a result, most researchers concur that it should be explained to the children prior to removal why are they removed from their family (Fox & Berrick, 2007; Freundlich & Avery, 2005; Muller & Steyn, 1990).

2.7 Biological family involvement

Previously, parents were not involved in the rehabilitation or treatment programmes and plans of their child/ren following removal to residential care. However, parents have been identified as the crucial source of continuity and permanency in the child's life regardless of the reason for removal of the child. Since the early 80's, there has been an increase in realisation of the importance of family involvement in alternate care of their children. Thomlison *et al.* (1996) states that there is an understanding based on research that biological families of children influence the well being of their children in alternative care. However, the extent of that influence on the children's wellbeing is unknown. Another area where parents can assist the treatment programme is on maintaining the behavioural change produced or facilitated by the children's home (Paul, 1994). The intervention of the children's home or residential care is temporary, two years and renewable every two years (Children's Act No 38 of 2005). Nevertheless, residential care is a long-term and maybe permanent place for most Black South African children because of difficulty to adopt (Ngcobo, 1992)

Biological families fulfil certain specific functions in any child's life. Often families provide children with security and love, and they expose children to culture, set boundaries for the child and assist the child towards socialisation with wider community (Ngcobo, 1992). Children in alternate care have a right to a continuous relationship with their families (Ngcobo, 1992; Muller & Steyn, 1990) unless parental rights have been terminated (Children's Act No. 38 of 2005 and Children's Amendment Act No. 41 of 2007). As a result, children's homes should do their best in encouraging and ensuring that children remain in contact with their families. Where it is felt that contact might be detrimental to the well-being of the child, Muller and Steyn (1990) proposed that attempts should be made to rectify the element or elements that have been seen as harmful to the child's well-being and

development. Older children can also express whether they would like to have contact with their families or not, but in research by Buchanan (1995) children raised a concern that their desires were not respected as adults often had different views concerning with what was best for them.

Certain obstructions have been identified which relate to involvement of biological families while children are away from their families in residential care. Obstructions include financial constraints due to poverty, children in residential care staying far away from their families, guilt feelings and those parents may be embarrassed of exposure of their parenting skills to staff and other parents (Carla & Shennum, 1989).

2.7.1 Nature of family involvement

There are a number of ways that children's biological families can be involved while children are in alternate placement such as the children's home. However, it seems as if the dominant way regarding family involvement that has come up from different studies is parental visiting to the child at the children's home (Leathers, 2003; Muller & Steyn, 1990). The other manner in which biological families can be involved includes being involved in decision-making regarding the child's wellbeing and development while in care (Leathers, 2003). Family involvement in decision making might assist in a child's development plan in such a way that the family knows its role and understands how to look after as well as support the child's unique development optimally.

2.7.2 Role of biological family while child is in care of housemother

Families seem to play two important roles, to nurture their children while in residential care and be the family of children who have no family to go back to (abandoned children whose families are untraceable). This can be done through active involvement by parents for example, help with homework, be part of mealtimes, outings, decision-making, etc (Leathers, 2003; Carlo & Shennum, 1989). The study that was done by Leathers (2003) revealed that visitation by parents is associated with a protective effect that was uniform among children in residential settings but not children in foster care. It was mentioned earlier in this chapter that for some children it might not be possible for them to stay with their families throughout their childhood, nevertheless their families need to be involved in their lives. For such parents and

families, experts have proposed that they be involved in the decision making process regarding their children so as to assist in choosing the best permanency plan for their child/ren in alternate placement (Leathers, 2003).

2.7.3 Relationship between children's home and biological family

Different research studies have recommended that relationship between children's home and the child's biological family should be that of equal partners in relation to caring for the child in residential care (Fraser *et al.*, 1996; Paul, 1994; Ngcobo, 1992; Muller & Steyn, 1990). Equal partnership can be determined by the way that decisions are made regarding the well-being of the child as well as amount of contact there is between biological and the child during the out of home care period. For example, when there are parenting skills courses that are run by the children's home, parents should be on the training team as equal partners as they possess lots of valuable information about the child concerned (Paul, 1994). Ngcobo (1992) further states that the success of the treatment programmes offered by the children's home lies with the nature and level of family involvement. Families can take their children on weekends and on holidays (Muller & Steyn, 1990).

2.7.4 Amount of contact between biological family and child

Almost all researchers concur that parents and children should be allowed to visit each other regularly to promote permanency (Leathers, 2003; Paul, 1994; Ngcobo, 1992; Muller & Steyn, 1990). To combat the challenge mentioned earlier of biological families lacking transport and sometimes money to visit their children in alternate care, Ngcobo (1992) suggested that the children's home provide transport to those families.

2.7.5 Frequency of visits

Reviewed literature indicated that the more frequent the parental visits to the child, the better the chances are for that child to be reunified with his or family regardless of the reason for the removal of the child, parental or child characteristics (Leathers, 2003). Also frequent visitations soon after the child has been placed in alternative care were found to be closely linked with decreased behavioural problems in the long run (*Ibid*).

From the literature reviewed in this chapter, it becomes clear that children who live in alternate placements away from their biological families experience a number of challenges that are unique to them. These main challenges include identity problems, unsatisfactory scholastic progress and tendency to display negative behaviour characteristics. Permanency planning theory and reunification theory were explored as a means of addressing challenges experienced by children who were removed from their biological families and placed in alternative care. Biological family was seen as important in each child's life as children belonged to their families of origin and there was a possibility that the family could be a protective factor against challenges faced by children while in alternate care. Thus, abandoned children who have had no contact with their biological families might arguably be at greater risk compared to children with the involvement of their biological families in their lives in terms of challenges experienced by children in alternate care.

Chapter 3: Research Methodology

3.1 Introduction

Child care practitioners have been faced with the dilemma of involving the child's family, and at the same time needing to protect the child from harmful family processes. As a result, there has been a general tendency to avoid any contact between the child and his or her family. This study interrogates the question: Does biological family involvement play a major part in development of children in residential care, or is it something that can be ignored? Most importantly in responding to this question is the concern for the child's well-being and the effect that these decisions may have from the child's own perspective.

3.2 Rationale

The rationale for choosing this study was the researcher's interest in children and their development, including the continuous quest to find ways of improving psychosocial services offered to such children. In addition, the researcher was working at the children's home where the study was located. It was therefore necessary to work objectively and systematically at all times, to carefully avoid any bias coming into the process of data collection and data analysis.

It was hoped that the research results would benefit children at the children's home under study in terms of it being used to inform policy. The research findings could also assist childcare workers who work in a similar setting as the children's home under study.

The research questions, stated as hypothesis in their null form are:

1. Primary school children living within a children's home were likely to have similar levels of scholastic progress whether they had biological family involvement or not; i.e. that biological family involvement was unlikely to impact on scholastic progress of the children.
2. Primary school children living within a children's home were likely to have similar behavioural difficulties whether they had biological family involvement or not; i.e.

that biological family involvement was unlikely to impact on behavioural adjustment of the children.

Hypothesis are not usually included in qualitative research but are included here to focus the attention of the research on two essential aspects of adaptation and well-being in young children.

3.3 Research design

This was a qualitative multiple case study in which information was sought to explore the role that the biological family has on children's development. The multiple case study method allowed in-depth exploration into the research problem being investigated (Terre Blanche, Kelly & Durrheim, 2006; Terre Blanche & Durrheim, 2002; Greig & Taylor, 1999). Case studies also enabled the researcher to study children in their context and as a result gained a fuller understanding of their circumstances (Terre Blanche, Kelly & Durrheim, 2006; Greig & Taylor, 1999). A sample of five children who have had biological family involvement in their lives was compared with five children who have had no biological family involvement in their lives. Ten children in total were sufficient to fulfil the purpose of the study as literature has recommended that large numbers are not necessary if the purpose of the study is to describe events surrounding the child's life (Greig & Taylor, 1999) and six to eight cases are sufficient if the sample is more or less identical or has similar characteristics (Kelly, 2006).

3.4 Sampling

3.4.1 Purposive Sampling

The sampling technique used in this study was purposive sampling since children who were part of the study were those that fitted the criteria set by researcher. Purposive sampling ensured that children who participated in the study had similar characteristics and fitted the phenomenon under investigation (Durrheim & Painter, 2006); i.e. either had biological family involvement or did not.

Children that fitted the criteria were:

- 1) children who had been at the children's home for more than two years,
- 2) were eleven to twelve years old (same age band), and

3) attended mainstream school.

Eleven to twelve year old children were not yet adolescents, who might be grappling with their identity as part of normal psychosocial development, and also not too young to be unable to express themselves clearly. Furthermore, children that participated in the study were those attending mainstream schools perceived to offer similar levels of education (Colton & Heath, 1994). Children had to be attending schools with English as the medium of instruction as the majority of children at the children's home attended such schools from primary level. It must be noted, however, that none of the participants were mother tongue English speakers. English medium schools in the area are considered to offer a better quality of education and so the children from the children's home are sent there.

3.4.2 Random sampling

Interval sampling was used to select the five cases of children with family involvement and five cases without family involvement. The children's home had 52 children with biological family involvement and 102 children without biological family involvement. That information had been obtained from children's files and verified by housemothers. The researcher then used the Control List in order to establish the number of children who had biological family involvement who fitted the criteria of age (11-12 year olds), school (mainstream) and had been at the children's home for more that two years. The Residents' List was used to verify the information on the Control List. There were discrepancies between the Control List and the Residents' List. For example, some of the children's birth dates were not the same on the two lists. The researcher then decided to use the Resident's List as it was the one the children's home submitted to Department of Social Welfare when claiming children's grants.

There were twelve children with family involvement and twenty one children without family involvement who fitted the criteria. As there were more children in both categories than what the researcher required, interval sampling was used to select ten children, five with biological family involvement and five without biological family involvement. The first child was chosen randomly and thereafter every third child was chosen until there were five children in both categories of children with biological family involvement and those without. The researcher wrote the names of all children without biological family involvement on pieces of

paper, placed the pieces of paper in a box, shook the box and picked any name from the box. Thereafter, every third name was picked until there were five names on each category.

3.5 Data Collection

Triangulation

“Triangulation entails collecting material in as many different ways and from as many diverse sources as possible. This can help researchers to ‘hone in’ on a better understanding of a phenomenon by approaching it from several different angles.” (Kelly, 2006 p287).

In order to understand the effects of biological family involvement on the lives of children in the children’s home under study, data triangulation was thought of as best suited to address the research question. Triangulation enabled the researcher to understand the research question from three perspectives: namely, children’s files, children and their caregivers referred to as housemothers. Information from the children’s files and information from the interviews of the housemothers enhanced the information obtained from the children themselves and that added to the richness of the understanding of each individual child in his or her context.

There was a possibility that children or housemothers might answer questions to impress the researcher who was known to them or might not feel free to state if they did not know the answer. According to Kelly (2006), data triangulation assists us to be cautious about data that we receive lest we err in our interpretation of circumstances. Greig and Taylor (1999) viewed triangulation as a means of improving the validity of the study as well as identifying “...shifting realities...” (p75) of research participants in this instance children and housemothers.

Data was collected in three phases:

3.5.1. Children’s files

Documentary review of the case files of the participants was used to identify educational and behavioural indicators of progress or lack thereof. The method of data collection involved extracting information from the children’s files that are normally kept by the social workers

and housemothers (primary caregivers). Documentary review of case files assisted the researcher to cut down on the interview research time with children by avoiding asking children for information that was readily available in their files. Nevertheless, there were certain instances where the researcher felt that it was necessary to ask children for information so as to obtain the child's own perception of the situation. Asking children assisted in verifying as well as ascertaining children's understanding of that information.

Extracting data from children's files occurred immediately after finishing interviewing children and housemothers. The researcher collected files from social workers of those children participating in the study and extracted information using the guide (found in Appendix E) that had been designed for that purpose. Data for children without biological family involvement was extracted first. On finishing, files were returned to social workers then the second batch of files for children without family involvement was collected and returned on finishing. The process of data collection took longer than the researcher anticipated as there was much information stored in each file. While collecting the information, clear patterns were emerging from the data which are discussed in the next chapter. The effect of biological family involvement was evaluated through two main variables, namely, academic performance and behaviour characteristics. The main challenge experienced by the researcher while extracting information from children's files was that some of the information was not there e.g. other school reports were missing. The other challenge was that the birth dates on the Residents List were not the same as those on the birth certificates for some of the children. The researcher decided to use dates on birth certificates as reflecting the age of the child. That resulted in some children falling out of the original criteria in terms of age. The researcher ended up with children ranging from 11 to 13 years.

Children's files provided information on:

- 1) academic performance using school reports (half-year marks and year-end marks since child entered the children's home) and teachers' comments; and
- 2) behaviour characteristics using incident reports (recorded by housemothers, teachers, or other childcare workers at the children's home), as well as referrals, medication e.g. Ritalin.

3) nature of family involvement using indemnity forms filled in by biological family members when children visit them, records of conversations, meetings, correspondence between family members and the child and social workers, and any contact the biological family had with the child.

3.5.2 Interviews with children

Data was accessed through semi-structured interviews using questionnaires with the children. Recent research has promoted the importance of "...listening to the voices and views of children themselves..." (Greig & Taylor, 1999 p81). The recently passed Children's Act and Children's Amendment Act have also emphasized the importance of children participating in issues that affect their lives (Children's Act 38 of 2005, Children's Amendment Act 41 of 2007). Interviews were conducted with each child individually, with the purpose of minimising the possible effect of children influencing each other. All children's interviews were conducted in their cottages. Each interview lasted approximately one hour, but none took longer than an hour. In accordance with ethical guidelines, informed assent and consent was obtained from the child participants and from the children's legal guardians (please see Appendices A, B, C & D).

The use of semi-structured interviews has been recommended by many researchers as an effective tool for conducting qualitative research (Greig & Taylor, 1999; Holdaway, 2000; Kelly, 2006). Use of semi-structured interviews allowed the researcher the flexibility to ask questions and follow-up on those questions so as to understand in depth the reasons for participant's actions or lack thereof. Semi-structured interviews also gave a structure to the interviewing process through focusing on themes, thereby allowing the interview to flow especially when interviewing participants who do not readily talk. It was based on these reasons that the researcher adopted the use of semi-structured interviews.

The researcher developed a questionnaire to guide the whole interview process with children and housemothers. The questionnaire used a mixture of closed and open-ended questions. Closed questions allowed the research participants to use either yes or no answers, while open-ended questions enabled participants to expand on the answers they had given. The researcher took time to ensure that she did not ask leading questions to research participants.

Questions that were asked to participants were either to test questions that had been asked in previous research or ask new questions based on recommendations from previous research. Children's interviews were guided by short questions. To increase the validity of using a questionnaire as an instrument of data collection, questions were simplified because research found that children find it hard to cope with long questions or two in one questions (Greig & Taylor, 1999).

It was very important for the researcher to ask questions in a child friendly manner so as to increase the reliability of the questions asked. The researcher tried as much as possible to make the interviewing process as natural as possible, as if the researcher and the participants were engaged in a normal conversation (Holdaway, 2000). The researcher's interpersonal skills and the fact that the researcher was known to both children and housemothers enabled the participants to feel relaxed and not intimidated by the whole research process. However, there might be a possibility that research participants felt a certain degree of pressure to participate in the study despite the ethical procedure taken by the researcher of asking for informed consent/ assent and stressing the voluntariness of the study. Pressure might have come as a result of the researchers' position in relation to housemothers and children.

Interviews for children were done at the children's cottages, which was a familiar environment to them in order to further lessen the formality of the interviewing process. All children's interviews were done after school. Interviews with children occurred after they had eaten and rested and prior to them doing their homework and were conducted at the child's bedroom. The child's bedroom was a private place and the housemother ensured that there were no interruptions while the interviewing process took place. It was the researcher's intention to do interviews in IsiZulu but children had difficulty understanding IsiZulu words and sometimes English words. Interviews were done in a mixture of IsiZulu and English. The researcher had both questionnaires with her. She wrote in the answers in an English questionnaire although used the IsiZulu questionnaire to ask questions. Children's answers were a mixture of English and IsiZulu but mainly with English. Taking notes while children were talking was a challenging part.

Prior to the commencement of the interview process, the researcher made appointments with all housemothers individually to request permission from them to interview 'their' children

and themselves. The principal of the children's home had already given the researcher permission to conduct the study but the researcher felt it was also appropriate as well as necessary to request access to children from their housemothers who were their primary caregivers. Housemothers were second gatekeepers to children. Housemothers needed to understand the purpose of the study and would be unlikely to hinder the research process or be sceptical with the whole research process. It was critical for the researcher to clarify that she was doing the research as a student at a university and not doing the research as an employee of the children's home.

The researcher further explained the purpose of the study and that participation in the study was voluntary for them and their children. Some housemothers were curious as to what made them and their children to be selected as part of the study. The researcher explained the process that had been followed in selecting them and the children they looked after. Housemothers saw no problem in their children being interviewed in fact they were very enthusiastic about the purpose of the research. Four of them started already to state their opinions pertaining the topic and how the research was going to assist children without biological family involvement. The researcher had to stop them and explain that she was going to come back and do the actual interview but for that day the purpose was to obtain permission to do those interviews.

Although there was much enthusiasm about participating in the research, there was no such enthusiasm with being recorded. Housemothers clearly expressed that they were uncomfortable with the researcher using a tape recorder. The refusal was in spite of the researcher's explanations that the sole purpose of recording was to assist the researcher with storing information as it was going to be hard for the researcher to take down everything the participants were going to say. Due to ethical reasons, the researcher had to respect the desires of the participants. The researcher requested housemothers to make appointments with children concerned on behalf of the researcher as it was necessary for the researcher to explain to the children the purpose of the study as well as get the children's permission to participate in the study.

After obtaining verbal permission from children, dates and times for interviews were set. The researcher conducted all interviews with children over three days, doing three interviews per

day for two days and four interviews on the third day. The researcher allowed a bit of time between the interviews so as to allow time for making process notes while the interview was still fresh from memory. Note taking, however, impacted the flow of the interview to a certain extent as it proved to be challenging (Burton, 2000) as the researcher had to pause a little bit, at times, and jot down important information lest she forgot. As Stroh (2000) observed, it was a near impossible exercise for the interviewer to capture all the of the interview content directly on paper.

3.5.3 Interviews with housemothers

Semi-structured interviews were conducted with the housemothers who knew the individual children well (See Appendix F & G). Most children had been placed at the children's home from a younger age under the care of the housemothers. The housemothers themselves had cared for these children for a number of years so the researcher felt confident that they would be able to provide valuable insight regarding the children under study. Although the main focus of the study was children, adults in the form of housemothers were able to assist the researcher with information from a different perspective (Greig & Taylor, 1999).

Interviews with housemothers were conducted during the day prior to children returning from school in order to minimise interruptions during the interview process. Each housemother was interviewed at the cottage she was responsible for, which was an environment that was familiar to her. Interviews took place in the dining room. Seven housemothers were interviewed because three housemothers had each two children who were participating in the study. Interviewing housemothers took three days to complete.

3.6. Data analysis technique

Interpretive analysis was used in the analysis of research results. Terre Blanche, Kelly and Durrheim (2006, p.321) explained the intention of interpretive analysis was "... to provide a 'thick description', which means thorough description of characteristics, processes, transactions, and contexts that constitute the phenomenon being studied, couched in language not alien to the phenomenon, as well as an account of the researcher's role in constructing this description." As explained by Kelly (2006), in interpretive analysis a researcher could either use preformulated themes or derive themes as they emerge from the data or context.

Analysis was used to make comparisons between children with biological family involvement and without such involvement. The analysis focused on two main themes, namely, academic performance and behaviour characteristics as well as sub-themes that were pre-determined by the researcher based on the literature review. The focus was in line with the research questions. Review of statements by research participants was assigned to categories – positive, negative or neutral or a combination of positive and negative factors.

3.7 Ethical issues

Among the most important factors a researcher has to consider when doing research are ethical issues. Ethical issues when conducting research have been developed as a means of protecting participants in that particular research. Without ethical considerations, research participants would be at risk of being harmed intentionally or unintentionally at psychosocial, biosocial and spiritual levels. Ethics are aimed at preserving human dignity by observing the rights of individuals. Four principles guided this research, namely, autonomy, beneficence, non-maleficence and justice which will be discussed fully below.

3.7.1 Autonomy

The researcher understood and was guided by the principle that children and housemothers have the right to decide and voluntarily consent or assent (in the case of minors) to participate in the study as well as the right to refuse to be part of the study (Kent, 2000). The purpose of the study was explained to all research participants in IsiZulu, which was the mother-tongue of all participants. It was also explained to research participants that they had the right to agree or refuse to participate as well as withdraw from the study without fear of prejudice or harm towards them. An informed consent/assent form was signed by all research participants. (Refer to Appendix A & B). Research data was kept confidential at all times. Data from the research was not included in the children's files kept by Social Workers but was coded and kept separately in a locked cabinet accessible to the researcher only. The identities of all research participants including that of the children's home under study remained confidential and pseudonyms were used whenever necessary (Wassenaar, 2006).

3.7.2 Beneficence

According to Greig and Taylor (1999), the research question should be of importance to the lives of children and ultimately add towards their development and improve their environment. Through their participation, children felt listened to and cared for in terms of their own unique life circumstances. Through this study, children's homes might be able to involve biological families in the lives of children in a more meaningful way. It was anticipated that the research results were to assist childcare practitioners with increased knowledge of taking better care of children in long-term residential care who were without any biological family involvement to reach their optimum developmental levels (Kent, 2000). Depending on the outcome of the study, children were to be assisted by vigorously searching for their biological families.

3.7.3 Non-Maleficence

All research participants were treated with utmost respect and dignity. No harm was administered to either children or their housemothers (Wassenaar, 2006; Kent, 2000). However, there was one question directed at the children that upset at least one child. The question was about the biological family but the child was abandoned. The question sought to clarify the frequency of thoughts the child had about his biological family. The boy cried for some time and towards the end of the interview he thanked the interviewer profusely for talking to him. He felt relieved. The boy was referred to a Social Worker to talk about his feelings towards his family of origin. Although the question upset the boy, his relief after talking outweighed the initial sorrow.

3.7.4 Justice

Children with biological family involvement and children without any biological family involvement who participated in the study, received the same treatment from the researcher (Kent, 2000). All children and housemothers participating in the study were treated "...with fairness and equity during all stages of the research" (Wassenaar, 2006, p.68). Also, selection of children was based on the criteria set by the researcher and all children fitting those criteria had an equal chance of being part of the study. Purposive sampling ensured that the sample consisted of children fitting the criteria for the purpose of this study.

Chapter 4: Results

4.1 Introduction

The basic research question was to investigate the role that biological families play in the development of children in long-term residential care. The study was a comparison between five children with biological family involvement and five children without any biological family involvement. Multiple sources of data collection were used in an attempt to answer the research question. Data was collected from children participants' perceptions, file records of the children's behaviour and educational progress, and also obtained from the housemother's perceptions on children's behaviour and educational progress.

4.2 Profile of research participants

Children that were interviewed consisted of six boys and four girls whose age ranged from 11 to 13 years old (Mean age = 12.2 years and the std. deviation = .789 indicating there was little variation on the ages of the children). All children were attending schools within the Msunduzi area. There were six children in grade six, five children in grade five and one child in grade seven. Most children with biological families were in grade six compared to children without biological families, where only two were in grade six. This may be attributable to relatively weaker scholastic performance - a possibility that will be explored later in this chapter. Below, in Table 4.1 is an outline of research participants.

Profile of research participants

Participants	Sex	Age	Grade	No. of years at the children's home	Reason for being in care	No. of placements before children's home	No. of children in a cottage
With biological family involvement							
P1- Joyce*	Girl	12	6	3	Abuse & neglect	0	9
P2- Mandla*	Boy	12	6	11	Abandoned	0	9
P3- Small*	Boy	13	5	10	Orphan	0	8
P4- Imelda*	Girl	13	6	5	Orphan	0	9
P5- Owami*	Girl	11	6	3	Abuse	0	9
No biological family involvement							
P6- Perseverance*	Girl	11	5	10	Abandoned	1	8
P7- Tim*	Boy	12	6	11	Abandoned	0	9
P8- Akha*	Boy	13	7	11	Abandoned	0	9
P9- Oscar*	Boy	13	6	9	Abandoned	1	7
P10-Khuthala*	Boy	12	5	11	Abandoned	1	9

Table 4.1: Profile of research participants (*Pseudonyms used and they have no resemblance to the real names)

The sample consisted of six boys and four girls. The ratio of boys to girls was in line with the ratio of boys and girls in the children's home which had more boys in its care compared to girls.

4.2.1 Reason for being in care

Children with biological families came to care because of several reasons: they were orphans (single and double), abused or abandoned (and families subsequently traced such as in the case of Mandla). Single orphans in this study referred to children whose mothers were dead and their fathers' whereabouts were unknown as in the cases of Small and Owami. On the other hand, double orphans in this study referred to a case where both parents had passed away, just like Imelda's parents. For children without biological families, the reason for all of them to be in care was because they had been abandoned.

4.2.2 Number of placements before the current children's home

The children's home was the first placement for all of the children who still had biological family involvement. Children came straight from their families into the children's home. Interestingly, children with biological family involvement were also ones with the shortest period of time in care compared with children without any biological family involvement. For children without any biological family involvement, the children's home was their second placement for three of the children and the first placement for only two children. The two children for whom the children's home was their first placement had spent short periods of time in hospital from where they had been abandoned.

4.2.3 Number of children in a cottage

All children in the study resided in cottages of more than six children. Four of the children interviewed who had biological family involvement came from cottages with nine children (including the participant) and one child came from a cottage with eight children. Three of the participants without biological family involvement viz. Tim, Akha and Khuthala lived with eight other children in their cottages; Perseverance lived with seven other children; and Oscar lived with six other children. There was one caregiver who was responsible for all the children in each cottage. The relief caregiver would take over from the housemother when the housemother was on leave, off-duty or off sick.

4.3 Academic performance

The table below shows the academic progress of children with biological family involvement and children without any biological family involvement. Three qualitative judgements on the child's scholastic progress were obtained for each child: viz. the child's own subjective appraisal, the housemother perception and a comment from the child's current educator.

With biological family involvement			
Participants	Child's perception	Housemother's perception	Teacher's perception
P1-Joyce* No repeats or failures	<u>Not doing well</u> because she experienced difficulty with Maths & EMS	<u>Doing very well.</u> Likes school as well as schoolwork a lot. But her performance has recently dropped because of sports commitment.	Gets along well with peers, teachers, good concentration span, high self-esteem, passes well.
P2- Mandla* Has failed three times	<u>Not doing well</u> because of some other problems as well as talking too much in class.	<u>Struggling at school.</u> Talkative, easily forgets.	Gets along well with peers and teachers. Disturbs other children, impulsive, short-concentration span.
P3 - Small* Repeated Grades 2&4, condoned once Gr. 4, Failed thrice in June.	<u>Doing well</u> because he sometimes did his work but at other times he forgot his work at school.	<u>Progress fluctuates</u> between doing well and not doing well. Slow, does not finish. Sometimes hides homework.	Hard working, lively, confident. Has difficulty with his schoolwork, not committed to his schoolwork. No cooperation in group activities.
P4- Imelda* Failed once in June	<u>Doing well</u> because she was quiet in class	<u>Average performance.</u> Does not like school	Good behaviour cooperates with teachers.
P5- Owami* Failed once in June	<u>Doing well</u> but there were 3 subjects that she did not understand	Respectful, <u>Marks dropped.</u>	Short concentration span.

Table 4.2: Perceptions on academic progress of children with biological family involvement
(*Pseudonyms used, they have no resemblance to the real names)

The results indicate differences between the perceptions of children and their caregivers on the progress of the child at school. Three of the children with biological family involvement thought they were doing well at school, while only two children felt they were not doing well at school. The congruence on the perception on academic progress was between Mandla and his housemother. Even the reasons they gave for not doing well at school for Mandla corresponded, the main one being talkativeness. The descriptors of “doing well” and “not doing well” had different meanings for the child participants. For example, Imelda thought she was doing well at school because she was quiet in class, whereas Owami thought she was doing well at school because there were only three subjects in which she experienced difficulty; while Imelda focused on behaviour, Owami focused on performance.

Without biological family involvement			
Participants	Child's perception	Housemother's perception	Teacher's perception
P6- Perseverance* Failed twice in June.	<u>Not doing well</u> because she got detention.	<u>Doing well</u> likes school.	Lovely, diligent to her work, attains excellent results, works consistently, capable of better results. Lacks ability to focus effectively, poor self-discipline.
P7- Tim* Failed all June exams.	<u>Not doing well</u> because of three difficult subjects.	<u>Average</u> performance, likes school	Healthy self-esteem, a lot of confidence, passes all his grades. Lacks self-discipline, short concentration span, slow in execution of work tasks, need much assistance, reinforcement and encouragement.
P8- Akha* No repeats for failures. Passed June & December.	<u>Doing very well</u> because at times he passed without even studying.	<u>Doing very well</u> , likes education, very independent	Increased self-confidence gets along well with peers and teachers. Ability to focus, listen and concentrate dropped, experiences no enjoyment in classroom activities, reserved.
P9- Oscar* Repeated Grade 1. Condoned twice (Grades 2&4).	<u>Not doing well</u> because of difficult Maths and housemother unable to help.	<u>Doing well</u> , independent, likes school but does not like current school because of detention. Child not understood by teachers.	Gets along well with peers and educators. Disturbs other children, easily distracted, unable to follow instructions, short concentration span, and lags behind.
P10- Khuthala* Repeated Grade 1, condoned twice (Grades 1 & 2). Failed most of his June exams	<u>Doing well</u> because he felt he did well in many things such as Arts & Culture, Life Orientation & English.	<u>Not doing well</u> . Good with practical things. Weak academically, struggles with reading, spelling, writing and forming sentences. Likes school.	Gets along well with peers and teachers. Disturbs other children, impulsive, easily distracted, short concentration span.

Table 4.3: Perceptions on academic progress of children without any biological family involvement
(*Pseudonyms used, they have no resemblance to the real names)

Just like children with biological family involvement, perceptions of children's academic performance of children and housemothers were contradictory in most instances, except for one child, Akha, where there was consensus. Children also cited different reasons pertaining to their progress at school. Perseverance, for instance, perceived that she was not doing well because of behavioural problems but Tim, Oscar and Khuthala gave reasons based on the difficulty of certain subjects (academic performance). Oscar went even further to explain that he experienced difficulty with Maths, and that his housemother did not have the ability to help him as she had only passed Grade seven.

4.3.1 Absenteeism

There were fewer number of days that children with biological family involvement had been absent from school with the exception of one child, Small, who was absent for 45 days. This was the child who was chronically ill and therefore tended to be absent from school for doctor's appointments and fetching his medication from hospital. The housemother could not fetch his medicine as the child had to be present every time there was an appointment or collection of medicine. The information on absenteeism was not available for Imelda on her school report. Most children attended school regularly (attendance rate mean =10, std. deviation = 5.9) and probably benefited from being in the classroom by not being left behind.

Although there were indications that children without biological family involvement were absent for more days when compared to children with biological family involvement, the available data was incomplete: for two children, it was not indicated in their school reports the number of days they had been absent from school. Tim and Oscar had missed school for 22 days each and Khuthala had been absent for 33 days. Number of days missed meant not benefiting from being in the classroom probably resulting in being left behind with the schoolwork. Mean= 15.40 and the std. deviation for this group = 5.5.

Theme	Children with biological family involvement	Children without biological family involvement
Absenteeism (school reports)	P1-Joyce* <ul style="list-style-type: none"> ▪ Twice P2- Mandla* <ul style="list-style-type: none"> ▪ Once P3-Small* <ul style="list-style-type: none"> ▪ 45 days P4-Imelda* <ul style="list-style-type: none"> ▪ Not indicated P5-Owami* <ul style="list-style-type: none"> ▪ Twice 	P6-Perseverance* <ul style="list-style-type: none"> ▪ Not indicated P7-Tim* <ul style="list-style-type: none"> ▪ 22 days P8-Akha* <ul style="list-style-type: none"> ▪ Not indicated P9-Oscar* <ul style="list-style-type: none"> ▪ 22 days P10-Khuthala* <ul style="list-style-type: none"> ▪ 33 days
Homework	P1-Joyce* <ul style="list-style-type: none"> ▪ 1 hour on weekdays P2- Mandla* <ul style="list-style-type: none"> ▪ 20 min on weekdays P3-Small* <ul style="list-style-type: none"> ▪ 30 min on weekdays P4-Imelda* <ul style="list-style-type: none"> ▪ 1 hour on weekdays P5-Owami* <ul style="list-style-type: none"> ▪ 15-20 min on weekdays ▪ 15 min on weekends 	P6-Perseverance* <ul style="list-style-type: none"> ▪ 1 hour on weekdays ▪ 1 hour on weekends, P7-Tim* <ul style="list-style-type: none"> ▪ 45/15 min/1hr weekdays ▪ 10-15 min weekends P8-Akha* <ul style="list-style-type: none"> ▪ 30 min on weekdays ▪ 1 hour on weekends P9-Oscar* <ul style="list-style-type: none"> ▪ 1 hour on weekdays ▪ 1 hour 10min on weekends P10-Khuthala* <ul style="list-style-type: none"> ▪ 5 min on weekdays
Housemothers strategies to improve marks and to cope with children's homework	P1-Joyce* <ul style="list-style-type: none"> ▪ Talking about marks ▪ Encouragement P2- Mandla* <ul style="list-style-type: none"> ▪ Communication book ▪ Doing homework in stages ▪ Doing homework in a fun way ▪ Talking to him ▪ Requests extra help P3-Small* <ul style="list-style-type: none"> ▪ Reward system ▪ Follow up on the child ▪ Enquire from classmates ▪ Use of volunteers ▪ Cooperation between mother and teacher P4-Imelda* <ul style="list-style-type: none"> ▪ Helps with homework even if help was unwanted ▪ Paired child with another girl next door P5-Owami* <ul style="list-style-type: none"> ▪ Encourage to read books ▪ Elder 'sister' helps ▪ Helps with homework whenever necessary ▪ Talks about future, better jobs, better money 	P6-Perseverance* <ul style="list-style-type: none"> ▪ Use of study & free time ▪ Encourage to study P7-Tim* <ul style="list-style-type: none"> ▪ Medication (Ritalin) ▪ Being firm ▪ Three 'brothers' assist P8-Akha* <ul style="list-style-type: none"> ▪ Use of study & homework time ▪ Child asks questions ▪ Referrals to others P9-Oscar* <ul style="list-style-type: none"> ▪ Helps with Maths despite child claiming he was coping ▪ Encourage to read P10-Khuthala* <ul style="list-style-type: none"> ▪ Talk about school report ▪ Assist with homework ▪ Referrals to others ▪ Pair with classmate
Referrals	P1-Joyce* <ul style="list-style-type: none"> ▪ No P2- Mandla* <ul style="list-style-type: none"> ▪ Yes (for academics) P3-Small* <ul style="list-style-type: none"> ▪ Yes (for academics) P4-Imelda* <ul style="list-style-type: none"> ▪ No P5-Owami* <ul style="list-style-type: none"> ▪ Yes (for emotional) 	P6-Perseverance* <ul style="list-style-type: none"> ▪ No P7-Tim* <ul style="list-style-type: none"> ▪ Yes (for academics) P8-Akha* <ul style="list-style-type: none"> ▪ No P9-Oscar* <ul style="list-style-type: none"> ▪ Yes (for academics) P10-Khuthala* <ul style="list-style-type: none"> ▪ Yes (for academics)

Table 4.4: Academic performance/scholastic achievement

(*Pseudonyms used, they have no resemblance to the real names)

4.3.2 Homework

Time spent doing homework varied among children with biological family involvement. Two children, Joyce and Imelda, spent one hour each doing their home work. The other three children, Mandla, Small and Owami each spent 30 minutes or less doing homework. The children's home had set one hour which was compulsory for all school going age children to use. Children did their home work at their cottages under the supervision of the housemother. Only Owami mentioned spending some time on weekends doing her schoolwork. For children without any biological family involvement, three of them spent about one hour doing homework during weekdays and two children spent less time on homework e.g. 5 minutes, 15-45 minutes and 30 minutes. It was interesting to note that all children without any biological family involvement, except for Khuthala, spent time during the weekends doing their schoolwork. They mostly spent about an hour during weekdays which is equal to the time they spend with their books on weekends as well.

4.3.3 Prize-giving ceremonies

The children's home regularly conducts its own prize giving ceremonies to motivate children to do well at school and to recognise the effort put in by some of the children. All children interviewed with or without any biological family involvement found prize-giving ceremonies held at the children's home helpful in motivating them to do well at school. Most children mentioned that the motivation came as a result of also wanting to receive a prize.

4.3.4 Exclusion

None of the participants, with or without any biological family involvement, had been excluded from school.

4.3.5 School transfer

Among children with biological family involvement, three (Joyce, Imelda and Owami) had been transferred from one school to another. The other two children, Mandla and Small, had never experienced a school transfer. Mandla and Small had experienced stability in their schooling. Joyce changed school when she came to the children's home as she had to attend a school closer to the children's home. Imelda changed schools three times due to her mother's death. Her mother's death meant a move from the rural area to town so her sister could find

employment. When her sister changed employment, Imelda had to change school as well. Owami had transferred school twice because, first, her family moved from a rural area to peri-urban area and secondly, she moved on being admitted to the children's home.

As with children with biological family involvement, three children without any biological family involvement had never experienced any school transfer but had experienced stability in the same school. Two children, Tim and Khuthala, were transferred two times each. Both of their transfers came as a result of recommendations from external psychotherapists due to their slow academic performance.

4.3.6 Friends at school

All children with biological family involvement reported having friends at school. The child with the highest number of friends had six friends and the child with the lowest number of friends had three. The reported number of friends for children without any biological family involvement ranged from five to eleven. Only one child reported having no friends at school because he felt friends at school might have a negative influence on his behaviour by encouraging him to do wrong things.

4.3.7 Housemothers' strategies to improve marks and to cope with homework

Housemothers employed different strategies to improve children's homework. The common strategy was to encourage the child through talking about school performance based on marks as indicated in the school report. One housemother rewarded the child under her care for doing well; another assisted the children to do homework in stages with breaks in between, etc. Strategies were tailor-made to each child based on the mother's understanding of the needs of that child. However, due to high numbers of children in each cottage, housemothers found it difficult to cope with homework demands of all children. As a result, other children in the cottage often assisted housemothers to cope with the homework of children in their own cottage.

Some housemothers were fortunate enough to have volunteers from local tertiary institutions who came and assisted with children's homework. Only one housemother mentioned the use of medication (stimulant medication, such as Ritalin in the treatment of attention deficits) as a means of improving the child's marks.

4.3.8 Referrals

Among children with biological family involvement, three children had been referred for professional help. Two had been referred for academic reasons and one had been referred for emotional reasons.

A similar number of children had been referred for professional help among children with no biological family involvement. However, all three children had been referred for academic reasons.

4.4 Behaviour characteristics

Theme	Children with biological family involvement	Children without biological family involvement
Child's feelings about residing at children's home	P1-Joyce* <ul style="list-style-type: none"> ▪ <u>Very happy</u> because it's nice P2- Mandla* <ul style="list-style-type: none"> ▪ <u>OK</u> because it was sometimes nice & sometimes not nice P3-Small* <ul style="list-style-type: none"> ▪ <u>Very happy</u> because he was bought what he wanted, went to school and was helped when sick P4-Imelda* <ul style="list-style-type: none"> ▪ <u>Very happy</u> because of clothes and food P5-Owami* <ul style="list-style-type: none"> ▪ <u>Very happy</u> because she has a new home 	P6-Perseverance* <ul style="list-style-type: none"> ▪ <u>Very happy</u> because she met children she was never to meet otherwise P7-Tim* <ul style="list-style-type: none"> ▪ <u>Happy</u> because he has friends P8-Akha* <ul style="list-style-type: none"> ▪ <u>OK</u> "comfortable" because he didn't know he was going to live at the children's home; it's a liveable place; food; shelter P9-Oscar* <ul style="list-style-type: none"> ▪ <u>Sad</u> because he didn't see nor talk to his parents; has no relatives and no cousins P10-Khuthala* <ul style="list-style-type: none"> ▪ <u>Very happy</u> because it was nice and he was having fun
Friends (community)	P1-Joyce*= 6; P2- Mandla* =4; P3 – Small*=4; P4- Imelda*=3; P5- Owami =4.	P6-Perseverance*=12; P7-Tim =6; P8 Akha =15; Oscar* =0 and P10* Khuthala*=0.
Dealing with challenges	P1-Joyce* <ul style="list-style-type: none"> ▪ Housemother, friends, siblings, other staff members, teacher P2- Mandla* <ul style="list-style-type: none"> ▪ Housemother and teacher P3-Small* <ul style="list-style-type: none"> ▪ Housemother, friends at the children's home P4-Imelda* <ul style="list-style-type: none"> ▪ Housemother, friends at the children's home P5-Owami* <ul style="list-style-type: none"> ▪ Housemother 	P6-Perseverance* <ul style="list-style-type: none"> ▪ Teacher, housemother, friends both at school and at children's home P7-Tim* <ul style="list-style-type: none"> ▪ Housemother P8-Akha* <ul style="list-style-type: none"> ▪ Housemother, friends at the children's home P9-Oscar* <ul style="list-style-type: none"> ▪ Housemother, friends at the children's home P10-Khuthala* <ul style="list-style-type: none"> ▪ Teacher, housemother
Adjustment at children's home	P1-Joyce* <ul style="list-style-type: none"> ▪ Adjusted through help of friends 	P6-Perseverance* <ul style="list-style-type: none"> ▪ Has adjusted because she came as a

	<ul style="list-style-type: none"> ▪ Was hard to adjust because some children thought highly of themselves <p>P2- Mandla*</p> <ul style="list-style-type: none"> ▪ Easy to adjust because he grew up there <p>P3-Small*</p> <ul style="list-style-type: none"> ▪ Adjustment was easy because of siblings <p>P4-Imelda*</p> <ul style="list-style-type: none"> ▪ Has adjusted with the help of friends ▪ It was difficult to adjust , does not remember why <p>P5-Owami*</p> <ul style="list-style-type: none"> ▪ Has adjusted , she was told by family to adjust ▪ It was difficult at the beginning 	<p>baby and through her housemother introducing her to everyone and she was able to make friends</p> <ul style="list-style-type: none"> ▪ Difficult to adjust at the beginning as she was scared <p>P7-Tim*</p> <ul style="list-style-type: none"> ▪ Has adjusted because he came a baby <p>P8-Akha*</p> <ul style="list-style-type: none"> ▪ Has adjusted because he came as a baby <p>P9-Oscar*</p> <ul style="list-style-type: none"> ▪ Has adjusted because he came as a child and he got more knowledge <p>P10-Khuthala*</p> <ul style="list-style-type: none"> ▪ Has adjusted because he came as a baby
Child participates in decision-making	<p>P1-Joyce*</p> <ul style="list-style-type: none"> ▪ Yes <p>P2- Mandla*</p> <ul style="list-style-type: none"> ▪ Yes <p>P3-Small*</p> <ul style="list-style-type: none"> ▪ Yes <p>P4-Imelda*</p> <ul style="list-style-type: none"> ▪ Sometimes <p>P5-Owami*</p> <ul style="list-style-type: none"> ▪ Yes 	<p>P6-Perseverance*</p> <ul style="list-style-type: none"> ▪ Sometimes <p>P7-Tim*</p> <ul style="list-style-type: none"> ▪ Yes <p>P8-Akha*</p> <ul style="list-style-type: none"> ▪ Yes <p>P9-Oscar*</p> <ul style="list-style-type: none"> ▪ Sometimes <p>P10-Khuthala*</p> <ul style="list-style-type: none"> ▪ No
Behaviour of child at children's home	<p>P1-Joyce*</p> <ul style="list-style-type: none"> ▪ Good behaviour ▪ Soft heart ▪ Listens to advice ▪ Very sensitive, cries easily <p>P2- Mandla*</p> <ul style="list-style-type: none"> ▪ Behaves well <p>P3-Small*</p> <ul style="list-style-type: none"> ▪ Loving ▪ Shows appreciation ▪ Sometimes rude and cheeky ▪ Not responsible in taking medication ▪ Able to apologise when he erred 	<p>P6-Perseverance*</p> <ul style="list-style-type: none"> ▪ Leadership skills ▪ She's a ' Know it all' ▪ Tendency to dominate ▪ Talkative <p>P7-Tim*</p> <ul style="list-style-type: none"> ▪ Wondering mind ▪ Loses concentration ▪ Shouts <p>P8-Akha*</p> <ul style="list-style-type: none"> ▪ Good behaviour ▪ Quiet child ▪ "A child without mistakes"

	<p>P4-Imelda*</p> <ul style="list-style-type: none"> ▪ Right behaviour ▪ Tendency to talk back ▪ Stubborn <p>P5-Owami*</p> <ul style="list-style-type: none"> ▪ Good behaviour ▪ Can't say no when asked to do anything 	<p>P9-Oscar*</p> <ul style="list-style-type: none"> ▪ Open ▪ Well behaved ▪ Has started to be lazy <p>P10-Khuthala*</p> <ul style="list-style-type: none"> ▪ Kind & soft hearted ▪ Does not fight ▪ Assertive ▪ Easily angered ▪ Sensitive
Behaviour of child at school	<p>P1-Joyce*</p> <ul style="list-style-type: none"> ▪ Gets along well with peers &, teachers, ▪ good concentration span, ▪ high self-esteem, ▪ Passes well. <p>P2- Mandla*</p> <ul style="list-style-type: none"> ▪ Gets along well with peers and teachers. ▪ Disturbs other children, ▪ impulsive, ▪ Short-concentration span. <p>P3-Small*</p> <ul style="list-style-type: none"> ▪ Hard working, ▪ lively, ▪ Confident. ▪ Has difficulty with his schoolwork, ▪ Not committed to his schoolwork. ▪ No cooperation in group activities. <p>P4-Imelda*</p> <ul style="list-style-type: none"> ▪ Good behaviour ▪ Cooperates with teachers. <p>P5-Owami*</p> <ul style="list-style-type: none"> ▪ Short concentration span. 	<p>P6-Perseverance*</p> <ul style="list-style-type: none"> ▪ Lovely, ▪ Diligent to her work, ▪ Attains excellent results, ▪ Works consistently, ▪ Capable of better results. ▪ Lacks ability to focus effectively, poor self-discipline. <p>P7-Tim*</p> <ul style="list-style-type: none"> ▪ Healthy self-esteem, ▪ a lot of confidence, ▪ Passes all his grades. ▪ Lacks self-discipline, ▪ short concentration span, ▪ slow in execution of work tasks, ▪ Need much assistance, reinforcement and encouragement. <p>P8-Akha*</p> <ul style="list-style-type: none"> ▪ Increased self-confidence, ▪ Gets along well with peers and teachers. ▪ Ability to focus, listen and concentrate dropped, ▪ Experiences no enjoyment in classroom activities, ▪ Reserved. <p>P9-Oscar*</p> <ul style="list-style-type: none"> ▪ Gets along well with peers and educators. ▪ Disturbs other children,

		<ul style="list-style-type: none"> ▪ Easily distracted, ▪ Unable to follow instructions, ▪ short concentration span, ▪ Lags behind. <p>P10-Khuthala</p> <ul style="list-style-type: none"> ▪ Gets along well with peers and teachers. ▪ Disturbs other children, ▪ Impulsive, ▪ Easily distracted, ▪ Short concentration span.
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Table 4.5: Behaviour characteristics of children (*Pseudonyms used, they have no resemblance to the real names)

4.4.1 Child’s feelings about residing at the children’s home

Four out of five children with biological family involvement were very happy to be residing at the children’s home. Only one child, Mandla, expressed some dissatisfaction about staying at the children’s home. Children were happy to be in a children’s home for the following reasons: it was a nice place to be, supplied with clothes, school, help with homework, food and that it was a new home. The reference to a new home may have reflected an opportunity for a new beginning and fresh start.

On the other hand, only two children (Perseverance and Khuthala) without any biological family involvement reported being very happy to be staying at the children’s home. Tim was happy, Akha expressed that he felt just OK and the last child, Oscar reported that he was sad to be staying at the children’s home. The reasoning behind much happiness was similar to children without biological family involvement, for Khuthala as he also stated that it was nice and fun to be at the children’s home. Perseverance mentioned that it was meeting children she would never have met that made her to be very happy to be at the children’s home. Oscar was sad because he did not relate to his parents and had no relatives. Friends made Tim happy while staying at the children’s home. Akha’s residence at the children’s home made him feel ‘comfortable’ as he felt it was a place where one could live as the home provided him with food and shelter. The children’s home seemed to have a significant and sometimes distinctive role for each child.

4.4.2 Friends (community)

Peer relationships outside of the children's home are important to develop a rootedness. All children with biological family involvement had friends in the community whereas only three children without any biological family involvement had friends in the community. Among those three children, two children had quite a high number of friends in the community compared to the number of friends for children with biological family.

4.4.3 Dealing with challenges

All children, whether with biological family involvement or not, reported housemothers as their major support system when dealing with challenges in their lives. The second support system mentioned by children in both categories, was their friends at the children's home. The third support system was teachers. Only one child mentioned other staff members at the children's home as her primary support system. Children did not feel alone with their challenges but had someone to talk to in order to share their burdens or sometimes ease their pain. The extent to which they used their support system will be discussed in the next chapter.

4.4.4 Adjustment at children's home

Three children with biological family involvement reported that it was difficult for them to adjust at the children's home. For two of those children, namely Joyce and Imelda, friends played an important role in helping them to adjust to the children's home environment and lifestyle. The other child, Owami, was told by her family at the children's home how to adjust. Children who found it easy to adjust were Mandla and Small. It was easier for Small to adjust because he came to the children's home with his siblings. Mandla adjusted easily because he grew up at the children's home having been placed there since the age of one year. The children who found it difficult to adjust were the ones who came to the children's home when they were older. This suggests that adjusting can be difficult and challenging for those children who are older by the time they are placed as they need to adjust to a different real world experience.

Among children without any biological family involvement, only one child (Perseverance) reported that she experienced difficulty in adjusting at the children's home due to being scared. Her housemother was helpful as she introduced her to everyone, and in that way, she was able to make friends who assisted her in adjusting to life at the children's home. The

other four children, Tim, Akha, Oscar and Khuthala, said it was easier for them to adjust because they all came as babies and grew up at the children's home, since the children's home was the only home they knew. However, Oscar mentioned that obtaining more knowledge about the children's home assisted him with his adjustment. Based on the experiences of Perseverance and Oscar, it seems as if explaining to the children about the children's home as well as people in the children's home greatly assists children to overcome challenges of adjusting in the children's home.

4.4.5 Child's participation in decision making

The current Children's Act no. 38 of 2005 (Government Gazette, 2006) and Children's Amendment Act no. 41 of 2007 (Government Gazette, 2008) has put child participation as one of the paramount elements to consider when working with children. Four out of five children with biological family involvement felt they were involved when it came to decisions that had an effect on their lives. One child felt she was sometimes involved in decision making.

With regards to children without any biological family involvement, two children felt they were involved, another two children felt they were sometimes involved and one felt he was not involved at all in taking of decisions that affected his life. Children with biological family involvement appeared to be more involved in decision making than children without biological family involvement.

4.4.6 Behaviour at children's homes

The behaviour of the children interviewed was based on the housemothers' insights. Children with biological family involvement were described as generally displaying characteristics of good behaviour at the children's home. Nevertheless, housemothers were able to point out few areas of improvement pertaining to the children's behaviour, except for Mandla whom his housemother did not point out any area for improvement. A child who behaves well is generally a child who follows routine, does his/her chores to the mother's satisfaction, performs little or no back chatting to the housemother, and interacts well with other children at the children's home by not fighting (physically or verbally) with them.

With regards to children without any biological family involvement, three children were described by their housemothers as having displayed characteristics of good behaviour at the

children's home. The other two children, Perseverance and Tim, were described by their housemothers as children who had a lot of areas to improve in terms of their behaviour.

4.4.7 Behaviour at school

The behaviour of children at school was based on teachers' perceptions regarding that particular child. Information on behaviour was based on the remarks on school reports by the children's teachers.

All children without any biological family involvement seemed to have short concentration span. There also appeared to be many negative behaviour characteristics per child that teachers could identify on children without any biological family involvement. However, children with biological family involvement emerged as having fewer negative behaviour characteristics.

4.4.8 Housemother's strategies to improve behaviour

Housemothers of children with biological family relied mainly on engaging in discussions about unacceptable behaviour with children as a means of improving the behaviour of children under their care. They also reported using discipline to assist children improve their behaviour. Only one housemother reported extramural activities as helpful in improving her child's behaviour.

On the other hand, housemothers of children without any biological involvement appeared to be using different strategies to improve their children's behaviour. The strategies for two children, Perseverance and Tim, seemed to be tailor made to the child's unique makeup. For example, Perseverance's housemother turned her tendency to dominate into a positive by giving her leadership responsibilities at the cottage. Tim's housemother dealt with negative behaviour 'then and there' after calming Tim down. Another housemother i.e. Oscars' adopted the strategy of simply reminding Oscar until the desired behaviour change was achieved. Tim's housemother dealt with negative behaviour 'there and there' after calming Tim down.

4.4.9 Thoughts about biological family

Overall, children with biological family involvement, except for Mandla, reported to be having more frequent thoughts about their families. Mandla did not think at all about his family. Children without biological family involvement reported experiencing less frequent thoughts about their families compared with children with biological family involvement. Only one child (Hope) reported that he missed his family a lot and as a result had thoughts about his family everyday.

Children with biological family involvement		Children without biological family involvement	
P1- Joyce*	Daily	P6- Perseverance*	Once per month
P2- Mandla*	Zero	P7- Tim*	Zero
P3- Small*	Once per week	P8- Akha*	Once per month
P4- Imelda*	Once per week	P9- Oscar*	Daily
P5- Owami*	Once per week	P10- Khuthala*	Zero

Table 4.6: Frequency of thinking about biological family
(*Pseudonyms used, they have no resemblance to the real names)

4.5 Pre-admission procedures

4.5.1 Child preparation before entry to children's home

Three children with biological family involvement remembered getting explanations about going to stay at the children's home. The other two children could not recall who prepared them for staying at the children's home. On the other hand, children without biological family involvement reported that they were too young to remember preparations towards staying at the children's home.

Theme	Children with biological family involvement	Children without biological family involvement
Child preparation before entry to children's home	P1-Joyce* <ul style="list-style-type: none"> ▪ Don't know P2- Mandla* <ul style="list-style-type: none"> ▪ Can't remember** P3-Small* <ul style="list-style-type: none"> ▪ Someone spoke to them , doesn't remember who P4-Imelda* <ul style="list-style-type: none"> ▪ Her sister organised everything and spoke to Social Workers. She also explained to her. P5-Owami* <ul style="list-style-type: none"> ▪ The Social Worker explained to her. 	P6-Perseverance* <ul style="list-style-type: none"> ▪ Does not remember** P7-Tim* <ul style="list-style-type: none"> ▪ n/a P8-Akha* <ul style="list-style-type: none"> ▪ n/a P9-Oscar* <ul style="list-style-type: none"> ▪ n/a P10-Khuthala* <ul style="list-style-type: none"> ▪ n/a
Reason for being in a children's home known to the child	P1-Joyce* <ul style="list-style-type: none"> ▪ No P2- Mandla* <ul style="list-style-type: none"> ▪ No P3-Small* <ul style="list-style-type: none"> ▪ Yes P4-Imelda* <ul style="list-style-type: none"> ▪ Yes P5-Owami* <ul style="list-style-type: none"> ▪ Forgotten 	P6-Perseverance* <ul style="list-style-type: none"> ▪ No P7-Tim* <ul style="list-style-type: none"> ▪ No P8-Akha* <ul style="list-style-type: none"> ▪ No P9-Oscar* <ul style="list-style-type: none"> ▪ Yes P10-Khuthala* <ul style="list-style-type: none"> ▪ No, afraid to ask

Table 4.7: Preadmission procedures (*Pseudonyms used, they have no resemblance to the real names)

4.5.2 Reason for being in a children's home known to the child

Among children with biological family involvement, only two children understood why they were residing at the children's home. The other two children did not know the reason for staying at the children's home. Remarkably, one child at one stage knew the reason she was brought to care but at the time of the study she had forgotten. Perhaps the age of the child on removal had an effect on whether the child understood the reason for removal and placement at the children's home. Or maybe the child blocked the memory of the reason for removal if it was too painful or she simply did not trust the researcher enough to share deep and private information about herself.

Four of the children without any biological family involvement had no idea why they were residing at the children's home. Only one child knew the reason for being in care. As a matter of fact, one child, Khuthala, stated that he was afraid to ask the reason he was residing at the children's home. This might indicate that the subject of reasons for children's placement at the children's home was not something that was discussed between children and their caregivers.

4.6 Biological family involvement

Theme	Children with biological family involvement	Children without biological family involvement
Nature of family involvement	P1-Joyce* <ul style="list-style-type: none"> ▪ Visits by the family to the child ▪ Visits by the child to the family ▪ Telephone calls P2- Mandla* <ul style="list-style-type: none"> ▪ Visits by the child to the family P3-Small* <ul style="list-style-type: none"> ▪ Visits by the child to the family P4-Imelda* <ul style="list-style-type: none"> ▪ Visits by the family to the child ▪ Visits by the child to the family ▪ Telephone calls P5-Owami* <ul style="list-style-type: none"> ▪ Prior to the child admitted to the children's home ▪ Decision-making re: child ▪ Visits by the family to the child ▪ Visits by the child to the family ▪ Telephone calls 	n/a
Role of biological family while child is in care of housemother	P1-Joyce* <ul style="list-style-type: none"> ▪ Not seen her role as yet ▪ She needs to be closer the child P2- Mandla* <ul style="list-style-type: none"> ▪ Raise the child together with the housemother ▪ Speak the same language to the child P3-Small* <ul style="list-style-type: none"> ▪ To be a family P4-Imelda* <ul style="list-style-type: none"> ▪ To raise her together with housemother ▪ Speak the same language to the child P5-Owami* <ul style="list-style-type: none"> ▪ Encourage the child to learn ▪ Encourage the child to show good behaviour while at the children's home ▪ To encourage the child to stay at the children's home 	n/a
Role of biological family in general	P1-Joyce* <ul style="list-style-type: none"> ▪ Visit and be visited by the child ▪ Be involved in the child's birthday P2- Mandla* <ul style="list-style-type: none"> ▪ Raise the child ▪ Expose the child to its culture ▪ Discipline the child P3-Small* <ul style="list-style-type: none"> ▪ It is important to children to see their family so they can show their family clothes & toys And that they are healthy P4-Imelda* <ul style="list-style-type: none"> ▪ Raise the child ▪ Offer cultural exposure to the child ▪ Discipline the child P5-Owami* <ul style="list-style-type: none"> ▪ The child knows she has a family ▪ Buying the child clothes 	n/a

Relationship between children's home and biological family	<p>P1-Joyce*</p> <ul style="list-style-type: none"> ▪ Family a client not equal partner <p>P2- Mandla*</p> <ul style="list-style-type: none"> ▪ Family a client not equal partner <p>P3-Small*</p> <ul style="list-style-type: none"> ▪ Family a client not equal partner <p>P4-Imelda*</p> <ul style="list-style-type: none"> ▪ Family an equal partner <p>P5-Owami*</p> <ul style="list-style-type: none"> ▪ Family a client not equal partner 	n/a
Amount of contact between biological family and child	<p>P1-Joyce*</p> <ul style="list-style-type: none"> ▪ Not enough <p>P2- Mandla*</p> <ul style="list-style-type: none"> ▪ Enough <p>P3-Small*</p> <ul style="list-style-type: none"> ▪ Not enough <p>P4-Imelda*</p> <ul style="list-style-type: none"> ▪ Enough <p>P5-Owami*</p> <ul style="list-style-type: none"> ▪ Enough 	n/a
Frequency of visits	<p>P1-Joyce*</p> <ul style="list-style-type: none"> ▪ School holidays (December) <p>P2-Mandla</p> <ul style="list-style-type: none"> ▪ School holidays (December) <p>P3-Small*</p> <ul style="list-style-type: none"> ▪ School holidays (December) <p>P4-Imelda*</p> <ul style="list-style-type: none"> ▪ School holidays (April, June, September & December) <p>P5-Owami*</p> <ul style="list-style-type: none"> ▪ School holidays (June & December) 	n/a
Strategies to increase level of involvement by biological family	<p>P1-Joyce*</p> <ul style="list-style-type: none"> ▪ Build relationship with families ▪ Invite families to events at children's home ▪ Go on outing together ▪ Discuss finances <p>P2- Mandla*</p> <ul style="list-style-type: none"> ▪ Children's to visit family ▪ Find out from family how would they like to be involved <p>P3-Small*</p> <ul style="list-style-type: none"> ▪ Children to visit their families more ▪ Trust that family is capable of looking after its children <p>P4-Imelda*</p> <ul style="list-style-type: none"> ▪ Nothing <p>P5-Owami*</p> <ul style="list-style-type: none"> ▪ Continue to allow children to visit their families ▪ Invite family to children's home events 	n/a

Table 4.8: Biological family involvement (*Pseudonyms used, they have no resemblance to the real names)

4.6.1. Nature of family involvement

All five families of the children were involved in allowing children to visit them, particularly during school holidays. Three out of five families made efforts and visited their children at the children's home as well as contacted their children telephonically at the children's home. It was only two families who played the part of only allowing their children to visit them. A single family, Owami's family, was involved with the children's home even prior to the child residing at the children's home.

4.6.2 Role of biological family while child is in care

Roles of biological family while the child was in care, as perceived by housemothers, included being closer to the child, partnering with the housemother in raising the child, and just being the family in the child's life. Encouraging the child to learn, to display good behaviour and to encourage children to stay at children's home was also identified as another role of the biological family.

4.6.3 Role of biological family in general

According to housemothers' perspectives, children's families were important in raising, visiting, disciplining, and exposing children to culture. Biological families were places where children could share their belongings such as clothes and toys that the children's home bought them. Where possible, housemothers expected biological families to buy children clothes. The other important function of biological families had to do with identity and belonging where children just knew that they had families outside the children's home where they belonged.

4.6.4 Relationship between biological family and housemother

Four out of five housemothers described their relationship with children's biological families as good. Only Joyce's housemother felt her relationship with Joyce's biological family was not good due to the family being unreliable as well as demanding.

4.6.5 Amount of contact between biological family and child

Three housemothers thought children had enough contact with their biological families whereas two housemothers thought children had not enough contact with their biological families. Children who were identified by their housemothers as having adequate contact

were Mandla, Imelda and Owami. Housemothers of Joyce and Small perceived that their children did not have enough contact with their biological families.

4.6.6 Feelings / behaviour of child when going home

Joyce was one child who was not keen to go home when she was new at the children's home, but eventually became very happy to visit her biological family. Two more children were also very happy to visit their biological families. The other two children's feelings on going home were described by their housemothers as just happy.

4.6.7. Feelings /behaviour of the child on returning from home

Children expressed different feelings on returning from visiting their biological families. Only one child seemed very sad to return to the children's home. The other two children were happy with one child being extremely happy. There was also one child who noticeably spent a lot of time outside of her cottage than inside.

4.6.8 Frequency of visits

Housemother of Joyce, housemother of Mandla and housemother of Small reported that Joyce, Mandla and Small visited their biological families during December holidays only. Imelda visited her family most often as compared to other children as she visited her family on all school holidays i.e. four times a year. Imelda visited her family twice a year during June and December holidays.

4.6.9 Strategies to increase level of involvement of biological family

Housemothers suggested interesting strategies that could be used to raise the level of involvement of biological families in their children's lives while in care. Strategies mentioned included building relationships with biological families by inviting families to events at the children's home, outings together, permitting children to visit their families, discussing finances and generally having faith that families were capable of taking care of their children. One housemother also suggested creating a space for biological families to have a say by enquiring from them how would they like to be involved. Nevertheless, one housemother thought of nothing that could be done to increase biological families' involvement in their children's lives.

4.6.10 Perceptions by housemothers of where child benefits more (children's home or biological family)

Three housemothers perceived that children were benefitting more by being at the children's home compared to being with their families. Benefits were mainly physical e.g. activities, camps, clothes, food, shelter, exposure, etc. On the other hand, two housemothers had perceptions that children were benefitting both at the children's home and at their biological family's home. Housemothers' focus on the benefits of staying at the children's home appeared to be limited to material benefits, as opposed to psychological or spiritual benefits for example.

The results presented in this chapter showed a variation between children with biological family involvement and children without such involvement and the difference was in both variables i.e. academic progress and behaviour of children especially at school compared to children's behaviour at home.

Chapter 5: Analysis and Discussion

5.1 Introduction

Both children with family involvement and children without any family involvement participated in this study. This was a cross-sectional comparison between five children with biological family involvement and five children without any biological family involvement. The aim of the study was to identify if there were any differences between children with biological family involvement and children without any biological family involvement while children were in residential care. The effect or lack thereof of biological family involvement was based on two variables, namely, academic performance and behavioural characteristics.

5.1.1 Profile of children

5.1.1.1 Number of years in care

There was a difference between children with biological family involvement and children without any biological family involvement on the number of years they had spent in residential care under study (mean = 6 for children with biological family involvement and mean = 10 for children without any biological family involvement). This means children with biological family involvement spent fewer years in residential care compared to children without any biological family involvement. The result concurred with literature reviewed based on children in foster care and residential care that children without any biological families often remained in care until discharged towards independence (Ngcobo, 1992).

Permanency for children without any biological family involvement would be difficult to achieve as there were no families to take children and there were no families willing to adopt them. According to the Children's Act No. 38 of 2005, these children would be having few years for them left in care as children had to be in care until the age of 18 or until 21 years if they were still schooling. It is possible that the children would experience fear in anticipation of the future as they will know that they have to live on their own and they have no one who will be responsible for them to rely on. The literature on permanency has clearly indicated that these children will end up being homeless, unemployed or underemployed and suffer poverty, some end up in jail as they try to survive (Finkelstein *et al.*, 2002).

5.1.1.2 Reason for being in care

As reported in the previous chapter, the reason for being in care for children with no biological family involvement was abandonment. For children with biological family involvement, their reasons for being in care were a variety e.g. being orphans, abuse and abandonment. According to Finkelstein *et al.* (2002), those children who had suffered abuse or neglect had increased chances of failing at school. It might be possible that even children who had been abandoned had suffered abuse and neglect earlier in their lives, especially those who had experienced more than one movement in their lives because children are usually moved from place to place due to abuse or neglect.

5.1.1.3 Reason for being in a children's home known to the child

There was a difference on the children's knowledge of the reasons they were in care at the children's home. As stated in the previous chapter, among children with biological family involvement, two of the children knew the reason they were in a children's home, two children did not know and one child had forgotten the reason. Among children without any biological involvement only one child knew the reason he was residing at the children's home, the other four children had no idea. The possible reason for the difference might be due to the fact that most children came to care when they were too small to be told what happened. As they grew and reached the level of understanding, it may have become maybe it became more difficult for housemothers and social workers to inform them of the reasons why they were in a children's home, possibly because of fear that the truth might upset them.

Children on the other hand wondered individually and probably among themselves what brought them to care and where were the rest of their biological families? Oscar mentioned that he felt alone and very sad and would love to see his family even if it was just one. This suggests that children longed to see their families to complete their identity and not be lost and alone but feel they belong somewhere. Even though the past is painful, it is part of whom the child is (Henry, 2005). Reunification theory and permanency theory stated that children belonged to their families and the children will always desire to be reunited with their families of origin.

5.1.1.4 Frequency of placements before current children's home

The children without any biological family involvement had had at least one official placement before being admitted to the children's home under study, whereas children with biological family involvement moved from their families to the children's home. The good thing was that the children's home was a stable environment for all children under study as it appeared that there were no further placements after children had been admitted to this particular children's home under study. Permanency planning theory emphasized the importance of attachment between children and their families, especially primary caregivers such as parents especially mothers. Therefore abandonment damages that bonding between parents and children (Ngcobo, 1992). At the following placement, another attachment was established between children and caregivers. Again those attachments were destroyed when children were moved to the children's home where they had to form new attachments. It can be argued then that the sense of trust and security as well as stability in children without any biological family involvement was less than for those children with biological family involvement.

5.1.1.5 Number of children in each cottage

Children with biological family involvement and children without any biological family involvement came from cottages with about the same number of children. This might mean that the number of care and attention given to them by the housemother was similar for both children with biological family involvement and children without any biological family involvement. As we saw in the previous chapter, individual attention given to each child by housemothers was less as they had high numbers of children to look after. In this study, the mean number of children per housemother was nine children (with biological family involvement) and eight children (without any biological family involvement). The positive thing again was that housemothers tended to be stable as those housemothers had been there when children arrived and have been there since, with the exception of one housemother who was the second caregiver but even then had come when children were very young and had been at the children's home for eight years.

5.1.1.6 Child preparation before entry into the children's home

As mentioned in the previous chapter, three children with biological family involvement mentioned that it was explained to them that they would be staying at the children's home. The other two children were too young to remember. Children without any biological family involvement also came when they were very young and practically grew up at the children's home. The challenges experienced by children without any biological family involvement were largely identity issues and lack of continuity in their lives. They experienced a void as they did not know where they were coming from and where they were going. And nobody spoke to them even when they had grown up about why they were staying at the children's home. The results of this study concurred with research that most children in care did not know the reason they were in care (Henry, 2005; Finkelstein *et al.*, 2002). The results suggest that children with biological family involvement could be better off in terms of continuity as they knew the reason they were in care and on top of that they knew their relatives.

5.2 Educational attainment

Review of the literature highlighted that children in care, whether foster or residential care, obtained lower marks when compared to children growing up with their biological families. Furthermore, children in residential care performed lower academically compared to children in foster care. The research was to establish if biological family involvement had any influence on the academic attainment of children in residential care.

5.2.1 Progress at school

Overall, there appeared to be a slight difference between children with biological family involvement and children without any biological family involvement based on the school reports. Children with biological family involvement appeared to be performing a little bit better compared to children without any biological family involvement. Interestingly, on a closer look among children with biological family involvement, those two children who had been in care for longer (Mandla and Small); their academic progress and behaviour characteristics in school resembled those children who were without any biological family involvement. This might be due to the number of years spent in care as they had been in a children's home about the same number of years as children without any biological family involvement. The influence at the children's home might be stronger in academic progress

and behaviour as children adapt more and more to the life at the children's home. It might be interesting to see the effects over time of adaptation at the children's home on the other three children with biological family involvement.

The perceptions of children on their progress were in line with the actual results for most children whether with or without any biological family involvement. Only two children's perceptions, with biological family involvement, and two without any biological family involvement, did not correspond with the school report. Children thought they were doing well when their school reports were the opposite or sometimes they thought they were not doing well whereas they were actually doing well. The children's home had made some referrals of children who were not performing well academically at school. The three referred children for academic reasons were without any biological family involvement and only two children with biological family involvement were referred for professional help in relation to their educational progress.

Lack of permanency might explain the lesser academic performance of children without any biological family involvement. Children in research by Vera Institute of Justice indicated that most of the time children without families spent time daydreaming about their biological families instead of concentrating in class activities (Finkelstein *et al.*, 2002). That lack of concentration in class would probably result in those children falling behind with their school work.

5.2.2 Absenteeism

Research has found that the poor performance of children in residential care might be due to poor attendance at school (Finkelstein *et al.*, 2002). In this research, three of the children without any biological family involvement were absent for many days from school since they started school. It is possible that the number of days absent from school might be higher than reported in this study considering that number of days absent was based on June and December school reports only. High number of days absent meant losing out on class work and therefore impacting negatively on the marks gained. Children gave the following reasons for non-attendance at school: not being sure whether the school was open or not, being late and medical (being sick).

Among children with biological family involvement, only one child, Small, missed school for many days. The reasons for his absenteeism were medical since Small had a chronic illness and had to go for his appointments with doctors for regular check-ups and collection of medication. It is possible that his lack of wellness also affected his functioning at school. Other children were absent because teacher was away and medical (chicken pox).

5.2.3 Homework

Children in both groups reported spending some time doing homework ranging from five minutes to one hour. Most of the children reported that an hour was spent doing homework on weekdays and it must be noted that the children's home had a compulsory one hour where each child was expected to do his or her homework. It is possible that some children did not spend one hour doing homework but reported that because that is what they thought the researcher expected to hear. Only one child with biological family involvement spent time on weekends doing schoolwork. However, four children without any biological family involvement spent time during the weekends doing their schoolwork. Mostly children spend an hour doing school work. It was seen from results that time spent doing homework varied from child to child. Research has suggested that children in residential care experienced difficulties coping with schoolwork especially when the task was difficult and was not initiated by them (Roy & Rutter, 2006). This could explain why most teachers complained about short concentration span and poor self-discipline for most children in this study.

Some children raised a crucial point that at times it was difficult for them to cope with homework on their own, especially Maths, and caregivers were not in a position to assist them but would just be there to supervise. On housemothers being asked on how they were coping with assisting children with homework, housemothers reported that it was a challenge because of a high number of children and also that it was difficult to assist older children in advanced classes. However, they used different strategies to cope with homework demands, such as grouping children together or referring children to older children or other staff at the children's home to assist as well. However it must be noted that lack of skills of housemothers in assisting older children with homework affected both children with or without biological family involvement equally.

5.2.4 Friends at school

Friends have been identified as an important element in the development of any child. Generally the functions of friends are to socialise, act as a confidant, share good times with and give a child a sense of belonging. Lack of friends might leave the child feeling isolated from other children and therefore experiencing difficulties with adapting to school environment. All children with biological family involvement reported having friends at school who were not from the children's home. The child with the highest number of friends had six friends and the child with the lowest number of friends had three. All children with biological family involvement therefore had no problem forming relationships with their peers at school.

The reported number of friends for children without any biological family involvement ranged from five to eleven. Only one child, Oscar, reported having no friends at school because he felt friends at school might have a negative influence on his behaviour by encouraging him to do wrong things.

Research has indicated that children in care experienced difficulties with forming close friendship with other children in school as they wanted to keep their status of coming from a children's home for example hidden (Finkelstein *et al.*, 2002). As a result, children only formed shallow relationships as this might display lack of trust. However this study found that children did have friendships except for one. The child's reasoning was a valid one but it was hard to believe that in the entire school there was not one good child whom Oscar could make friends with but this might mean that Oscar showed lack of trust in other people.

5.3 Behaviour characteristics

Some studies have found that there is a relationship between behaviour of a child and academic performance. Often negative behaviour affects educational performance negatively and good behaviour had positive results on educational performance.

5.3.1 Child's feelings about residing at the children's home

Some studies have found that often children in care are ashamed of their status as it is often associated with stigma. That stigma of children's home for example is usually accompanied by people feeling sorry for children. That stigma results in children having low self-esteem

which in turn affects everything about them. Four out of five children with biological family involvement reported feeling very happy about residing at the children's home because of material things such as clothes, food, and that it was a nice home. One child felt okay about the children's home because at times it was nice but at other times it was not. The results of children with biological family involvement were in contrast with other research on stigma (Finkelstein *et al.*, 2002) maybe because these children knew that they had real families outside the children's home. The purpose of the children's home in their lives was to provide them with material stuff whereas their biological families provided them with emotional fulfilment such as continuity in their lives, stability and identity.

Among children without any biological family involvement, two reported being very happy to be at the children's home because of material reasons also. Oscar was very sad because he felt he had no parents or relatives to relate. This might suggest that all five children had that void in their lives as all five of them had no family except the one at the children's home. Akha also felt the home provided him with food and shelter, without which he would be nowhere. Feelings about the home were unique to each child because of unique needs of that child.

5.3.2 Dealing with challenges

There was no significant difference between children with and children without any biological family involvement on the manner that they handled challenges that occurred in their lives. The housemother was the main person children talked to when they faced challenges in their lives. Friends both at school and especially at the children's home were also very helpful to the child in dealing with his or her problems. Some teachers had also earned the trust of certain children as these children mentioned that they confided in their teachers when they had problems.

5.3.3 Adjustment at children's home

For children who had come to the children's home as babies, their adjustment became easier whether they were with or without any biological family involvement. Children who experienced some difficulties in adjusting were the children who came when they were older, possibly because these children had to get used to a new lifestyle which might be totally

different from where they were coming from. Research has indicated that siblings made it easier to adjust in a new environment because siblings provided continuity with each other and comforted each other on the effects of separation (Farmer, 1996).

5.3.4 Child's participation in decision making

Results suggested that there was a difference with regards to child participation in decision-making between children with biological family involvement and children without any biological family involvement. In a study conducted by (Finkelstein *et al.*, 2002) children felt that it was indeed important for each child to be involved in issues that affected his or her life as each child knew what was best for him or her. Nevertheless, the challenge most children faced was that adults always thought they knew what was best for them. Permanency planning promotes the active inclusion of the child in discussing and deciding permanency plans for him or her.

5.3.5 Behaviour at children's home and at school

As indicated earlier, there appeared to be a relationship between behaviour and educational attainment. Behaviour of the child at the children's home was based on the housemother's perspective. All children with or without any biological family seemed to be behaving well. Only two children without any biological family involvement had improvements to make with regards to their behaviour although they were also not that bad according to their housemothers. The behaviour displayed by children at the children's home seemed slightly better than behaviour displayed at school. A possible explanation might be that housemothers had become used to the children's behaviour and were therefore less critical of their behaviour, whereas teachers were not used to the children's behaviour. Also, housemothers may have been sympathetic to the children's behaviour based on their knowledge of the children's backgrounds, knowledge which might not have been readily available to the teachers (Finkelstein *et al.*, 2002).

Teachers identified much negative behaviour in children while at school. Chief among those behaviour characteristics were short concentration span, lack of self-discipline and disturbing other children in class. There also seemed to be a great difference in behaviour between children with biological family and children without any biological family involvement.

However, of children with biological family involvement, those who had been in care for a long period displayed similar characteristics of behaviour as children without any biological family involvement. Possible explanations for negative behaviour characteristics include that children in residential care find it hard to concentrate for longer periods especially if the task is demanding cognitively and that that task was imposed on them by teachers (Roy & Rutter, 2006). The other explanation is that children behaved badly in school as a way of blocking others from making friendships with them lest they find out their status; and finally children might be having difficulty in controlling their anger (Finkelstein *et al.*, 2002).

Housemothers used different strategies to help improve the behaviour of children under their care. Those strategies included discipline, talking to the child, behaviour modification strategies such as reward system, turning the child's weakness into strength, and using extramural activities such as sport to deal with anger for example.

5.3.6 Thoughts about biological family

Involving children in the process of decision making teaches children how to make good decisions. The results of not involving children tend to have lasting effects on children (Freundlich & Avery, 2005; Buchanan, 1995). Some studies have shown that children who graduated from care battled to make decisions as they were not used to making decisions and did not know where resources were (Freundlich & Avery, 2005; Buchanan, 1995). The results suggested that there was a difference on the frequency of thinking about biological family between children with biological family involvement and children without any biological family involvement.

5.4 Biological family involvement

As mentioned in the literature review, there were some challenges that were identified as working against family reunification and denying permanency in the lives of children that have been placed in care. Factors such as poverty often resulted in lack of transport to visit the child in care, for example. However, biological family remains the basis for child care (Ngcobo, 1992).

5.4.1 Nature of family involvement

All families were involved in the children's lives by allowing their children to visit them. However, only one family was involved prior to the child being placed at the children's home. This could indicate that families were not seen and treated as equal partners in planning permanency plans for children. The dominant form of contact between families and children was through visits, especially children visiting their families. However, three families visited their children at the children's home. Families who visited children were staying closer to the children's home and the two families who did not visit their children were staying far away from the children's home. This confirmed the challenges as explained by permanency planning theory that when children were placed in children's homes far away from their families, the nature of family involvement was decreased because many families lacked transport money to come and visit their children in residential care (Paul, 1994; Ngcobo, 1992). All children were able to visit their families during school holidays because the children's home gave children transport money to and from their families. Indeed poverty and distance seemed to determine the extent to which families were able to be involved.

5.4.2 Role of biological family while child is in care

Permanency planning theory expects biological families of children to be maximally involved in the child's life so as to enable children to feel less abandoned by their families. As indicated in the literature review, reunification theory requires biological families to visit their children or be more in contact with their children so as to increase the chances of reunification (Farmer, 1996; Thomlison *et al.*, 1996). Housemothers also felt that biological families needed to be closer to their children and partner with housemothers in raising children in care. Housemothers also expected biological families to operate like all other families when engaging with their children. Biological families were also expected to expose and teach children about culture, to discipline children and to support housemothers in raising their children. This highlights what some children were saying in one study about identity - that some of the things are not taught but caught - the mere fact of being in a family environment taught children how to socialise and conduct themselves normally when out of care (Schwartz, 2007).

5.4.3 Relationship between children's home and biological family

While permanency planning theory and reunification theory promotes children's home and biological families to relate as equal partners in raising children in care, housemothers' responses indicated that in reality that was not the case. According to housemother's perspectives, biological families were not treated as equal partners to the children's home in raising the children. The children's home played a dominant role and the biological family a less significant role, yet biological families had crucial roles to play in their children's lives that the children's home could not fulfil. Unequal relationships between the children's home and biological families might be due to biological families not having enough contact with children in residential care.

5.4.4 Strategies to increase level of involvement of biological family

Strategies that were suggested by housemothers on increasing the level of biological family involvement concur with strategies identified by other scholars. Those strategies include involving biological family in children's home's events, going on children's outings together, visits to the children's home, discussing finances, and trusting that biological families were capable of taking care of their children (Paul, 1994; Ngcobo, 1992; Muller & Steyn, 1990). It was also identified as important to ask biological families how would they like to be involved, instead of imposing on them how they were supposed to be involved. The results gave an indication that housemothers were willing to share the responsibility of raising children under their care with biological family members. They seemed to acknowledge that children belong with their families and those children were only under their care temporarily. Although that understanding of housemothers was good for children with biological families, for abandoned children who had no family involvement that was a challenge to their sense of belonging. Abandoned children might often worry about their biological families in terms of where were they and when were they going to find them.

5.4.5 Perceptions by housemothers of where child benefits more (children's home or biological family)

The general feeling among housemothers was that children were benefiting more by being at the children's home than by staying with their families. The feeling was based on the material

aspect of things, for example, camps, clothes, food, shelter. Interestingly, that corresponded with what children gave as their reasons for liking staying at the children's home. The findings were similar to Finkelstein *et al.*'s (2002) research, where children reported that the level of meeting their physical needs was higher in alternative care compared to the their families of origin. On the other hand, the two housemothers who believed that children were benefitting both at the children's home and at their biological family's home might have been considering children's holistic needs.

Chapter 6: Conclusion and Recommendations

6.1. Conclusion

The aim of the research was to identify if involving biological family had any effects on the lives of children in residential care. The study was a comparison between five children with biological family involvement and five children without any biological family involvement. The effects or lack thereof was measured with the use of two variables, namely, educational attainment and behaviour characteristics. Data was collected from children, their housemothers and children's files.

With regards to the first variable, educational attainment, there was a difference between children with biological family involvement and children without. Children with biological family involvement showed better progress at school as compared to children without any biological involvement.

Again on behaviour, children with biological family involvement displayed fewer negative behaviour characteristics compared to children without any biological family involvement. The most common behaviour among children without any biological family involvement at school was short concentration span, lack of self discipline and tendency to disturb other children. Interestingly, children with biological family involvement who had been in care for a long period displayed similar characteristics to children without any biological family involvement. This finding suggests that the differences between children with biological family involvement and children without biological family involvement might be indicative of institutionalisation or early developmental delays rather than effect of biological family involvement. However, all children who had no biological family involvement had been abandoned at birth or soon after birth, whereas the reason for being in care for children with biological family involvement was abuse or being orphaned. Therefore, the researcher was unable to conclusively state that the differences identified between children with biological family involvement and children without any biological family involvement might be due to biological family involvement or lack thereof.

6.2.Recommendations

Based on the finding that children with biological family involvement performed better academically and displayed fewer negative behavioural characteristics compared to children without biological family intervention, it might be of benefit for children without such family involvement, i.e. abandoned children, to be exposed to family life outside the children's home. Those families will be family as well as a support system to abandoned children while they are in residential care as well as after children have been released from care. Host families could assist with socialisation of children in the community, thereby reducing institutionalisation of children in the children's home. Families can be recruited by staff of children's home as staff builds relationships with communities surrounding the children's home.

To improve on this study, non-participant classroom observations and observations of the behaviour at home, including habits during homework or study time, is recommended. That would aid in verifying what participants say compared to what they actually do. This study only relied on what participants were saying with an assumption that all information given was truthful.

Also the use of a second interviewer or scribe to take notes if participants refuse to be tape recorded should be considered in future research. The benefits of that would be allowing the main researcher to focus on the interviewing process so as not to hinder the flow of the interview while the scribe focuses on taking the notes. Thereafter, the main researcher and the scribe could compare notes.

It might be useful for future research to consider using a bigger sample size to conduct similar research. It might also be useful to consider doing a longitudinal study in order to establish patterns of academic progress and behaviour characteristics over time. A comparison of children from different children's homes might be beneficial in terms of identifying the extent of the influence of environment on children's academic progress and/or behaviour characteristics.

Volunteers or retired teachers might be brought in to assist children with homework, since housemothers' battle to assist children in higher grades because of their low level of education. Most housemothers did not have matriculation certificates and a few had done child care courses. Increased help with homework for child might assist in boosting the children's marks at school.

It seems beneficial based on the results of this study for children to be given information about their background and reasons why they are in care. Those explanations should be guided by age and maturity of the child. Children, especially those who came when they were babies, need to know this so as to fill in the missing link to assist them with their identity.

It is suggested that biological families be interviewed in order to obtain their side of the story, especially the challenges that they experience with regards to being involved in the lives of their children in care. Those interviews could also establish how they would like to be involved and how they see their role while the children are in their care.

There needs to be increased partnership between housemothers and teachers in order to monitor the children's progress closely. Frequent visits or phone calls by housemothers to the school might strengthen the relationship and partnership between schools and housemothers.

As most housemothers reported challenges pertaining to assisting older children who have completed lower grades, the level of education of housemothers needs to be addressed. There is a need to employ competent housemothers who will be able to intervene in the children's lives skilfully in terms of educational and behavioural needs of children. In instances where housemothers have already been employed, they should be encouraged and given opportunities to upgrade themselves in order to keep up with the needs of children under their care.

Finally, it might be very beneficial to decrease the number of children per cottage so as to allow housemothers to give individual attention to each child. The ratio of five children per housemother might be more manageable than ten children per housemother. However, decreasing the number of children requires careful consideration since it might have negative financial implications in terms of lesser income.

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Appendix A:

INFORMED CONSENT/ASSENT FORM

I..... (full names of participant)
hereby confirm that I understand the nature of this research project, and I consent to participating in this research project. The study was explained to me as investigating the effects of biological family in the lives of children in long-term residential care. The study is conducted by Ms Dumile Goba who is a Masters student at University of KwaZulu-Natal, Pietermaritzburg Campus.

I understand that participation in this study is voluntary and that I can withdraw from this study at any time without fear of any form of disadvantage or prejudice.

I understand that all information will be treated as confidential and participants will remain anonymous.

I understand that I am not forced to answer all questions should I not wish to answer any of the questions.

I can obtain further information regarding the study from Dr B. Killian – Project Supervisor at this number 033 260 5371 or e-mail her at Killian@ukzn.ac.za

SIGNATURE OF PARTICIPANT

DATE:.....

.....

Appendix B

IFOMU LEMVUME

Mina.....(Igama Nesibongo) ngiyaqinisekisa ukuthi ngiyaluqonda uhlobo lwalolucwaningo olwenziwayo, futhi ngiyanika imvume yokubamba iqhaza kulolucwaningo. Ngichazelwe ukuthi lolucwaningo lubheka imithelela elethwa ukuzimbandakanya kwabomndeni womntwana empilweni yomntwana ngenkathi umntwana ehlala ekhaya labantwana. Ucwano lwenziwa uNkosaz. Dumile Goba ongumfundi weziqu ze-Masters eNyuvesi YaKwaZulu-Natali ophikweni lwaseMgungundlovu.

Ngियाqonda ukuthi ukubamba iqhaza kwami kulolucwaningo akuyona impoqo futhi ngingayeka noma inini ukuba yingxenye ngaphandle kokwesabela ukuhlukunyezwa noma ukucwaswa kwanoma iluphi uhlobo.

Ngियाqonda ukuthi lonke ulwazi luyogcinwa luyimfihlo kanjalo nababambe iqhaza bayogcinwa beyimfihlo.

Ngियाqonda ukuthi angiphoqiwe ukuphendula yonke imibuzo uma kungenzeka kube nemibuzo engingathandi ukuyiphendula.

Ngingathola eminye imininingwane mayelana nalolucwaningo ku Dokt. B. Killian okunguyena oqaphe lolucwaningo kulenamba 033 260 5371 noma kuledilesi ye- e-mail yakhe ethi killian@ukzn.ac.za

Ukusayina kobamba iqhaza..... Usuku:

Appendix C

Questionnaire for children at the children's home

I am Masters student at the University of KwaZulu-Natal in Pietermaritzburg. We are doing a research to find out the effect of involving biological family in the lives of children in long-term residential care. Participation in this study is voluntary and you can withdraw from this study at any time without prejudice. All information provided will be treated as confidential. If you agree to participate in this study please sign in the space provided below.

Signature: _____

Date: _____

1. Code:

2. First name:

3. Have you got any idea why you came to the children's home

Yes

No

4. How do you feel about being in a children's home?

1. Very happy 2. Happy 3. OK 4. Sad 5. Very sad

5. Why do you feel that way?

6. How many friends (not from the children's home) do you have at school?

7. How many friends do you have in the community?

8. How many times have you been absent from school in the last term?

9. Why were you absent?

Medical Sports Psychological Bunking Other

10. How do you think you are doing at school?

4. Very well 3. Well 2. Not so well 1. Badly

11. Why do you think the way you have chosen above?

12. How much time do you spend doing homework?

Per day On a weekend

13. Are Achievers Day/Reach for the Stars events helpful in motivating you to improve your marks? Yes or No

How are they helpful or not helpful?

14. Whom do you talk to if you have problems?

15. How often do you talk to adults about your challenges?

16. Whom do you think is not available to you when you need them?

17. Adjusting to the children's Home. Have you adjusted at the children's home? Yes

No

18. If yes, how did you adjust?

19. Was it easy or difficult to adjust at the children's home? Why was that?

20. What is it that you love about being at this children's home?

21. What is it that you hate about being at this children's home?

22. How often do you think about your biological family?

Nearly Everyday

About once a week

Once a month

Infrequently, only a couple of times a year

23. How were you prepared to come and live at the children's home?

24. How often do you have contact with your biological family? Weekends Fortnightly

Once per month School holidays June holidays December

holidays

25. Are you involved in making decisions about your life? Yes No

26. If no, who decides for you?

27. How do you decide which school to attend?

Thank you for your time!

Appendix D

Imibuzo yezingane zasekhaya labantwana.

1. I- code:
2. Igama:
3. Ingabe uyazi yini ukuthi siyini isizathu esakuletha lapha ekhaya labantwana?
Yebo Cha
4. Uzizwa unjani ngokuhlala ekhaya labantwana?
1. Uthokoze kakhulu 2. Uthokozile 3. Ukahle nje 4. Udabukile 5. Udabuke kakhulu
5. Kungani uzizwa ngaleyondlela?
6. Bangaki abangani (okungebona basekhaya labantwana) onabo esikoleni?
7. Bangaki abangani onabo emphakathini?
8. Zingaki izikhathi ophuthe ngazo esikoleni?
9. Kungani wawuphuthile?
Ezempilo Ezemidlalo Ezomphefumulo Ukudoja Okunye
10. Ucabanga ukuthi uqhuba kanjani esikoleni?
Kahle kakhulu Kahle Ayi kahlehle Kabi
11. Kungani ucabanga ngalendlela okhethe ngayo ngenhla?
12. Ngabe singakanani isikhathi osichitha ekwenzeni umsebenzi wesikole wasekhaya?
Ngosuku Ngempelasonto
13. Kungabe imicimbi efana no – Achiever’s Day kanye no Reach for the Stars iyakusiza ukukugququzela ukuba wenze ngcono amamaki akho? Ikusiza kanjani futhi kungani ikusiza?
14. Ngabe ukhuluma nobani uma unezinkinga?
15. Ngabe ukhuluma kangaki nabantu abadala ngezingqinamba obhekana nazo?

16. Ubani ocabanga ukuthi akatholakali ngalesisikhathi wena umdinga?

17. Ngabe usuyijwayele yini impilo yasekhaya labantwana? Yebo Cha

18. Wajwayela kanjani ekhaya labantwana?

19. Ngabe kwakulula noma kwakunzima ukujwayela ekhaya labantwana? Kungani kwakunjalo?

20. Yini oyithandayo ngokuba lapha ekhaya labantwana?

21. Yini ongayithandi ngokuba lapha ekhaya labantwana?

22. Kungabe singakanani isikhathi osichitha ucabangana nomndeni wakho?

 Zonke izinsuku Kanye ngeviki Kanye ngenyanga

23. Ngabe walungiselelwa kanjani ukuzohlala lapha ekhaya labantwana?

24. Ngabe uxhumana kangakanani nomndeni wakho? Ngezimpelaviki

 Kabili ngenyanga Kanye ngenyanga Ngamaholide
ezikole kaJuni noma amaholide ezikole kaDisemba

25. Ngabe uyingxenye yokuthathwa kwezinqumo ngempilo yakho?

26. Uma uthi cha, ngabe ubani okuthathelayo izinqumo?

27. Ngabe unquma kanjani ukuthi yisiphi isikole ozofunda kusona?

Ngiyabonga ngesikhathi sakho!

Appendix E

Guide for extracting information from the children's files

1. Code:
2. First name: _____
3. Age Years Months
4. Sex: 1. Male 2. Female
5. Number of years at children's home Years Months
6. Reason for being in care
 1. Abuse (sexual, physical, emotional, psychological)
 2. Abandonment
 3. Family breakdown (illness, separation, imprisonment)
 4. Neglect
 5. Poverty (no income)
 6. Other
7. Number of placements before current children's home
8. Name of school: _____
9. Grade: _____
10. Subjects
 - 1) English
 - 2) Maths/Numeracy
11. Has the child ever been excluded from school? Yes No
12. What was the reason for exclusion? _____
13. Behaviour at school or in class (Data taken form school reports and possible letters about the child from the school)
 - a) Fighting
 - b) Disturbs other children

- c) Backchats to teachers
- d) Stealing
- e) Withdrawn
- f) Threatens other children
- g) Destroys property
- h) Uses drugs/alcohol
- i) Inappropriate sexual behaviour
- j) Behaves well/ good behaviour
- k) Cooperates with teachers
- l) Fearful
- m) Anxious,
- n) Daydreaming

14. School attendance: Number of days absent from school since child started at school.

Year 1 = days

Year 2 = days

Year 3 = days

Year 4 = days

Year 5 = days

Year 6 = days

Year 7 = days

Year 8 = days

15. Reason for absence: (Information from doctor's sick notes, or appointment cards, psychologist's appointments, invitations to play in matches, dates of court appearances, etc)

1. Medical

2. Psychological

3. Sport

4. Court appearances

5. Other

16. School transfers: Frequency Never Seldom Often

17. Progress of the child at school:

Year 1:	June: Pass	Fail	December: Pass	Fail
Year 2:	June: Pass	Fail	December: Pass	Fail
Year 3:	June: Pass	Fail	December: Pass	Fail
Year 4:	June: Pass	Fail	December: Pass	Fail
Year 5:	June: Pass	Fail	December: Pass	Fail
Year 6:	June: Pass	Fail	December: Pass	Fail
Year 7:	June: Pass	Fail	December: Pass	Fail
Year8:	June: Pass	Fail	December: Pass	Fail

18. When did the child first have contact with biological family? Under what circumstances?

19. Children's biological family

- 1. Father
- 2. Mother
- 3. Grandma
- 4. Grandpa
- 5. Sibling/s
- 6. Uncle
- 7. Aunt
- 8. Cousin
- 9. Nephew
- 10. Niece

20. When did the family become involved in the child's life?

- 1. Prior to child admitted at the children's home
- 2. On admission of the child to the children's home
- 3. During decision-making re: child
- 4. Visits by the family to the child
- 5. Visits by the child to the family
- 5. Telephone calls
- 6. Other

21. Frequency of visits

Weekends Fortnightly Once per month School holidays June Holidays
December holidays

22. Does the child use Ritalin? Yes No

23. Behaviour of the child at the children's home?

- 1) Fighting
- 2) Disturbs other children
- 3) Backchats to Housemothers
- 4) Stealing
- 5) Withdrawn
- 6) Threatens other children
- 7) Destroys property
- 8) Uses drugs/alcohol
- 9) Inappropriate sexual behaviour
- 10) Behaves well/ good behaviour
- 11) Cooperates with Housemothers
- 12) Compliant,
- 13) Anxious

24. Has the child been referred to Psychologists?

Yes No

25. Has the child received psychotherapy or any other form of psychosocial support?

Yes No

26. Reason for referral

Behavioural

Academic

Psychological

Physical

Appendix F

Questionnaire for housemothers

I am masters student at the University of KwaZulu-Natal in Pietermaritzburg. We are doing a research to find out the effect of involving biological family in the lives of children in residential care. Participation in this study is voluntary and you can withdraw from this study at any time without prejudice. All information provided will be treated as confidential. If you agree to participate in this study please sign in the space provided below.

Signature: _____ Date: _____

1. How many children do you have in your house?
2. How is the child's progress at school?
3. In your opinion what could be the cause of that progress?
4. How do you help the child improve his or her marks at school?
5. What do you do to change the attitude of the child towards school?
6. When do you go to school? Parents meeting To view child's work On
school's request Other
7. How do you cope with regards to helping children with their homework?

8. How would you describe the behaviour of this child here at the children's home?

9. In your opinion why is the child behaving that way?

10. What could be done to help improve the behaviour of the child?

11. Nature of family involvement

1. Prior to child admitted at the children's home

2. During admission to the children's home

3. During decision-making re: child

4. Visits by the family to the child

5. Visits by the child to the family

5. Telephone calls

6. Other

12. In your view what is the role of the biological family in the child's life while the child is staying under your care at the children's home?

13. How would you describe your relationship with biological family of the child?

Good

Neutral

Bad

14. Do you feel the family of this child has enough contact with the child?

Yes

No

15. Why is that?

16. How does the child feel when she/he has to go home?

17. How is the child when she/he returns form home?

18. Frequency of visits

Weekends Fortnightly Once per month School holidays June Holidays
December holidays

19. In your view, is the child benefiting more by being at the children's home than being at home?

20. In your opinion what is the role of biological family in the child's life?

21. Do you think the biological family is an equal partner or client in caring for the child?

22. What could be done to increase the level of involvement of the biological family?

Thank you for your time!

Appendix G

Imibuzo Yomama ababheka abantwana

1. Bangaki abantwana ohlala nabo endlini yakho?
2. Kungabe uqhuba kanjani umntwana esikoleni?
3. Ngokubona kwakho kungabe kudalwa yini lokho kuqhuba komntwana?
4. Umsiza kanjani umntwana ukukhuphula amamaki akhe esikoleni?
5. Ngabe wenza kanjani ukushintsha indlela umntwana abuka ngayo isikole?
6. Ngabe uya nini esikoleni? Ngemihlangano yabazali Ukuyobona
umsebenzi womntwana Uma ucelwe isikole Okunye
7. Ukhona kanjani ukusiza abantwana ngomsebenzi wabo wesikole?
8. Ungakuchaza kanjani ukuziphatha kwalomntwana lapha ekhaya labantwana?
9. Ngombono wakho ngabe kungani eziphethe ngalendlela lomntwana?
10. Ngabe yini engenziwa ukwenza ngcono izinga lokuziphatha kwalomntwana?
11. Uqale nini umndeni womntwana ukuzimbandakanya empilweni yalomntwana
 1. Umntwana engakafiki ekhaya labantwana
 2. Ngesikhathi umntwana engena ekhaya labantwana
 3. Ngesikhathi kuthathwa izinqumo eziphathelene nomntwana
 4. Ngokuvakashela umntwana
 5. Ngomntwana evakashela umndeni
 6. Ukushaya izingcingo
 7. Okunye

12. Ngokubona kwakho ingabe iyiphi indima okufanelwe idlalwe umndeni womntwana ngesikhathi umntwana enakekelwa nguwe lapha ekhaya labantwana?
13. Ungabuchaza kanjani ubudlelwano bakho nomndeni womntwana?
 Buhle Abubuhle futhi abububi Abubuhle
14. Ngabe ucabanga ukuthi lomntwana uxhumene ngokwanele nomndeni wakhe?
 Yebo Cha
15. Kungani kunjalo?
16. Kungabe umntwana uzizwa enjani uma ezovakashela ekhaya?
17. Kungabe uzizwa enjani umntwana uma ebuya lapha ekhaya labantwana?
18. Ukuvakasha komntwana Izimpelaviki Kabili ngenyanga
 Kanye ngenyanga Ngezikhathi zamaholide kaJuni
 Ngezikhathi zamaholide kaDisemba
19. Ngokubona kwakho, kungabe umntwana uzuza kakhulu ngokuba lapha ekhaya labantwana kunokuba sekhaya?
20. Ucabanga ukuthi umndeni womntwana udlala ingxenye elinganayo noma ungama-clients ekunakekeleni komntwana?
21. Yini engenziwa ukukhuphula izinga lokuzibandakanya komndeni empilweni yomntwana ngesikhathi umntwana esalapha ekhaya labantwana?

Ngiyabonga ngesikhathi sakho.

Appendix H

Overview of results

Joyce* (Pseudonym have been used that have no resemblance to the participants' names)

Biological family and history information:

- Abused and neglected
- Has an aunt and a half-brother
- Parents died
- Did not stay well with aunt
- Aunt distant to the child
- Relationship with aunt unstable
- Aunt not reliable and demanding

School progress and academic performance

- Gets along well with peers and educators
- Passes well but recently dropped because commitment to dance
- Good concentration span
- Likes school and school work

Social relationships

- Six friends at school
- Four friends in the community
- Lives with eight children at children's home
- Deals with problems by talking to housemother, friends, staff at children's home, teacher

Behaviour

- High self-esteem
- Very sensitive
- Cries easily and has a soft heart
- Quarrelsome
- Had difficulty in adjusting at the children's home
- Participates in making decisions concerning her life

General assessment of functioning

Joyce seems to be coping well with life's challenges and academic demands. Her relationship with her aunt is improving and she has adjusted at the children's home with the help of friends.

P2 - Mandla* (Pseudonym have been used that have no resemblance to the participants' names)

Biological family and history information:

- Abandoned
- Later reunited with father, grandmother and a cousin
- Visits his family during December holidays
- Good relationship between family and child

School progress and academic performance

- Disturbs other children
- Impulsive
- Short concentration span
- Got along well with peers and teachers
- Failed three times
- Struggling at school
- Talked too much in class

Social relationships

- Four friends at school & one friend in the community
- Lives with eight children at the children's home
- Speaks to housemother and teacher when he has problems
- Has adjusted at the children's home as he grew up there

Behaviour

- Good behaviour at the children's home

General assessment of functioning

Mandla is a well-behaved boy since he came to stay at the children's home. However, he has difficulty coping with his schoolwork. He relates well with his biological family.

P3 - Small*(Pseudonym have been used that have no resemblance to the participants' names)

Biological family and history information:

- Orphan
- Has grandmother, uncle, aunt and two siblings
- Visits family on school holidays

School progress and academic performance

- Hard worker
- Lively, confident
- Has difficulty with his school work
- Hid his homework
- Cooperates well with classmates and peers
- Is not committed to his work
- Absent 45 days due illness and doctor's appointments
- Referred to occupational therapist for academic processes
- Slow academically & therefore did not finish his work

Social relationships

- Lives with seven children at the children's home
- Four friends at school
- One friend in the community
- Deals with challenges by speaking to housemother and friends
- Has adjusted to the children's home with the help of siblings
- Was difficult to adjust

Behaviour

- Lively, confident
- Does not participate in decision making concerning his life.
- Rude to relieving housemothers
- Sometimes participated in decision making concerning her life

General assessment of functioning

Small battles with his schoolwork and has a tendency to hide his homework. He has poor health that has led for him to be absent at school quite often. He relates well with his housemother although he is at times cheeky with relieving housemothers. He also had good relations with his biological family.

P4 – Imelda*(Pseudonym have been used that have no resemblance to the participants' names)

Biological family and history information

- Orphan
- Has an uncle and a sister
- Family involved prior to admission of child
- Partnership between family and children's home in caring for Imelda
- Good contact between family and child

School progress and academic performance

- Average performance
- Cooperate with teachers
- Failed once
- Quiet in class

Social relationships

- Three friends at school and
- Two friends in the community

Behaviour

- Good
- Talks back
- Stubborn
- Deals with challenges by speaking to housemother and friends at the children's home
- Has adjusted to the children's home with the help of friends

General assessment of functioning

Imelda has a good behaviour at school and at home. She also has a good relationship with his biological family. She receives average school marks. Has adjusted at children's home with the help of friends.

P5- Owami*(Pseudonym have been used that have no resemblance to the participants' names)

Biological family and history information:

- Abused
- Orphan
- Has siblings
- Enough contact between child & family
- Visits family during school holidays
- Involvement started prior to child's admission at children's home

School progress and academic performance

- Short concentration span
- Failed once
- Respectful
- Marks dropped
- Struggling with English

Social relationships

- One placement prior to children's home
- Four friends at school
- No friends in the community
- Deals with challenges by speaking to housemother
- Had difficulty adjusting in the children's home at the beginning

Behaviour

- Good behaviour at children's home
- Not assertive
- Participates in decision-making concerning her life
- Average self-esteem

General assessment of functioning

Owami's progress at school is standard. And her marks have dropped as she struggles with English. She has made friends but has not been able to make friends in the community as yet. She seems a quiet person who likes to please everyone.

P6 – Perseverance *(Pseudonym have been used that have no resemblance to the participants' names)

Biological family and history information:

- Abandoned

School progress and academic performance

- Lacks ability to focus effectively
- Self-discipline not what it could be
- Capable of better results
- Failed twice
- Diligent to her work
- Attains excellent results
- Works consistently
- Likes school

Social relationships

- Lives with seven children at the children's home
- Eleven friends at school
- Twelve friends in the community
- Average self-esteem
- Deals with challenges by speaking to teacher, sometimes housemother and sometimes friends
- Housemother unavailable when needed
- Adjusted at children's home

Behaviour

- Talkative
- Leadership skills
- Dominates
- Likes attention
- Sometimes participates in decision making concerning her life

General assessment of functioning

Perseverance is doing very well at school despite a bad start in lower grades. She has always shown potential since she was younger. Perseverance is a confident and lovely young lady who has leadership skills. She is popular with lots of friends at school and in the community.

P7 - Tim*(Pseudonym have been used that have no resemblance to the participants' names)

Biological family and history information:

- Abandoned

School progress and academic performance

- Healthy self-esteem
- Lots of self-confidence
- Lacks self-discipline
- Short concentration span
- Slow in execution of work tasks
- Failed all June exams
- Referred to occupational therapist for academics
- Difficulty with Maths, HSS, NS and English spelling
- Average student
- Likes school

Social relationships

- Five friends at school
- Six friends in the community
- Involved in sport in the community
- Lives with eight children at the children's home
- Deals with challenges by speaking to housemother

Behaviour

- Participates in making decisions concerning his life
- Wondering mind
- Looses concentration
- Noisy

General assessment of functioning

Tim has a normal self-esteem but tends to battle a lot at school. He experiences difficulty with self-control and has short concentration span. Plays sport in the community.

P8 - Akha*(Pseudonym have been used that have no resemblance to the participants' names)

Biological family and history information:

- Abandoned

School progress and academic performance

- Self confidence increasing
- Concentration decreasing
- Lacks ability to focus and listen
- Reserved
- No enjoyment in classroom activities
- Talkativeness spoils his efforts
- No self-discipline
- No responsibility
- Gets along well with peers and educators
- Doing very well

Social relationships

- Nine friends at school
- Fifteen friends in the community
- Spoke to housemother when having challenges
- Lives with eight children in the children's home

Behaviour

- Good behaviour
- Quiet
- Without mistakes
- Participates in decision making concerning his life

General assessment of functioning

Akha lacks self-discipline but housemother thinks he is doing very well at school. He displays a good behaviour at children's home and appears to have a good relationship with his housemother who seems to be very proud of him.

P9 - Oscar*(Pseudonym have been used that have no resemblance to the participants' names)

Biological family and history information:

- Abandoned

School progress and academic performance

- Tendency to disturb other children
- Easily distracted
- Has difficulty in following instructions
- Poor listening skills
- Lags behind with his work
- Gets along well with peers and educators
- Referred to an occupational therapist for academics
- Failed once, condoned twice
- Referred to an occupational therapist for academics
- Likes school
- Disliked the school attending presently
- Difficulty with Maths
- Not doing well

Social relationships

- Lives with six children in the children's home
- No friends at school
- No friends in the community
- Loner
- Housemothers busy therefore don't talk to anyone regarding his challenges

Behaviour

- Happy
- Free
- Independent
- Open in relating with others
- Lazy with tidying his wardrobe

- Sad concerning his biological family
- Cries often because he misses his family
- Sometimes involved in making decisions about his life

General assessment of functioning

Oscar is doing poorly at school and seems to be a sad and lonely boy who has no friends both at school and in the community. He does not trust easily.

P10 -Khuthala *(Pseudonym have been used that have no resemblance to the participants' names)

Biological family and history information:

- Abandoned

School progress and academic performance

- Disturbs other children
- Impulsive
- Easily distracted
- Short concentration span
- Got along well with peers and educators
- Repeated Grade one, condoned twice, failed most June exams
- Academically weak
- Struggles with reading, spelling, writing & forming sentences
- Referred to an occupational therapist and counselling & educational psychologist for academics
- Likes school
- Doing well at school

Social relationships

- Lives with seven children in the children's home
- Sport in the community
- Six friends at school
- No friends in the community

- Does not participate in decision making regarding his life

Behaviour

- Kind
- Soft hearted
- Easily angered
- Sensitive
- Does not fight

General assessment of functioning

Khuthala seems to be struggling with his schoolwork. His behaviour at school is negative as he tends to disturb other children and he battles himself to concentrate. He prefers to have friends at school rather than in the community. He is a kind and sensitive boy.

Appendix I

Case studies

P1 – Joyce*(Pseudonym have been used that have no resemblance to the participants' names)

Joyce is a 12 year old girl who was transmitted to the children's home following her abuse and neglect since the death of her parents. Joyce has been described by her teachers as having a good concentration span, high self esteem and gets along well with peers and educators. Her school marks are good. Joyce's housemother agrees with the observation of teachers on Joyce's conduct and performance at school. However, Joyce's housemother thinks her marks have dropped because of sports commitments. Joyce believed she was not doing well at school because Maths & EMS were difficult subjects. The housemother has encourages her to focus more on her studies.

Joyce has an aunt who is not very committed in her life. There is not a very good relationship between the aunt and the housemother. The housemother feels the aunt needs to be very much involved in her niece's life as at the moment she is 'on and off'. Nevertheless Joyce's relationship with her aunt seems to be improving as Joyce looks forward to visiting her aunt unlike when she first came at the children's home.

Joyce feels happy to be at the children's home even though she does not know why she was brought at the children's home. Adjusting at the children's home was difficult because some children did not want to speak to her. Eventually she adjusted with the help of friends she managed to make. She misses her family as she said she thinks daily about them. She feels she is involved in making decisions concerning her life while she is staying her at the children's home.

P2 – Mandla*(Pseudonym have been used that have no resemblance to the participants' names)

Mandla was abandoned as a child and he came to the children's home when he was merely a year old. The children's home traced Mandla's family and he was united with them after years in care. His biological family consists of a father, grandmother and a cousin who he visits during school holidays. The housemother has a good relationship with Mandla's biological family.

His behaviour at school was characterised by disturbing other children and short concentration span but he relates well to peers and teachers. He has failed two times in June and once in December since he started school. Both Mandla and his housemother were in agreement that he was not doing well at school because he was talkative.

Mandla does not know the reason he was brought to the children's home and he feels 'OK' to be residing at the home. He said he does not think at all about his biological family because he has adjusted at the children's home. Regarding decision-making concerning his life, he feels he is involved. He shares his challenges with his housemother and teacher.

P3 – Small*(Pseudonym have been used that have no resemblance to the participants' names)

Small came to the children's home when he was 3 years old. He is now 13 years old and doing Grade 5. He is an orphan but has a grandmother, uncle, aunt, cousin and two siblings. He visits his biological family during June holidays. His housemother feels the relationship Small has with his family is inadequate; she would like Small to visit his biological family even during December holidays.

Small is not doing well at school. This is how teachers see him; as a hard working pupil, lively, confident and cooperating well with classmates and peers. As he progressed in school his behaviour changed to be less cooperative in group activities, and abiding by the rules and instructions. He also showed less commitment to his schoolwork. Due to ill-health, Small tended to miss school quite often. His housemother reported that his progress at school fluctuates and he sometimes hides his homework. Small, however, felt he was doing very well at school because sometimes he did his work although at times he would forget his books at school.

Despite the boy being sometimes rude to relieving housemothers, he is loving and displays appreciation. He is not afraid to apologize when he has made a mistake. Small knew the reason he came to live at the children's home. Someone spoke to them before coming to the children's home. It was easy for him to adjust at the children's home because he came with his siblings. He feels he is involved in making decisions about his life and he shares his problems with his housemother and friends from the children's home.

P4 – Imelda*(Pseudonym have been used that have no resemblance to the participants' names)

She is 13 years old and she came to the children's home when she was eight years old. Imelda is an orphan and in Grade 6. Her biological family includes her uncle and her sibling. She adjusted at the children's home with the help of friends. The housemother has a good relationship with the Imelda's family and feels the family is a partner with her in raising Imelda. Her behaviour at school is good as she cooperates with teachers. She failed once (in June) while in Grade 1.

According to her housemother Imelda received average marks at school because she does not like school. Imelda thinks she is doing very well because she is quiet in class. When she has challenges she speaks to her housemother as well as friends at the children's home. Her friends helped her to adjust at the children's home although it was difficult to adjust when she was new at the beginning. She knew the reason to be at the children's home and was happy to be at the children's home. She thought about her biological family about once per week. She shared her challenges with her housemother and friends from the children's home. Imelda was sometimes involved in decision-making concerning her life.

P5 – Owami*(Pseudonym have been used that have no resemblance to the participants' names)

Owami is in care because of sexual abuse, she is also an orphan. She came to the children's home when she was eight years old. She is 11 years old presently. Owami has siblings as her biological family. Her housemother has a good relationship with Owami's family. At school she has displayed short concentration span. Her housemother believed she conducted herself at school with respect and she was concerned that her marks dropped because of difficulty with English. Owami, on the other hand, thought she was doing well at school; she did not understand Afrikaans, EMS and HSS. She failed twice in Grade 4 and Grade 5 in June. She had one placement before coming to the children's home.

Owami experienced difficulty with adjusting to the children's home. She was happy to visit her family and sad on coming back to the children's home to such an extent that she would not speak to anyone for a few days. Owami said she had forgotten the reason she was in care. However, she was very happy to be at the children's home. At Owami's cottage, the housemother felt that Owami was not assertive. She did not know how to say no when asked to do something. Owami shares her problems with her housemother. She feels involved in decision making concerning her life. She thinks about her biological family about once per week. There are four friends of Owami at school and none in the community.

P6 - Perseverance*(Pseudonym have been used that have no resemblance to the participants' names)

Perseverance is an 11 year old girl who came to the children's home when she was two years old. She is an abandoned child. She is in Grade 5 and displayed good behaviour at school. At a young age, Perseverance could not focus effectively nor show self-discipline but teachers observed that she had potential. She failed twice in June when in Grade 1 & also in Grade 3. Perseverance's turning point occurred in Grade 4 onwards. She became diligent to her work and therefore attained excellent results consistently. Perseverance thinks she is not doing well at school because of detention; and her housemother felt she was doing very well at school.

There was one placement before the children's home. Her housemother described Perseverance as having leadership skill and tends to dominate other children. To improve her behaviour her housemother gave her leadership responsibilities.

Perseverance thought about her biological family about once per month. She also thought about her parents when other children in her class spoke about their families. To cope with life's challenges she spoke to her teacher, her housemother and friends. She, however, feels that her housemother is sometimes not available when she needs her. She only thinks about her biological family about once per month. Perseverance feels she is sometimes involved in decision making regarding her life issues.

P7 - Tim*(Pseudonym have been used that have no resemblance to the participants' names)

Tim is a 12 year old boy who came to the children's home when she was a year and five months old. He is an abandoned child. He is doing Grade 6 in a special school but he started in mainstream. He had been referred to occupational therapist for academic purposes.

At school Tim lacks self-discipline, has a short concentration span and slow in execution of tasks. At the same time Tim has been described by other teachers as having a healthy self-esteem. Tim feels he is battling with Maths, HSS, NS and English spelling. Tim passed all his grades although he failed June exams. Tim's housemother described Tim's progress at school as average. At the children's home Tim was noisy.

Tim does not know why he came to stay at the children's home. However, he feels happy to be at the children's home because he has friends. Tim did not think at all about his family. He feels he is involved when decisions are made concerning his life.

P8 – Akha*(Pseudonym have been used that have no resemblance to the participants' names)

Akha is a 13 year old boy who came to the children's home when he was two years old following his abandonment. Presently, he is doing Grade 7. He is doing very well in Zulu and struggles with Afrikaans and English. He started well in school but his marks and behaviour dropped. He became reserved. At home he is a quiet and independent child who does not need to be pushed with regards to his schoolwork, says his housemother. Both Akha and his housemother agreed that Akha was doing very well at school. Akha has nine friends at school and about 15 friends in the community.

Akha did not understand why he came and stayed at the children's village. Akha feels 'comfortable' about being at the children's home because he has no idea where he would be if not at the children's home. He thinks about his biological family about once per month. He thinks he is involved when decisions are made concerning his life.

P9 – Oscar*(Pseudonym have been used that have no resemblance to the participants' names)

Oscar is an abandoned child who is 13 years old. He was transferred to the children's home at the age of three. At present he is doing Grade 6. His behaviour at school includes being easily distracted, difficulty in following instruction, poor listening skills, short concentration span and a tendency to disturb others. Nevertheless he gets along well with peers and teachers. Has been absent from school for 22 days since he started school. He repeated Grade 1 and was condoned twice. He had been referred to an occupational therapist for academic purposes. There was one placement prior to the children's home.

His housemother though his progress at school was good because he was happy, well fed and free from oppression. His mother feels he is struggling with Maths. Oscar has entered the

teenage stage according to his housemother and therefore tends to be a bit lazy. Oscar struggles alone with Maths because he feels his housemother can't help him with Maths

Oscar knew the reason he was staying at the children's home. He misses his biological family very much and longs to his parents even if it is just once. He thinks about family daily and cries. He has no friends both at school and in the community as he trusts no one but Jesus. He is sometimes involved when decisions are made about his life.

P10 – Khuthala*(Pseudonym have been used that have no resemblance to the participants' names)

Khuthala is a boy of 12 years who came to the children's home when he was a year old. He was an abandoned child.

Khuthala repeated Grade 1, was condoned twice and failed most of his June exams. Referral was made an occupational therapist and educational psychologist for academic purposes. His housemother feels he is very weak academically but good with practical things such as art and cooking. Khuthala struggles with reading, spelling, writing and forming sentences. Nevertheless, he likes school. He has six friends at school and none in the community.

Khuthala is a very sensitive child who is easily angered. He is also assertive and can defend himself verbally as he does not fight. He has no idea why he stays at the children's home and is afraid to ask. He feels he is not involved in decision making concerning his life.

P1- Joyce

Joyce came to the children's home when she was 10 years old. She is 12 years old and in Grade 6. Been in children home for 2 years The reason for her to be admitted to the children's home was because she had been abused and neglected. She was never excluded from any school. Joyce behaved well and got along well with peers and educators. Her concentration span was good. She had been absent from school two times. She was passing well at school. According to her teachers she had a high self-esteem. Joyce had an aunt and a half-brother (boy from another mother) as her biological family. Her biological family was involved in Joyce's life prior to Joyce's admission at the children's home. Joyce did not use Ritalin. Joyce had displayed good behaviour at the children's home. She had not been referred to a Psychologist. 0 placements before that children's home.

Joyce lived with eight other children at her cottage. According to Joyce's housemother Joyce was doing very well at school but had recently dropped because of her commitments in other activities such as dance that she was doing three times per week. Her housemother helped Joyce to improve her marks by talking to her about her (school) report and about her other activities. She also encouraged her to focus on her studies. Joyce liked school a lot and liked her schoolwork, said her housemother. Her housemother also described Joyce as good in helping others in school. Joyce's housemother went to school on parents' meeting and on school's request. Her housemother coped with assisting all children in her cottage with homework because Joyce and her bigger (not a biological sister) sister helped other children, while mom helped others. Joyce's behaviour at the children's home was described as a very sensitive child who cried easily and had a soft heart. Joyce also listened when she was advised against something. Her behaviour was attributed to her background.

She knew how her parents died and she did not stay well with her aunt. She had been through a lot of abuse, staying here and there. Her aunt had said Joyce was quarrelsome just like her (biological) mother. The only way to assist Joyce with her behaviour was to talk to her. Joyce's biological family involvement was on and off. The housemother said that sometimes Joyce visited her family and sometimes aunt visited and telephoned Joyce. Based on the housemother's view, Joyce's aunt needed to be closer to the child. At that period the housemother felt that Joyce's aunt had not played much of a role in Joyce's life but had been very demanding. The housemother continued to describe her relationship with Joyce's biological family as not good because Joyce's aunt was not reliable and very demanding. Joyce's aunt liked money and sometimes asked for food when visiting Joyce. The housemother felt Joyce had not enough contact with her family as the aunt is on and off. Sometimes she came, sometimes she didn't come.

When asked how was Joyce when she had to go home, her housemother said "she is better than when she came. She looks forward and eager to go." On coming back from home Joyce loitered around her cottage. Joyce visited home during December holidays. The housemother thought Joyce was benefitting more by being at the children's home than being at home because there were activities, camps and lots of skills one learnt (while at a children's home). The housemother had an opinion that the role of the biological family was to visit the child, be visited by the child and be involved in the child's birthday. The biological family was viewed as a client (of the children's home) in caring for Joyce and the housemother stated that she was happy that way because if the aunt was very much involved she might say things they couldn't do. To increase the level of involvement of Joyce's family in her life, the housemother felt that 1) the children's home needed to have a relationship with the family. Say there was a birthday, the cottage could visit the family and family could visit the cottage, 2) invite family to the events at the children's home, 3) go on outings together, 4) discuss with Joyce's aunt finances and about behaviour of the child, 5) aunt had spoken with social worker that she would love her children to visit the children's home.

Joyce said she did not have any idea why she came to the children's home. Nevertheless, she felt very happy to be at the children's home because "we have mothers who look after us and they treat us nicely". Joyce had six friends at school who were not from the children's home and four friends in the community. Joyce had only been absent from school that year once because their teacher told them not to come as he was to be away. Joyce thought she was doing not so well at school because she did not understand other subjects and others were difficult e.g. Maths and EMS. English was fine and easy. Joyce said she spent an hour per day doing her homework and did not do any homework on weekends. Prize giving ceremonies at the children's home helpful because when she saw other children receiving she wanted to do just like them.

When Joyce had problems she spoke to her mom, friends, siblings, other staff members and her teacher. She spoke to adults about her problems once a week or only if she had problems. Joyce thought that her elder sister was sometimes not there whenever she needed her. Joyce felt she had adjusted to the children's home; she adjusted by getting used to talking to people. It was hard for Joyce to adjust as some children thought 'highly' of themselves and didn't want to talk to her. What Joyce loved about being at the children's home was that there were housemothers who looked after them and her friends. What she hated about being at the children's home were people who teased her. She thought daily about her biological family because she was missing them. She did not know how she was prepared to come and live at

the children's home. Joyce said she had contact with her biological family during school holidays. Joyce felt she was involved in making decisions about her life. Together with her mother they decided for her to attend the school that she was then attending; her mom asked her whether she wanted to be out of her previous school, Joyce said yes, and then her mother found the school for her.

P2 – Mandla

Mandla is 12 years old and he came to the children's home when he was a year old. Mandla was an abandoned child. He was doing Grade 6 and was never excluded from school. His behaviour at school was described as disturbing other children, 'impulsive', has a short concentration span but he got on well with peers and teachers. Mandla was absent from school once. Since Mandla started school he failed three times, he failed his first year at school (both) June & December and failed Grade 6 in June. Mandla was fortunate that the children's home traced his biological family after years in care and he now has a father, grandma, and a cousin. Mandla visited his biological family during school holidays. Mandla did not use Ritalin. He has a good behaviour at the children's home and cooperates with housemothers. Mandla had been referred to psychologists in terms of his academics. 0 placements before that children's home.

Mandla shared his cottage with eight other children. His housemother felt that Mandla was struggling at school probably because he was talkative and easily forgot. Maybe the boy was traumatised before meeting his parents and the previous housemother left without preparation. His housemother helped him to improve his marks by using the communication book and talking to him about his homework as he easily forgets. Doing homework 'half-half' and doing homework in a fun way was what Mandla's housemother used to change Mandla's attitude towards school. She goes to Mandla's school during parents' meeting and when she felt there was a need e.g. when she saw there was something lacking in Mandla's progress. The older children at Mandla's cottage could do homework by themselves the housemother only assisted here and there; the housemother also requested from an elderly girl from a cottage nearby if she did not understand the homework.

Based on his housemother's view Mandla behaved well, he had started to talk about girls, and to swop clothes with his friends at school because of teenage stage. Talking to him assisted to improve his behaviour. The nature of Mandla's family involvement included visits by Mandla to his family during December holidays. The role of Mandla's family in his life included raising the child together as well as speaking the same language with the housemother, said Mandla's housemother. There was a good relationship between the housemother and Mandla's biological family. The housemother felt that there was enough contact between Mandla and his biological family as Mandla was still enjoying his visits (home). Mandla felt happy when he had to go home and was extremely happy on returning because he thought he was a big shot as he was looking after the cattle, sheep and goats (at home); and he would tell the other children he had freedom at home. Mandla's housemother had a view that Mandla was benefitting equally when he was at the children's home and when he was at home. The biological family of Mandla was not an equal partner but a client concerning caring for Mandla. Mandla thought that the way to increase the level of Mandla's biological family involvement was to 1) visit them and 2) talk to them to find out from them how they would like to be involved. The housemother suggested the researcher to visit as well.

Mandla said he had no idea why he came to the children's home. He felt 'OK' by being at the children's home because sometimes it was nice and sometimes it was not. Mandla had four friends at school who were not from the children's home and one friend in the community. He was always present at school. Mandla thought he was doing not so well at school because he sometimes had problems, he talked too much in class. He said he could not keep quiet. Mandla said he spent 20 minutes during weekdays doing his homework and did not do homework on weekends. Prize giving ceremony was helpful because he wanted to receive as well. When Mandla had problems he spoke to his mom and teacher. He spoke weekly to adults about his challenges and felt no one was not available to him when he needed them. Mandla felt he had adjusted at the children's home because he grew up there as he came when he was little and he just adjusted. It was easy to adjust because he was still a child. What Mandla loved about being at the children's home were outings and games. What he hated about being at the children's home were study time and not being allowed to visit out of the children's home. Mandla did not think at all about his biological family as he was used to the children's home. He had contact with his biological family during school holidays. Mandla was involved in making decisions about his life. To decide which school to attend, he asked his mother and she agreed.

P3 – Small

Small is a 13 year old boy who came to the children's home when he was 3 years old. He came to the children's home because he was an orphan, his mother had died and his father was unknown. He was doing Grade 5. From Grade 1 Small was a hard working pupil who had difficulty with his school work. As he progressed he became lively, confident and co-operated well with his classmates and peers. One teacher stated that small needed to make an effort to cooperate in group activities and abide by the rules and instructions. Teachers said that Small was not committed to his schoolwork. Small had been absent from school 45 days since he started school because of medical reasons including appointments with doctors, etc. He failed Grade 1 in June, repeated grade 2 and Grade 4; he was condoned from Grade 4 to Grade 5. His biological family includes grandma, uncle, aunt, cousin and two siblings. The nature of involvement by the family entailed visits by the child to the family during December holidays. The boy behaved well at the children's home and cooperated with his housemothers. The child was referred to an occupational therapist for academic purposes. 0 placements before that children's home.

Small lived with seven other children at his cottage. His housemother felt that his progress at school was not steady; sometimes he did well and sometimes not. Small's housemother felt his progress was due the delay in the development of fine motor skills, his development was delayed and he was very slow, also his sickness affected him. He was slow academically and in doing, he did not finish his work. Small shows his housemother the work they did at school and his mother asked another girl he was with in class about homework. She gave Small a reward if he did well. He needed a lot of follow-up. He hid his homework. In order to change Small's attitude towards school, his housemother got information from the girl who was Small's classmate and there was cooperation between housemother and the teacher. The housemother went to Small's school to attend parents' meetings and also on request by the school. Volunteers assisted Small's housemother to cope with helping children with their homework. Small's housemother focused on four children while volunteers helped others.

The housemother described Small's behaviour at the children's home as sometimes rude/cheeky towards relieving housemothers nevertheless the boy had love and showed appreciation. He could say he was sorry but was not responsible enough to take his medication. His behaviour could be attributed to the 'stage' and to 'show' relieving housemother that she was not his mother. To improve his behaviour the housemother talked to him and/ or disciplined him immediately. Nature of biological family involvement included visits by the child to the family and the elder sibling phoned them. The housemother had a view that the role of Small's family in his life while in care was to be a family. The housemother's relationship with Small's family was good but she felt that there was not enough contact between Small and his family, Small needed to visit his family even during June holidays. She felt Small needed to get used to his family because he was to eventually go back to his family so it was better for Small to bond and become used to his family then. She continued to state that sometimes we (children's home) were too protective of the children. According to the housemother, the child felt happy when he had to go home and was happy and a little bit sad on returning. Sometimes Small's family gave them money. Small's housemother thought that Small was benefitting more by being at the children's home than being at home because he was receiving good education, clothing, food, shelter, was learning about life in a different environment and developing a broad mind. The housemother felt Small's family was a client not an equal partner in caring for Small. In order to increase the level of involvement of biological family, his housemother felt that 1) children should be allowed to visit their families more and 2) trust that the family will be able to look after the child/ren.

Small said he had an idea why he came to the children's home. He felt very happy to be at the children's home because if he wanted something they would buy for him. He was able to go to school and they helped him when he was sick. Small had four friends at school who were not from the children's home and one friend in the community. He could not remember the number of times he had been absent from school. He felt he was doing well at school because sometimes he did his school work and sometimes he did not because he would forget his school books at school. He said he was spending 30 min per day to do his homework and did not do homework on weekends. Prize giving ceremonies helpful because Small wanted to receive something one day. When Small had problems he spoke to his housemother and his friends at the children's home. He did not talk to other adults. No one was not available to him when he needed them. Small felt he had adjusted at the children's home and it was easy for him to adjust because he came with his siblings. What he loved about the children's home was that every three months they bought clothes and he went to school. There was nothing he did not like about being at the children's home. He thought about his biological family approximately once per week. As part of preparation to come and live at the children's home, someone spoke to them although he did not remember who. Small had contact with his biological family during school holidays. He felt he was involved in making decisions about his life. He said the school he was then attending others decided for him but he did not know who.

P4 – Imelda

Imelda is 13 years old and she came to the children's home when she was eight years old. She came to care because she was an orphan. She is currently doing Grade 6. Her behaviour at school was good and she cooperated with teachers. She had been absent from school three times. She only failed once when she was doing Grade 1 in June. Her biological family was her uncle and her sibling who was lived with uncle. The nature of family involvement started prior to Imelda being admitted at the children's home, visits by the child to her family and also telephone calls. Imelda visited during school holidays. She behaved well at the children's home and cooperated with housemothers. 0 placements before that children's home.

There are nine children including Imelda that live at her cottage. Imelda was passing at school but was neither intelligent nor dumb because she did not like school. To help improve her marks at school, her housemother helped her with her homework even though she did not want to be helped. Her housemother mother grouped Imelda with a girl from another cottage to do homework together as a way of coping with regards to helping her children with homework. Imelda's behaviour was described by her housemother as 'right' although she had a tendency to talk back. Her behaviour was attributed to teenage stage and the fact that Imelda was stubborn. To help improve her behaviour her housemother disciplined her and Imelda took her discipline. The nature of biological family involvement included visits by the family to the child, visits by the child to the family and telephone calls. The housemother felt that the role of the biological family was to partner with her and she felt that Imelda's sister helped in raising Imelda. The housemother told Imelda's sister about the challenges she was experiencing with Imelda. As a result the housemother had a good relationship with Imelda's biological family. She felt that Imelda had enough contact with her family because her sister visited and phoned Imelda regularly and most of the holidays Imelda visited her sister and uncle. Imelda felt very happy when she had to go home because she became a baby at home, was treated special and got lots of attention. On returning from home Imelda seemed to be fine. Imelda visited her family during school holidays including June and December holidays. The housemother felt that Imelda benefited by both being at the children's home and being at home and also felt that her biological family was an equal partner in caring for Imelda. There was nothing to be done to increase the level of biological family involvement as it was just right.

Imelda said she had an idea why she came to the children's home. She felt very happy to be at the children's home because they got things such as clothes, food, etc. Imelda had three friends at school who were not from the children's home, and two friends from the community. She had been six times absent from school because she had chicken pox. Imelda thought she was doing well at school because she did not talk too much in class and she did not make noise. She spent 1hr per day doing her homework and did not do homework on weekends. Prize giving ceremonies helpful because it helped her to do her work so that she could receive what others were getting. When she had problems she spoke to her mom and friends from the children's home. She spoke once a week to adults if she had challenges. No one was not available when she needed them. She felt she had adjusted to the children's home with the help of friends but it was difficult to adjust although she couldn't remember why. What she loved about being at the children's home was that she had friends and a mother who looked after her. What she hated about being at the children's home was that sometimes it was boring because on Saturdays they did nothing. She thought about her biological family about once a week. The way she was prepared to come and live at the children's home was through her sister who organised for her by speaking with the social

workers and then she told her she was to come and stay here at the children's home. Imelda has contact with her biological family during school holidays. Imelda felt she was sometimes involved in making decisions about her life as her mother decides for her. Her mother chose for her the school she was attending.

P5 – Owami

Owami is an 11 year old girl who came to the children's home when she was 8 years old. The reason for her to be in care was because of sexual abuse. Owami is an orphan, her mother passed away and her father is unknown. She is currently doing Grade 6 and has been described by teachers as having a short concentration span. She has been absent from school two times. She only failed twice in June while in Grade 3 and Grade 4. She has been described by her social worker as a girl with an average self-esteem. She has siblings as her biological family. Nature of family involvement includes visits by the family to Owami and telephone calls. Owami behaved herself well and cooperates with housemothers at the children's home. She had been referred to Childline for psychological purposes. One placement before the children's home.

Owami shared her cottage with eight other children. Owami conducted herself respectfully at school but according to her housemother her marks had dropped compared to the previous years. Her housemother thought Owami's marks dropped because Owami was struggling with English. Owami's housemother helped Owami to improve her marks by encouraging Owami to read books from the library in order to improve her English; Owami's elder sister helped her with Maths although Owami was doing well in Maths. Her housemother helped wherever Owami needed help. Owami's mother told her that if she wanted to have a better job she needed to study hard. Better job would allow Owami to earn more. Owami's housemother went to Owami's school during parents meetings and on request by the school. To cope with helping all children in her cottage with homework, Owami's housemother asked other caregivers to assist. Owami's behaviour at the children's home was described by her housemother as good although she couldn't say no when asked to do anything maybe because she was afraid of other children especially her big sister. The housemother felt that dance, modelling and talking about her behaviour could help improve Owami's behaviour. Owami's biological family was involved in her life prior to her admission to the children's home; the family was also involved in making decisions regarding Owami. The family visited and phoned Owami and Owami also visited them. The role of the biological family as described by Owami's housemother was to encourage the child to 1) learn, 2) behave well and 3) to remain at the children's home. The housemother felt she had a good relationship with Owami's biological family. The child had enough contact with her biological family because when she phoned her family she got hold of them, in fact the child and her family were in contact all the time. Owami felt very happy when she had to go home and was looking forward to going home even then (around the time the interview took place). On returning from home the child would be quiet and didn't want to talk to anyone but would eventually start to communicate. Owami visited her family during June and December holidays. Owami's housemother was of a view that Owami was benefitting more by being at the children's home than being at her home because she got everything e.g. food, clothes, etc. She also got help with her homework. Owami 'knows' that she 'has a family' and the fact that her family bought her clothes was the role Owami's family was playing in her life. The housemother thought Owami's family was a client when it came to caring for Owami. To increase the level of involvement by the biological family, the housemother thought the

children's home should continue to allow the child to visit her home and for her family to visit the child. Also to invite the child's family when there were events at the children's home.

Owami said she had forgotten the reason she came to stay at the children's home. She felt very happy to be the children's home because she had a new home. Owami had 4 friends at school who are not from the children's home and had no friends in the community. According to Owami, she had never been absent from school. Owami thought she was doing well at school because there were some of the things she did not understand e.g. Afrikaans, EMS and HSS. She said she was spending 15-20 min per day to do her homework and sometimes studied for 15 minutes weekends. Prize giving ceremonies helpful because they encouraged her to study so that she could do better and get certificates, trophies for good progress. When Owami had problems she spoke to her housemother. She spoke to adults about her challenges when there was a need. No one was not available to her when she needed them. She felt she had adjusted to the children's home. She was told by her family i.e. housemother and siblings at the cottage the way to adjust and it was difficult for her to adjust at the beginning. What she loved about being at the children's home was education, being taught to respect people outside the children's home, and sport opportunities. There was nothing she hated about being at the children's home. She was prepared by the social worker to come and stay at the children's home. She had contact with her biological family during school holidays. Owami felt she was involved in making decisions about her life. Her housemother told her to go to the school she was currently attending.

P6 – Perseverance

Perseverance is an 11 year old girl who came to the children's home when she was two years old. She was in care because she had been abandoned. She was doing Grade 5 and behaved herself well at school and cooperated with her teachers. At the lower grades one teacher observed that Perseverance was "A lovely girl who lacks the ability to focus effectively, self discipline is not what it should or could be. She is capable of better results". She failed twice in June when she was doing Grade 1 and Grade 3. But as she progressed, from Grade 4 upwards, Perseverance improved drastically in her results and behaviour. Her teachers saw Perseverance as diligent to her work and consequently attained excellent results and worked consistently. Perseverance had an average self-esteem. One placement before children's home.

There were eight children in total at Perseverance's cottage. Her housemother thought Perseverance was doing well at school as her reports were good. Her housemother saw her as having leadership skills and she had a tendency of thinking she knew it all and to dominate others. She was also talkative. Her housemother thought that that was caused by the need to become first in everything and to show off her intelligence as she liked attention. Her housemother made use of the study time and other free time to encourage her to study. Perseverance liked school. Her housemother attended parents meetings and also went to school to view Perseverance's work. The way to cope with helping all her children with homework was that she grouped children into two groups, one of slow learners and one of fast learners. Children also assisted each other. Sometimes she mixed slow and fast learners. Volunteers who came to the cottage also assisted. To help improve Perseverance's behaviour

her housemother gave her responsibilities e.g. asked her to educate others at home or made her supervisor of the week.

Perseverance was very happy to be at the children's home because she met with children whom she would never have known. She did not know why she came to the children's home. She said she had eleven friends at school who were not from the children's home and twelve friends in the community. (She was actually counting her friends by their names and seemed to enjoy the shock the researcher had to learn that she had so many friends). She had been absent from school only once due to the camp she attended. She thought she was doing not so well at school because she had had a detention. She was spending one hour per day to do her homework on weekdays and also one hour on weekends. Prize giving ceremonies were helpful. When she had problems she spoke to her teacher, sometimes to her housemother and sometimes to her friends at school and at home. She talked to adults about her challenges "many times if anyone abuses me". She felt her mom was not available when she needed her. She felt she had adjusted to the children's home because she came as a baby although she was afraid when she came for the first time. What helped her to adjust was that her housemother introduced her to other housemothers and other children; she spoke to other children and made friends. It was a bit difficult for her to adjust because she was scared. What she liked about being at the children's home was that they were raised in a proper manner. What she hated about being at the children's home was that when they wanted things such as the swimming pool they were not build for them. She said she thought about her biological family approximately once a month but when children in class talked about their families, she also thought about her own, her real parents. She did not remember how she was prepared to come and stay at the children's home. She firstly felt she was not involved in making decisions about her life then later said she was involved sometimes. Her housemother told her to go to the school she was then attending.

P7 – Tim

Tim is 12 years old. He came to the children's home when he was a year and five months old. Tim was abandoned. He was doing Grade 6 in a special school although he started in a mainstream school. He has been described as having a lot of confidence and a healthy self-esteem by one teacher. These are some of the comments made by other teachers on Tim's behaviour at school; he lacks self-discipline, has a short concentration span and is slow in execution of work tasks. According to one of his teacher's comment "the child needs much assistance, reinforcement and encouragement". Tim passed all his grades although he used to fail his June exams. Tim is on Ritalin. Tim's behaviour at the children's home has been described as good and he cooperated well with his housemother. Tim has been referred to an occupational therapist for academic purposes.0 placements before the children's home.

Tim stays with eight other children at his cottage. According to his housemother, Tim was a borderline case, neither bright nor dumb with regards to his progress at school. The reason for Tim's progress at school was that the housemother suspected that his biological mother was an alcoholic. Tim's mind wondered a lot, continued the housemother. Tim's housemother assisted him to improve his marks at school by giving him Ritalin and helped him with his homework by being firm because Tim lost concentration. Tim was described as

a child who liked school by his mother. His housemother went to Tim's school and to attend parents' meetings. Tim's mother said Tim liked shouting when he was at the children's home. She felt shouting was in Tim's genes because he was noisy as a child. Tim's housemother addressed his shouting there and there and said to calm him down was very important.

Tim said he had no idea why he came to stay at the children's home. He felt happy to be at a children's home because he had friends. Tim had five friends at school who were not from the children's home. In the community Tim had plus or minus six friends, the ones he danced with. Tim had been absent from school only once because he had not been sure whether the school was opened or closed. Tim thought he was doing not so well at school because he did not know Maths also HSS and NS. English was easy but his spelling was wrong. Tim spent 45min, 15 min or 1hr doing his homework during weekdays and spent 10-15 minutes on weekends. Prize giving ceremonies helpful. His mom and his three elder brothers assisted him with his homework.

Whenever Tim had problems he spoke to his mom because she's the one he trusted. Tim also spoke to other adults about his challenges whenever he had problems. No one was not available when Tim needed them. Tim had adjusted to the children's home because he grew up there as he came as a baby. What Tim liked about being at the children's home was that there was no bullying, if there was a fight they were stopped. There was nothing Tim did not like about being at the children's home. When asked how often he thought about his biological family, Tim said "I don't think about it at all". Tim was involved in making decisions about his life. The school he was attending at that time had been recommended by his previous school.

P8- Akha

Akha is 13 years old. He came to stay at the children's home when he was two years old. Akha was an abandoned child. He was doing Grade 7. The boy was struggling with Afrikaans, English to a lesser extent and was very good in Zulu. Akha started well in school then dropped. At first (in lower grades) his self confidence was greatly increasing although his concentration was decreasing. His ability to focus and his listening skills dropped. He was reserved and was increasingly becoming so as he was getting older. One teacher saw him as experiencing no enjoyment in classroom activities but preferred to remain passive during group and discussion activities. He was seen by another teacher as lacking self-confidence and did not always follow instructions. Another teacher observed that his talkativeness spoilt his efforts. He showed no self-discipline and no responsibility. However, Akha got along well with his teachers and his peers. Akha had a good behaviour at the children's homes and cooperated well with housemothers according to the social workers report. 0 placements before the children's home.

There were 9 children at Akha's cottage (including Akha). Akha's housemother felt that Akha was doing very well at school. The reason for doing well was that Akha was not affected by his abandonment because he stayed at home a little bit before being abandoned and therefore was able to breastfeed and bond with his mother. The way to help improve his marks was to use study/homework time and Akha could ask questions. Akha liked education, he did not need to be pushed, and he was very independent. 'If I don't know (how to help him) I refer him to others in the children's home such as when you (the researcher) helped the boy one time' said the housemother. Akha's housemother went to his school for parents' meetings and on schools request. The behaviour of Akha at the children's home according to his housemother was good. Akha was a quiet child, who was without mistakes. There was nothing that needed to be done to improve Akha's behaviour.

Akha did not have any idea why he came to stay at the children's home. He said he felt 'comfortable' about being at the children's home because he did not know he was going to be there; it was also a place where he felt he could stay and have food as well as shelter. Akha had 9 friends at school who were not from the children's home and approximately 15 friends in the community. He was never absent from school. He thought he was doing very well at school because sometimes he did not study yet when he wrote (tests, exams) he passed. He spent 30 minutes per day doing homework and about an hour on weekends. Prize giving ceremonies helpful in improving his marks.

Akha spoke to his housemother when he had problems. He spoke about once a month to adults about his challenges. No one was not available when Akha needed to talk to them. Akha felt he had adjusted to the children's home because he grew up there and consequently did not know whether it was easy or difficult to adjust. What he loved about being at the children's home were friends; and there was nothing he hated about being at the children's home. He thought approximately once a month about his biological family. Akha thought he was involved in making decisions about his life. The school he was attending was decided by somebody else but not him.

P9 - Oscar

Oscar is 13 years old. He was an abandoned child. He came to stay at the children's home when he was three years old. He was doing Grade 6 and had never been excluded from school. Oscar had a tendency of disturbing other children at school. His teachers also described him as easily distracted, had difficulty in following instruction, had poor listening skills. His concentration span was short. One teacher observed that "He often lags behind in all he does and seems to be in his own world, disregarding time constraints." However, Oscar got along well with other pupils and teachers. He had been absent from school 22 days. He repeated Grade 1 and was condoned in Grade 2 & in Grade 4. Oscar behaved himself well and cooperated well with housemothers at the children's home according to the social worker's report. He had been referred to an occupational therapist for academic purposes. One placement before children's home.

Oscar was sharing his cottage with six other children. Oscar's housemother felt Oscar's progress at school was good because Oscar was happy, well fed, free as he experienced no

oppression. To help improve Oscar's marks, his mother assists him with his weakest subject, viz. Maths. Oscar was independent but his housemother helps him even though Oscar told his mother he was coping or he knew Maths. She also encouraged him to read to improve his English. The housemother continued to state that Oscar liked going to school although he said to his housemother that he did not like going to the school he was attending because of detention; even if all children misbehaved in class, the teacher would blame children from the children's home. Oscar was an open child but teachers did not understand him. Oscar's housemother went to Oscar's school for parents' meeting, on school's request and she went to 'sort out things' regarding Oscar as there was one teacher who did not understand Oscar. To cope with the demands of all her children's homework, Oscar's housemother asked children where they need help and helped. But there was one child who was difficult to help because she did not know anything. The housemother felt that she could help Oscar with his homework although she struggled to help in Maths but the volunteers helped. According to Oscar's housemother's view, Oscar behaved himself well at the children's home although he had started to be lazy by not looking after his clothes nor tidying his wardrobe. She attributed Oscar's behaviour to teenage stage. Reminding Oscar to be responsible and to check his clothing were what the housemother thought could be done to improve Oscar's behaviour. Oscar's housemother felt that the role of biological family could be to act as a parent and to help the child at anytime. The family could also visit the child thus bond with the child. The child could also visit his family.

Oscar said he had an idea why he came to stay at the children's home. He felt sad to be staying at the children's home because he did not see his parents, he did not talk to them, he had no relatives and had no cousins. Oscar had no friends at school because "You don't do well at school if you have friend because they will influence you to do bad things." He continued to state that he felt OK about not having friends. Oscar also had no friends in the community "because you don't know the background of the person and so you can't trust them". He had been absent from school two times because he was not prepared for school as he woke up late. Oscar thought he was not doing so well at school because it was hard e.g. Maths. He did not think his housemother was able to assist him with Maths because she had Grade 7. As a result Hope did not ask his housemother to help him with Maths. Oscar spent approximately 1 hour to do his homework on weekdays and on weekends he spent approximately 1 hour for Maths and about 10 minutes for English. Prize giving ceremonies helpful because he got an award the previous year for improvement in most of the subjects.

When Oscar had problems he spoke to no one but just kept quiet because no one bothered or gave attention. That made Oscar to be sad. Instead of talking to adults about his challenges he prayed as he felt one can trust Jesus because he was trustworthy. He thought housemothers were not available when he needed them. They were always busy. Oscar felt he had adjusted to the children's home. He adjusted by getting more knowledge and the fact that he came at the children's home when he was still a baby and grew up there. What he loved about being at the children's home was education because he wouldn't know where he would be maybe he would have been on the streets. What he hated about being at the children's home was that most housemothers were "cheeky and strict" but the new ones were more kind and had love. They (children and newer housemothers) quarrelled but got over it quickly. Oscar thought about his biological family everyday. He felt alone and very sad and he said he would love to see his parents even if it was just once. Just to see them and cry with them. Maybe his parents were looking for him. How were they going to know that he was there at the children's home? Oscar felt he was sometimes involved in making decisions about his life. They

decided for him the school he was attending although he did not know who but they just told him the school to go to. At the end of the interview he thanked the researcher profusely for spending her time with him, said he really appreciated that. Oscar then asked the researcher whether the children's home requested permission from parents before taking children away from them.

P10 – Khuthala

Khuthala is 12 years old and he came to the children's home when he was a year old. He was an abandoned child. He was doing a special class for Grade 5. His behaviour at school had been described as disturbing other children, impulsive, got easily distracted and had a short concentration span. However he was getting on well with peers and teachers. He had been absent from school for 33 days. He repeated Grade 1 after failing in June & December, failed Grade 1 again in June and was condoned to Grade 2. He was again condoned to Grade 3 where he failed in June but passed in December. He also failed in June in Grade 5. (Khuthala repeated Grade 1, was condoned twice and failed most of his June exams). Khuthala was referred to occupational therapist and a counselling and educational psychologist for academic purposes. One placement before the children's home.

Khuthala stays with eight other children at his cottage. His housemother felt he was not progressing well at school. She felt he was intelligent in terms of general knowledge but was very weak academically. His weak academic progress was caused by the teacher who had apartheid. The other teacher understood him. The housemother also felt that the teacher's age contributed to Khuthala's weak progress at school because the teacher was old and didn't want any noise. Khuthala was struggling with reading, spelling, writing and forming sentences. Khuthala was good in practical things such as art and cooking. Khuthala's housemother helped Khuthala to improve his marks by talking to him about his school report, assisting him with homework and asking other people at the children's home to assist. It also helped Khuthala to do his work with his classmate who stays at the cottage next to him. Doing homework with his classmate also boosted his self-esteem. The boy did not need to be pushed as he loved school; even with his homework he did not need to be pushed. Khuthala's housemother went to Khuthala's school for parents' meetings and on school request.

To cope with the demands of homework for all her children the housemother sat down with Khuthala alone and encouraged him to start with easier parts of the homework, took a break, and then moved on to more difficult parts of the homework. The elder girl at the cottage also assisted the housemother a lot during homework time. The behaviour of Khuthala at the children's home was described by his housemother as kind and soft hearted although he was easily angered. Khuthala was also sensitive but he did not fight. The housemother also felt that he was assertive as he could defend himself with words. The reason of his behaviour was attributed to his background specifically the conditions before birth and while the child was young. To help improve the behaviour of the child the housemother felt the boy needed more help with his sensitivity although she stated she did not know how could that be done.

Khuthala said he had no idea why he came to stay at the children's home and was afraid to ask. He felt very happy to be at the children's home because it was nice and he was having fun. He played games and usually went on outings with his housemother. He had 6 friends at school who were not from the children's home and no friends in the community. He did not

want friends in the community because they were boring. He had been absent from school only once because he was sick. Khuthala thought he was doing well at school because there were many things he was doing well. He was doing well in Arts & culture, LO and a bit in English. He said he was spending 5 min doing his homework on weekdays and did no homework on weekends. Prize giving ceremonies helpful because they made him happy and it was the first time he received a medal. No one was not available to Khuthala when he needed them. He spoke to his teacher and his mother about his challenges countless times. He talked to no one when he had problems because he solved the problems himself. He felt he had adjusted at the children's home although he did not know how and therefore did not know whether it was easy or difficult to adjust. What he loved about being at the children's home was that he had time to do art; play and that sometimes his housemother gave him money. There was nothing he hated about being at the children's home but sometimes he hated coming to the house at 6 but he felt it (coming at 6) helped. Khuthala did not think about his biological family at all. Khuthala felt he was not involved in making decisions about his life. His mother decided for him. The school he was attending was chosen by his mother as Khuthala wanted to go to X school but housemother said Y school.

Appendix J
Children with biological family input: positive & negative factors

With biological family input

Positive factors	Negative factors
School/academic performance	
<p>• Progress at school</p> <p>.1 Perception of child</p> <ul style="list-style-type: none"> • Doing well (P3) • Doing well (P4) • Doing well (P5) 	<ul style="list-style-type: none"> • Not doing well (P1) • Not doing well (P2)
<p>.2 Perception of housemother</p> <ul style="list-style-type: none"> • Doing very well, (P1) • Liked school a lot & schoolwork (P1) • Average performance (P4) • Respectful (P5) 	<ul style="list-style-type: none"> • Recently dropped due to sports commitments (P1) • Struggling at school (P2) • Talkative & easily forgets (P2) • Progress fluctuated between well & not well (P3) • Slow, does not finish his work (P3) • Hid his homework (P3) • Did not like school (P4) • Marks dropped (P5)
<p>.3 Perception of teachers</p> <ul style="list-style-type: none"> • Got along well with peers (P1) • Got along well with educators (P1) • Good concentration span (P1) • High self-esteem (P1) • Passing well (P1) • Got along well with peers (P2) • Got along well with educators (P2) • Hard working (P3) • Lively, confident (P3) 	<ul style="list-style-type: none"> • disturbing other children (P2) • impulsive (P2) • short concentration span (P2) • Failed 3x (P2) • Difficulty with school work (P3) • Not committed to his schoolwork (P3) • Failed & condoned a couple of times (P3) • No cooperation in group activities (P3) • To abide with rules (P3)

<ul style="list-style-type: none"> • Got along well with peers & teachers (P3) • Good behaviour (P4) • Cooperated with teachers (P4) • Short concentration span (P5) 	<ul style="list-style-type: none"> • Failed once (P4) • Failed once (P5)
<ul style="list-style-type: none"> • Time spent doing homework <ul style="list-style-type: none"> • 1hr on weekdays (P1) • 20 min on weekdays (P2) • 30 min on weekdays (P3) • 1 hr on weekdays (P4) • 15-20 min on weekdays (P5) • 15 min on weekends (P5) 	
<ul style="list-style-type: none"> • Strategies used by housemothers to improve the child's school marks <ul style="list-style-type: none"> • Talking about marks (P1) • Encouragement (P1) • Communication book (P2) • Doing homework in stages (P2) • Doing homework in a fun way (P2) • Talking to him (P2) • Requests extra help (P2) • Reward system (P3) • Follow up on the child (P3) • Enquire from classmates (P3) • Use of volunteers (P3) • Cooperation between mother & teacher (P3) • Help with homework even if help was unwanted (P4) 	

<ul style="list-style-type: none"> • Paired with another girl next door (P4) • Encourage to read books (P5) • Elder sister helps (P5) • Help with homework whenever necessary (P5) • Talking about future, better jobs, better money (P5) 	
<p>Friends at school according to the child</p> <ul style="list-style-type: none"> • Six (P1) • Four (P2) • Four (P3) • Three (P4) • Four (P5) 	
<p>Absenteeism (school reports)Twice (P1) Once (P2) Not indicated (P4) Twice (P5)</p>	<ul style="list-style-type: none"> • 45 days (P3)
<ul style="list-style-type: none"> • Prize giving ceremonies • Helpful (P1) • Helpful (P2) • Helpful (P3) • Helpful (P4) • Helpful (P5) 	
<p>Behavioural indicators</p>	
<p>1. At children's home</p> <ul style="list-style-type: none"> • Good behaviour (P1) • Soft heart (P1) • Listened to advice (P1) • Behaved well (P2) • Had love (P3) • Showed appreciation (P3) 	<ul style="list-style-type: none"> • Very sensitive, cries easily (P1) • Sometimes rude & cheeky (P3) • Not responsible in taking medication (P3) • Can't say no when asked to do anything (P5)

<ul style="list-style-type: none"> • Can say he's sorry (P3) • Right (P4) • Tendency to talk back (P4) • Stubborn (P4) • Good (P5) 	
<p>2. Strategies to improve behaviour</p> <ul style="list-style-type: none"> • Talk to (P1) • Talk to (P2) • Talk to (P3) • Discipline immediately (P3) • Discipline (P4) • Dance, modelling (P5) • Talk to (P5) 	<ul style="list-style-type: none"> •
<p>3. Adjusting at the children's home – child's perception</p> <ul style="list-style-type: none"> • Adjusted through help of friends (P1) • Easy to adjust , grew up there (P2) • Adjusted, was easy because of siblings (P3) • Had adjusted with help of friends (P4) • Had adjusted , was told by family to adjust (P5) 	<ul style="list-style-type: none"> • Was hard to adjust, some children thought highly of themselves (P1) • Was difficult to adjust, don't remember why (P4) • Was difficult to adjust at the beginning (P5) •
<p>4. Friends in the community</p> <ul style="list-style-type: none"> • Four (P1) • One (P2) • One (P3) • Two (P4) 	<ul style="list-style-type: none"> • None (P5)

<p>5. Dealing with challenges</p> <ul style="list-style-type: none"> • Talk to housemother, friends, siblings, other staff members, teacher when necessary (P1) • Talk to mom & teacher weekly (P2) • People were available when needed (P2) • Talk to housemother & friends at the children's home (P3) • People were available when he needed them (P3) • Talk to housemother & friends from the children's home (P4) • People were available when needed (P4) • People were available when she needed them (P5) • Spoke to housemother (P5) • 	<ul style="list-style-type: none"> • Elder sister sometimes unavailable when needed (P2)
<p>6. Child participation on decision making</p> <ul style="list-style-type: none"> • Yes (P1) • Yes (P2) • Yes (P3) • Sometimes (P4) 	
<p>7. Referrals</p> <ul style="list-style-type: none"> • None (P1) • Yes, for academics (P2) • Yes, for academics (P3) 	
<p>General comments and reactions to family involvement</p>	
<p>1. Child's knowledge of the reason for being in care</p>	<ul style="list-style-type: none"> • No (P1) • No (P2) • Yes (P3)

	<ul style="list-style-type: none"> • Yes (P4) • Forgotten (P5)
<p>2. Feelings about being in a children's home</p> <ul style="list-style-type: none"> • Very happy because it's nice (P1) • OK because it was sometimes nice & sometimes not (P2) • Very happy because was bought what he wanted, go to school & helped when sick (P3) • Very happy because of clothes, food (P4) • Very happy because she had a new home (P5) 	
<p>3. Frequency of thinking about family:</p> <ul style="list-style-type: none"> • Daily (P1) • Missing them (P2) • Once per week (P3) • Once per week (P4) • Once per week (P5) 	
<p>4. Relationship between housemother & family</p> <ul style="list-style-type: none"> • Good (P2) • Good (P3) • Good (P4) • Good (P5) 	<ul style="list-style-type: none"> • Not good (P1)
<p>5. Relationship between family & children's home</p>	<ul style="list-style-type: none"> • Family a client (P1) • Family a client (P1) • Family a client (P3) • Family a client (P5)
<p>6. Role of biological family</p> <ul style="list-style-type: none"> • Visit & be visited by child (P1) • Involved in the child's birthday (P1) 	<ul style="list-style-type: none"> • Not much (P1)

<ul style="list-style-type: none"> • Raising child together (P2) • Speaking the same language (P2) • To be a family (P3) • To partner with housemother (P4) • Encourage the child to learn (P5) • Encourage the child to behave well (P5) • Encourage the child to remain at the children's home (P5) • Buying clothes (P5) • 'Knowing 'one has a family (P5) 	
<p>7. Contact between child & family</p> <ul style="list-style-type: none"> • Enough (P2) 	<ul style="list-style-type: none"> • Not enough (P1) • Not enough (P3) • Sometimes children's home too protective of children (P3) • No bonding between child & family (P3) • Enough contact (P4) • All the time (enough contact) (P5)
<p>8. Child on going home</p> <ul style="list-style-type: none"> • Eager to go (P1) • Happy (P2) • Happy (P3) • Very happy (P4) • Very happy (P5) 	<ul style="list-style-type: none"> • Reluctant at first (P1)
<p>9. Child on returning from home</p> <ul style="list-style-type: none"> • Extremely happy (P2) • Happy (P3) • Fine (P4) • Eventually communicates (P5) 	<ul style="list-style-type: none"> • Loiter around the cottage (P1) • Little bit sad (P3) • Quiet (P5) • Didn't want to talk to anyone (P5)

<p>10. Family involvement</p> <ul style="list-style-type: none"> • Prior to care (P1) • Visits, telephone (P1) • Visit by child to family (P2) • Visits by the child to family (P3) • Prior to care (P4) • Visits by family (P4) • Visits by the child (P4) • Telephone calls (P4) • Prior to admission (P5) • Involved in decision-making (P5) • Visits by the family (P5) • Visits by the child (P5) • Telephone calls (P5) 	<ul style="list-style-type: none"> • On & off (P1) • Demanding , unreliable (P1) • To be closer (P1)
<p>11. Strategies to increase family involvement</p> <ul style="list-style-type: none"> • Build relationship, invite to events, • Outings together, discuss finances (P1) • Visit family (P2) • Find out from them how would they like to be involved (P2) • Children to visit their families more (P3) • Trust that family is capable of looking after its children (P3) • Nothing (P4) • Continue allowing children to visit their families (P5) • Invite to events (P5) 	

Appendix K

Children without any biological family input: positive & negative factors

Without biological family input

Positive factors	Negative factors
School/academic performance	
1. Progress at school	
1.1 Perception of child <ul style="list-style-type: none"> • Doing very well (P8) • Doing well (P10) 	<ul style="list-style-type: none"> • Not doing well (P6) • Not doing well (P7) • Not doing well (P9)
1.2 Perception of housemother <ul style="list-style-type: none"> • Doing well (P6) • Likes school (P6) • Average performance (P7) • Likes school (P7) • Doing very well (P8) • Likes education (P8) • Very independent (P8) • Doing well (P9) • Independent (P9) • Likes school (P9) • Not doing well (P10) • Good with practical things (P10) • Likes school (P10) 	<ul style="list-style-type: none"> • Didn't like the school (P9) • Child not understood by teachers (P9) • Weak academically (P10) • Struggles with reading, spelling, writing & forming sentences (P10)
1.3 Perception of teachers <ul style="list-style-type: none"> • Lovely (P6) • Diligent to her work (P6) • Attained excellent results (P6) 	<ul style="list-style-type: none"> • Lacked the ability to focus effectively (P6) • Poor self-discipline (P6) • Failed twice (P6)

<ul style="list-style-type: none"> • Worked consistently (P6) • Capable of better results (P6) • Healthy self-esteem (P7) • A lot of confidence (P7) • Passed all his grades (P7) • Increased self-confidence (P8) • Gets along well with peers (P8) • Gets along well with teachers (P8) • Gets along with peers (P9) • Gets along with teachers (P9) • Gets along well with teachers (P10) • Gets along well with peers (P10) • Repeated Grade 1, condoned twice, failed most of June exams (P10) 	<ul style="list-style-type: none"> • Lacks self-discipline (P7) • Short concentration span (P7) • Slow in execution of work tasks (P7) • Need much assistance, reinforcement & encouragement (P7) • Fail June exams (P7) • Ability to focus, listen and concentrate dropped (P8) • Experiences no enjoyment in classroom activities (P8) • (Reserved P8) • Lacking self-confidence (P8) • No self-discipline & no responsibility (P8) • Disturbs other children (P9) • Easily distracted (P9) • Unable to follow instructions (P9) • Short concentration span (P9) Lags behind (P9) • Disturbing other children (P10) • Impulsive (P10) • Easily distracted (P10) • Short concentration span (P10)
<p>2. Time spent doing homework</p> <ul style="list-style-type: none"> • 1 hr on weekdays (P6) • 1hr on weekends (P6) • 45min, 15 min, or 1hr on weekdays (P7) • 10-15 min on weekends (P7) • 30 min on weekdays (P8) 	

<ul style="list-style-type: none"> • 1 hr on weekends (P8) • 1hr on weekdays (P9) • 1hr for Maths, 10min for English on weekends (P9) • 5 min on weekdays (P10) 	
<p>3. Strategies to improve marks</p> <ul style="list-style-type: none"> • Use of study time & free time (P6) • Encourage to study (P6) • Ritalin (P7) • Helps with homework by being firm (P7) • Three brothers assist (P7) • Use of study & homework time (P8) • Child ask questions (P8) • Refer to others (P8) • Helps with Maths even though the boy claimed he was coping (P9) • Encourage to read (P9) • Talk about school report (P10) • Assist with homework (P10) • Refer to others (P10) • Pair with classmate (P10) 	
<p>4. Friends at school</p> <ul style="list-style-type: none"> • Eleven (P6) • Five (P7) • Nine (P8) • Six (P10) 	<ul style="list-style-type: none"> • None (P9)
<p>5. Absenteeism (school reports)</p>	
<p>6. Prize giving ceremonies</p>	

<ul style="list-style-type: none"> • Helpful (P6) • Helpful (P7) • Helpful (P8) • Helpful (P9) • Helpful (P10) 	
Behavioural indicators	
<p>1. At children's home</p> <ul style="list-style-type: none"> • Leadership skills (P6) • Good behaviour (P8) • Quiet child (P8) • 'A child without mistakes' (P8) • Open (P9) • Behaved well (P9) • Kind & soft hearted (P10) • Do not fight (P10) • Assertive (P10) 	<ul style="list-style-type: none"> • Know it all (P6) • Tendency to dominate (P6) • Talkative (P6) • Wondering mind (P7) • Loses concentration (P7) • Shouting (P7) • Started to be lazy (P9) • Easily angered (P10) • Sensitive (P10)
<p>2. Strategies to improve behaviour</p> <ul style="list-style-type: none"> • Give her responsibilities (P6) • Calm the child down (P7) • Address behaviour 'there and there' (P7) • Nothing to improve (P8) • Keep reminding (P9) • Don't know (P10) 	
<p>3. Adjusting at the children's home</p> <ul style="list-style-type: none"> • Has adjusted because came as a baby and through her housemother introducing her to everyone and made friends (P6) • Has adjusted because came as a 	<ul style="list-style-type: none"> • Difficult to adjust because was scared at the beginning (P6)

<p style="text-align: center;">baby (P7)</p> <ul style="list-style-type: none"> • Has adjusted because came as a baby (P8) • Has adjusted because came as a child & he got more knowledge (P9) • Had adjusted because he came as a baby (P10) 	
<p>4. Friends in the community</p> <ul style="list-style-type: none"> • Twelve (P6) • About Six (P7) • About Fifteen (P8) • None (P9) • None (P10) 	
<p>5. Dealing with challenges</p> <ul style="list-style-type: none"> • Spoke to teacher, sometimes housemother, friends both at school & children's home (P6) • Spoke to housemother, the one trusted (P7) • People were available when he needed them (P7) • Spoke to housemother (P8) • People were available when he needed (P8) • Prayed, trusted in Jesus (P9) • Spoke to teacher & housemother (P10) • People were available when he needed them (P10) 	<ul style="list-style-type: none"> • Housemother not available when needed (P6) • Spoke to no one (P9) • Housemothers unavailable when needed (P9)
<p>6. Child participation on decision making</p> <ul style="list-style-type: none"> • Sometimes (P6) • Yes (P7) • Yes (P8) 	

<ul style="list-style-type: none"> • Sometimes (P9) • No (P10) 	
<p>7. Referrals</p> <ul style="list-style-type: none"> • None (P6) • Yes, occupational therapist for academics (P7) • None (P8) • Yes, occupational therapist for academics (P9) • Yes, occupational therapist, counselling & educational psychologist for academics (P10) 	
<p><u>General comments and reactions to family involvement</u></p>	
<p>1. Child's knowledge of the reason for being in care</p>	<ul style="list-style-type: none"> • No (P6) • No (P7) • No (P8) • Yes (P9) • No, afraid to ask (P10)
<p>2. Feelings about being in a children's home</p> <ul style="list-style-type: none"> • Very happy because met children she was never to meet (P6) • Happy because he has friends (P7) • OK – 'comfortable' because he didn't know he was going to be there, liveable place, food, shelter (P8) • Very happy because it was nice and was having fun (P10) 	<ul style="list-style-type: none"> • Sad because he didn't see nor talk to his parents , no relatives, no cousins (P9)
<p>3. Frequency of thinking about family:</p> <ul style="list-style-type: none"> • Once per month (P6) • Zero- ' don't think about it at all' (P7) • Once per month (P8) 	<ul style="list-style-type: none"> • Also when children in class spoke about their families (P6) • Cries daily about missing family (P9) • Feels alone and very sad (P9) • Longing to see and communicate

<ul style="list-style-type: none"> • Daily (P9) • Didn't think about them (P10) 	<p>with family (P9)</p> <ul style="list-style-type: none"> • Hopes family is looking for him (P9) • Worries that family might not find him (P9)
4. Relationship between housemother & family (N/A for P6-P10)	
5. Relationship between family & children's home (N/A for P6-P10)	
6. Role of biological family (N/A for P6-P10)	
7. Contact between child & family (N/A for P6-P10)	
8. Child on going home (N/A for P6-P10)	
9. Child on returning from home (N/A for P6-P10)	
10. Strategies to increase family involvement (N/A for P6-P10)	
11. Contact between child & family (N/A for P6-P10)	
12. Child on going home (N/A for P6-P10)	
13. Child on returning home (N/A for P6-P10)	
14. Family involvement (N/A for P6-P10)	
15. Strategies to increase family involvement (N/A for P6-P10)	

Appendix L

Comparison between children with and without any biological family input (additional information)

Theme	Children with biological family involvement	Children without biological family involvement
Prize giving ceremonies	P1-Joyce* <ul style="list-style-type: none"> ▪ Helpful P2- Mandla* <ul style="list-style-type: none"> ▪ Helpful P3-Small* <ul style="list-style-type: none"> ▪ Helpful P4-Imelda* <ul style="list-style-type: none"> ▪ Helpful P5-Owami* <ul style="list-style-type: none"> ▪ Helpful 	P6-Perseverance* <ul style="list-style-type: none"> ▪ Helpful P7-Tim* <ul style="list-style-type: none"> ▪ Helpful P8-Akha* <ul style="list-style-type: none"> ▪ Helpful P9-Oscar* <ul style="list-style-type: none"> ▪ Helpful P10-Khuthala* <ul style="list-style-type: none"> ▪ Helpful
School exclusion	P1-Joyce* <ul style="list-style-type: none"> ▪ None P2- Mandla* <ul style="list-style-type: none"> ▪ None P3-Small* <ul style="list-style-type: none"> ▪ None P4-Imelda* <ul style="list-style-type: none"> ▪ None P5-Oami* <ul style="list-style-type: none"> ▪ None 	P6-Perseverance* <ul style="list-style-type: none"> ▪ None P7-Tim* <ul style="list-style-type: none"> ▪ None P8-Akha* <ul style="list-style-type: none"> ▪ None P9-Oscar* <ul style="list-style-type: none"> ▪ None P10-Khuthala* <ul style="list-style-type: none"> ▪ None
Dealing with challenges	P1-Joyce* <ul style="list-style-type: none"> ▪ Housemother, friends, siblings, other staff members, teacher P2- Mandla* <ul style="list-style-type: none"> ▪ Housemother and teacher P3-Small* <ul style="list-style-type: none"> ▪ Housemother, friends at the children's home P4-Imelda* <ul style="list-style-type: none"> ▪ Housemother, friends at the children's home P5-Owami* <ul style="list-style-type: none"> ▪ Housemother 	P6-Perseverance* <ul style="list-style-type: none"> ▪ Teacher, housemother, friends both at school and at children's home P7-Tim* <ul style="list-style-type: none"> ▪ Housemother P8-Akha* <ul style="list-style-type: none"> ▪ Housemother, friends at the children's home P9-Oscar* <ul style="list-style-type: none"> ▪ Housemother, friends at the children's home P10-Khuthala* <ul style="list-style-type: none"> ▪ Teacher, housemother
Child participates in decision-making	P1-Joyce* <ul style="list-style-type: none"> ▪ Yes P2- Mandla* <ul style="list-style-type: none"> ▪ Yes P3-Small* <ul style="list-style-type: none"> ▪ Yes P4-Imelda* <ul style="list-style-type: none"> ▪ Yes 	P6-Perseverance* <ul style="list-style-type: none"> ▪ Sometimes P7-Tim* <ul style="list-style-type: none"> ▪ Yes P8-Akha* <ul style="list-style-type: none"> ▪ Yes P9-Oscar* <ul style="list-style-type: none"> ▪ Yes

	<ul style="list-style-type: none"> ▪ Sometimes <p>P5-Owami*</p> <ul style="list-style-type: none"> ▪ Yes 	<ul style="list-style-type: none"> ▪ Sometimes <p>P10-Khuthala*</p> <ul style="list-style-type: none"> ▪ No
Thoughts about biological family	<p>P1-Joyce*</p> <ul style="list-style-type: none"> ▪ Daily <p>P2- Mandla*</p> <ul style="list-style-type: none"> ▪ None, used to children's home <p>P3-Small*</p> <ul style="list-style-type: none"> ▪ Once per week <p>P4-Imelda*</p> <ul style="list-style-type: none"> ▪ Once per week <p>P5-Owami*</p> <ul style="list-style-type: none"> ▪ Once per week 	<p>P6-Perseverance*</p> <ul style="list-style-type: none"> ▪ Once per month ▪ When children in class speak about their families <p>P7-Tim*</p> <ul style="list-style-type: none"> ▪ None <p>P8-Akha*</p> <ul style="list-style-type: none"> ▪ Once per month <p>P9-Oscar*</p> <ul style="list-style-type: none"> ▪ Daily ▪ Feels alone and sad ▪ Longing to see and communicate with family ▪ Hopes family is looking for him <p>P10-Khuthala</p> <ul style="list-style-type: none"> ▪ None
Relationship between biological family and housemother	<p>P1-Joyce*</p> <ul style="list-style-type: none"> ▪ Not good <p>P2- Mandla*</p> <ul style="list-style-type: none"> ▪ Good <p>P3-Small*</p> <ul style="list-style-type: none"> ▪ Good <p>P4-Imelda*</p> <ul style="list-style-type: none"> ▪ Good <p>P5-Owami*</p> <ul style="list-style-type: none"> ▪ Good 	n/a
Strategies used by housemothers to improve the child's behaviour	<p>P1-Joyce*</p> <ul style="list-style-type: none"> ▪ Talk to <p>P2- Mandla*</p> <ul style="list-style-type: none"> ▪ Talk to <p>P3-Small*</p> <ul style="list-style-type: none"> ▪ Talk to ▪ Discipline immediately <p>P4-Imelda*</p> <ul style="list-style-type: none"> ▪ Discipline <p>P5-Owami*</p> <ul style="list-style-type: none"> ▪ Extramural activities (Dance, modelling) ▪ Talk to 	<p>P6-Perseverance*</p> <ul style="list-style-type: none"> ▪ Give her responsibilities <p>P7-Tim*</p> <ul style="list-style-type: none"> ▪ Calm him down ▪ Address behaviour 'there and there' <p>P8-Akha*</p> <ul style="list-style-type: none"> ▪ Nothing to improve <p>P9-Oscar*</p> <ul style="list-style-type: none"> ▪ Keep reminding <p>P10-Khuthala*</p> <ul style="list-style-type: none"> ▪ Don't know
Feelings / behaviour of child when going home	<p>P1-Joyce*</p> <ul style="list-style-type: none"> ▪ Reluctant at first ▪ Now eager to go <p>P2- Mandla*</p> <ul style="list-style-type: none"> ▪ Happy <p>P3-Small*</p> <ul style="list-style-type: none"> ▪ Happy 	n/a

	<p>P4-Imelda*</p> <ul style="list-style-type: none"> ▪ Very happy <p>P5-Owami*</p> <ul style="list-style-type: none"> ▪ Very happy 	
Feelings /behaviour of the child on returning from home	<p>P1-Joyce*</p> <ul style="list-style-type: none"> ▪ Loiter outside the cottage <p>P2- Mandla*</p> <ul style="list-style-type: none"> ▪ Extremely happy <p>P3-Small*</p> <ul style="list-style-type: none"> ▪ Happy ▪ Little bit sad <p>P4-Imelda*</p> <ul style="list-style-type: none"> ▪ Fine <p>P5-Owami*</p> <ul style="list-style-type: none"> ▪ Quiet, does not want to talk to anyone ▪ Eventually communicates 	n/a
Perceptions by housemothers of where child benefits more (children's home or biological family)	<p>P1-Joyce*</p> <ul style="list-style-type: none"> ▪ Children's home because of activities, camps, variety of skills to learn <p>P2- Mandla*</p> <ul style="list-style-type: none"> ▪ Both sides equally <p>P3-Small*</p> <ul style="list-style-type: none"> ▪ Children's home because of good education, clothing, food, shelter, learns about like, different environment makes child to have a broad mind <p>P4-Imelda*</p> <ul style="list-style-type: none"> ▪ Both sides <p>P5-Owami*</p> <ul style="list-style-type: none"> ▪ Children's home because the child gets everything e.g. food, clothes, 	n/a
Strategies used by housemothers to improve the child's behaviour	<p>P1-Joyce*</p> <ul style="list-style-type: none"> ▪ Talk to <p>P2- Mandla*</p> <ul style="list-style-type: none"> ▪ Talk to <p>P3-Small*</p> <ul style="list-style-type: none"> ▪ Talk to ▪ Discipline immediately <p>P4-Imelda*</p> <ul style="list-style-type: none"> ▪ Discipline <p>P5-Owami*</p> <ul style="list-style-type: none"> ▪ Extramural activities (Dance, modelling) ▪ Talk to 	<p>P6-Perseverance*</p> <ul style="list-style-type: none"> ▪ Give her responsibilities <p>P7-Tim*</p> <ul style="list-style-type: none"> ▪ Calm him down ▪ Address behaviour 'there and there' <p>P8-Akha*</p> <ul style="list-style-type: none"> ▪ Nothing to improve <p>P9-Oscar*</p> <ul style="list-style-type: none"> ▪ Keep reminding <p>P10-Khuthala*</p> <ul style="list-style-type: none"> ▪ Don't know

Appendix M

Social relationships and support system

Participant	Friends at school	Friends in community	Support system
P1	6	4	Housemother, friends, siblings, other staff members, teacher
P2	4	1	Housemother and teacher
P3	4	1	Housemother, friends at the children's home
P4	3	2	Housemother, friends at the children's home
P5	4	0	Housemother

Table 3: Social relationships and support system for children with biological family involvement

Participant	Friends at school	Friends in community	Support system
P6	11	12	Teacher, housemother, friends both at school and at children's home
P7	5	6	Housemother
P8	9	15	Housemother & other people
P9	0	0	God
P10	6	0	Teacher, housemother

Table 4: Social relationships and support system for children without biological family involvement