

**An Exploration of the Holistic Development and Wellbeing of Children at Clouds of
Hope Home KwaSani Municipality, KwaZulu-Natal**

By

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This thesis is submitted in fulfillment of the requirements for the degree of Masters in
Conflict Management and Peace Studies.

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DECLARATION

This thesis is the presentation of the unique effort of mine. Every contribution of other people's work used in this paper is to make more clarity to the piece with references outlined respectively as well as the team work, collaboration and research discussions.

This work was done under the supervision of Dr. Tshudin Alain and Dr Dlamini Siyabonga at Howard College, University of Kwazulu-Natal Durban, South Africa

DEDICATION

I dedicate this work to God almighty, my dear husband, mum and Dad

ACKNOWLEDGMENT

This project would not have been possible without the support of many people. Many thanks to my supervisors Dr T. Alain, and Dr, D. Siyabonga, who cautioned and guided my every step on the way making corrections and revisions and helped, make some sense out of confusion. Thanks to my team Dr Ganzamungu Zihindula and Gugu who offered guidance and enormous support. Thanks to the University of KwaZulu-Natal Howard College for awarding me a support to complete this project. And a final thanks to my lovely husband, parents, siblings who endured this long process with me always offering support and love.

ABSTRACT

Children wellbeing is strongly linked to their holistic development and both dependent to the parental support and environmental as well as socioeconomic situation of the country. South Africa is one of the third world countries where the number of orphaned children is growing following HIV/AIDS and the socioeconomic situation of the country is deteriorating. This study explored factors that promote the holistic development of children in Clouds of Hope Home (CHH) taking into consideration the quality of their diets, cognitive growth, psychosocial wellness and the children's participatory contribution in their wellbeing. It used a case study of the CHH on the basis that the centre hosts children who formed part of the study.

A qualitative methodology was adopted in this study and data were collected through 33 in-depth interviews and one focus group discussion. Data for the study was collected at the CHH in KwaSane municipality. Data was analyzed qualitatively using thematic analysis.

Findings in this research study suggested that children at the CHH are predominantly orphans and vulnerable. They face the day to day challenges of dealing with their situation both at school and at the centre. Their responses suggest that they are bullied at school and others face stigma and discrimination due to their HIV status that they live with. As reported during the focus group discussions, the children at CHH, indicated the need to be taken care of by a biological parent instead of a caregiver at the CHH, which unfortunately was impossible as many of the children are dominantly orphans.

We conclude that rural South Africa continues to struggle with situations of orphans and vulnerable children. While their number is on increase, this research finding suggested that not much is being done for them to face their future if they failed to complete their studies. Moreover, the children in CHH had limited choices as to where to further their studies as they depended most on what the centre management could only afford.

Key words: holistic development, Children wellbeing, Cloud of hope home, KwaSani Municipality, OVCs

LIST OF ACRONYMS

ECCD: Early Child Care Development
HIV: Human Immune-deficiency Virus
AIDS: Acquired Immune Deficiency Syndrome
CHH: Cloud of Hope Home
CCF: Christians Children Fund
ECD: Early Childhood Development
UNICEF: United Nations International Children Fund
OVCs: Orphans and Vulnerable Children

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CHAPTER ONE

INTRODUCTION

1.1 Background

The need for wellbeing of a child is well documented globally. Research has shown that for the child to holistically develop, a myriad of elements come to play, amongst which the most crucial are the presence of parents, good nutrition and education. According to Kabita (2010) a holistic approach to child development and well-being considers the whole child, and all of the dimensions that interrelate together as a child grows up rather than focusing on a child's physical or mental development, a holistic approach recognizes that children are made up of interconnected parts: mental, physical, socio-emotional and spiritual. Changes in any one part have an impact on all of the others.

The focus has been on the relationship between holistic development and poverty and its impact on children globally. Wed (2004, 2007) suggests that, emphasis should be on improving the wellbeing of the child living standards in terms of future desirable outcome rather than changing the present state of wellbeing of the child. Ben-Arieh's (2006) critical view considers both the present and future state of wellbeing of the child as they are both interrelated. Their present wellbeing will consequently determine the future wellbeing. Other scholars like Michela et al (2012) have evaluated the concept of wellbeing from the perspective of education and its effects on the child. This study looked at factors that promote the holistic development of children in Clouds of Hope taking into consideration the quality of their diets, cognitive growth, psychosocial wellness and the children's participatory contribution to their wellbeing, taking into consideration that most of the studied group of children were orphans and vulnerable.

1.2 Definition of key terms

Holistic development has been defined a process of self-actualization and learning that combines an individual's mental, physical, social, emotional and spiritual growth. The term can be used to describe forms of alternative education that are based on the more humanistic and democratic outlooks. Its premise is that an individual finds purpose and meaning in life through connections to the natural world, the community and through humanitarian values

(Andrews et al 2002; Myers 2015). According to Andrews et al (2002), holistic development in children focuses on addressing all of the needs of a child's life: emotional, physical, relational, intellectual, creative and spiritual. This perspective to development encourages caregivers and teachers to look at the child as a whole and not focus on the individual parts.

Brought into popularity in the 1960s and 1970s, the holistic approach to child development has steadily become more common and led to the development of alternative approaches to education, such as the Montessori Method. In this approach, traditional fact memorization and passive learning is eschewed for a more open and explorative method of learning and development (Myers 2015).

Children wellbeing: Andrews et al. (2002) defined well-being as 'healthy and successful individual functioning (involving physiological, psychological and behavioral levels of organisation), positive social relationships (with family members, peers, adult caregivers, and community and societal institutions, for instance, school and faith and civic organisations), and a social ecology that provides safety (e.g., freedom from interpersonal violence, war and crime), human and civil rights, social justice and participation in civil society' (Andrews et al., 2002, p.103).

1.3 Orphans in South Africa

Orphans and vulnerable children (OVCs) are the most affected by many natural disasters, wars, violence and infections globally. In the case of this study, anecdotal evidences suggest that orphans and other vulnerable children are most likely to face challenges with holistic development and wellbeing, leading to stunting. A study conducted by Hall and Meintjes (2014) indicated that there were 3.5 million orphans in South Africa at the time of the study, of these, 2.13 million had lost their fathers and 611,000 of them could be classified as maternal orphans while 812 000 had lost both parents. This number was projected to reach 5.5 million in 2015.

The statistics above are indicative of a serious challenge facing South Africa and the realities of children growth and well-being. This in addition to the next paragraph, this justifies the reasons for conducting this research and the motivations behind it being conducted. This study focused on the holistic development of children in the KwaSani local community, a rural area of South Africa.

1.4 The Clouds of Hope orphanage

In order to answer to the issues of holistic development and child wellbeing in South Africa, and specifically in rural areas of the country; initiatives like that of CHH have been undertaken to address the issues. CHH was founded in 2000 by a nurse known as Sister Abigail Ntleko with the vision to improve on the living and health conditions of the indigenous people in KwaSani municipality. This was because of the limited medical facilities and services, as well as the HIV pandemic that spread throughout the area causing the death of several parents leaving vulnerable orphans behind and in most cases with no relative to carter for them as reported by Sister Abigail. The increasing number of orphans on the streets, around neighborhoods in the community stirred up empathy and the need to accommodate these vulnerable children. The quality of the children's lives with regards to wellbeing is above mere survival (Mue, 2012).

1.5 Reasons for choosing this topic

Wellbeing during childhood is the fundamental human right of the child. UNESCO's constitution ratified in 1946 states "since war begins in the mind of men, it is in the mind of men that defenses of peace must be constructed." Since then, its objective has been the promotion of education globally. Ensuring this secure a better future for the community of KwaSani. The indicators after the research will play a significant role in formulating policies related to child issues for policy makers, practitioners working in areas of child wellbeing and future outcomes for children in the near future. Early identification of problems will enable service policies to respond in a timely and effective manner to changing needs. This research will also result in a more efficient use of resources and prevention of greater long term costs. Identifying successful strategies through gathering of evidence of effectiveness of interventions after the research allows for policy to be specifically targeted and accurate assessments made to potential outcomes in different settings and contexts. The study was conducted in a developing and rural community; where infant mortality is high, children are abandoned, vulnerable to illnesses and such has an effect on the future generation of KwaSani and rural South Africa at large. Getting the children involved, actively participating and contributing their opinion throughout the research's efforts to measure and monitor their wellbeing thereby evaluating child's wellbeing from a holistic perspective aided this research study to reach its objectives and generate policy recommendations based on findings.

1.6 Research problems and objectives: Key questions asked

- 1 Is holistic child development adequately represented by the following categories: physical, psychological wellbeing socio-economical and cognitive developmental variables?
2. Do these categories provide flexibility for cultural settings in Clouds of Hope Home, KwaSani municipality?
3. Can the activities for each category be predicted during investigations? Can predicted indicators attain to goals/objectives of the study?
4. How can these categories provide a richer understanding and improvement of the quality of life of these children at Clouds of Hope Home?
5. How can these categories serve as a guide in improving curriculum and development for children's studies?
6. Will the categories provide the basis for assessing the developmental progress for individual children or groups of children in KwaSani municipality?

Research problems and objectives: Broader issues that were investigated

This research study's objectives and issues investigated were guided by the UNICEF' (1981 & 1984) specifying that generally, families which are not able to meet basic needs suffer from extreme poverty; therefore the children of such families suffer lack with the greatest severity. Not only is their physical development limited but their lives are at risk and they have insufficient intellectual and effective development. The problems to be investigated will include the living conditions of the children, the nutritional content of their daily diets, food security, economic state of parents and care givers as well as the availability of health and educational services. There is the need to consider the economic and social welfare of the children. Through these measures, the root causes of major problems of this community will be identified and can therefore be prevented.

Vijaya (2010) asserts that despite the complexities of these factors, it unanimously offers a holistic approach to analyze multilevel and interactive influences of child development. Proper sanitary conditions, the protection of children from environmental health hazards, appropriate educational institutions and health units are a necessity. Children are highly exposed to environmental toxins especially those who live in poor communities due to poor sanitary conditions and limited waste management services. According to Needleman (1979) most diseases are aggravated by pollution. KwaSani municipality experiences poor housing infrastructure and pollution burden. Due to their physiological tenderness, children are vulnerable than any other age group to toxic effects of environmental

pollutant. The disproportionate impact of environmental health threatens the future generation. The health of the Kwasani local community can be determined by the health of children in this community. Children are exposed to diseases, vulnerable to sexual assault especially the young girls. These claims were investigated in course of this research study.

1.7 Structure of dissertation:

Abstract:

Chapter one

Introduction and Statement of Intent

This research will be investigating the wellbeing and holistic development of children in the KwaSani municipality, with the objective of identifying factors that limit the wellbeing of these children. Having identified these factors, concrete analysis can be drawn which will help policy makers in children's institutions to improve upon present policies. The research will also give a reflection of the situation at stake and suggest possible solutions to improve the living conditions of children not only in the KwaSani but in other developing rural communities as well. This chapter will also consider the historical context and the major challenges facing the members of the local community in the KwaSani municipality specifically children.

Chapter two

Literature review and Theoretical framework: This chapter will consider previous articles that have been written in relation to the holistic development and wellbeing of children, interlocking findings, unstudied areas, unanswered questions and measures to answer these questions or bridge these gaps.

Chapter three

Research Methodology

Chapter four will consider previous theories which will lay the foundation on which the research will be established. Also the chapter will consider the method with which the research will be carried out. It will take the form of interviews using questionnaires based on qualitative and quantitative information coupled with discussion sessions with the children.

Chapter four

Research Analysis of Results and discussions

In this chapter, the researcher will indicate how the anticipated outcomes will be interpreted to answer the research question and identified challenges in the local community. It will be extremely beneficial to anticipate the range of outcomes from the analysis which will facilitate the formation of proposed interventions to combat these challenges.

These results will build the final-analysis of the research and will help provide valuable and useful indicators in improving childhood development and globally.

Chapter Five

Conclusion and Recommendations

This chapter will comprise the overall conclusion of the study including literature and fieldwork findings. A few recommendations were made to policy makers and other governmental and non-governmental entities that deal with children wellbeing and the holistic development in South Africa.

Against this backdrop and based on the sparse literature documenting African situation of child holistic development, this chapter presented a background to the entire study, the problems and objectives investigated and justified the reasons for this research as well as the structure of the dissertation followed by a short conclusion to the chapter.

CHAPTER TWO

LITERATURE REVIEW & THEORETICAL FRAMEWORK

2.1 Introduction

Chapter two analyzed previous literature related to holistic child development and wellbeing. It served as a guide to this project and gave attention to the limitations of the previous studies; signpost unsolved problems and recommended solutions. Terre Blanche and Durrheim (1999), point out that the literature review involves more than merely citing as many sources as possible, but highlights pertinent literature and contributes to the field by providing a novel and focused reading of current studies. A thorough and critical review of existing literature was conducted to access all necessary reports, books, papers and briefs that this review was made up with. In order to link this study with the research problems, aims and objectives, the literature review was structured around: the global perspectives on holistic development of children, the wellbeing and holistic development of children in Africa and South Africa specifically, the barriers to wellbeing of children in Africa and South Africa as well as the consequences of the failed holistic development of a children in their old age. This is followed by a section describing factors that contribute to the holistic development and wellbeing of children and the role of biological parent in the holistic development of children. To this adds a theoretical and conceptual frameworks on ecological systems and social cognitive theories, after which a short conclusion of the literature review chapter is drawn.

2.2 Global perspective on Holistic Child Development

Child development is crucial and early ages are the stage at which caregivers ensure that the necessary care and support are given to a child for his/ her holistic development which ultimately contributes to the child's wellbeing. Jacquelynne (1999) conducted a study centered on the evaluation of the child wellbeing of age group 0-16 years based on several variables including but not limited to: the child's educational level, occurrence of problematic behaviors and parental assessment. The research was based on the child's present condition which included the basic necessities of the child, physical, educational participation and psychosocial behavior. Only parents, especially mothers were actively participating during the interview. Children's opinion was ignored. The absence of the children's self-reported information discarded a wide range of valuable data thereby limiting the scope of the information.

In the second study, Joris (2008) used a national representative sample for young people and their parent's assessment of life satisfaction between adolescent and adulthood. Qualitative and quantitative indicators were used. Only teenagers above 17 were allowed to respond to the questionnaires leaving out adolescents. Fattore et al (2007, p. 5) argue that if one is to adequately measure children's wellbeing, then children need to be involved, actively participating and contributing their opinion throughout the research's efforts to measure and monitor their wellbeing.

Similar to the above, Elizabeth and Jennifer (1998) conducted a study that compared relative influence of family structure and parental conflict and assessing the extent to which family structure and parental conflict affects the wellbeing of children and adolescent between the ages of 10-17 years. The study focused on negative effects and their outcomes on children. Amato and Keith (1991) concurred that divorce is stressful to both parents and can greatly affect the children. The entire divorce process is usually a difficult transitional period for children as they undergo psychological, emotional and sometimes physical stress which hinders their development and wellbeing. This study was somehow limited in the sense that, attention was given only to family structure and parental conflict as reasons limiting children's wellbeing. Emery (1982) argued that it is critical to understand the extent to which parental conflict affects child's development and wellbeing.

A study by Jane (2007) documenting parental work arrangement and child development in Canada between year 2002 and 2004 revealed that most parents were employed and left their children being taken care of by baby sitters or older siblings. Another study of employment rate of single and married parents in America and Britain in 2006, by the same author showed high rate of employed parents; 68 percent of parents were employed in Canada and 70 percent in America and Britain. The study also indicated that the parents spend 35 -50 hours per week at their job sides (Jane 2007). The long working hours implied working parents spent less time with their children. Duxbury and Higgins (2003) affirm that long working hours increases stress and depression to parents who in turn give very little attention to their children cognitive, social and emotional development. Leibowitz (2005) and Han (2005) suggest these can have an effect on the child's educational productivity. This survey centers on employed parents and their absences from home. Children can grow, develop or survive without their parents. There are other reasons that slow down the development and wellbeing of children. Some children are raised by caregivers or foster parents who later on turn out to be responsible adults.

According to Kenneth (2007) if we are to adequately measure children's wellbeing, we must get them involved at all stages of the research processes. This research study focused on the opinion about wellbeing from the children in Clouds of Hope Home in the Kwasani municipality in order to meet up with the shortcomings of the previous literatures.

2.3 Holistic Development and Child Well-being in Africa

Africa is the continent that is most affected by everything that negatively affects human wellbeing including war, conflict, political unrests, hunger, malnutrition and diseases. Children are the most affected population groups based on their age and body susceptibility to infections. Dawes & Donald (1994) are of the view that many African children flexibly adapt to difficult and changing times more than other races. This may be explained by the prolonged conflicts, physical aggression, poverty and the HIV/AIDS epidemic characterized in Africa. These protracted wars have destroyed the health and educational structures of many African countries, HIV/AIDS has led to the loss of many lives rendering many children orphaned, homeless and vulnerable leading to high infant mortality rates. The need for urgent intervention by government and civil societies cannot be over emphasized (UNICEF 2004, World Vision 2005). These interventions should focus on critical areas that interact with children including the environment, socioeconomic, health and culture.

Research carried out by UNICEF in 2006 evaluated the environmental relationship that promotes early child development within a socio economic context (Bronfenbrenner, 1979). Part one of the study centers on the quality of Early Childhood Development (ECD). It focuses on the factors that limit and encourage the wellbeing and development of young children taking into consideration the holistic approach which entails the health of the child, the quality of meals, education, environmental safety, recreation and a balanced emotional stability. The above factors are to prepare or program the child for a successful adulthood. Parents and care giver are called upon to implement the holistic approach at home and in schools. Governments which have enacted the Convention of the Right of the Child into their constitution as well as non-governmental organizations, have to ensure and promote the application of these laws favoring children. These can be done at local, regional and at the national levels through the provision of grants and subsidies to families and schools to promote the development of children (UNICEF and UNESCO 2007).

The research emphasizes early development from birth; this includes the child's physical growth, learning locomotive, his or her emotional strength as well as social interaction with

family members, peers and his or her immediate world (Vygotsky, 1978). The above solely depend on the eating of balanced meals, favorable living conditions, mental stability and readiness to for schooling. The first three to eight years of the child's life according to David et al. (2003) is very important due to the fact that the brain develops faster during early years and is facilitates familiarization with the living environments. Gopnick et al. (1999) assert that brain development during early child growth is critical to the general body formation and fitness as its development depends on, and is sensitive to good nutrition, anxiety, depression and happiness, all of which can result in a mal- or right-functioning of the brain. For this to be achieved, the study incorporated certain strategies to improve early child development such as the prevention of risk that may expose children to environmental and psychological danger (Blakemore & Frith, 2005). For children to rise up to their full potential, the research laid emphasis on high-quality nutrition for the children with specification of food nutrients such as breast milk, iodine and iron especially during the first two –three years of the child's life.

Additionally, children need be healthy so as to boost their immune system sufficiently to resist diseases. Clean environments and the availability of sanitary services are also vital for effective early childhood development. Loving relationships in accommodative and secured environments creates emotional security and lays a ready foundation for early learning. There is a significant connection between parent's attitude and children's response in order to understand children's interactive behavior (Denham et al, 2002). Furthermore, the study highlights the role of the government which is to ensure that every child even the less privilege have access to the resources provided for their upbringing. Ensuring early child growth involves the promotion and protecting of women's rights since children are so attached and connected to their mothers during early years (Laible et al, 2008).

Part one of the study shows three major steps to secure a long life span for children; these entail good basic services for children, standardized practices at home and the community; a-break down considers Micro Level engagements that involves decision making, behavioral patterns portrayed by parents and caregivers, within the family circles, firstly, this involves the role parents and care givers play in raising their children at home. According to this study, children copy more of what they see and hear at home, in other words their future behaviors in most cases turn out to be a replica of their parents' or legal guardian characters, The reasons for this is because parents and legal guardians are the first set of people the children know and are familiarized with during the first few years of their lives before engaging with

outer world. In this light, children experience a greater influence at home than anywhere else. The Meso Level deals with facilities and services provided to the community by the government. This calls for government intervention through policy making and establishing institutions and services such as hospitals, schools, sanitary services, recreational centers that enhances the wellbeing and holistic development of children. The study emphasizes the role of government bodies to revise and improve laws frequently that favor's children. The Macro Level involves government policies, grants provided to sustain and promote child development such as free food, medication and educational facilities and services. Finally at the Mega level, the goals and targets, financing of projects that fosters the rights of children at the international level (UNICEF, 2006).

2.4 Early childhood Development

Part two of the project deals with practical experience in implementing Early Child Development policies in some regions around the world such as Brazil, Kenya, and Ghana among others. This process was facilitated by the creation of relationships with families through “ Interactive Early Child Development Kit” on family capabilities, assist family to care for their children especially below the age of one year, motivating families to always provide basic necessities for the home as well as propagating the registration of all newly born babes especially in under privileged communities. The study focused on the holistic approach because it's the child's right to a good and healthy life according to article six of the Convention on the Rights of the Child. The holistic approach is effective as pediatricians; nutritionists and psychologists in child development have accredited it to be successful as child growth and resilience to sickness are interconnected. The holistic approach is necessary for the millennium development goals, one of which is reducing poverty during early childhood. However the study indicated the difficulties in implementing early child development policies in countries which do not give adequate attention to children's wants and needs. Additionally, the implementation of these policies may take a long period time which is usually cost effective and time consuming which limits these findings. The above literature will guide the research being undertaken in KwaSani municipality in the direction of rating and identifying possible intervention measures that are less costly, less time consuming and are easily applicable by the administrators, vulnerable and orphaned children in Clouds of Hope Home (CHH) and in the KwaSani local community.

Deters (2008) carried out a research on early child care development and living conditions of orphans and vulnerable children in Ghana as well as on the intervention and

response of Early Child Care and Development (ECCD) to the needs of helpless orphans and vulnerable children. This study outlined several indicators as causes of the numerical increase of orphans and vulnerable children in Ghana. These include—the spread of HIV/AIDS as a result of rural urban migration, economic factors such as poverty and unemployment, social ills like societal stratification which caused many orphaned and vulnerable children to go beyond family ties to fend for themselves. A similar report by UNICEF, (2005) stipulated that by 2014, there will be over 603,000 orphans and vulnerable children in Ghana. The Ghana AIDS Commission, (2005) reported that 50% of the population is below 18years of age, 14% of the population is below 5years of age and just 3% of the population are 65 years and above, reflecting that the majority of the population in Ghana are the independent youths. This has raised a lot of concern to the Ghanaian government which is in the process of looking out for strategies to accommodate these youths otherwise these may be a major problem for the future of Ghana. The above research throws light on the effects of HIV on vulnerable children. It also gives reasons as to why orphans are increasing in Africa and will guide this project in KwaSani in assessing and comparing the outcome of investigated reasons for increasing number of orphans in KwaSani municipality.

Most of these children are orphaned as a result of HIV/AIDS. Ghanaian demographics and Health Services (2007) estimated that 2.7% (equivalent to 270,000 Ghanaians, the majority of whom are youths below the age of 17years of age) are infected with HIV. This category lack basic necessities to livelihood. This survey according to the World Bank (2002) considered vulnerability in terms of poverty, abandoned and homeless children, unregistered births, nutritional deficiency, mentally and physically deformed persons, children exposed to social ills such as drug abuse, sexual harassments, and unwanted pregnancy, and youth house hold heads engaged in child labor as a means of survival, including children living with infected parents or guardians. The above stems from the insufficient child related policies in the country. Children continue to suffer vulnerability because they are marginalized. Ghana Statistical Services (2004), shows that infant mortality rate in Ghana is at 64 per 1000. With an attempt to meet up with millennium goals, the government of Ghana has eliminated tuition fees for both nursery and primary schools and as such education at this level is free and compulsory. The above analysis shows how children without guardians in other African countries living out of foster homes are exposed to societal ills and are vulnerable because there is no one to look after them contrary to children living in foster homes like those in KwaSani municipality.

These plans seem realistically untrue one would dare to say, as the increase of students in this educational institution is not compatible with the finances for substance. The increase in students will require more trained teachers, learning facilities and resources. A related study by Addison (2007) asserts that Ghana has for a long time practiced the old traditional method of communal living and has depended on brotherly love among village members to integrate vulnerable children into families. The HIV/AIDS pandemic has weakened this traditional and cultural living. Due to deteriorating economic tendencies, poverty has made families incapable of providing for relatives talk less of orphans coming in to increase their economic burden. In this regard, a similar situation presents itself in South Africa. The increasing number of orphans and vulnerable children has led to the high demand for children institutions and orphanages. The Ghanaian government has established more orphanages, some of which are controlled by non-governmental and charitable organizations.

An evaluation of the research at this stage may present a positive picture and solution to the helpless Ghanaian children. Although children have been incorporated into various NGOs and civil societies, family and orphanages, the attainment of holistic goals in terms of childhood development might be brought to question. Donors do not respond all the time to the needs of these children because it financially demanding. Walker and Monasch (2007) affirm that it costs a budget of over 1.7million dollars yearly for the Early Child Development agency to run an orphanage in Ghana in terms of adequately supplying good food, education and emotional support to the vulnerable children. One would like to consider civil societies and individuals who operate orphanages at small scales. These orphanages have a substantial demand for infrastructure and trained staff. Most of which may depend on the volunteers from the villages who offer their time, homes and services, food as they can afford. This will be a limitation as congestions and over population will be the next challenge for convenient living especially for those infected with HIV/AIDS. Due to overpopulation the children are not properly nourished which affects their development and wellbeing and they may suffer more than ordinary children (Atwine et al 2005; Nyamukapa et al 2008). Objectively, it may be assumed that the problem is being taken care of as material and social needs are being provided to the children, but there is a need to trace the root causes of the rising increase of vulnerable children on the streets of Ghana. Incorporating these vulnerable children into orphanages and foster homes is not the final solution rather it is just a means to an end. Identifying and preventing all the reasons that account for increasing number of vulnerable children will be a long lasting solution. Therefore, the study at KwaSani may help to trace the

root causes of increasing number of orphans within that community and South Africa as a whole. This will also direct the research team in engaging strategic solutions to remedy this challenge.

Scherto (2009) investigates the processes that lead to child wellbeing indicating the critical inclusion of children's opinion in realizing and conceptualizing their wellbeing, while considering children's opinion in the course of observing their wellbeing recognizing modifications in the course of time. The guidelines of wellbeing include framed principles obtained from the universal notion of wellbeing. Ben-Arieh and Frones (2007) are of the view that proper observation of child wellbeing must be done so as to improve the quality of the child's life. Aspects such as educational curricula, learning processes can serve as a guide to monitor wellbeing of children properly. Therefore policies pertaining to children must go beyond theories into practices so as to enhance learning. For Moore et al. (2003) the chronological collection of data can be used in identifying tendencies throughout the investigating period; this is due to the fact that analyzing data, setting up of objectives, considering the cost and practical work goes a long way to reveal indicators that can improve the wellbeing of children. Fattore et al. (2006) argue that children's wellbeing cannot be measured by the quality of education provided to the child as this totally neglects the child impression about the kind of education he or she is receiving evaluating the entire learning procedure. International standards usually consider educational institutions, orphanages while minimizing the child's interaction with other people out of these settings.

From this study, there has been a move from focusing on survival in terms of wellbeing to the factors that prevent or promote wellbeing to the focusing on the child's future potential during adulthood. Ben-Arieh et al. (2001) put forward the argument that children's opinion and skills should be placed alongside the indicators monitoring their wellbeing for effective outcomes. Damon (2004) is of the view that children's involvement in these findings makes the child a focal point of investigation as well as contextualizes related factors the child's association with others, milieu, child's input and policies related to children. The entire study stresses the child's contributions, exclusive understanding and personal discernment of thoughts in the course of learning in improving their wellbeing. According to this study the child stands in the best position to suggest what is good for him or her which can then be put together with other environmental factors. According to Kenneth (2007) if we are to adequately measure children's wellbeing, we must get them involved at all stages of the

research processes. This paper will be helpful in giving children the right to self-reported information focusing on the opinions surrounding wellbeing from the children in Clouds of Hope Home in the Kwasani municipality in order to meet up with the shortcomings of the previous literature. This research would be considered true to a limited extent since child wellbeing cannot be achieved solely by placing the child's voice and opinion about wellbeing and learning processes at the centre of the research (Huitt, 2009a).

Wellbeing is an all-encompassing work from a holistic approach, children's perception will serve only as "one" of the indicators, because other factors such as the parental, caregiver's guide and relationships, mentoring, educating and nurturing the children from birth sets a mental foundation for the child, who grows up primarily with this mind set before attending other external educational institutions. The parent's voice throughout the child's learning process cannot be ignored because the first teachers the children get to know are their parents, such that whatever a child gets to think or say is primarily influence from home. Child wellbeing cannot be achieved only by the child's opinion in the learning process that is why exploring the holistic development and wellbeing of children in CHH in KwaSani municipality involves both the children, care givers and legal guardians (Grathem-Mcgregor and Powel 1991).

Further research by Elizabeth and Jennifer (1998) makes a comparison between relative influence of family structure and parental conflict and assesses to what extent family structure and parental conflict affects the wellbeing of children and adolescent between the ages of 10-17. The study focuses on negative effects and the outcome on children. Amato and Keith (1991) argue that divorce is stressful to both parents and can greatly affect the children. The entire divorce process is usually a difficult transitional period for children as they undergo psychological, emotional and sometimes physical stress which hinders their development and wellbeing. This study is somehow limited in the sense that attention is given only to family structure and parental conflict as reasons limiting children's wellbeing. Emery (1982) argues that it is critical to understand to what extent parental conflict affects child's development and wellbeing

According to Kenneth (2007) if we are to adequately measure children's wellbeing, children should participate at all stages of the research processes.

A study by Becky and Merissa (2009) looks at factors taken into consideration to assess the wellbeing of children from birth to eight years of age. These aspects are considered the most appropriate way of accessing information about the general wellbeing of the child in England and other parts of the world. It compares children from different races, religions and backgrounds, and also examines the developmental changes over a period of time. Areas of focus in terms of early child wellbeing were the child's physical wellbeing, psychological, social, emotional wellness and the child's mental aptitude in school and language skills within family setting, financial status and the community in which the child finds herself or himself (Reinis and Goldman 1980). From the physical perspective, infant mortality, birth weights, physical state of the body, nutrition, recreational activities, exposure to risk, safety manners for children, all of which are evaluated through investigated findings. From birth, vaccination and proper breastfeeding strengthens the child's immune system guaranteeing smooth development within those first few years. Teaching children basic health and hygienic practices goes a long way to lessen future health challenges. Psychological and social wellbeing considers children's behaviors and response to situation and circumstances, the ability to interpret and relate with others. (UNICEF, UNAIDS, USAID, 2006).

The study shows that children with a more stable and healthy mind tend to be more productive in apprehending information and vice versa. The child's performance in school, parental care givers and teachers report on child's attitude towards learning were used to evaluate the child's cognitive development. Policy makers or providers have to continuously improve on strategies to improve the child's development. Serious measures have to been taken to ensure that children's rights are respected and preserved by all possible means because they are the future of the society, community and country to which they belong. Their potential is brought out through the implementation of the policies and care given to them at every stage of their developing process. Moreover, the financial status of parents or care givers predetermines the wellbeing of the child. Studies have shown that children from poor backgrounds are liable to suffer from malnutrition and other related illnesses. And in most cases, when exposed to social ills such as drug abuse, child labor, begging as means of survival, poor children grows up to be poor adults (Culver and Orkins 2009).

Parental care and guidance, and the immediate environment determine child wellbeing as children spend the first few years of their lives at home with parents, caregivers and also with their immediate neighbors. This study highlights the above indicators contributing to child

wellbeing specifically only within the first eight years of their lives, this elementary stage can be considered as a “start off” of the child developing process. But it does not end there because for effective growth and development to be realized, a continuous monitoring has to be done throughout childhood. Therefore this study is biased by limiting attention to wellbeing only within the first eight years from birth (Culver and Gardner, 2007).

Michael and Mary (2007, 2008) examine a holistic strategy applied by the Christian Children Fund (CCF), a nongovernmental organization, and demonstrated how CCF implements these strategies to eradicate the negative effects of war on the minds of young children. The community –based research centers on a holistic based approach to improve wellbeing for African children. The NGO’s goal is to encourage the wellbeing of about 2.5million children in 32 countries around the world acknowledging the importance of a holistic perspective. This took the approach of reuniting child soldiers with their families and community according to the study. The CCF implemented the UN Convention on the Rights of the Child. Following this Convention, the organization considered child’s development from a holistic angle incorporating physical, intellectual, psychological, and emotional aspects. In order for a child to develop as a complete human being, the above aspects must be treated simultaneously; this will require the construction of schools, hospitals and play grounds. But in a war scenario, children are traumatized with the violence and destruction of war and may find it challenging to learn (Connor and Zhang 2006).

For this to be avoided conflict and related consequences must be prevented and in situations where war has already occurred, peace and social interaction must be encouraged for the children so as to enable development and wellbeing. CCF introduced a mental reprogramming to assist children manage depression and psychological trauma caused by armed conflict such that they desire to study. The child’s development is interwoven with neighborhood and cultural settings. In this regard, children turn to behave in different ways due to cultural differences and diverse upbringing. CCF focuses on cultural settings within the African context whereby children are considered to respect and copy from their parents and elders. The African traditions help to build and maintain the African identity, self-respect and the zeal to be resilient in times of war. The reoccurrence of political violence in South Africa for example has led to immoral violence that has traumatized young children and retarded their wellbeing and development at an alarming rate.

In other countries, perhaps many have been kidnapped, and forced into child soldering depriving them from their right to a healthy life and a good education. Prolonged conflicts in Africa present the picture of peace as a myth rather than an anticipated reality this has a psychological effect on children (Corrigan and Watson 2002). The effects of war seriously weigh on children who become orphans and homeless. South Africa has a history of prolonged conflict during the apartheid regime which to an extent may have effects in the KwaSani municipality. Therefore it is the objective of CCF to attend to activities and programs such as the reintegration of child soldiers into communal life, promotion and sanitization of the importance of balanced meals, encouraging mothers to feed their children with nutritive food which enhances peace and healthy living.

The CCF survey presents some of the effects of war on children's wellbeing. But the research is only limited to the causes and effects of war and how it influences child development, whereas there are several other elements that also hinder child development. Africa may be characterized by conflicts, but not all parts of Africa are in conflict. Ghana for example is not faced with any type of armed conflict but studies have shown that the number of vulnerable children and orphans are on the rise due to other factors such as HIV, unemployment, economic crisis and poverty as a whole. That is why the exploration of the holistic development and wellbeing of orphans and abandoned children at CHH in South Africa is broad research which incorporates political, economic and social tenets affecting children's wellbeing. Through questionnaires and personal interviews, the children in CHH in the KwaSani municipality—are given the opportunity to give self-reported analysis of what constitute their wellbeing in CHH orphanage. These findings will bring to light what children's wellbeing and development entails.

2.5 Theories informing the study

Ecological systems theory by Bronfenbrenner (1979) studies the child's development within the context of the system of relationships that forms his or her environment and how these different environments motivates or slows down the child's development. Bronfenbrenner's ecological systems theory focuses on the quality and context of the child's environment. Vijaya (2010) asserts that as a child develops, the interaction within these environments becomes more complex and these complexities can increase as the child's physical and cognitive structures grow and mature. This theory defines complex layers of environment, (the family, school, religion, culture society or the community at large.) each having an

influence on a child's development. This theory has recently been renamed "bio ecological systems theory" emphasizing that a child's own biology is a major environment fueling his or her development.

The second theory is the "Social Cognitive theory". Michelle (2012), centers on Albert Bandura's emphasis on the intellectual capacity of learners and role of participation in the social learning process. Bandura asserted that human beings can learn through observation. By observing others, Gibson (2004) affirms that learners can easily learn and copy by observing their environment, others behaviors and their effects. For Bandura (2004) focus should be on learner's behavior and how he or she assimilates information. Gredler (2009) claims that learner's ability to receive and interpret information in a logical presentation are critical to the acquisition and modification of behaviors. Hill et al (2012) affirms that learners should believe in their own ability to learn as well as focus on self- determined goals as well as normalize behaviors. Emphasis on the role of the instructor during the teaching and learning process is critical to learning. This involves the teachers, peers, and relatives. Eastman and Marzillier (1984) support the view that, the role of instructor or teachers should be reinforcement; thereby creating favorable learning environment that will cause students to be aware of their expectation and motivate student to work towards achieving their academic goal.

The Ecological systems theory is used for this study because it illustrates how children are influenced by the people they live with and the environment in which they spend time. The interaction between factors in the child's maturing biology, his immediate family, community, environment, and the societal landscape enhances the child's development. Changes in any one these layers will have an effect on all the other layers. The words, actions, of the child's family members, teachers and peers are a vital factor for human this development and in a long run determine the outcome of the child (Bronfenbrenner, 2004). This will serve as a guide to the research in evaluating how people and environmental factors affect children's development and wellbeing in Clouds of Hope Home. The Social Cognitive theory will enhance the research's assessment of the children's intellectual ability to assimilating information both at Clouds of Hope Home and in school; to determine their cognitive progress of the children.

2.6 Conclusion

The reviewed literature in this research study showed how factors such as war, conflicts, diseases, poverty and food insecurity among others affect the realization of wellbeing and development of people in Africa. The literature review shows further that wellbeing and development are largely compromised by the continent's history of political instability, underdevelopment and being the world's hardest hit by the HIV and AIDS epidemic. Moreover, the literature review in this research study presented existing information in the field of holistic development and wellbeing of children both across the globe and in South Africa specifically. Guided by the ecological systems and the social cognitive theories respectively, the literature findings suggest a gap on information pertaining to parentless children guarded in a specific place by a non-biological parent or a voluntary organization's employee. These findings act as reference and guiding information in comparison with the study's findings from the interviews and focus group discussions with children at the CHH in KwaMsani municipality. The analysis chapter 'four' provides detailed information of the children's responses and the way the way data was collected is described in the preceding chapter three hereunder.

CHAPTER III

RESEARCH METHODOLOGY

3.1 Introduction

The methodology that guided this study involved me in gathering the data and led me to reaching the study's aims and objectives as anticipated at start. The study was conducted in order to explore and understand the factors that promote the holistic development of children in Clouds of Hope taking into consideration the quality of their diets, cognitive growth, psychosocial wellness and the children's participatory contribution to their wellbeing using a case study of children living at the Clouds Hope Home in KwaSane district Municipality. Many challenges and barriers do exist hindering them from holistically growing. In order to better understand these barriers, an apt methodology and an appropriate research design needed to be adopted. The chosen methodology and research design are justified in the sections that follow.

The methodology adopted was therefore exploratory qualitative study. The sample size comprises 33 children in Clouds of Hope Home. The goal was to obtain data from the respondents. According to Gom (2004) this can be achieved through in-depth interviews and discussions sessions with the children. After obtaining informed consent from parents and legal guardians, questionnaires were used to test the hypothesis, considering the fact that we were dealing with children between the ages of 4-18 respectively. The children were interviewed individually by members of the research team with the help of the legal guardians. All questionnaires were coded along with the consent forms so as to secure information. These questionnaires are suitable tools for approaching certain areas of concern to the research group. These include issues of health, education, food and security, the nutritive content or balanced diets and psychosocial wellbeing. Kerr et al (1995) affirm that questionnaires provide suitable possibilities of obtaining quantitative and qualitative data from the children. They also provided information of management practices of their guardians. These questionnaires were useful for qualifying and quantifying the children's attitudes with respect to health issues, educational mental status.

3.2 Research design

In order to effectively address the research problem, this study adopted a case study approach as research design. The case study approach was adopted in this study based on its convenience and that it allowed me to explore the experiences of children at CHH in far more

detail than might be possible if I was trying to deal with a large number of research participants with the aim of ‘averaging’. According to De Vos et al (2005. p73), “a research design is a...detailed plan for how a research study is to be conducted” This assertion may be read in conjunction with Silverman (2002. p2) who asserts that “if you are concerned with exploring people’s life histories or everyday behaviour, then qualitative methods may be favoured”. Eventually, this is a qualitative study which uses a case study design in order to provide satisfactory answers to the research questions. More importantly, the case-based study of the CHH was used with the aim to unpack questions regarding holistic approach to development and child wellbeing in the rural spheres of South Africa.

3.3 Study Setting

Beck and Polit (2005) refer a setting as the physical location and conditions in which the data collection takes place. The study was conducted at Clouds Hope Home n KwaSane local municipality, a rural area of KwaZulu-Natal province in South Africa as depicted on the map here under:

3.4.1 Map of the city of the KwaSani Municipality



Accessed from: <http://www.localgovernment.co.za/locals/view/76/Kwa-Sani-Local-Municipality#map>

KwaSani is located within the Sisonke District Municipal area an entrance to the Southern Drakensberg, which borders the UKhahlamba Park and a World Heritage site. The municipality is surrounded by the Umkhomazi Wilderness Area to the West, Greater Kokstad to the South West, Eastern Cape to the south Ingwe local municipality to the East and Impendle Local municipality to the north. The area is 1180sq kilometers in extent with a total population estimated in the region of 17,000. The quality of the children's lives with regards to wellbeing is above mere survival (Mue 2012).

3.4 Data collection

Through the case study I was able to collect a lot of details that would not normally be easily obtained by other research designs. The design allowed me to collect very rich data and of greater depth than can be found through other investigational designs (Popper 1959; Thomas 2011; Yin 1993). A further reason for using a case study was because of its strengths to

provide insight for future research and permits investigation of otherwise impractical situations, giving psychological researchers the possibility to investigate cases which could not be possibly engineered elsewhere. The case study design therefore helped me to generate new ideas and was an important method of illustrating theories which helped to show different aspects of how a person's life is related to each other. Hence, the method is important for psychologists who adopt a holistic point of view (McLeod 2008). Secondly, the case study aimed to capture all of the details of the children at CHH which are relevant to the purpose of the study, within their real life context. To do the above, the case study relied on multiple sources of data; including in-depth interviews, Focus group discussions, direct observation and informal conversations (McLeod 2008; Popper 1959; Thomas 2011; Yin 1993). Lastly, this design allowed me to apply an appropriate methodology and rely on the later to investigate the research problem.

Furthermore, the application of case study approach allowed to examine contemporary real-life situations and provided the basis for the application of concepts and theories and extension of methods. During this process, I visited the CHH more than three times together with the research team and observed ways in which children were being taken care of including their feeding and education as well as their safety. The health statuses of the participants were also observed during the face to face interviews and focus group discussions. Prior to and during the course of the study, I had spent considerable time observing the refugee community and engaging in informal conversation regarding their health and access challenges and their views of the South African health systems. These methods allowed me to explore qualitatively the general challenges of children at Hope Home.

3.5 Research Approaches/ Paradigms

In order to document in rich the situation of CHH qualitative methodology was adopted as it allowed gathering in-depth information from the participants. Qualitative methods are invaluable for exploring the complexities of health and people's experiences in particular. However, diverse qualitative methods are available that incorporate different ontological and epistemological perspectives. The methodologies are defined differently from different authors. For the purpose of this study I have considered Burns and Grove (2001) definition of research methodology as the application of all steps, strategies and procedures for gathering

and analyzing data in a research investigation, in a logical and systematic way. The selection of the qualitative research methodology was the core of the research design adopted in this study and probably the single most important decision that I had to make. Furthermore, the qualitative methodology was used in this study because it is the only methodology that deals with subjective data produced by the mind of the respondents and thus allowed me to understand the significance which respondents attached to their environment (Stainback and Stainback 1984).

The term qualitative implies “an emphasis on an examination of processes and meanings, but not measured in terms of quantity, amount or frequency” (Labuschagne 2003). Rather “qualitative research method was used in this study to allow the researcher to understand how research participants perceive their situation and their role within the context” (Katzenellenbogen et al., 2002). The great strength of qualitative research is therefore that it attempts to depict the fullness of experience in a meaningful and comprehensive way (Winget 2005). Since the main aim of this study was to explore the Holistic Development and Wellbeing of Children at Clouds of Hope Home KwaSani municipality, KwaZulu-Natal, a qualitative research approach was the appropriate method to gain such insight. This research gave the participants the unique opportunity to voice their perspectives on aspects that contribute to their wellbeing and holistic growth both positively and negatively, including their successes and failures of their coping strategies, and what they believed should be done to address the problem.

In order to provide a detailed profile of children at hope home, a particular type of qualitative research, a ‘qualitative descriptive approach’, was used in this study. Sullivan-Bolyai et al., (2005. p128) explained that “the goal of qualitative description is not theory development, but the provision of thick description, and adding interpretative meaning to an experience depicted in an easily understood language”. Thus, this qualitative method responded to the goals of the topic undertaken. A qualitative descriptive approach offered me the opportunity to gather rich description about children at hope home and the management of the organisation hosting the children. The focus was placed on direct communication with the research participants, eliciting rich descriptions about their experiences and offering a valuable opportunity to acquire ‘inside’ knowledge about how they see their world. This was made possible by interviewing the participants at their respective living place the “CHH”, enabling them to feel more comfortable. My research experiences and background allowed me “to interact with the participants in an empathetic and understanding manner, in

naturalistic and everyday settings “and with the support of their caregivers (Terre Blanche et al., 2006b. p206).

3.5 Target Population

The study targeted every child who lives in the Clouds Hope Home. The target was aimed only at those who have stayed there for at least half of their lifetime. Although, the managers and any service provider at the centre was targeted but their information was not crucial for the study as the aim was to explore and document only experiences of children at the CHH to be able to respond to the question of holistic development and wellbeing of children in rural South Africa, using the case study of this centre.

We targeted the CHH based on many reasons including, the longtime existence of the centre and the fact that it served the majority of the population that we needed in this study. The second reason was the centre being officially registered as an NGO and having a history of being supported by governmental fund in previous year, making it unique in the KwaZulu-Natal province and in the KwaSane district. Thirdly, the selection was based on the geographic location of the organisation as well as the acceptability and permission granted for the study to be conducted at the centre without difficulties. Fourthly, the experience of children at the centre with interviews, as the manager noted that a few researchers had come to conduct interviews with the children and they have adapted to this situation.

3.6 Sampling strategies

When sampling “hidden” populations like refugees, traditional methods are inappropriate as one cannot rely on household surveys, for example. Methods which dominate the study of hidden populations are: snowball and other forms of chain referral sampling, key informant sampling and targeted sampling (Heckathorn 1997). The method used in this case study was key informant sampling (Bradshaw and Startford 2005). Within this method ideally the first few contacts are randomly chosen, although in reality ease of access usually determines the initial sample. The first sample then provided the researcher an opportunity to identify children to be included in focus groups (Heckathorn 1997).

However, this method has been heavily critiqued, for example Erickson (1979) cited in Heckathorn (1997) argues that due to the fact that the initial sample/contact usually cannot be drawn randomly, the sample is biased towards those that are cooperative; they are seen to lack the claim to produce unbiased results; and will only engage those who are similar to that

of the initial contact. Snowball sampling both excludes and includes individuals and gives a chance to every member to participate (Browne 2005). Samples that are produced are not even close to random samples, as people recruit their friends who are often similar to them. Also the choice of the first person is often biased, as what led the researcher to choose these people needs to be questioned as often it will be strongly biased to personal relationships (Salganik and Heckathorn 2004). Regarding the sample size, the simple advice of Patton (1990, cited in Bradshaw and Startford 2005. p73, emphasis original) is relevant: There are no rules for sample size in qualitative inquiry. Sample size depends on what you want to know, the purpose of inquiry, what's at stake, what will be useful, what will have credibility. And what can be done with available data, time and resources...the validity, meaningfulness, and insights generated from qualitative inquiry have more to do with ... information-richness ... and the observational/analytical capacities of the researcher than with the sample size. Thus, the sample size was not predetermined; rather, factors such as ease of access, ability to network are fundamental. Therefore, the findings in this study was not necessarily generalized to the entire community of orphans and vulnerable children in South Africa but provided insights into this particular social process, practice and experiences that exist within the current context.

3.7 Sample size

The sample calculation was set at 40 key informants and this number was set to increase if the researcher did not reach the information saturation level. The final total number of participants interviewed were 33 respondents. So as to narrow down my sample frame, my population target was the entire community of children at cloud hope home in KwaSane Municipality. The sample included two senior managers of the CHH who provided information about their perceptions, understanding and knowledge of the children in the CHH. The reasons for their inclusion are simply to understand their views and perceptions about holistic development of children and their wellbeing. So the total number of the participant in this study reached up to 33 participants including the manager of the CHH.

3.8 Sample

The number of participants selected to participate in the study was 33 children from CHH. Members of the research team and the managers of the centre assisted with interpretation to some of the children who could not communicate in English properly. To ensure that persons with varying expectations and understanding of what their 'deserved' socio-economic, health and educational status should be, the sample comprised children of all ages and gender.

3.8.1 Accessing the sample

In order to gain access to the sample, I used convenience and snowball sampling methodologies. According to Babbie and Mouton (2001. p139), “convenience samples are people who volunteer to participate in the study”. Thus, I identified the first few participants who were selected on their availability and willingness to participate in the study within the centre, then the managers assisted with the selection of additional participants until the number mentioned above was reached.

The process of accessing other research participants was supported by snowballing. Brink (2001. p141) defined snowball sampling as “a technique that involves the assistance of study participants in obtaining other potential participants”. Newman (2000) indicated that “snowball sampling begins with one or a few people or cases, and spreads out on the basis of links to the initial cases”. The first few participants suggested other participants from their OVC centre who meet the criteria for the study, who were then approached by the researcher. They represented a group of male and female who live in this OVC centre. They all were interested and agreed to participate after all the requirements for participation were read out for them and they consented.

3.8.2 Eligibility criteria

The study considered certain conditions and criteria for inclusion of participants.

- Firstly be living in the CHH for the past five years and above
- Be selected by the management or a fellow respondent who lives with you at the centre
- Able to communicate with both the research team and the management in a language of your choice
- Be able to sign the consent form or have a caregiver who signs it on your behalf

3.9 Data collection methods

De Vos (1998) argued that “the most widely used method of data collection in the social sciences and humanities are documentary sources, observation, in-depth, intensive interviews and questionnaires”. For data collection, I used face-to-face in-depth interviews and one focus group discussion as they were considered to be the most appropriate methods for the purpose of the study. While conducting interviews with participants at CHH, I also made

observations that provided additional information regarding the respondents' experiences. Informal conversations were also carried out prior to and after the interviews with pertaining to children experiences.

Data were collected through a tool that I designed and was approved by my supervisor to be used for data collection. The instrument (interview guide) was taken to the field for use until I completed the fieldwork fully. Instruments for data collection were prepared in advance and approved by the supervisors prior to the data collection phase. Interview guides were used to gather qualitative information and this was seconded with data from unstructured interviews conducted with centre managers. The interview guide was comprised of three sections including: the demographic details of the respondent, the second part the social characteristics and the third section is the related questions. The interviews were tape-recorded under the permission of the respondents. In-depth interviews were conducted through which rich data were provided which revealed the meaning that the children at the centre attached to their situations. Data gathered through these interviews were supplemented by information collected through observation and informal conversation with the children.

3.9.1 Face to face in-depth interviews with children at CHH

A primary aim of the study was to gain an in-depth understanding into complex situations that "usually requires semi-structured, in-depth interviewing or observational methods that, though time consuming, often result in a deeper more detailed appreciation of the complicated issues involved" (Bradshaw and Stratford 2005. p72). Therefore, interviews were face-to-face in which the researcher attempted to obtain information, opinions and perceptions from another person(s) (Dunn 2005). Interviews are an excellent method of gaining access to information about events, opinions, and experiences. Questions posed in interviews allowed for open-ended responses as opposed to a simple yes or no. There are various forms of interviewing. Factors such as the nature of the group and the desired outcome determine the interview form.

Interviews with children were unstructured and took the form of life histories and narratives. This approach sought personal accounts of significant events and perceptions determined by the informants, the interviewees, in their own words (Marshall and Rossman 1995). In this research study the face to face interviews were used and yielded very positive responses.

Firstly, the children felt open and encouraged to speak to the interviewer as the interviews were conducted in a space where on the respondents and the interviewers were located until they finished. The second advantage of using the face to face interview was in order to hear from the informant personally how he/she explains the situation that he/she is going through. The research was very flexible and attentive to their responses and engaged with the participants' accordingly as most of the questions were asked to incite the respondents to provide a life history pertaining to their experiences of being at the OVC.

The life histories approach is one type of narrative interview, with the intention to learn about the individuals experience, how he or she understands and perceives the world (Payne and Payne, 2004). Life histories are records of personal experiences, from the past as well as present social events (Payne and Payne 2004). Hence, this was most appropriate to reconstruct the life histories of children. Another reason for the choice of the approach is that it provides not only their present perspective but allows one to give a historical perspective, therefore enabling the researcher to "see how experiences and events come together with reference to some particular issue" (Payne and Payne 2004:24). The nature of the research means that the researcher/interviewer has to inquire into people's individual lives. This method presupposes that people live 'storied lives' and looks to collect information to illustrate those lives (Marshall and Rossman 1995). It is important to note that a narrative approach requires a great deal of sensitivity, a caring relationship (one which is established over time) and trust. This was because as people tell their stories, this will reveal experiences and details which are personal and involve feelings of love, exploitation, hurt, violence, abandonment and much more (Marshall and Rossman 1995).

The decision to use unstructured interviews as a data collection method in this research study was governed by my epistemology and the study's objectives. I used unstructured interviews with a constructivist point of view of social reality and correspondingly design studies within an interpretive research paradigm. With reference to many other researchers in the field; I believed that, in order to make sense of a study participants' world, I had to approach it through the participants' own perspective and in their own terms (Denzin 1989; Robertson & Boyle 1984). No hypothesis was made beforehand and the purpose of inquiry was theory development rather than theory testing.

3.10 Data Analysis

Thematic analysis by Braun and Clark (2006) was used to analyse all the transcribed data. The first step in analysing the data for this research study involved familiarizing and immersing oneself with the data to be analysed. Patterns of all common themes were identified (Ulin et al., 2002). The second step involved the identification of themes that shared the same words, styles and terms used by participants. These themes were used to set up connections. Themes that emerged from the text were used, displayed in detail then reduced to essential points under major themes stated in the objectives. The third step in data analysis was coding. The data were marked according to themes using the research questions as a guide. Step four involved the breaking down and coding of the data into themes. Different concepts expressed by the participants in several ways were grouped together under a single theme. Each theme was then elaborated in more details. The final step consisted of putting together the interpretation of the data, and checking it (Terre Blanche et al., 2006).

In this research study, thematic analysis of content which is suitable for a descriptive presentation of qualitative data was used to analyse the data in this research study (Anderson (2007), because thematic analysis is utilised when the study includes the identification, examination and commentary outlines or refrains in a given data. This research study therefore involved the identification of challenges faces by OVCs at the CHH in KwaSane Municipality. This thematic analysis helped the researcher to organise and describe the data that she collected in very detailed and plenteous way and following all the necessary steps of thematic analysis (Braun and Clark, 2006). Thematic analysis is therefore one method of qualitative data analysis that has gained popularity among healthcare and social science researchers. It has been outlined here and its relative merits discussed providing a working example of its application to data management and analysis throughout the thesis and its adoption in this study was justified and referenced in detail within this paragraph (Buse et al., 2005; Exworthy, 2007; Gale et al., 2013; Pope et al., 2000).

Many researchers in health have used thematic analysis for a comprehensive and detailed analysis of the information collected from participants. The thematic analysis is most used because it is a grounded theory and development of cultural models, requiring more involvement and interpretation from the researcher. Secondly it moves beyond counting explicit words or phrases and focus on identifying and describing both implicit and explicit ideas within the data, that is, themes which captures something important about the data in relation to the research question and represents some level of pattern and response or

meaning within the data set. Lastly, as a narrative approach, framework analysis is a useful and flexible method in and beyond psychology. Hence, the use of this method provided a means of organizing and summarizing the findings from this study (Braun and Clark 2006; Pope et al 2007).

Moreover, the use of thematic analysis in this study is justified with reference to many researchers who have proved the benefits of its use when conducting qualitative studies. Firstly, thematic approach is particularly suitable to analyzing cross-sectional descriptive data, enabling different aspects of the phenomena under investigation to be captured (Ritchie and Lewis 2003). Secondly, researchers' interpretations of participants' experiences are transparent (Ritchie and Lewis 2003). Thirdly, moving from data management to developing the analysis sufficiently to answer research questions can be a daunting and bewildering task for novice researchers. The interconnected stages in the framework approach explicitly describe the processes that guide the systematic analysis of data from initial management through to the development of descriptive to explanatory accounts (Ritchie and Lewis 2003).

The method has five distinct phases that are interlinked and form a methodical and rigorous framework. These phases enabled the researcher to understand and interpret data, and moved from descriptive accounts to a conceptual explanation of what is happening from the data of OVCs at the CHH. The method was very transparent and provided a clearer explanation of the phases of thematic analysis. This enabled the researcher also to explore data in depth while simultaneously maintaining an effective and transparent audit trail, which enhanced the rigour of the analytical processes and the credibility of the findings (Ritchie and Lewis 2003). It is believed that the thematic approach has been gaining popularity as a means of analyzing qualitative data derived from healthcare research because it can be used to manage qualitative data and undertake analysis systematically (Ritchie and Lewis 2003).

3.10.1 Thematic Analysis process

Despite the diversity of qualitative methods, data are often obtained through participant interviews. The subsequent analysis is based on a common set of principles. However, the thematic approach has many similarities to framework analysis, particularly in the initial stages when recurring and significant themes are identified. The process followed by the research to analyze the data consisted of: transcribing the interviews- immersing oneself in

the data to gain detailed insights into the phenomena under investigation- development of a data coding system- and linking codes or units of data to form overarching categories or themes that can lead to the development of the theory (Morse and Richards 2002). Following the steps above provided the researcher with transparency in data analysis. As the literature shows; analytical frameworks, such as thematic networks and the framework approach, emphasize transparency in data analysis and the links between the stages of the analysis (Pope et al 2000; Ritchie and Lewis 2003; Braun and Clark 2006). Central to the analytical processes in thematic approach is a series of interconnected stages that enabled the researcher to move back and forth across the data until a coherent account emerged (Ritchie and Lewis 2003). This resulted in the constant refinement of themes that supported the development of a conceptual framework. Many authors have argued that analytical frameworks such as the framework approach (Ritchie and Lewis 2003) and thematic networks (Attride-Stirling 2001) are gaining in popularity because they systematically and explicitly apply the principles of undertaking qualitative analysis to a series of interconnected stages that guide the process. The above argument proved true throughout the analysis phase in this research study.

3.11 Ethical considerations

Permission from the CHH and participants was sought before conducting the interviews. The anonymity of the participants was guaranteed through the use of pseudonyms. Informed consent was sought and participants were informed of their freedom to withdraw from the study at any time they opt to. The Ethical clearance was obtained from the Ethic Committee at the University of KwaZulu-Natal for the broader study.

Informed consent forms were provided in the respondents' language to read and sign if agrees to participate in the study. The caregivers signed for children who were under the age of 18 years and who could ultimately not sign the consent form. The consent form carried a section that indicated clearly that the participation was voluntary and that the participants had the right to withdraw from the study at any time. I ensured confidentiality and this was communicated even verbally to the participants prior to the start of the interviews.

3.12 Limitations of the study

The limitation of this study related to the sampling technique used. Only 33 children were interviewed. The study was limited based on some distance to travel to the CHH and there

was not enough funding to conduct the study. There was also a challenge with availability of the respondents and the management was involved in a lot more other activities including fund raising, meetings and travels which hindered a regular visit at the centre.

3.13 Fieldwork experience

Like any other research, my field work experience was not very different from that of other scientists. However, some particular challenges faced during the stage of data collection and the discovery of new information made the field work experience dissimilar from some few others. This study's experience has proved hard and challenging. Conducting interviews with vulnerable children and orphans is challenging. In most cases the respondents' reports revealed many other issues going on in their lives. Although not anticipated for the study but the information became crucial as it shed light on the general experiences of children living in similar centres in rural South Africa.

3.14 Conclusion

This chapter presented the methodology used in the study in order to collect the information, analyse and present the later accordingly. A larger part of this chapter provided detailed information on the area where the study was conducted, the instruments used to collect the data, the study population and participants who were interviewed, the procedure and the ethical issues. The last part of the chapter presents in detail the data analysis procedure and the field work experience of the researcher as well as the research schedule and finally a short conclusion was drawn. The following chapter presents a detailed analysis and discussions of the data collected through the above-explained methodology.

CHAPTER IV

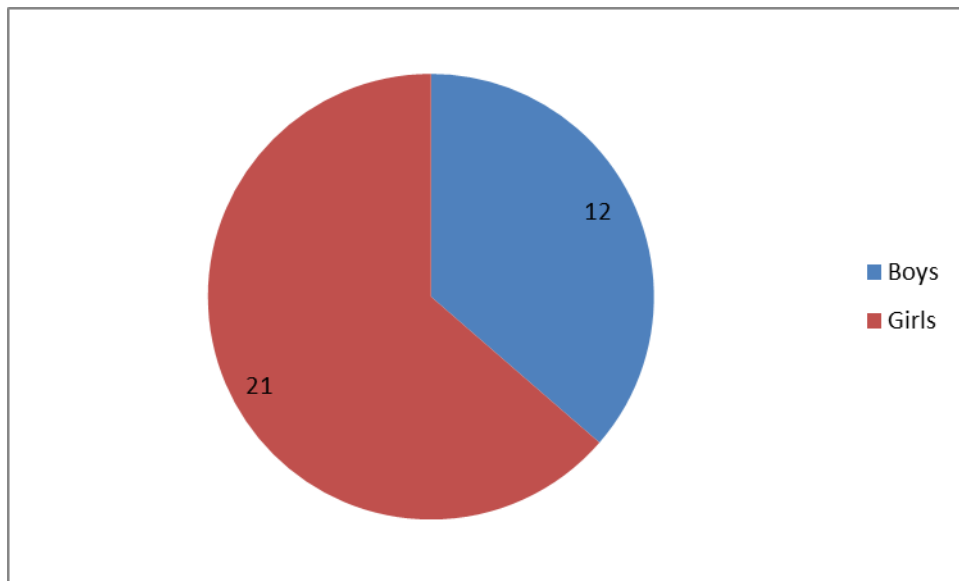
QUALITATIVE DATA ANALYSIS and DISCUSSION

4.1 Introduction

This research study was an investigation of a project carried out in the Clouds of Hope Orphanage in KwaSani municipality, province of Kwazulu-Natal South Africa. The results present an appropriate study of the life style of vulnerable and orphaned children as it reflects the picture of the living conditions under which these children live in orphanages in South Africa. Several visits were paid to Clouds of Hope Home (CHH) by the research team and the research was ongoing while during these visits several findings were realized. The first visit to KwaSani was from 6-9 May 2013 during which the research team was presented with a background and overview of the orphanage and KwaSani municipality by the administration and staff of the organization. The process and procedures of these activities are described in the following paragraphs while the responses from the respondents are quoted and interpreted by the researcher. This section starts with the background of the area where the research was conducted, followed by the demographic characteristics of the respondents then the actual analysis of the responses, which are followed by a brief conclusion of the chapter.

4.2 Demographic Characteristics of Respondents

A total number of 33 children were interviewed and formed part of the focus group discussion. Amongst them were 12 boys aged between five years to 18 years old and females were 21 of whom the youngest was six years old and the oldest was 21 years old.



The high number of female than male in the sample was justified by the management as owing to the fact that many boys leave the CHH at a certain age and find themselves in street lives, while others decide to join their relatives across the country. The management of the CHH gave some background and challenges facing the centre and the above were included.

4.3 Managerial Perspectives of CHH

In addition to the interviews and focus group discussions with the children at the CHH, a few other informal conversations as well as observations were made at every visit to the centre. During these conversation and prior to conducting the focus group discussions, the manager was asked to share the historical background of the CHH with the research team, and her responses were:

“Though it had a challenging beginning, the community and subsequently the government and other charitable organizations contributed food, clothing and other basic logistics within their disposal to meet up with the daily requirements of these vulnerable children”

Sourcing funding for an organization such as CHH especially rural based was reported to be hard. While anecdotal sources indicate that due to major shift in priorities, many orphans and vulnerable children centres find themselves left out when the donors focus target majors priority areas like HIV/AIDS, TB, Malaria and other. This was therefore viewed as one of the most challenge for the CHH to acquire funding for the organization, despite its strive to assist children who are in such situation in rural areas of South Africa. Sister Abigail who is the

manager and founder of the CHH recounted that in 2004, the South African government financed the building project of several cottages which accommodated over seventy two vulnerable orphaned children; lodging six children in each cottage. She added that the South African government enacted the Child Care Act in the Legislation in 2005 and later on in 2012 CHH was registered and officially recognized giving rights of existence and support to the CHH.

During this first visit, Sister Abigail spelled out the objectives of the orphanage; the primary motive was the safety of the children. All the homeless orphaned children that were brought to the orphanage, CHH became their new home and permanent residence until the age of eighteen. She stated that:

“ at the age of eighteen, the children may continue in other higher institutions of learning to pursue the careers and or move to the recently constructed foster home known as the “Half Way house” after leaving CHH”.

According to the views of the management, this is a positive way of taking care of orphans and vulnerable children. The management’s responses suggested that they wished not to help children at the centre only and let them go away after they become teenagers or youth. According to the management, there are other different guidance and orientations as well as life supports given to the children when they turn eighteen years old. According to the respondent, it is therefore a sole responsibility of the organization also to ensure the holistic development and wellbeing of these children. In this regard, the orphanage supports the primary schools into which these children are integrated, regular health services are provided to all the sick children especially those affected with HIV (Roelen and Gassman, 2008).

4.4 Day to day activities and community’s lifestyle

During the subsequent visit to the KwaSani municipality, a visit was paid to the founder’s residence, Sister Abigail, where an interview was conducted between her and the research team. Sister Abigail gave a resume of what characterizes the activities and way of life of the people living in this community. She indicated that:

“Agriculture is the major occupation of most of the inhabitants. Commonly cultivated are potatoes, apples, peaches and vegetables such as spinach and cabbages”.

The respondent suggested that these activities are the most dominant in the area. Her reasons included the fact that the majority of the youth have been educated up to secondary level only. Insufficient educational institutions in the area and the costly nature of tuition fees discourage most youth to go to school. She added therefore that:

“Education is for a few privileged who can afford both tuition fees and means of transportation to study in distant schools far away from home. Due to lack of education, many youth are unskilled and therefore cannot acquire jobs, for the few lucky ones, the resort to minimal jobs such as taxi drivers, cleaners, and security workers among others”.

The responded rounded up this session, emphasizing the need for government intervention; providing free aids, the construction of more health units, schools, and job opportunity for this community. She also stressed the need for the men to create a men’s league that will educate men on how to assume their family responsibilities and protect their women and sisters in the community. She cited the example of the Kiyisa Men’s Project founded in 2002. The initiative group promotes capacity building among the youths and serves as an employment agent and also Civil societies like churches and other support groups, shop owners from time to time provided food parcels, blankets and other necessities to the locals especially during winter.

The responses from the CHH founder and owner, provided a sufficient background to the researcher and an understanding of CHH as well as its mission and vision and the outcomes of the activities and assistances offered to the orphans and vulnerable children.

The second visit to KwaSani was from 4-6 September 2013. This time the research team visited CHH. This session was quite interactive; the administrative head of CHH gave a background history of the orphanage for the second time and welcomed several questions from the research students. These investigations and findings served as a torch light to the research proper, dealing with the exploration of the holistic development and well-being of children living in the orphanage in KwaSani municipality. The research team interacted with the children, building familiar relationships. This was to enhance a cordial and relaxed environment for the children to freely give their views about their way of life in the orphanage.

The third visit to KwaSani municipality was from 23 – 24 October 2013. The research team during this phase critically examined the living conditions of these children at CHH so as to effectively evaluate their holistic development and wellbeing as well as shared activities and feedback from the children's focus group. This process was facilitated with the help of questionnaires comprising of different categories, a breakdown of their holistic life which included questions regarding their health, types of food they eat, how often they eat, their cognitive life, under what circumstances they study, if they were happy living at the foster home with foster parents, questions to their security and safety, their history about their parents, relatives and loved ones, questions about their emotional, psychological and physical satisfaction. During this session, with the help of the administrators and staff of CHH, the children were assembled in the orphanage hall in successful sessions as they returned back to school in order to be questioned by the research team. Every child between the ages of four and eighteen was given a questionnaire to answer and the intent consent form was signed by the administrative head of the organization on behalf of the children in his capacity as the legal guardian of the children. With the help of the foster parents, staff and researchers, the younger ones were assisted in filling in the questionnaires and the older children single handedly answered all the questions. With the supervision of the research team, proper checks were affected to make sure that all the questions were attended to by the children.

The session was more relaxed and playful such that the children felt comfortable enough to express their views without being influenced or pressured. This was critical to the full process because the data gotten from these children determined the outcomes of the entire project. Happily all the children filled in the questionnaires and returned them to the research team. Information was not only gotten from the questionnaires, judging from the children's behaviors, they expressed happiness, a sense of belonging; feeling free, secure and at home. They also demonstrated love for one another. A touching scenario was when one of the HIV infected children was reminded and encourage by fellow peers that it was time to go and get his medication. Brotherly to sisterly love and concern for one another was also remarkable. This session ended with words of appreciation from the head of the research team, thanking the organization for making the hall available and for organizing these children to be interviewed.

The subsequent visit was made to CHH to get feedback from the children on how they felt about the research as well as providing the outcome of study to them

4.5 Feedback from the children at Clouds with respect to the research

The session began with an introduction and appreciation note from the research team headed by the Supervisor Dr. A.Tschudin. This was followed by a question and answer session. The children were asked questions pertaining to information received from the questionnaire. To begin with, some of the children agreed they would like to leave KwaSani to go to other places, so the question was; why do they want to move out of KwaSani? Some said:

“We want to leave because of high crime wave in the community especially at the R2 tavern”

Some of the children were uncomfortable with drunkards who walked pass by Clouds to the location making unnecessary noise and sometimes fighting. They also complained about ways in which the police responded to interventions when the need arises, more so, the police drive pass by Clouds at high speed not mindful of the fact that there are children living in the area.

When asked about their preferred area, some of the children responded that:

We prefer to go to Johannesburg where there are greater job opportunities, and also to Durban because of the beach, Cape Town to see colored people, and overseas to see Lil Wayne the musician”.

The reasons for children wanting to relocate did not however show any motive of development of wellbeing. Instead, many of the children showed the need to visit and be able to meet with celebrities. This called for a need of continued education and advises on their future than thinking about visiting and meeting celebrities. In most cases some of the children mentioned the need for survival instead of wellbeing, while other simply mentioned the need to move away and settle elsewhere without a convincing reason. According to Mue, (2012) the quality of the children’s lives with regards to wellbeing is above mere survival. Some were asked why they didn’t have friends. A few said:

“We don’t trust our mates here because some of them are bad and have negative influences.”

Others mention the need for their privacy and some others said some friends may-let you down. Some said some friends can let you down. Another question was asked about what makes a good friend? Some said:

“Doing faithful, sympathizing, loves you for who you are and not what you have. A friend is someone you can look up to or someone who cares”.

The above descriptions of a good friend by the children at the centre reflected their expectations from everyone who would come into their lives and becoming a friend. This includes service providers at the centre, the police around the area, the researchers who had visited as well as anyone who comes in contact with the children.

Another question was asked about the need to help them with developing friendship skills? Others said by being open to your friends, spending more time with your friends, keeping yourself busy and playing sport with your friend.

The reasons for most of these responses were believed to emanate from the challenges faced by these children that include bullying at school and verbal abuse. They were also asked if they feel loved at home and what makes them feel loved at home? One child after the presentation said that:

“They hit me at school whenever I fail to respond to the teacher’s question”.

Another responded that it is because they do not like the child that smacked the other children at school. One child said he does not feel safe at school. Children were asked what makes them feel special. Responses were:

“We want to be respected by our peers to have their birthday celebrated and getting gifts”.

Some also noted that they feel special when their suggested opinions are being respected, Christmas celebrations, showing other people love, playing games, for another it is when he is going to visit his grandfather and spend time with his biological relatives that makes him feel special.

4.6 Perceived role of fathers

During the focus group discussions with the children, they were asked to cite their perceived roles of the father in their lives. They said that the father has many roles but the most cited were:

“The father has to protect, love, care and provide for the family. Also a good father should not abuse his wife and children”.

According to the children some fathers run away from responsibilities. One of the children indicated he doesn't know his father and doesn't feel anything regarding his father. The following question was what does it mean to be a man? The responses were as follows:

“To work hard, look after their family and make sure his children live healthily and also a man should be able to take up responsibility and stand for himself”.

They were questioned about the role of the ideal woman, they said:

“She has to look after her children, respect her husband, be responsible and provide food for the whole family to eat. She is supposed to be dignified, respect other people, independent, faithful and loyal to her husband”.

The children said unity and love were the most important words for the family. Like Ben's (2008) emphasis on the importance of education to the children, the children at CHH said education prepares them for a better future and guarantees job opportunities for them. This propels them to take their studies seriously at school as well as their homework at home. The majority of the children were further asked what they felt about “Ubuntu” and if they understand the meaning of Ubuntu? Only one of the children knew what “Ubuntu” meant, the rest of the children were rather familiar with the word Ubuntu and not the meaning of the word. When they were asked if they knew the phrase “umuntungumuntungabantu”, the majority of the children were familiar with the phrase. The children were also asked how we improve Ubuntu, they said:

“By communication, helping those in need, respecting others, having role models, Leadership: it is to set an example, show respect and others will learn from your example Steve is an example of a good leader (the administrative head of CHHH)”.

It was encouraging from this quote to find out that children admired some of their leaders at CHH. As many were inspired by them to the point that they used the names of the administrators to illustrate the example of a good role model to children.

After the presentation was done, the children were asked to draw a happy or angry face with regards to the feedback of the project. They all did, the majority of the children drew smiling and laughing faces except for one child who drew an angry face and was shown by his friends, but later on drew a happy face.

The above information indicates two sided information. Firstly some of the children sound positive and are happy living at CHH while others are not. The feeling surrounding the foster homes goes a long way to portray the general unrest and insecure atmosphere especially for vulnerable children living in the KwaSani municipality.

This section presented the analysis of data collected during the Observation, informal conversations and focus group discussions, with children at the CHH. Detailed information has been provided in this chapter based on the responses of the children as well as their caregivers. The chapter is made of a dominant range of direct quotes from the respondents and these are interpreted using the research's qualitative analysis skills.

5. Discussion of findings

Findings in this study are consistent with existing literature on child wellbeing and holistic growth. Research from the UNICEF on this topic suggest that the Department of Health in South Africa sponsors sensitization campaigns to promote moral input in the municipality to combat HIV/AIDS (UNICEF1999-2000). In a municipality like KwaSani, that is characterized by a high rate of unemployment, insufficient housing, inadequate health services, schools, limited transportation means and no grants or aids from the government has relegated the municipality to abject poverty (Sue 2013).The above ills are the driving motivation for Clouds of Hope Home to absorb abandoned and orphaned children so as to remedy this situation as their resources are at their disposal. CHH continues to incorporate more vulnerable children, this rounded up the information gathered during the first visits.

The findings in this research study continue to be similar to a few other studies conducted in different parts of the world. Focus has been on the relationship between holistic development and poverty and its impact on children globally. Wed (2004, 2007) suggests that, emphasis should be on improving the wellbeing of the child's living standards in terms of environmental conditions in order to achieve a future desirable outcome rather than changing the present state of wellbeing of the child. This can hinder early child development and renders the children unproductive in school. For children to properly grow, they require a mental emotional, spiritual and psychological calmness Michela et al. (2012) have evaluated

the concept of wellbeing from the perspective of education and its effects on the child. This study is looking at all the factors that promote the holistic development of children in Clouds of Hope taking into consideration the quality of their diets, cognitive growth, psychosocial wellness and the children's participatory contribution in their wellbeing (Becky and Marisa 2009). The findings of this research may lead to the improvement of the quality of living standards in KwaSani as the outcomes will help policy makers, and individuals ameliorate and reduce crime wave, unemployment and general insecurity in the area.

Findings in this study remained consistent with Meyers (2015) regarding the role of the parent in the holistic development of a child. According to Myers (2015), the parent has to provide encouragement, support and access to activities that enable the child to master key developmental tasks. A parent is their child's first teacher and should remain their best teacher throughout life. Functioning as a coach, the parent exposes a child to age appropriate challenges to encourage development as well as to experiences that allows the child to explore on their own and learn from interacting with their environment. Child Development specialists have learned that from birth children are goal directed to experiment and learn from each experience. Child Development experts have taken the concept of scaffolding from the building trades. Just as scaffolding is put up to support the structure of the building as it is being built and gradually taken down as the building is able to stand on its own, a parent needs to provide the necessary support for a child to allow them to safely and productively explore and learn from their environment. When children were interviewed in the focus group at CHH, they gave similar responses as role of parents to their children.

5.1 Conclusions

This research study was conducted against the backdrop of increase in the number of OVCs in the South Africa, especially those who lose their parents following the scourge of HIV/AIDS. These developments were discussed in this chapter in the context of high rate of HIV infection countrywide leading to an ongoing and forever increasing number of HIV and AIDS related deaths. As such, the research problem was formulated against the backdrop of examining factors that undermine wellbeing and development for OVCs specifically. Fundamentally, this study's findings have shown that KwaSani Municipality is characterized by resource scarcity, high level of unemployment and too many OVCs which in turn motivated the CHH to start providing palliative care to the abandoned and OVCs.

CHAPTER SIX

CONCLUSION AND RECOMMENDATIONS

This research study was conducted with the purpose of exploring the lived experiences of children living at the cloud hope home in KwaSani municipality. Findings in the study suggest that children and specifically the orphans and vulnerable ones face a complexity of challenges in dealing with their situations. This research study, using a case study of the CHH revealed that most of these children have negative experiences of their parents, friendship within the CHH and they also expressed fear related to the un-conduciveness of the environment in which the CHH is located. This is based on their responses suggesting that fathers and mothers' roles are known but not being carried out?

Findings therefore suggest that a similar study is to be conducted in a different rural area and using the same measurement so that comparison is drawn and actual recommendations are made. This research study's findings also verified that the centre management looks not after the children as soon as they turn 18 years old. This is a bit challenging for some of the children to attend. However, given that the study was retrospective and relied on limited population sample, the findings cannot be generalized to the entire community of orphans and vulnerable children living in similar centres in South Africa. However, the results have shed a light on the situation of OVCs in South Africa and specifically in rural areas.

We recommend that research is conducted to document the difference between children living under biological parental care and those in centres like CHH. While such research findings are not expected only to shed light on the children (orphans and vulnerable) situation in the country, the focus is to be on rural areas where there is a high need of assisting such children.

The research also suggests that governmental departments that deal with children including but not limited to the Department of Social Development, the Ministry of women, children and people living with disability as well as the private sectors in the country should focus on rural-based children and prepare their future by providing them with skills and education that could ultimately become beneficial to them as they grow.

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Appendices

1.1 Interview guide and questionnaire

Section 1 : General profile & demographics

1.	2.	3.	4.	5.	6.
Gender 1. Male 2. Female	Your age today	Home language 1. isiZulu 2. siSotho 3. isiXhosa 4. English 5. Afrikaans 6. Other, please specify	Other languages 7. isiZulu 8. siSotho 9. isiXhosa 10. English 11. Afrikaans 12. Other, please specify	Were you born in KwaSani? 1. Yes 2. No If no, how old were you when you came to KwaSani?	Would you like to : 1. Remain in KwaSani or 2. Leave KwaSani. Please explain why.

7.	8.	9.	10.	11.	12.
What education have you completed? 1 Primary School 2 Secondary School 3 University/ Technicon 4. Other (please indicate)	Do you have work? 1. Yes 2. No	If you have a job, what work do you do? Please specify	What is your monthly income group: 1. No – Low (less than R1000) 2. Low (R1000-R4000) 3. Low – Middle (Over R4,000)	What is your marital status? 1. Single 2. Married 3. Separated/ Divorced 4. Widowed 5. Living together	How many people depend on you?

13.	14.	15.	16.	17.
What type of house do you live in? Please choose one option. 1. Brick House 2. Traditional Zulu house 3. Wooden House (not in backyard) 4. Informal house/shack in backyard 5. Informal house/shack in township 6. Other	How many people live with you (including children)	Who lives in your house (not visitors). 1. Biological mother 2. Biological father 3. Step parent 4. Foster parent 5. Brother(s)/ Sister(s) 6. Aunt(s)/Uncle (s) 7. Grandmother 8. Grandfather 9. Other family member(s) (please specify) 10. Non-family member(s) (please specify)	Do you and your brothers/sisters have the same biological father? 1. Yes 2. No	Is/was your father involved in your life? 1. Yes 2. No

18. Who are the people in your house that have a job and what type of work do they do? <i>If unemployed leave the space open next to the category name.</i>			
19.1 Who is employed? <i>Indicate the number next to the relevant category</i>		19.2 <u>If employed</u> , please specify type of work they do in space next to category	
Example: (biological father)		1	Farm worker
A	Biological Mother		
B	Biological Father		
C	Step parent		
D	Foster Parent		
E	Brother(s) & Sisters(s)		
F	Aunt(s)/Uncle(s)		
G	Grandmother		
H	Grandfather		
I	Other family member(s), please specify		
J	Non-family member (s), please specify		

19. How do the following issues affect you? <i>Please indicate relevant response with an 'X' for each category</i>
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Social aspect		Does not affect at all	Has some effect	Has a big effect
1	Drug abuse	1	2	3
2	Alcohol abuse	1	2	3
3	Teenage pregnancy	1	2	3
4	Violence and crime	1	2	3
5	Gangsterism	1	2	3
6	Poverty & Unemployment	1	2	3
7	HIV/AIDS	1	2	3
8	Sexual abuse	1	2	3
9	Rape (forced sex)	1	2	3
10	Emotional abuse	1	2	3
11	Violence in your home	1	2	3
12	Lack of safety at school	1	2	3
13	Lack of parental support	1	2	3
14	Lack of personal care/ neglect	1	2	3
15	Lack of recreational activities	1	2	3
16	Lack of safety and protection	1	2	3
17	Peer group pressure	1	2	3

20. Would you say that the following types of behaviour are acceptable or unacceptable? If you think that it depends on the circumstances, please explain your answer.			
	Social behaviour	1. Acceptable 2. Unacceptable 3. Depends on circumstances	If you indicated nr 3 (depends on circumstances) please explain why you say this

1	Stealing		
2	Looting/vandalising property		
3	Rape		
4	Physical violence		
5	Verbal abuse		
6	Emotional abuse		
7	Urinating on the street		
8	Bunking class		
9	Dropping out of school		
10	Having multiple sexual partners		
11	Smoking		
12	Drinking		
13	Using drugs		
14	Having sex outside marriage		
15	Falling pregnant if not married		
16	Falling pregnant while still at school		
17	Getting an abortion		
18	Using contraceptives		
19	Going out with older men		
20	Having unprotected sex		
21	Same sex relations		

Section 2: Food Security

1.	2.	3.	4.	5.
Do you know what a balanced meal is?	Do you eat balanced meals?	How often do you eat balanced meals?	How many times do you eat per day?	Do you ever miss out on a meal?

1. Yes 2. No	1. Yes 2. No	1. Never 2. Not really 3. Sometimes 4. Often 5. Always	1. Once 2. Twice 3. Three times	1. Never 2. Not really 3. Sometimes 4. Often 5. Always

6.	7.	8.	9.	10.
In the past 4 weeks, did you go to bed hungry because there was not enough food to eat?	Do you enjoy the food that you eat?	Do you ever have to cut the amount of food that you eat because of money?	Do you ever have to cut the quality of food that you eat because of money?	What kinds of foods do you usually have in your house? Please list below.
1. Never 2. Not really 3. Sometimes 4. Often 5. Always	1. Yes 2. No	1. Never 2. Not really 3. Sometimes 4. Often 5. Always	1. Never 2. Not really 3. Sometimes 4. Often 5. Always	

Section 2: Food Security/ continued

11.	12.	13.	14.	15.
Do you have a good water supply?	Do you have a toilet and a place to wash and clean?	Do you grow your own food at home?	How easy is it for you to obtain food?	Where do you mainly buy your food from?
1. Yes 2. No	1. Yes 2. No	1. Yes 2. No	1. Never 2. Not really 3.	1. Supermarket 2. Local Shops 3. Traders

			Sometimes 4. Often 5. Always	4. Farmers 5. Neighbours 6. Other – please specify
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16.	17.	18.	19.	20.
Has there been an increase in food prices lately?	Have you received help from the government to secure food?	Have you received help from NGOs, the church, social groups to secure food?	Have you lost weight recently because of lack of food?	Do you have to travel far to buy food and supplies?
1. Yes 2. No	1. Yes 2. No	1. Yes 2. No	1. Yes 2. No	1. Never 2. Not really 3. Sometimes 4. Often 5. Always

Section 3: Children

1.	2.	3.	4.	5.
How do you get to school?	Do you play sport? If yes, please list.	Do you have books at school?	How often are teachers in class?	Do you feel you are learning at school?
1. Walk 2. Bicycle 3. School Bus 4. Taxi 5. Car	1. Yes 2. No	1. Yes 2. No	1. Always 2. Often 3. Sometimes 4. Hardly 5. Never	1. Never 2. Not really 3. Sometimes 4. Often 5. Always

6.	7.	8.	9.	10.
Do you feel cared for at school?	How many friends do you have?	Would you like more friends?	Are you ever bullied at school?	How do you get on with other kids?
1. Always 2. Often 3. Sometimes 4. Hardly 5. Never	1. Very many 2. many 3. some 4. a few 5. hardly any	1. Yes 2. No	1. Always 2. Often 3. Sometimes 4. Hardly 5. Never	1. Very well 2. well 3. Average 4. badly 5. Very badly

Section 3: Children/ continued

11.	12.	13.	14.	15.
Do you know your rights and responsibilities?	Do you ever get sick?	Do you ever visit the clinic?	Do you get time to play with the other kids?	Do you feel loved at home?
1. Yes 2. No 3. I am interested but do not have info 4. I know of info but am not interested 5. Other – please explain	1. Never 2. Not really 3. Sometimes 4. Often 5. Always	1. Always 2. Often 3. Sometimes 4. Hardly 5. Never	1. Never 2. Not really 3. Sometimes 4. Often 5. Always	1. Never 2. Not really 3. Sometimes 4. Often 5. Always

16.	17.	18.	19.	20.
Do you feel safe in your community?	What special challenges do you face – if any- as children in the community?	Has the government helped you to address challenges?	Have NGOs, the church, social groups helped you to address challenges?	Do you have duties at home like cooking, herding animals etc. If yes, please list.
1. Always 2. Often 3. Sometimes 4. Hardly 5. Never		1. Never 2. Not really 3. Sometimes 4. Often 5. Always	1. Never 2. Not really 3. Sometimes 4. Often 5. Always	1. Yes 2. No

The End

Thank you for your participation in this study. Your opinion is important to us.