Living in a Children's Home and Living in Foster Care: Hearing the voices of children and their caregivers

By

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Submitted in partial fulfilment of the requirements for the Degree in Master of Social Work (MSW) at the University of KwaZulu-Natal.

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DECLARATION

THE REGISTRAR (Academic)

UNIVERSITY OF KWAZULU-NATAL

Dear Sir/Madam

I, Nevashnee Perumal,

Reg. No. 9151436

Hereby declare that the dissertation/thesis, entitled "Living in a Children's Home and Living in Foster Care: Hearing the voices of children and their caregivers", is the result of my own investigation and research and has not been submitted in part or in full for any other degree or to any other University.

N Perumal

Signature

21 February 2008

Date

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DEDICATION

Dedicated to my brother Sundran and my husband Kessie for their unconditional love, never ending encouragement and very strong shoulders…

Like the child participants in this study, I too realise the importance of family.

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Definition of concepts

Prior to presenting the rationale for the study, it is essential to define the main concepts that provided a contextual framework for the study. Following these definitions is the list of acronyms used in the study.

Alternative care: if the child has been placed in:

- foster care;
- the care of a child and youth care centre; or
- temporary safe care. (Children's Amendment Bill [B19-2006] 167:24)

Caregiver: any person other than a parent or guardian, who factually cares for a child and includes amongst others:

- A foster parent and;
- A child and youth care worker who cares for a child who is without appropriate family care in the community (Children's Act 38/2005:18)

Child: a person under the age of 18 years (Children's Act 38/2005:20)

Child and youth care centre (Children's Home): a child and youth care centre is a facility for the provision of residential care to more than six children outside the child's family environment in accordance with a residential care programme or programmes suited to the children in the facility. (Children's Amendment Bill [B19-2006] 180(1):29)

Designated social worker: a social worker in the service of:

- The Department of social development
- A designated child protection organization, or
- A municipality (Children's Act 38/2005:20)

Foster Care: a child is in foster care if the child has been placed in the care of a person who is not the parent or guardian of the child via the processes of the Children's Court (Children's Amendment Bill [B19-2006] 180(1):29)

The White Paper for social welfare (1997) defines the term **Ubuntu** as follows:

people are people through other people. It also acknowledges both the rights and the responsibilities of every citizen in promoting individual and societal well-being. Each individual's humanity is ideally expressed through his or her relationship with others and theirs in turn through recognition of the individual's humanity.

Acronyms

AIDS: Acquired Immune Deficiency Syndrome

BIG: Basic Income Grant

CSG: Child Support Grant

HIV: Human Immuno-deficiency Virus

SASSA: South African Social Security Agency

Abstract

Legislation in South Africa pertaining to the care and protection of children is presently being revised and changed. Should alternative care be necessary for a vulnerable child, the Children's Act 38/2005 prioritises a foster care placement over a child and youth care centre of which a Children's Home is a part. Given the steady decline in traditional family living due to, amongst other things HIV/AIDS, poverty and unemployment in South Africa, the dominant view of family care being prioritised may not always be feasible in reality.

The study researched this view by hearing the voices of children and their caregivers, in both foster care and in Children's Homes by conducting a qualitative study based on the exploratory and descriptive designs A purposive sampling strategy was used as there were clear criteria for the selection of participants. There were two sample groups. One consisted of child participants and the other consisted of caregivers viz. foster parents and child-care workers. Caregivers were included for the purposes of enhancing reliability, validity and trustworthiness of the study. Data was collected by means of semi-structured in depth interviews with the child participants. Two focus groups were held with the caregivers; one with the foster parents and the other with the child-care workers. Both the in depth interviews as well as the focus group discussions were guided by similar themes that were linked to the main objectives of the study. The findings revealed that children's voices were largely absent in decisions pertaining to their well being; that they preferred to live with families of origin as opposed to alternative care and should they be placed in alternative care, foster care was preferred to Children's Homes. The findings further emphasized the need for infrastructural support such as family preservation programmes, financial and social work support for all poverty stricken families and strengthened human resources for Children's Homes. Recommendations therefore centred around ways in which to capacitate families of origin; ways of including children in decision making and the necessary infrastructural support to ensure optimum care for vulnerable children.

Chapter One

1. INTRODUCTION AND RESEARCH METHODOLOGY

1.1 TITLE

Living in a Children's Home and Living in Foster Care: Hearing the voices of children and their caregivers.

1.2 BACKGROUND AND OUTLINE OF RESEARCH PROBLEM

It is the dominant view, supported by legislation, that foster care of which kinship care is a part, is a superior option to care in a Children's Home. This study aims to research this view by hearing the voices of children and their caregivers in alternative care settings who may concur or disagree that foster care is best suited to meet the needs of children in South Africa.

Legislation governing the care and protection of children in South Africa is currently being revised. The Children's Bill consists of two sections : Section 75 and Section 76. Section 75 of the Bill was signed by President Mbeki in June 2006, and is called the Children's Act 38/2005. Section 76 of the Bill remains before parliament. The Children's Act 38/2005 is not operational as yet and social service providers are currently using the Child Care Act 74/1983.

In South Africa, children who are found to be in need of care in terms of the Children's Act 38/2005 should ideally be placed within an extended or unrelated family. According to the Children's Act 38/2005:108 , "a Children's Court may issue an order placing a child in the care of a Child and Youth Care Centre only if another option is not appropriate."

According to the Act, Child and Youth Care Centres which include Children's Homes should be used as a last resort to placing children in need of care since family is seen to be least restrictive in terms of nurturance, care and support in raising children. Children's Homes are viewed as more restrictive and less nurturing and personal elements of belonging appear to be absent (Developmental Assessment of Children Youth and Families, 2000:37). There is much debate among social workers in the child welfare field around the benefits of family care

versus institutional care (McKay, 2002). Williamson (2002) indicates that orphanages are much more expensive to maintain than assisting families to care for children. He further indicates that countries with long-term experience with institutional care for children have seen the problems that emerge as children grow into young adults and have difficulty reintegrating into society. The fluidity, mobility and dispersion of caring relationships in South Africa complicate the definition of a family or household (Morei, 2002). Foster families are known to experience similar challenges. McKay (2002) writes that the experts are predicting that by the year 2010 there will be between two and three million orphans in the country and these experts are asking what will happen when the grannies die? A large number of foster placements are family-related placements and this concern becomes very relevant. Given the steady decline in traditional family living due to HIV/AIDS, poverty and unemployment in South Africa, the dominant view may therefore not be plausible now.

The question that arises is: how does the child feel being placed in a foster home and being placed in a Children's Home and how do caregivers in each placement respond to vulnerable children?

1.3 Preliminary Literature Study, and Reasons for Choosing Topic

The topic was of interest to the researcher as she is employed at the Child and Family Welfare Society of Pietermaritzburg. This organisation is a KwaZulu Natal based Non-Governmental Organisation (NGO), responsible for protecting and promoting the well being of children and families in the magisterial district of Pietermaritzburg. The researcher's experience in working with children and legislation governing the protection of children has heightened her awareness of the developmental needs and experiences of children who grow up in alternative care.

Children growing up in families generally receive the kind of love, attention and care essential to their well-being. The daily life and close relationships within a family lay the foundation for a child's social and emotional development, self-image and a sense of belonging (Olson, Messinger, Sutherland and Astone, 2005).

The authors mentioned further comment that institutional care is sometimes needed as a temporary response for children who have no other means and that institutions can offer short-term transitional care for especially vulnerable children, offering them safe shelter and providing for other immediate needs while searches are made for reliable family care. This reliable family care may be, but not limited to, grandparents, uncles, aunts and other related kin since in the South African context, family no longer refers to father-mother and children only (Tau, 1989).

McKay (1994), refers to first world research having put forward the position that a child needs:

- A limited number of secure caretakers;
- Sensitive, individual attention to create the conditions for bonding;
- The presence of familiar surroundings and people and
- Intellectual stimulation through play and affection to develop intellectual physical co-ordination.

None of the above necessarily add up to love, neither is it limited to a family setting (McKay, 1994:80).

When a child is rendered in need of care, every effort is made to secure a suitable foster placement for the child in an effort to maintain the child within a family environment. A social worker carries this process through with much initial momentum. However, due to the demands and pressures that arise from the statutory process, and other crises that the social worker may have to deal with, foster families may not be supported consistently to care for a vulnerable child (Moodley, 2006, Yoganathan, 2002).

Ball and Bailey in Tod, as early as 1971, referring to social work challenges in England wrote: "In our large county borough there is a system of allocating a childcare officer to each foster home in an attempt to provide continuity and develop the skills of the foster parents, but changes in staff and pressures of other work, tend to detract from the system's effectiveness" (p.131). In view of the above, the challenge that continuity poses to South African families, is neither new nor unique, as social work posts remain vacant for three to six months and, in some instances even longer (McKay, 2002). In South Africa, social work staff turnover is

high in the NGO sector. Foster families may therefore be inadequately supported in terms of social services and reunification services to families of children in Children's Homes is challenging in the same vein (Briede and Loffell, 2005).

It is not uncommon at the Child and Family Welfare Society of Pietermaritzburg, in the process of a traumatic statutory removal and placement of a child, for that child to be seen by as many as three social workers (The Child and Family Welfare Society of Pietermaritzburg – Annual Report, 2004:6). The child's involvement in decision-making on his/her placement options is therefore questionable in light of the above.

There are few community groups that genuinely involve children in the design of interventions intended to support those children. There are even fewer supporting organisations that have involved children (Long, 2007).

Children are the "experts in their own lives" and often bring valuable ideas, information and viewpoints that adults may overlook. It is therefore important to listen to the voices of children, respond to their concerns, and involve them in decisions that affect their lives (Olson, Sibanda Knight and Foster, 2005).

Although children are known and documented to have made submissions for inclusion in the Children's Bill, the Dikwankwetla Action Group set up by the Children's Institute, University of Cape Town, are cited in Jacobs et al (2005) as the only group of children, representing four of the nine provinces in South Africa, to have made submissions for inclusion (Jacobs, Shung-King and Smith, 2005).

The lack of child participation in policy formulation is a key concern (van Niekerk, 2007).

The literature search pertaining to this study revealed limited information on children's experiences of growing up in alternative care and their caregivers' experiences.

Prior research, such as the study done by Giese, Meintjes, Croke and Chamberlain (2003), has focused on strengthening the family and reducing the number of children being placed in Children's Homes. Funders and donors have also shifted to a more community based funding approach. Save Africa's Children/ Pan African Children's Fund based in Los Angeles, California, initially funded orphanages and institutions in Africa directly since 2001, to ensure their survival. In 2005, the focus

of the Fund shifted to support institutions that strengthen families and support communities (Olson, Sibanda Knight and Foster, 2005:23).

1.4 Key Assumptions

The following are the key assumptions of the study:

- The experiences of children in alternative care settings may be overlooked when acting in their best interests.
- Foster families may be inadequately equipped to deal with the challenges presented by children in need of care.
- Children's Homes may be better resourced than foster families to cope with the challenges presented by children in need of care.

This study is envisioned to be worthwhile and necessary in:

- understanding children's experiences of living in alternative care settings
- understanding the experiences of caregivers in alternative care settings
- providing a foundation for further studies
- providing researched evidence in an effort to influence policy
- adding to a body of knowledge in social work practice, specifically in the field of Child Welfare
- offering recommendations to service providers on foster care placements and Children's Home placements in challenging dominant views

1.5 Research Problems and Objectives: Key Questions To Be Asked

1.5.1 Research Problem

There is limited knowledge that exists:

- on children's experiences of living in foster care and living in Children's Homes
- on experiences of caregivers in alternative care settings in caring for vulnerable children

1.5.2 Key Objectives

- To understand children's perceptions of foster care

- To understand children's perceptions of a Children's Home
- To explore children's perceptions and experiences of what is positive about living in foster care and living in a Children's Home
- To explore children's perceptions and experiences of what is negative about living in foster care and living in a Children's Home
- To understand the experiences and challenges of foster parents and of key informants in Children's Homes in caring for vulnerable children

1.5.3 Research Questions

- What was the level of involvement of children when they were placed in foster care and/or a Children's Home?
- What do children identify as positive experiences of living in a Children's Home and living in a foster home?
- What are children's views of what is negative about living in a Children's Home and living in foster care?
- What do foster parents recollect as their positive experiences and challenges in caring for vulnerable children?
- How do key informants in the Children's Home recount their positive experiences and challenges in caring for vulnerable children?

1.6 Research Problems and Objectives

Children are communities' and countries' most valuable assets (Knutsson, 1997). They therefore need care and protection from abuse and harm. In order to protect children, social workers and other helping professionals are commissioned by the Children's Act 38/2005, to act in the best interests of the child. All helping professionals are adults and all caregivers, in alternative care settings, should be adults. It is therefore assumed that adults are best placed to care for and protect children, and in so doing, would also be best placed in determining legislation pertaining to the care and protection of children. According to van Niekerk (2007) professionals traditionally work from a position of authority that is based on hard-earned years of experience and training. Often these qualifications may give one an exaggerated sense of expertise that prevents one from being able to acknowledge that the best experts on childhood and youth might, at times, be children and young people themselves and that their participation does not

necessarily diminish one's expertise and competence but expands and complements it.

Is, "in the best interests of the child," taking into account every boy or girl's wishes and feelings? (Long, 2007). Should this then not guide and influence legislation, bearing in mind that children at different developmental stages need varying degrees of adult supervision and mentoring?

Chama in Williamson (2002) calls for the revival of the old African tenets of extended familyhood and strong community life. He adds that given the strenuous challenges brought about by the HIV/AIDS pandemic, the African extended family is perhaps weaker now than a hundred years ago but the resilience and the spirit of community life is still there for current practitioners to tap into.

Clough (1982) refers to the traditional needs of children coming into care as children either being orphaned or abandoned or needing shelter and food. The needs of children nowadays is neither so obvious nor so precise. The changing expectations and needs of children must be responded to appropriately. In light of these changing expectations, are foster families adequately equipped to respond or would institutions be more appropriately resourced to respond?

This study talks to children and caregivers in an effort to understand their experiences of foster care and care in Children's Homes.

1.7 PRINCIPAL THEORIES

1.7.1 Ecological Theory

Ecological theory is one of the theoretical frameworks used in this study since the experiences of foster care and care in a Children's Home need to be understood at various systemic levels.

1.7.2 Structural Social Work Theory

Structural social work theory is the second theory that is used in this study. This theory will complement the ecological theory. In working with vulnerable children and families in South Africa, the country's history cannot be negated hence the use of structural social work theory giving prominence to macro level issues.

1.7.3 Theories Discussed

Both theories are discussed complementarily as follows:

Ecological and structural social work theories

The ecological approach was pioneered by Germain and Gitterman in 1980. The approach is based on the premise that there exists a reciprocal relationship between living organisms and their environments. Therefore human beings are seen to constantly change through adaptation by acting on their environments thereby shaping the responses of other people, groups, institutions and even the physical environment (Hepworth and Larsen, 1990). This adaptation appears necessary in order for people to cope successfully with environmental influences.

Likewise in the child and youth care system, when a child is considered to be at risk, he/she is removed from his/her natural environment to a safer environment such as foster care or a Children's Home (Children's Act 38/2005). The child therefore needs to adapt to this new environment in order for the placement to be successful. When this does not happen, imbalance is experienced.

The child's functioning is affected on four systemic levels. According to Brofenbrenner in Shaefor et al. (1994), at the microsystemic level the child's relationships with his natural/biological family and/or relationships that the child shared with teachers and close friends are fractured because of removal to a new environment (foster family or Children's Home). At the mezzosystemic level, the child's life may be imbalanced because of being denied neighbourhood influences. This is especially true for the South African context where traditional family structures may be non-existent and systems beyond the family play a nurturing role. At the exosystemic level, parts of the environment that the child may not participate in actively, such as school governing bodies need to be appreciated as influencing childcare. At a macrosystemic level, legislation governing the care and protection of a child is considered, and in South Africa, the Children's Act 38/2005 is the statutory tool that aims to ensure the child's safety.

Ecological theory thus appears to provide an overarching framework to understanding childcare in relation to multiple influences that directly and in interaction impact the child and his/her care (de Vos 2002). However, this

understanding may generate questions and concerns, given the South African context of unequal resource distribution.

Propping ecological theory, structural social work theory may be seen to accommodate key concerns in childcare in South Africa. Structural social work was a term first used by Middelman and Goldberg in 1974 cited in Mullaly (1993). Relating childcare to structural theory, macrosystemic forces are seen to have a powerful influence as follows:

- Different forms of oppression (racism, classism, patriarchy, etc) are not prioritized, rather all relevant influences are accorded due concern.
- Various forms of oppression are seen as intersecting with each other at numerous points, creating a total system of oppression
- The connection between the personal (micro) and the political (macro) is considered significant.

Within a context of recovery from unequal resources for different racial groups in South Africa, structural social work theory accommodates understanding of how certain families were oppressed and under resourced, thereby rendered incapable or only partially able to care for their children. Sewpaul (2005) critically reflects on this in her evaluation of the Draft National Family Policy 2005 (http://www.socdev.gov.za) stating that the policy contains ideological inconsistencies reminiscent of an apartheid era.

In a similar vein, Clough (1982:19) mentions:

"There is a widely held belief that families are the ideal places in which to bring up children or indeed in which any of us, but particularly the dependent, should live. The myth that life is best in families persists in spite of the fact that families are not perfect..."

(and cannot perform duties expected of them because of the depravity in which they live).

Child welfare services aim to be comprehensive and holistic, with family preservation and prevention being prioritized. The focus on family care being the superior option may not always be feasible or in the best interests of the child,

against structural deficiencies. Sewpaul (2005) also agrees that structural concerns such as unemployment, economic oppression and exclusion, inequality and poverty have a profound influence on family coping.

1.8 Research Methodology and Methods

1.8.1 Research Paradigm and Design

A research paradigm reflects the researcher's thinking on the world. It is the researcher's perspective or world view that influences what is considered worthy of investigation. A paradigm further influences how the investigation is conducted and the research methods employed (Shaw and Lishman, 1999).

The qualitative research design was used in this study as the study aimed to compare life experiences of children having moved through foster care and Children's Home placements and caregivers' experiences in caring for vulnerable children. Feelings, thoughts and experiences were taken into account as the researcher obtained an in depth understanding of the children's and caregivers' experiences. Babbie and Mouton (2001), claim that qualitative studies provide deeper understanding and new insights that might escape quantitative studies. It further provides an insider perspective on social action.

1.8.2 Specific Research Design

The exploratory and descriptive research designs appeared most relevant to this study. Bless and Higson-Simth in de Vos (2002) inform that exploratory research is conducted to gain insight into a situation, phenomenon, community or individual. Generally, exploratory research has a basic research goal and researchers frequently use qualitative data to obtain an insider perspective on social action (Babbie and Mouton, 2001). Grinell, (1988) further indicates that the idea of exploratory studies is to build a foundation of general ideas and tentative theories which can be explored later with more precise and more complex research designs and corresponding methodologies.

Rubin and Babbie and Bless Higson-Smith are quoted in de Vos (2002:109) as saying that "description is more likely to refer to a more intensive examination of phenomena and their deeper meanings, thus leading to a thicker description, and a research strategy such as the case study would be applicable."

Exploratory and descriptive research have some similarities but also differ in many respects. Neuman in de Vos (2002) indicates that although descriptive and exploratory research may blend in practice, descriptive research presents a picture of the specific details of a situation whereas exploratory studies aim to become conversant with basic facts and create a general picture of conditions.

This study however, does not imply that the intention of exploration is to merely scan the topic but rather to:

- Test the feasibility of an extensive study
- To determine priorities for future research and
- To add to the limited body of knowledge that exists

Children's accounts of their experiences will illuminate findings in the study, lending itself to the descriptive design.

1.8.3 Sampling and Sample

According to de Vos (2002:199): "we study the sample in an effort to understand the population from which it is drawn." A population is the total number of people with which the research problem is concerned.

In qualitative studies, non- probability sampling methods are used and in particular theoretical or purposive sampling techniques (de Vos, 2002). Denzin and Lincoln cited in de Vos (2002) point out that qualitative researchers seek out individuals and groups where the specific processes being researched are most likely to occur. In this study, a purposive sampling strategy was used. In purposive sampling, a particular case is chosen because it illustrates some feature or process that is of interest for a particular study (Silverman in de Vos, 2002). Therefore, there needs to be clear criteria for the selection of participants.

In this study there were two sample groups, which were drawn from the Child and Family Welfare Society of Pietermaritzburg's clientele population. Sample 2 was derived from sample 1.

The Child and Family Welfare Society of Pietermaritzburg was used to conduct the study as it was convenient to access and the individuals, groups, settings and processes being studied , occurred at this organization.

The criteria for inclusion in the sample were the following:

Sample 1

- All children on the caseload of the Child and Family Welfare Society of Pietermaritzburg, who have been in both a foster care and a Children's Home placement in the period 2003-2006.
- For a minimum period of three months in each of the placements
- Who were willing to be included in the study

The final sample consisted of 13 who consented to participate in the study.

Sample 2

- Foster parents of the participants
- Key informants at the Children's Homes where the children are or were placed.

The abovementioned sample groups provided a holistic understanding of children's and caregivers' experiences in alternative care settings. Sample 2 was chosen by randomizing to select a manageable sample size.

1.8.4 Data Collection Procedures

Since this study involved exploration and description, in depth data collection methods were utilised, which involved multiple sources of information, highlighted above, that were rich in content.

The following data collection procedures were utilized:

In- depth interview

De Vos (2002:292) quotes Kvale in Sewell (2001:1): "qualitative interviews are attempts to understand the world from the participant's point of view, to unfold the meaning of people's experiences and to uncover their lived world prior to scientific explanations."

The participants (children) were the subjects of semi-structured in depth interviews, which were guided by interview themes. These themes were explored in an age appropriate manner, since the participants ranged in age between seven and

seventeen. Seidman in de Vos (2002) states that interviews are conducted because the interviewer is interested in the interviewee's stories. This study aimed to compare children's experiences of living in alternative care settings and caregivers experiences in alternative care settings, and therefore their stories formed the basis of the study. Interviewing the participant not only involves description of the experience but also involves reflection on the description (de Vos, 2002). It was therefore necessary to present the findings and discuss them concurrently as is evident in Chapter 3.

Focus groups

Focus groups were conducted with foster parents and with key informants at Children's Homes with a view to collecting data through probing and group interaction. Focus groups are group interviews where participants are selected because they have certain characteristics in common that relate to the topic of the focus group. Kreuger and Kingry et al are cited in de Vos (2002) as defining the focus group as a carefully planned discussion designed to obtain perceptions on a defined area of interest in a permissive, non-threatening environment. In this instance, foster parents were engaged in one focus group and key informants of Children's Homes in another focus group, to explore and gain an understanding of their experiences and challenges in caring for vulnerable children. The foster parent focus group was chosen by randomizing to select a manageable sample size. One childcare worker was chosen from each Children's Home where the child participants were placed, as key informants. Two focus groups were therefore held to enhance reliability, validity and trustworthiness.

- Focus groups were a preferred sample for the following reasons:
- Participants were envisioned to lend support to each other
- Different ideas were anticipated to be forthcoming and participants were expected to build on one another's views
- Common themes were anticipated
- Focus groups were considered to be time economical as opposed to individual interviews

1.8.5 Reliability and Validity

According to Babbie and Mouton (2001), a qualitative study may strive towards objectivity, validity and reliability but may never truly attain this.

De Vos (2002) indicates that in quantitative studies the assumption is that the universe is unchanging and an inquiry could quite logically be replicated. This assumption, is however, in direct contrast to the qualitative assumption that the social world is always being constructed, and the concept of replication itself is problematic. The generalisability (validity) of qualitative findings is challenging and it is therefore imperative for the researcher to employ other methods such as triangulating multiple resources to enhance the study's generalisability.

In this study, in depth interviews with children and focus groups with foster parents and key informants at Children's Homes enabled triangulation to take place by allowing the researcher to corroborate, elaborate and illuminate the same phenomenon, thereby enhancing the contents and methods validity of this study (de Vos, 2002). Triangulation further enables one to be sure that the findings are reflective of the subjects and the inquiry itself, rather than a creation of the researcher's biases or prejudices (Marshall and Rossman in de Vos, 2002).

Since the aforegoing suggests that reliability and validity is challenging to outline in qualitative research, trustworthiness appeared to be more appropriate to use in qualitative studies (Babbie and Mouton, 2001).

Lincoln and Guba cited in Babbie and Mouton (2001), base trustworthiness on four constructs:

- Credibility
- Dependability
- Transferability
- Confirmability

Credibility and Dependability

In this study, credibility was addressed through triangulating multiple sources of information to corroborate, illuminate and elaborate children's experiences of living in foster care and living in a Children's Home. To this end children and their

caregivers participated in the study. This was seen to further add to the study's dependability. If a study is credible then it will be dependable, drawing a comparison to quantitative studies where validity cannot exist without reliability (Linclon and Guba in Babbie and Mouton, 2001).

Transferability

Transferability refers to the extent to which findings can be applied in other contexts or with other respondents. The qualitative researcher is not primarily interested in generalisations and does not maintain or claim that knowledge gained from one context will necessarily have relevance for other contexts or for the same context in another time frame (Lincoln and Guba in Babbie and Mouton, 2001).

Therefore, in this study, the researcher attempted to provide a thick description of children's experiences in the context of living in foster care and living in a Children's Home and reported it with sufficient detail and precision to allow judgments about transferability to be made by the reader.

For this reason a purposive sample was chosen.

Confirmability

According to Lincoln and Guba cited in Babbie and Mouton (2001), confirmability relates to leaving an adequate trail to enable the reader to determine whether the conclusions, interpretations and recommendations can be traced to their sources. In this study, this was easily achieved by the raw data which included the field notes and/or tape recordings, transcripts of field notes which related to data reduction and analysis products, themes that were developed, findings and conclusions, process notes, personal notes and expectations and instrument development information.

The qualitative content of this study may be useful to other Child Welfare Societies and Children's Homes in Kwa Zulu-Natal as the Child and Family Welfare Society of Pietermaritzburg is representative of the larger Child Welfare societies in Kwa Zulu-Natal (McKay, 2002).

1.8.6 Data Analysis

Punch (in Denzin and Lincoln, 1994:84) cited in de Vos (2002) states: "Qualitative research covers a spectrum of techniques, the centrepiece of which is observation,

interviewing and documentary analysis. Qualitative research depends on the presentation of solid, descriptive data, so that the researcher leads the reader to an understanding of the meaning of the experience or phenomenon being studied."

In this study semi-structured in depth interviews with children lent itself to content analysis. De Vos (2002) recommends that the content of interviews be analysed while they are still fresh and preliminary coding which is characteristic of content analysis may be useful. Babbie and Mouton (2001), refer to the manifest content, which is the visible, surface content, and latent content, which is the underlying meaning.

De Vos (2002), states that employing qualitative analysis in interviews will attempt to capture the richness of themes emerging from the participants' talk.

The focus groups in this study lent themselves to discourse analysis. De Vos (2002), indicates that a focus group creates a process of sharing and comparing among participants. Discourse governs the way in which a topic can be meaningfully talked about. In this study, the experiences of foster parents and key informants at Children's Homes would be that topic. The researcher focused on content, interaction and dynamics in the group. Discourse analysis is valuable in exploring people's perceptions, attitudes, opinions and meanings regarding common issues (de Vos, 2002).

1.8.7 Ethical Issues

Ethical clearance was secured from the University of KwaZulu-Natal's Ethics Committee. The details pertaining to the ethical issues in this study are contained below.

Ethics pertaining to participants

In including children as the sample in this study, the researcher took into account the following ethical considerations:

- The purpose of the research, the scope of the interview and the use of the material was explicitly explained to the participants in an age-appropriate manner.
- Informed consent was obtained from the child and parent/foster parent/management of Children's Home/guardian/legal custodian.

- The participants' consent was voluntary and no penalty was levied for refusal to participate.
- The participants' dignity and privacy were maintained and respected throughout the research process.
- Confidentiality was maintained at all times during and after the research process.
- The children were not be subjected to any physical, mental distress or harm during the research process.
- Children forming the sample of this study were known to be vulnerable and in engaging such children in a study of this nature, the researcher expected children to share painful past life experiences. These were dealt with by the researcher appropriately due to the researcher also being a qualified social worker in the field of child welfare. Appropriate supportive services such as referring the child to his/her individual agency social workers or other specialist helping professionals, were also provided.
- Discussion and presentation of findings outside the research report were only to be done for professional purposes and with people directly and professionally involved with the child.
- The child participants and the caregivers were at liberty to withdraw during the research process at any point with no penalty.
- Proper engagement and disengagement techniques were employed by the researcher prior to and after the research was completed.
- The child was made comfortable at all times during the research process.
- Credit was given to all participants in the research process in the form of acknowledgement in the research report.

Informed Consent and Research Instruments

The participants were subjected to semi-structured in depth interviews guided by themes (Annexure 1). The focus groups were also guided by themes.

Informed permission was obtained from appropriate authorities, gate keepers, parents and guardians as per Annexure 2.

Limitations

- The child participants shared painful past life experiences due to the nature of the study. These experiences were addressed by the researcher immediately and referred to the relevant agencies for follow up services. This was time consuming and lengthened the field work involved in the study.
- Social work agencies were unable to provide timeous follow up services to the child participants due to strained resources. In these instances, the researcher provided "stop-gap" services, again lengthening the field work component of the research.
- Children's expectations were raised by being subjects in the study. These expectations were inherent due to the children's vulnerable life circumstances. This could not be dealt with in the scope of this study.
- Co-operation was expected from all Children's Homes, foster parents and child participants. However, due to bureaucracy in Children's Homes, some Children's Homes did not participate in the study. There were also those foster parents and child participants who did not participate for personal reasons. Although this resulted in a diminished sample size, it did not impact greatly on the information obtained in the study as the study was qualitative.
- Local literature on the topic was comparatively less than what is available in other countries.

Data collection and storage

The research data was secured as follows:

- Data was taped and/or manually recorded. Data was kept in a locked cabinet overnight and when not in use.
- Electronic data was password secured.
- Once collated and analysed, these records were destroyed.
- All information was confidential and none of the participants were identifiable

Confidentiality

In the subsequent dissemination of the research findings, participants' identities were concealed at all times. No reference is made to specific Children's Homes or specific foster families.

Funding

This study is not supported by funding that is likely to inform or impact in any way on the design, outcome and dissemination of the research.

Research Instruments

The following draft instruments are attached as Annexures:

- Annexure 1: Interview themes and Focus group themes
- Annexure 2: Consent Forms

1.9 STRUCTURE OF DISSERTATION

Chapter One: Introduction and Research Methodology

This chapter contains the title of the study, provides the background and outline and informs the reader of the main focus of the study. The research methodology is discussed in this chapter.

Chapter Two: Literature Review

This chapter contains a comprehensive survey of existing knowledge on the study and provides a contextual framework for the study. The theoretical framework is also contained in this chapter.

Chapter Three: Results and Discussion

The findings, as well as, an analysis and interpretation is presented in this chapter.

Chapter Four: Summary, Conclusions and Recommendations

The conclusions and recommendations as well as further interpretation and a summary of the study is included in this chapter.

CHAPTER TWO

2. LITERATURE REVIEW

2.1 INTRODUCTION

The dominant view nationally and internationally, supported by various legislative tools, is that vulnerable children are best cared for in foster homes as opposed to Children's Homes (Morei, 2002, McKay 2002, Kiraly 2001, Long 2007). Legislation in South Africa pertaining to the care and protection of children is presently being revised and changed. The Children's Bill consists of two sections : Section 75 and Section 76. Section 75 of the Bill was signed by President Mbeki in June 2006, and is called the Children's Act 38/2005. Section 76 of the Bill remains before parliament as the Children's Amendment Bill [B19-2006]. The Children's Act 38/2005 is not operational as yet and social service providers are currently using the Child Care Act 74/1983. It is envisioned that The Children's Act 38/2005 will replace the Child Care Act 74/1983 in 2008 (Jacobs, Shung-King and Smith, 2005). Should alternative care be necessary for a vulnerable child, the Children's Act 38/2005 prioritizes a foster care placement over a child and youth care centre of which a Children's Home is a part (Section 46(1)(a) of the Children's Act 38/2005).

Given the steady decline in traditional family living due to, amongst other things HIV/AIDS, poverty and unemployment in South Africa, the dominant view of family care being prioritized may not always be feasible in reality.

The literature review that follows, focuses on national and international literature pertaining to:

2.1.1 Ecological theory and Structural Social Work Theory:

- The systemic levels
- Relevance to child welfare practice
- The South African response to ecological theory in child welfare practice
- Challenges to the South African response to ecological theory
- Implications of ecological theory in reunification services
- The family as the unit of service
- Restructuring the environment

- Redefining the role of the social worker / foster parent and childcare staff

2.1.2 Legislation Pertaining To Care and Protection Of Children:

- Child participation in child and youth care legislation
- The Children's Bill [B19-2006]
- Foster Care
  - Purpose of foster care
  - Prospective foster parent
  - Determination of placement of child in foster care
  - Number of children to be placed in foster care
  - Duration of foster care placements
  - Reunification Services
  - Rights and responsibilities of foster parents
  - Termination of foster care
  - The reality of foster care in the South African context and the challenges faced by foster families
- Child and Youth Care Centres (Children's Homes)
  - The developmental stages of a child: Age and Understanding pertaining to child participation and decision making
  - Challenges facing South African children
  - The placement of children in Child and Youth Care Centres

2.1.3 The role of the social worker and challenges to service delivery

2.2 Ecological Theory and Structural Social Work Theory

In this study, ecological theory and structural social work theory will be used in the following ways:

2.2.1 Ecological Theory

Ecological theory will be used as the experience of foster care and care in a Children's Home needs to be understood at various systemic levels. The relevance of the ecological theory in child welfare work will also be outlined.

2.2.2 Structural Social Work Theory

Structural social work theory will be used to complement the ecological theory as working with vulnerable children and families in South Africa. This needs to be viewed against the backdrop of the country's history thereby giving prominence to macro level issues.

As discussed in chapter one, the relevance of the theories' applicability to working with vulnerable children and families has to be viewed against the following background:

The ecological approach pioneered by Germain and Gitterman (1980) refers to an

approach to social work practice that draws on the study of interactions between living organisms and their environments. According to Germain and Gitterman (1980:5): " Human beings change their physical and social environments and are changed by them through processes of continual reciprocal adaptation."

According to Kasiram (1992) the ecological perspective moves away from linearity, which is mainly used when studying physical and biological entities. Instead, the focus is on the wholeness, interdependence and complementarity of living organisms. People are not mere reactors to environmental forces. Rather, they act on their environments, thereby shaping the responses of other people, groups, institutions and even the physical environment (Hepworth and Larsen, 1990:17).

Sheafor et al (1994) writes that the ecological perspective reminds one that the environment in which people must function is constantly changing and that people must adapt to these changes in order to cope successfully.

Although the ecological theory with its emphasis on goodness of fit is seen as useful in understanding children in alternative care, the reasons warranting the child's removal to alternative care appear to be rooted in structural sources of unemployment, economic oppression and exclusion, inequality and poverty.

In relating ecological theory to this study, a child who is found to be in need of care in terms of the Children's Act 38/2005, who is placed in an alternative care setting, is seen to be removed from his/her natural environment. The child is either placed in foster care or a Children's Home, and is expected to adapt to this change in environment in order to cope successfully. Apter cited in Kasiram (1992) confirms the above by indicating that when the various aspects of the system are functioning

harmoniously together, then there is balance. When the different aspects of the system are not functioning harmoniously the system becomes unbalanced.

In this study, the child's functioning would therefore be affected on the four systemic levels, according to Brofenbrenner in Shaefor et al. (1994), which are identified as follows:

The systemic levels

- **Microsystemic**: At this level and in this study, the child's relationships with his natural/biological family and/or relationships that the child shared with teachers and close friends would become unbalanced in view of the child being removed to a new environment being that of a foster family or Children's Home.
- **Mezzosystemic**: At this level, the child's neighbourhood and proximity to relatives becomes unbalanced, once placed in alternative care. This is especially profound in the South African context and in this study as traditional family structures may not necessarily exist and a child may depend on other households in his/her environment, which may ensure homeostasis for the child.
- **Exosystemic**: At this level, parts of the environment that the child may not participate in actively, such as school governing bodies also affect the child. Related to this study, a child from a disadvantaged background who is placed in an alternative care setting may become unsettled with the rules laid down by the governing body in his/her new school. Whereas in the child's previous school the focus may have been on regular school attendance, in the present school the focus may be on extra-curricular activities, as school attendance is taken for granted. The dissenting influences negatively impacts on the child.
- **Macrosystemic**: At this level, legislation governing the care and protection of a child is considered. In this study, the Children's Act 38/2005 is referred to as a statutory tool in order to ensure the child's safety. Therefore, at this level, the manner in which a child adapts and responds to a Children's Home or a foster home should guide the legislation and policy in respect of the care and protection of children.

The aforegoing clarifies what de Vos (2002) describes as no individual or group, only being an individual or group. She further recommends that each case must be studied against the background of more universal social experiences and processes.

The state's policies pertaining to family preservation focus on the social challenges emanating from within individuals and thereby impacting on families. This focus is therefore at the micro level of functioning neglecting and renouncing macro issues such as socio economic impact on vulnerable families.

Structural social work was a term first used by Middelman and Goldberg in 1974 cited in Mullaly (1993). Although Middelman and Goldberg identified the environment as the source of social problems, they attributed them to the liberal notion of social disorganization. Middelman and Goldberg are further cited as not calling for complete social change nor presenting a social or ideological analysis of capitalism, rather their prescription for social problems falls within the ecological approach (Mullaly, 1993). It is, however, necessary to examine Mullaly's theory with regard to identifying problems beyond social disorganization.

According to Mullaly (1993:123), the structural approach:

- Does not attempt to prioritise different forms of oppression (racism, classism, patriarchy, etc) into a hierarchical list
- Views various forms of oppression as intersecting with each other at numerous points, creating a total system of oppression
- Does not restrict itself to working only with social institutions
- Is a generalist model of practice
- Requires knowledge and skill in working with individuals, families, groups and communities
- Always makes the connection between the personal (micro) and the political (macro).

Since South Africa's history cannot be overlooked when working with families, structural social work theory allows for understanding the circumstances leading to South African families becoming dependant on alternative means in caring for their children.

The structural social work theory suggests that efforts need to be made by the state to support the family, thereby not negating its centrality; however, not placing undue pressure on the family either.

Maluccio, Fein and Olmstead (1986:78-79) summarize the key ecological principles and their relevance to child welfare practice as follows:

- **Interactionism**: which assumes that human behaviour is not solely a function of personality or of environmental influences, but rather of the complex interaction between person and environment.
- **Transactionism**: which regards human beings as active participants in transactions with their environment.
- **Adaptation**: which views human behaviour in terms of whether it helps people adapt functionally as they interact with their environment.
- **Health/Growth orientation**: which focuses on people's strengths and adaptive striving, rather than solely on weaknesses or deficits.

Relevance to child welfare practice

The ecological perspective:

- Represents a move away from pathology to a developmental (health/growth) orientation. This is important in the study because individuals and families are seen to have inherent strengths.
- Enables social workers to gain a clearer understanding of relationships between families and their environments and to identify significant sources of support as well as stress and conflict. This will allow for a more appropriate care plan and individual development plan to be formulated.
- Recognises parents as full partners in the helping process. Family preservation is given prominence.

Child welfare services are conceptualized as comprehensive and holistic, with family preservation and prevention being prioritized. Again the focus on family care being the superior option may not always be feasible or in the best interests of the child.

From a structural social justice perspective, Sewpaul (2005) contends that the burden of coping with South Africa's huge problems is reduced to the levels of individuals and families, without recognition of structural sources of unemployment, economic oppression and exclusion, inequality and poverty on people's lives, and the profound roles that society and state play in contributing to the way that families cope. Sewpaul (2005) and Hochfeld (2007) agree that, without infrastructural support, rebuilding the moral fibre within individuals and communities may not lead to rich family structures existing in well adjusted communities, keeping all South African children safe.

The South African response to ecological theory in child welfare practice

The South African response to Germain and Gitterman's (1980) ecological perspective, related to children, youth and families, is the Developmental Assessment of Children, Youth and Families.

The Developmental Assessment of Children, Youth and Families was formulated by the Department of Social Welfare in 2000. The model is based on the indigenous model of the Native American people and the First Nations people of Canada. It is stated in the Developmental Assessment Master Trainers Guide 2000:27 that this model is the closest to African traditions. The model offers a strengths-based approach using a Circle of Courage, that moves away from pathology and focuses on development.

The Circle of Courage is based on the following four developmental needs/social values:

- **Belonging**: has to do with a deep sense of relationship or attachment with other human beings, and is reflected in a sense of relatedness, of care, of love, of community, of Ubuntu (White Paper 1997) of respect for each other and for nature.
- **Mastery**: is directly linked to a deep sense of competence and capacity which comes from the ability to successfully complete the appropriate developmental tasks and function effectively in family, community and society daily.
- **Independence**: is directly linked to a deep sense of inner control and self-discipline and the ability to make responsible choices and decisions

including the ability to take responsibility for actions. Every child, youth and family needs a deep sense of independence appropriate to their age and level of competency.

- **Generosity**: is linked to a deep sense of being needed and valuable, together with a desire and ability to contribute positively to the lives of those with whom the young people live and come into contact daily.

Every human being is perceived as having a Circle of Courage. When the individual is functioning optimally, then the circle is seen as being whole. When the individual's functioning becomes unbalanced, the circle is seen as being broken. The social worker is therefore responsible for identifying the point at which the circle is broken and is responsible for developing a care plan (which is a broad plan to achieve permanency planning) and an individual development plan (steps to follow in achieving the care plan) to repair the broken circle and, in turn, ensure optimal functioning. The motivation for this model according to the Department of Social Welfare, was to resurrect core human values in individuals and families in South Africa after the devastation of apartheid. The following challenges must however be noted:

Challenges to the South African response to ecological theory in child welfare practice

The Developmental Assessment of Children, Youth and Families (2000) and the Draft National Family Policy (2005) emphasize moral regeneration having its roots within families. The tenets of the Circle of Courage are positively connoted to include terms such as Ubuntu, self-discipline, inner control and [family's] ability to contribute – all referring to the individual and family's responsibility to resurrect themselves morally and to show appreciation to the state. Sight is lost of the structural constraints that maintain communities in poor, dispossessed and helpless positions. The language used above is indicative of the state's abdication of its responsibility towards its people (Sewpaul, 2005). Sewpaul (2005) believes in the philosophy of Ubuntu, which emphasizes equality and dignity of all human beings, sanctity of life, collective solidarity that enhances group care and self-reliance, compassion and respect, as it is this philosophy that steered South Africa through a peaceful transition from apartheid to democracy. Sewpaul (2005) however,

criticizes the state's exploitation of the concept of Ubuntu as the state has placed emphasis on community and group care, moral regeneration and self-reliance in families thereby abdicating responsibility to South African people.

The vision of the White Paper (1997) reads as: "A welfare system which facilitates the development of human capacity and self reliance within a caring and enabling socio-economic environment (White Paper, 1997). Subsequent welfare policies and guidelines have focused on the development of self reliance rather than on the creation of a caring and enabling socio-economic environment to facilitate self reliance (Sewpaul, 2005).

Families are ailing under poverty stricken conditions but yet are being charged with the task of caring for vulnerable children by adjusting themselves to adapt to the environment.

Although structural social work theory does not negate the centrality of the family, it challenges and attempts to deconstruct the dominant view of family care being a superior option against the backdrop of South Africa's past, with its structural deficiencies. The ecological paradigm, on the other hand, provides room for hearing children's voices at a micro level, which may otherwise be minimized.

Implications of ecological theory in reunification services

According to Maluccio, Fein and Olmstead (1986), the ecological perspective highlights the biological family's importance in the development and functioning of a child in alternative care. The Children's Act 38/2005 further entrenches family reunification as a critical element in child welfare services. The natural bonds between children in alternative care and their parents/biological family continue to be prominent for parents as well as children long after they are physically separated (Laird in Maluccio, Fein and Olmstead, 1986).

Every effort therefore needs to be made to support the family, to enhance its functioning and to avoid separation. Cordero (2004) reaffirms various studies done in the 70's, 80's and 90's on the successful return of children to their biological families when the parent-child attachment relationship is maintained for the duration of the child's placement in alternative care. Sibling relationships are also viewed as critical to the placed child's micro system. The aforegoing emphasizes the biological family however, in South Africa, biological families are rapidly

disintegrating for various reasons, some of which include: migrant labour, divorce, teenage pregnancies, infertility, child abandonment, HIV/AIDS and death. Kinship care is considered a useful resource in terms of reunification services and permanency planning. In view of the HIV/AIDS pandemic and its impact on South Africa, the dominant social construction of the family and kin being significant in the life of a vulnerable child soon needs to be reconstructed with less emphasis on the blood knot and more emphasis on significant others which may include child and youth care centres.

The family as the unit of service

Another implication flowing from the ecological perspective is the need to view the family as the central unit of service. People can best be understood and helped within their significant environment (Germain and Gitterman, 1980). The family is the most intimate environment of all. It is here that the child grows up, develops and forms a sense of identity and competence. The family has the potential for providing resources throughout the life process (Briede and Loffell, 2005). South African families are faced with obstacles such as crime, substance abuse, family and gender violence, child headed households and the effects of migration and urbanization, which engenders unstable family relationships (Sewpaul, 2005). The cycle of poverty pre and post 1994 has resulted in a vicious cycle as parents who neglect their children have a tendency to think and behave according to their own experiences of being parented and living in poverty (McSherry, 2004 and Mullaly, 1993). The dominant view however, is that families are best placed to care for and nurture vulnerable children (Developmental Assessment of Children, Youth and Families, 2000, White Paper, 1997, Draft National Family Policy, 2005). The question that arises is what about the vulnerabilities inherent in families?

Williamson (2002) calls for the revival of the old African tenets of extended familyhood and strong community life. He adds that given the strenuous challenges brought about by the HIV/AIDS pandemic, the African extended family is perhaps weaker now than a hundred years ago but the resilience and the spirit of community life is still there for current practitioners to tap into. This resilience, however, needs structural sources of support to be strengthened. It therefore appears necessary, in the absence of this support, to challenge the dominant view of family care as the best care option for vulnerable children.

The old African tenets of familyhood are encapsulated in the concept of Ubuntu. Ubuntu however, appears unbalanced in the wake of policies pertaining to social welfare as the responsibility on the state is reduced by constant calls for self reliance (Sewpaul, 2005). Although the African extended family is resilient as the grannies forsake their well being and use their old age pensions to provide for the basic needs of multigenerational family units, the state views this as a family preservation strategy and it is a cheaper option to maintain than a child and youth care facility. Sewpaul (2005) confirms this in her critique of the Draft National Family Policy (2005) by writing that the Policy places responsibility for quality of living squarely on the family, and/or reflects a fear and anxiety about those undeserving poor who might abuse state resources and become dependent. Extended families are therefore rarefied given these enormous strains.

McKay (1994) indicates, in referring to first world research, that a child's developmental needs need not necessarily be limited to a family setting. Children are seen to need reliable caregivers, individual attention, familiar surroundings and intellectual stimulation (McKay, 1994) all of which can be found in a Children's Home.

Therefore the assumption that Children's Homes possess all of the requirements mentioned above and may be better resourced to cope with the care of vulnerable children, appears to be supported. In view of the above, it is possible that Children's Homes may therefore not necessarily compromise a child's developmental and belonging needs.

Restructuring the environment

From an ecological orientation, a major function of the service delivery system in child welfare is to help families of children in alternative care to restructure their environment. This pertains to the family making its environment more conducive to positive functioning. This may include seeking accommodation in an area less notorious for the availability of drugs and gangs, so that the placed child may return to a safer environment (Berridge and Brodie, 1998). Changing the environment may also relate to families accessing the assistance of extended family members as a supportive function. From a structural perspective, social workers seek to change the social system and not the individuals (Mullaly, 1993). It is further

believed that social problems do not originate within the individual or the family but arise from the exploitative and alienating practices of the dominant groups. This study therefore suggests that ecological and structural theoretical perspectives are employed to re-examine and address structural deficiencies in South African childcare practice so that a goodness of fit across concentric spheres of interrelationship in child and family life may be promoted.

Re-defining the role of the social worker/ foster parent and childcare staff

The ecological perspective suggests that the role of the designated social worker in any case situation should be re-defined as that of catalyst or enabling agent – someone who helps the family to identify or create and use necessary resources (Barrat, 2002).

The relationship between parents, foster parents and childcare staff needs to be one of a partnership in working towards the common goal of returning the child to its family of origin. Their roles need to be mutually supportive and complementary (Maluccio, Fein and Olmstead, 1986).

2.3 LEGISLATION PERTAINING TO THE CARE AND PROTECTION OF CHILDREN

The state has drafted important legislation in the fields of juvenile justice, social security and health. However, while the social security laws make reference to children, the health laws are almost silent on children's special needs and requirements. In this context, civil society made a strong call for a comprehensive piece of legislation for children – the Children's Bill which, after more than a decade of dialogue and debate, is now reaching finalisation (Jacobs, Shung-King and Smith, 2005).

The following legislation pertains directly to children in need of care in South Africa:

- Children's Act 38/2005
- Child Care Act 74/1983
- 1989 United Nations Convention on the Rights of the Child
- 1990 African Charter on the Rights and Welfare of the Child
- South African Constitution

2.3.1 Child Participation in Child and Youth Care Legislation

Van Niekerk (2007) calls for increased child participation in policy formulation.

Article 4.2 of the African Charter gives a child who is capable of communicating, a right to express his/her views and it allows for this in all judicial or administrative proceedings. It is further stated in this provision that: "an opportunity shall be provided for the views of the child to be heard either directly or through an impartial representative as a party to the proceedings, and those views shall be taken into consideration by the relevant authority in accordance with the provisions of appropriate laws."

Child participation is also addressed in Section 61(1) of the Children's Act 38/2005 where it is stated that:

The presiding officer in a matter before a children's court must

- (a) allow a child involved in the matter to express a view and preference in the matter if the court finds that the child, given the child's age, maturity and stage of development and any special needs that the child might have, is able to participate in the proceedings and the child chooses to do so;
- (b) record the reasons if the court finds that the child is unable to participate in the proceedings or is unwilling to express a view or preference in the matter; and
- (c) intervene in the questioning or cross examination of a child if the court finds that this would be in the best interests of the child.

Although child participation is addressed in two instances above, this relates to children's participation after policies have been formulated. Thus the voice of the child does appear to be silent in this area.

Olson, Sibanda-Knight and Foster (2005) emphasize the need for children to be allowed to express their views as they are perceived to be the actual "authorities" in their own lives. Having given children this opportunity, it is imperative that adults give due importance to these views and respond to them accordingly. Although child participation was known to be given prominence when drafting the Children's Bill, the Dikwankwetla Action Group set up by the Children's Institute, University of

Cape Town was the only group of children, who actually made submissions for inclusion in the Bill. Of further note was that the Dikwanktwela Action Group was representative of only four of the nine provinces in South Africa (Jacobs, Shung-King and Smith, 2005).

According to van Niekerk (2007), the expertise of children and young people on childhood and youth must be awarded prominence in spite of professionals possessing specialised qualifications and hard earned years of experience in working with children and youth. Professionals should therefore be able to form a partnership with children with whom they work in order to expand and complement their expertise. This partnership may actually maximise child participation and enhance the services that professionals render to children.

Section 28.1 (b) of the South African constitution is particularly important to children in need of care as it states that: "every child has the right to appropriate alternative care when removed from the family environment." However, no direction is offered on how this right may pertain to a Child and Youth Care Centre.

Section 28.2 of the constitution states that: " a child's best interests is of paramount importance in every matter concerning the child."

This means that the child's needs will always be more important than the needs or rights of a parent or other adult (Padayachee, 2005).

2.3.2 The Children's Bill [B19-2006]

The Children's Bill focuses on the following three children's rights (Proudlock, 2005:16):

- the right to family care, parental care or appropriate alternative care
- the right to social services
- the right to protection from abuse, neglect, maltreatment and degradation.

Proudlock in Jacobs, Shung-King and Smith (2005) further indicates that the Children's Bill emphasizes the core constitutional and international principle that the child's best interest is of paramount importance. This is particularly relevant in the South African context as the Children's Act 38/2005 will eventually replace the 1983 Child Care Act, which according to Proudlock in Jacobs, Shung-King and Smith

(2005) was not written from a child rights perspective. It was written under the apartheid regime at a time when South Africa did not have a Bill of rights or a democracy. It would seem that the Children's Bill will be more democratic in its outlook on the care and protection of children post-apartheid.

2.3.3 Foster Care

According to the Children's Bill 2005, a child is in foster care if the child has been placed in the care of a person who is not the parent or guardian of the child via the processes of the Children's Court.

Purposes of foster care

The purposes of foster care are as follows:

- to protect and nurture children
- support, encourage and facilitate relationships between children and their parents for the purposes of family preservation
- promote the goals of permanency planning towards family reunification for the purpose of forming meaningful lasting relationships
- respect for cultural and ethnic diversity

Prospective foster parent

A prospective foster parent must be:

- a fit and proper person to be entrusted with the foster care of the child
- willing and able to undertake, exercise and maintain responsibilities of such care
- properly assessed by a designated social worker to comply with the above

Determination of placement of child in foster care

The designated social worker needs to take into account the cultural, linguistic and religious background of a child and make a recommendation to the Children's Court to place such a child in foster care with a suitable foster parent from a similar

background. Provisions are made for children to be placed in backgrounds different to that of the child's origin if:

- there is an existing bond between that person and the child
- a suitable foster parent from a similar background is not available

Number of children to be placed in foster care

No more than six unrelated children may be placed with one foster family. Special provisions are made for cluster foster care schemes.

Duration of foster care placements

The Child Care Act 74/1983 makes provisions for a foster care order to be extended by the Minister on the basis of a social worker's report after two years of the original order and every two years thereafter. This is irrespective of whether there are reunification services and/or a biological family.

The Children's Bill 2005 makes various provisions for the court to extend foster care orders and terminate social work services in the event of there being no reunification services allowing the foster care placement to subsist until the child turns eighteen (18) (Children's Bill 2005. 186(1):30).

This would allow social workers to strengthen reunification services in instances where there are biological families as opposed to the current situation of writing reports merely for the purposes of extending foster care orders, where there is no biological family.

Reunification Services

Provisions are made in the Children's Bill for reunification with biological families provided that it is in the best interests of the child. The court does however, have the power to terminate reunification services, should the designated social worker recommend that the prognosis for reunification is poor.

Rights and responsibilities of foster parents

The foster parent has parental responsibilities and rights in respect of the child as set out in the various orders of the Children's Court pertaining to the placement of a child in foster care.

Termination of foster care

Foster care may be terminated by a Children's Court only if it is in the best interests of the child. Relevant factors are stipulated in the Children's Bill 2005, which need to be taken into account prior to termination of foster care.

The reality of foster care in the South African context and the challenges faced by foster families

According to Barrat (2002) foster parents are expected to provide substitute parenting for other people's children. They are further expected to work with the biological family for the purposes of reunification. She further indicates that foster parents are motivated to parent children in a way that they may not have been cared for themselves.

According to Jacobs, Shung-King and Smith (2005:33): " research shows that increasing numbers of poverty stricken families who are caring for orphaned children are relying on foster care placements as a way to access the more substantial financial support offered by the foster care grant." This appears understandable in view of the high levels of poverty in the country, the lack of alternative social security options and the encouragement from the government to foster children, which affirms the validity of the structural social work theory in this study.

Comparative costs of maintaining a child in foster care and maintaining a child in a Children's Home

Foster care appears to be a more viable option, financially from the government's perspective, irrespective of the quality of foster care as the per child subsidy in a Children's Home is far greater than the foster care cash component per child (Morei, 2002 and Willamson, 2002). The amounts as at April 2007 stand at R650 per child in foster care and R1600 per child in a Children's Home as revealed in discussions held with the Department of Social Welfare (2007).

Challenges facing foster parents

The lives of foster families are constantly affected by the state as:

- grant applications take between six months to two years to process or
- supporting documentation is misplaced by social security

- foster parents feel threatened to question officials as they fear its impact on their application.

The above inevitably places financial strains on foster families which results in their incapacity to cope with children in their care. However, since the introduction, in late 2006, of the South African Social Security Agency (SASSA), which is a specialist social security agency, the foster care grant application system is noted to have improved. A foster care grant application now takes twenty-four hours to process and payment is effected within that calendar month.

This is a noteworthy achievement in respect of foster care grant payments. Foster families, are however, expected to take all responsibility for a vulnerable child's psychosocial development as well as health needs which often include educational assessments and therapeutic sessions with psychologists and visits to public hospitals, etc. These interventions are generally scheduled during the 8am to 5pm time slot when foster parents are at work. Therefore, children miss sessions as employers are often not keen to give foster parents time off on a regular basis. The dilemma that the foster parent faces is whether to neglect the child's psycho-social and health needs and remain employed to meet the child's basic needs or vice versa.

Prior to SASSA's establishment, it was often noted at the Child and Family Welfare Society of Pietermaritzburg that foster placements broke down even before the grant was made payable. Support and training for foster parents is absent in South Africa and although organizations refer to "foster care training"- this training takes the form of once off information and education sessions to foster parents. There is also no screening panel to approve a foster care application.

In countries such as Alberta, Canada, thirty-one -three hour foster parent training modules were redeveloped. A caregiver orientation training also exists. The caregiver orientation is composed of eight, three-hour modules and are for potential foster parents, kinship care parents and those seeking to adopt or apply for private guardianship. It is only after taking Caregiver Orientation that potential foster parents can proceed through the final screening and approval process (www.child.gov.ab.ca).

Foster care as a poverty alleviation mechanism

The South African Law Reform Commission (SALRC) cited in the Child Gauge (Jacobs, Shung-King and Smith, 2005) made provision for the informal kinship care and court ordered kinship care to be recognized as new legal forms of alternative care. In each case, kinship caregivers are given parental rights and responsibilities for children in their care.

According to Jacobs, Shung-King and Smith (2005), foster care as a poverty alleviation mechanism appears to detract from the purpose of the foster care system – to protect particularly vulnerable children. The huge number of applications for fostering orphans is already creating bottlenecks in the severely overburdened system. The backlog of kinship care finalizations at the Child and Family Welfare Society of Pietermaritzburg as at April 2007 dates back to 2003. This means that applications made by prospective foster parents in 2003 to foster their kin are still awaiting finalisation (Child and Family Welfare Society of Pietermaritzburg, Kinship care report: 2007).

Poverty is widespread in South Africa. The question that Jacobs, Shung-King and Smith (2005) ask appears relevant to this study: "Why should children who live with foster parents or with relatives require special grants that are of a substantially higher value, and continue for a longer time, than grants for poor children who live with their biological parents?" Post 1994, the state acknowledges the creative nature of oppressed South Africans in attempting to access social security, by defrauding the foster care system. Instead of the state in turn responding creatively by implementing alternative social security options such as a Basic Income Grant (BIG) or extending the Child Support Grant (CSG), it has implemented watchdog systems embodied in the South African Social Security Agency (SASSA) to root out social security recipient fraudsters. Although SASSA was outlined earlier as a milestone achievement for the South African foster care system, foster parents are still challenged with the biennial requirements of the Department of Social Welfare. This includes producing the following original documentation:

- A foster care order issued on behalf of Minister of Welfare. This order is issued following a comprehensive report compiled by a social worker in terms of Section 16(2) of the current Child Care Act 74/1983. Further, all

supporting documentation is submitted with this report by the social worker

- A VRT form with a visible school stamp. This verifies the child's school attendance
- Children's birth certificates
- Foster parents identity documents

The frustration of this process lies in the fact that all documentation mentioned above is produced by the social worker managing the case, biennially, as a requirement to extend the foster care order. The process appears to be duplicated by requiring the foster parent re-produce the same documents, taking a day off from work to wait in a queue. Fraud and corruption is a worldwide occurrence. However, producing the documentation twice does not verify the presence of the child in the home. The question that arises then is: Is there a lack of trust in social work services, the foster parent or both?

Grannies of poverty stricken families obtaining foster care grants although the parent/s of their grandchildren reside in the same home, will be prosecuted if reported to SASSA. This further disempowers the poor and creates a snowball effect on poverty.

Many parents are terminally ill and by 2010, the estimated number of orphans will be two million. The question being asked is: what will happen when the grannies die? (McKay, 2002).

Jacobs, Shung-King and Smith (2005) call the current foster care system inequitable. It fails to provide adequate support for all vulnerable families. It further introduces a perverse incentive for impoverished families to place their children in the care of others for financial gain. The government needs to address the poverty of all children in South Africa. Should foster care be considered a superior option, then foster parents should be trained and equitably remunerated as is common practice in Australia, Canada, New Zealand and the United Kingdom (ISPCAN, 2006).

2.3.4 Child and Youth Care Centres (Children's Homes)

"A Child and Youth Care Centre is a facility for the provision of residential care to more than six children outside the child's family environment in accordance with a residential care programme or programmes suited to children in the facility": Children's Bill [B19-2006]: 32.

A Children's Home therefore constitutes a Child and Youth Care Centre. The Bill further specifies that therapeutic programmes must be designed for children in such alternative care placements. In addition to the above, a Child and Youth Care Centre may offer specialized programmes for particularly vulnerable children such as those children with physical and mental disabilities or chronic illnesses.

Historically, as Vos (1997) points out, Children's Homes were established to care for orphaned, needy and child victims of epidemic outbreaks. Presently children requiring alternative care come from dysfunctional families (Knuttson, 1997). Mudaly, (1985:39) says that: "the child in the Children's Home comes from a life world of lack of appreciation, neglect, inadequate and destructive relationships, impaired communication and even ill treatment." A child's social development may therefore suffer. Whereas the Bill emphasizes the need for therapeutic programmes in a Child and Youth Care facility, there are no supportive training elements offered to foster parents who care for similarly vulnerable children.

The developmental stages of a child: Age and Understanding pertaining to child participation and decision-making

In understanding children's experiences, it is necessary to understand their stages of development. The developmental stages of the age groups comprising the sample in this study are outlined below:

According to Brandon, Schofield and Trinder (1998:51-60), the following developmental framework is presented:

Primary school children: (5-11 years)

Primary tasks: developing a sense of self in relation to the outside world; learning the rules.

Bentovim is cited in Brandon, Schofield and Trinder (1998:51) as saying that by the age of 5, a child needs many of the qualities required for adult life which include:

- being emotionally ready to learn
- having a clear idea of him/herself as a person
- having the ability to relate to others
- having the ability to control and postpone urgent needs
- having the ability to use initiative to find gratification in play and activities that are socially acceptable

Developmental challenges include the following:

- children are more cautious about revealing their thoughts and fears
- children who have been struggling to make sense of difficult situations may need professional help
- necessary for adults and helping professionals not to underestimate the need for children to understand what's happening around them

A central feature of this period according to Brandon, Schofield and Trinder (1998:52) is developing a self-concept. They further outline four tasks in developing self-concept:

- developing a relatively stable and comprehensive understanding of the self
- refining one's understanding of how the social world works
- developing standards and expectations of one's own behaviour
- developing strategies for controlling or managing one's behaviour

The following are characteristic of self-concept:

- developing an identity
- defining one's self in terms of cultural identity
- peer group relationships – for many children the need to be liked and be part of the group is very intense
- managing anxiety and sustaining attachment relationships – children who arrive at school age with insecure attachment relationships may be extremely anxious in this new and challenging environment. This is

particularly characteristic of children who may have experienced some form of abuse or dysfunctional relationship within their family.

According to Brandon, Schofield and Trinder (1998), children who start school from a firm basis both emotionally and socially, will move relatively smoothly into the formal school environment. Children who are vulnerable, because of living in adversity may find the transition to school and development over the primary school period more challenging and stressful. However, for some children from adverse backgrounds, school becomes a safe haven.

Age and Understanding:

- Children continue to need secure emotional relationships within the family
- Self esteem is a key factor in emotional well being
- Peer groups are valued and there can be a great fear of being different or of rejection
- Children are wanting to know how and why things happen and often do not have the opportunity to clarify their confusion, hopes and fears

Social work intervention and child participation

Social workers have a key role to play in child participation. Although child participation is defined in the Children's Act 38/2005, participation refers to a child's participation in the actual Children's Court Inquiry and not during the process of removal leading up to the Inquiry. According to the South African Council for Social Service Professions' (SACSSP) code of conduct, a social worker may be charged with misconduct for not acting in the best interest of the child. Child participation in determining an alternative care placement option, therefore needs to be appropriately communicated to a child, taking into account the child's developmental stage, age and maturity with the social worker guiding yet leading from one step behind. The ultimate goal is acting in the best interests of the child and the child understanding and partnering the social worker in achieving this goal. Social workers need to take the initiative rather than waiting for children to ask, particularly when children appear to be unable to put feelings into words (Brandon, Schofield and Trinder, 1998). These can contribute significantly to decisions that are to be made in the child's best interests. (Fowler, 2003).

Adolescence (12 – 18 years)

Tasks: identity, sexuality, independence / interdependence

Age and Understanding:

Adolescence is a time of transition but not necessarily a time of conflict. However, social workers will be aware that there is a minority of young people, particularly those who do not have a firm emotional, educational and social foundation from

earlier in their childhood, for whom the teenage years can throw up a number of significant difficulties, causing distress to them and concern to society.

- The establishment of an adult identity and the increasing capacity to make life decisions makes this a time of change.
- Peer groups have a powerful influence, but family ties remain very important for most young people. Adolescents have a continuing need for attachment relationships. For adolescents, in vulnerable life circumstances this may result in attachment to negative peer groups. For adolescents with challenging life circumstances, the social worker needs to be aware of the adolescent's need for belonging and a secure base. In some instances, the social worker may be the person to provide this by being reliable and consistently concerned for the young person.
- At the point at which young people leave home, they will continue to rely on family figures. Adolescents in alternative care settings will need additional help in establishing themselves practically and securing an emotional base. Young people who have experienced adversity especially in the form of abuse or neglect, and have a low self esteem, may find the changing nature of family and peer group relationships very challenging. They may react with either internalizing behaviour such as depression, suicidal tendencies and eating disorders and/or externalizing behaviour such as acts of delinquency, violence, theft and involvement in gangs.
- Developmentally, it is appropriate that teenagers are able to take responsibility for the decisions that affect their lives. However, most adolescents continue to need a chance for consultation with adults who are trusted by the young person and can treat the young person with respect and support them in expressing their wishes and feelings. For an adolescent in alternative care, this may be challenging and the social worker's involvement in the young person's life is therefore crucial.

Challenges facing South African children

Jacobs, Shung-King and Smith (2005: 10-12) outline the following structural challenges facing South African children:

Policies

There have been many specific sectoral policies and programme interventions for children post 1994. However, macro – development policies have not always been made in the best interests of children. While the state is committed to addressing the immediate realities of poverty and its consequences, its focus in recent years on the long term economic development of the country has taken precedence and this has direct implications for child policies and programmes. Since 1994, many policies in support of child rights have been drafted in the fields of health, education and other basic social services. Interventions by various state departments such as justice, social development, sport and recreation, have resulted in implementation of many child oriented policies and programmes, such as the Child Support Grant (CSG), free primary health care, the National School and Nutrition Programme and the School Fee Exemption Policy. All these have been well received while the success of their implementation has been variable across the provinces. While the CSG helps to provide a minimal means of financial support to children, the fate of the universal Basic Income Grant (BIG), recommended as a more pervasive approach to addressing income poverty across the nation, remains in dispute. The complex bureaucracy involved in accessing basic nutrition, shelter, basic health care services and social services, coupled with inequity in the provision and distribution of such services of quality, constrain the good intentions of support of child rights.

Right to survival

Children's survival, which is a central right for children, is under threat. According to the Medical Research Council of South Africa cited in Jacobs, Shung-King and Smith (2005), 40% of deaths of children under the age of five years are directly attributable to HIV/AIDS, and common, preventable poverty-related conditions, such as diarrhoea, pneumonia and trauma, which remain major child killers. On the

macro level of childhood, causes of death of very young children are also related to poor maternal health and inadequate provision of services. On a micro level deaths of older children and adolescents are caused by accidents, homicide and suicide, much of which is related to risk taking behaviour.

Right to development

In the past decade, the government and civil society have achieved much to ensure the child's right to development e.g. the state has committed itself to ensuring access to basic education for all. However, the delivery of quality education remains unfulfilled. And while it is well known that the early years represent the critical period during which stimulation and care of the very young are vital in terms ensuring their survival, nutrition and development, this area of responsibility falls between several government departments, with no over arching coordinating framework of policies, norms and standards for the provision of education. In this setting, the major responsibility for delivery of early childhood development programmes and services is left in the hands of NGOs and community based organizations (CBOs), many of which are inadequately resourced.

Right to protection

Children's rights to protection from emotional, social and environmental assaults are still under threat despite positive developments in this area e.g. South Africa is a world leader in tobacco control, resulting in stringent legislation to protect children from both active and passive forms of smoking. This is one example of the extent to which the right of children to be protected from adverse environmental conditions has been implemented. Yet children remain vulnerable to other forms of abuse, and violence pervading South African society, which manifests in injury and death of children. In South Africa, violation of children's rights to protection occurs in a setting of poverty, endemic violence and fragile family dynamics. A lack of safe care for young children and of recreational care for those of school going age result in children being exposed to preventable injury. And, while corporal punishment in schools has been outlawed, there is no protection for children in their own homes where violence against them is perpetrated by adult caregivers due to inadequate

preparation for parenthood and a failure to understand children's developmental needs and capabilities.

Right to participation

Children's rights to participation have received least attention globally, although these rights address the very heart of the notion of children's citizenship. South Africa has been at the forefront of action regarding children's rights to participation. More than a decade ago, NGOs convened a children's summit where children from across the country expressed their concerns about rights violations and made a series of suggestions. More recently, children were given the opportunity to make presentations in Parliament (Dikwankwetla – referred to earlier in this review). While these efforts towards greater child participation in decision making are commendable, the responsibility for giving children a voice extends all the way from Parliament into the home, where traditional practices, the interpretation of religious texts and power relations often mitigate against the realization of this right.

HIV/AIDS

Although it may seem a short time since 1994 to reverse a legacy of decades of inequity and uneven distribution of wealth and resources, during this time several factors in the global and national environments further aggravate the circumstances of children and dilute efforts to address their realities. The HIV/AIDS pandemic can be seen as first on the list among these factors that stand in the way of realizing children's rights. Jacques in Kasiram, Partab and Dano (2006) agree that the pandemic extends way beyond infections as it impacts on the vast number of children who are affected by the ill-health of their caregivers, whose ability to care for them is compromised. This results in a role reversal where children are becoming primary caregivers of those sick and dying adults who are normally charged with their care, with serious consequences. The end result is that huge responsibilities are placed on a range of duty bearers who must make adequate provision for these children's needs while the caregivers are alive and also after they have died. Poverty deepens the effects of HIV/AIDS on households and HIV/AIDS in turn, aggravates already existing poverty as an infected person's

output decreases and thereby impacts on the economy. In light of families having to contend with the challenges of HIV/AIDS, is it in the child's best interests to remain in family care forsaking their normal developmental milestones to care for terminally ill adults?

Against the backdrop of these macro issues, children continue to be challenged with micro level issues such as abuse in its various forms, domestic violence, drug and alcohol addiction and grief and bereavement.

The placement of children in Child and Youth Care Centres

In the South African context, there are many arguments supporting foster placements and these are consistent with childcare legislation. There is limited support for children being placed in Child and Youth Care Centres.

Barrat (2002) indicates that for some children who have experienced emotional, physical and / or sexual abuse in their biological family, the closeness of living in another small nuclear family such as a foster family can be frightening; the emotional distance offered in a residential care facility e.g. a Children's Home can provide a protective environment for the child.

In the South African context, child and youth care workers in Child and Youth Care Centres need to possess a basic qualification in child and youth care (BQCC) from the National Association of Child and Youth Care Workers (NACCW), in order to qualify to be employed by a Children's Home, whereas a foster parent does not possess any formal qualification nor are they required to undergo any formal, standardized means test to qualify to care for a child (Giese, Meintjies and Croke, 2003 and Vos, 1997). How then can foster care be idealized?

Kiraly (2001) refutes the dominant perspective that Child and Youth Care Centres be used as an option of last resort to placing vulnerable children. She has further cited various studies affirming the view that Child and Youth Care Centres should have a clearly defined purpose and ethos offering specific support for specific needs and that this concept will work only if there is recognition in the child welfare field of its value.

Vos (1997) confirms that the childcare staff play a critical role in assisting a child with his development in a Children's Home. She further indicates that the childcare staff possess the skills and training required to restore trust and respect for adults, which is a prerequisite for education in social life. A child may easily be reintegrated into society by being mentored by childcare staff. The correct procedures, however, need to be followed in employing childcare staff (Kiraly, 2001).

2.4 THE ROLE OF THE SOCIAL WORKER AND CHALLENGES TO SERVICE DELIVERY

The social worker is a key role player in the life of a vulnerable child (Brandon, Schofield and Trinder, 1998). The child is often seen to look to the social worker for affirmation, support and guidance. Sewpaul (2005:311) refers to the Global Standards for Social Work Education and Training in Sewpaul and Jones (2004), citing amongst others, the following as the core purposes of social work, which is applicable to work with vulnerable children and families:

- Facilitate the inclusion of marginalized, socially excluded, dispossessed, vulnerable and at risk groups of people;
- Address and challenge barriers, inequalities and injustices that exist in society;
- Work with and mobilize individuals, families, groups, organizations and communities to enhance their well being and their problem solving capacities;
- Assist people to obtain services and resources in their communities;
- Formulate and implement policies and programmes that enhance people's well being, promote development and human rights, and promote collective social harmony and social stability, insofar as such stability does not violate human rights;
- Encourage people to engage in advocacy with regard to pertinent local, national, regional and/or international concerns;

- Advocate for and/or with people the formulation and targeted implementation of policies that are consistent with the ethical principles of the profession;
- Advocate for and/or with people changes in those policies and structural conditions that maintain people in marginalized, dispossessed and vulnerable positions, and those that infringe the collective social harmony and stability of various ethnic groups, insofar as such stability does not violate human rights;
- Work towards the protection of people who are not in a position to do so themselves, for example, children in need of care;
- Engage in social and political action to impact on social policy and economic development, and to effect change by critiquing and eliminating inequalities.

The above core purposes reflect that, while services to individual and families are vital, they need to be underpinned by a structural social justice approach, with an emphasis on working with rather than for people; hence, the interrelatedness of the ecological and structural theories.

Shaefor et al. (1994:16-27) refer to the social worker's role as follows:

- Linking clients to appropriate human services and other resources
- Preparing clients with knowledge and skills necessary to prevent problems or enhance social functioning
- To help clients improve their social functioning by helping them better understand their attitudes and feelings, modify behaviours and learn to cope with problematic situations
- To achieve continuity of service to individuals and families through the process of connecting clients to appropriate services and coordinating the utilization of those services
- To manage one's workload to most efficiently provide client services and be responsible to the employing organization
- To facilitate the professional development of agency staff through training, staff supervision, consultation and personnel management

- To participate in the identification of community problems and/or areas where quality of life can be enhanced, to mobilize interest groups to advocate for change or new resources
- To engage in competent and ethical social work practice and contribute to the development of the social work profession.

As is evident from the aforegoing, the focus in work with vulnerable children and families is on the micro and mezzo level of functioning with the focus on empowering and enhancing individuals from within. Hochfeld (2007) agrees that the implications of continued conservatism in understanding families are profound. It is further seen to have a serious impact on social work as a profession as traditional ideas on the family have not been successfully dislodged. Often personal views of social workers become guidelines for actual practice as some concepts remain conservative by omission, meaning that nothing progressive replaces old ways of thinking (Hochfeld, 2007).

Social workers are expected to confront human suffering and turmoil on a daily basis. The social worker must be able to respond constructively to children and families who are directly affected by poverty, unemployment, neglect, domestic violence, abuse in its various forms, disability and mental challenges, abandonment, HIV/AIDS and all other types and forms of human suffering. Social workers must further be able to deal with these human problems without being distracted or immobilized by their emotional reactions (Shaefor, et al. 1994). Therefore, the balance between the challenges presented by vulnerable children and families to social workers, and appropriate self care alternatives such as trauma debriefing and time-out for social workers, appear absent (Development Corporation Ireland AIDS Conference in Pretoria, 2002).

It would therefore appear logical for social workers to either experience burnout and stress or resistance related to prolonged exposure to the list of social problems that vulnerable children and families face, especially as resources are either exhausted or absent. Coupled with this is the ongoing South African battle for parity in social work salaries. The increasing pressures on social workers to survive and care for themselves in a fledgling democracy has therefore negatively impacted on client services (Perumal in Fokus, SABC 2, 2003). This trend, however, is not unique to

the South African context. Studies done in the United Kingdom presented by Cauvain at the 2006 ISPCAN Conference in the United Kingdom, confirmed this. Is it no wonder that social workers in recent times appear to be abandoning the profession or are they abandoning the country?

2.5 CONCLUSION

As is evident from the literature review, South Africa has its unique challenges but shares many similarities with First World Countries (ISPCAN Conference, 2006). Therefore, although the state places emphasis on family care as a superior option to care in Children's Homes- the emphasis on South African families capacities to cope with caring for vulnerable children appear overrated in view of the historical challenges that the country has faced (Sewpaul, 2005). Anecdotal evidence suggests that the cash component of maintaining a child in a Children's Home is 60% greater than maintaining a child in a foster placement. If families are considered the heartbeat of our country, why is the state not investing more in them, financially as well as physically, e.g. formal training and support as is done in New Zealand, Australia and the United Kingdom? Caring for vulnerable children should be a highly skilled function as children are considered to be country's and community's most valuable assets (Long, 2007, van Niekerk, 2007). Would these skills therefore not be located in Children's Homes where childcare staff are trained and supported? Whilst legislation pertaining to the care and protection of children is being changed, the residual effects of apartheid appear to be prevalent. By hearing the voices of children and their caregivers in alternative care placements, the findings in this study will attempt to uncover and make recommendations in addressing these issues.

CHAPTER THREE

3. RESULTS AND DISCUSSION

3.1 INTRODUCTION

This chapter analyses the data collected with the aim of understanding the experiences of children who have lived in both a foster placement and a Children's Home placement. As discussed in the research methodology, this requirement of hearing the voices of children who were placed in alternative care settings was deemed necessary because the researcher assumed that the experiences of children in such placements may be overlooked when attempting to act in their best interests. In addition to the sample of children used in the study, a second sample of caregivers in alternative care settings i.e. foster parents of foster families and childcare workers from Children's Homes, were purposely chosen to share their experiences of caring for vulnerable children. This was done as the research assumption was that foster families may be inadequately equipped to deal with the challenges presented by vulnerable children and that Children's Homes may be better resourced than foster families to care for vulnerable children. This sample was also considered useful to enhance reliability, validity and trustworthiness of the study.

This study was a qualitative study in which the child participants were subjected to in depth interviews that were guided by interview themes. It is necessary to note that in conducting in depth interviews with the child participants, the researcher had to take into account the ethical considerations discussed in Chapter One and had to draw on her social work skills in dealing with painful memories that the child participants recalled. This often resulted in the researcher providing follow up services to the child participants herself as some of the agency social workers were unable to offer follow up services timeously.

In addition to in depth interviews with the child participants, two focus groups were held with caregivers for the purposes of corroborating and illuminating the information obtained from the child participants. These groups were guided by similar themes. The themes were formulated in line with the overall objectives of

the study outlined in Chapter One. Thus the key concerns explored in both the interviews and focus group discussions were:

- Children's perceptions and experiences of living in foster care and of living in a Children's Home
- Caregivers' motivations for and experiences of caring for vulnerable children
- Services and recommendations

Flowing from this were the following themes that were explored, with both child participants as well as the focus groups with caregivers:

- Legislation governing the care and protection of children
- Children's personal history of placements
- Children's involvement in placements
- Caregivers motivations, perceptions and experiences of caring for vulnerable children
- Education and training
- Professional services and recommendations

Although the interviews with the child participants and focus groups with the caregivers were done independently of each other, it appeared necessary in some instances to enmesh the results obtained from the child participants and the results obtained from the focus groups, in this chapter, under thematic headings since:

- Similar themes were explored with both sample groups (as identified above) and that,
- It flowed logically, for the purposes of illuminating, corroborating and enhancing the trustworthiness of the study, to discuss each theme that was common to both sample groups concurrently.

There were, however, themes that were common to the child participants only and themes that were common to caregivers only, which will be outlined as such, preceding each theme.

The results are presented and analyzed in this chapter under the following headings:

3.2 Sample Details

The study comprised two sample groups namely child participants and caregivers. The sample consisting of caregivers were further divided into two subcategories, which were childcare workers and foster parents.

3.3 Theme 1: Legislation

Theme 1 was common to both child participants as well as caregivers.

3.4 Theme 2: Personal History of Placements

Themes 2 and 3 were explored only with child participants:

- Length of time spent in each placement
- Positive memories of living in foster care and positive memories of living in a Children's Home
- Memories of difficult times whilst living in foster care and living in a Children's Home
- Influences of these experiences before and after the placements

3.5 Theme 3: Child's Involvement in Placements

- Preference of placement
- Changes child participants would have liked in the different placements

3.6 Theme 4: Motivation, Perceptions and Experiences

Themes 4 and 5 were explored with the caregivers only:

- Reasons for caring for a vulnerable child
- Perceptions of fostering/caring for a vulnerable child
- Positive experiences in caring for a vulnerable child
- Challenges related to caring for a vulnerable child and managing these challenges

3.7 Theme 5: Education and Training

- Knowledge, skills and attitudes necessary to cope with caring for a vulnerable child
- Recommendations to enhance capacity in caring for a vulnerable child

3.8 Theme 6: Critique of Professional Services

Theme 6 was explored with both child participants as well as caregivers:

- Critique of professional services by child participants
- Critique of professional services before the placement
- Critique of professional services during the placement
- Critique of professional services after the placement

3.9 Theme 7: Reunification Services

Theme 7 was explored with the child participants only

- Contacts with natural family and significant others in the community

3.10 Theme 8: Recommendations

Theme 8 was explored with both child participants as well as caregivers:

Since this was a qualitative study, in addition to discussing the results concurrently, where themes were common to both sample groups, it was further necessary to tabulate the actual responses of the child participants as well as the responses of the caregivers. Since the study consisted of two sample groups viz. child participants and caregivers, and two alternative care settings viz. foster care and Children's Homes, tabulating the results was considered worthwhile as the qualitative information obtained from the study may be compared at a glance, with ease.

3.2 Sample Details

As discussed in the research methodology, a purposive sampling strategy was used in this study as there were clear criteria for the selection of participants. There were two sample groups that were drawn from the Child and Family Welfare Society of Pietermaritzburg's clientele population:

Sample 1:

- consisted of sixteen (16) child participants, who were the total number of children on the case records of the Child and Family Welfare Society of Pietermaritzburg, in the time period 2003-2006
- who moved through a foster placement to a Children's Home placement or vice versa
- who were in each placement for a minimum period of three months

Sample 2:

- consisted of foster parents of the child participants and,
- key informants viz. childcare workers from Children's Homes where the child participants are or were placed.

Sample 2 was derived from sample one (1). Since this sample pertained to reliability, validity and trustworthiness of the study, this sample was chosen by randomizing to select a manageable sample size.

In choosing the abovementioned sample groups, the researcher anticipated a complementary, holistic understanding of children's and caregivers' experiences in alternative care settings.

3.2.1 Child Participants

Of the 16 child participants, identified by the researcher, 13 consented to participate in the study. Three children withheld consent since they were of the opinion that this study would cause them to relive their experiences of the Children's Home. The 13 child participants were from 8 different Children's Homes. Five had moved through multiple foster placements.

3.2.2 Caregivers

Childcare workers

One (1) childcare worker from each of the 8 Children's Homes, where the child participants were placed, was invited to attend a focus group. Seven Children's Homes consented to participate. Five attended the group discussion. Two apologized for not being able to attend, as those Children's Homes were short staffed and could not release childcare workers without compromising the care of

the children. One Children's Home did not consent to participate in the study as they were unable to conceptualize the relevance of the study. Note: The 3 children who did not consent to participate were from this Children's Home.

It is perceived that the lack of co operation from that Children's Home as well as from the children who were placed at that Children's Home may be due to the Children's Home and children's discomfort in sharing aspects of its operation and its care for vulnerable children . This appears to be in direct contrast to the purpose and function of a Child and Youth Care Centre as stipulated in the Children's Act 38/2005, as such a facility is intended to provide a protective, nurturing environment for a vulnerable child, empowering that child in the process.

As Vos (1997) indicates, childcare staff possess the skills and training required to restore trust and respect for adults which is a prerequisite for education in social life. It would therefore appear that childcare workers would be best placed to share their experiences in caring for vulnerable children, with the intention of their best practices being replicated. This sharing would further enhance the concept of Ubuntu as advocated by the state. This instance however, demonstrates Sewpaul's (2005) criticism of the state's exploitation of the concept of Ubuntu, where childcare workers appear not to want to contribute (give back) to the communities which they serve.

Being employed in the child welfare field herself, the following is of concern to the researcher:

- That there are Children's Homes that are unwilling to share with and learn from experiences of others which may lead to change and
- That vulnerable children are disempowered by being placed in such Children's Homes and therefore refuse for their voices to be heard.

Harmonious working relationships are necessary among all service providers to ensure that the best interests of a child are upheld at all times. This appears to be absent in the case where the Children's Home withheld consent.

Foster parents

One (1) foster parent from each foster family was invited to participate in the foster parent focus group. Although there were 13 child participants, there were 11 foster families, as 2 sibling pairs belonged to the same foster families. Of the 11 foster parents:

Eight (8) consented to participate. Three did not consent to participate in the study as they did not want anything to do with, or related to, the children who were in their foster care.

In contrast to the Children's Home's reason for non participation being directly related to not being able to conceptualise the relevance of the study, the foster parents who refused to participate appeared to have unresolved interpersonal relationships with foster children who moved through their care, therefore wanting to sever all ties with those children. When compared to other countries, this may well be attributed to:

- the lack of support and training that exists in South Africa for foster parents,
- the structural barriers that social workers face in delivering services to foster families and,
- the concept of the "inherent" ability of families to cope with caring for vulnerable children, being upheld, especially in our fledgling democracy (Hochfeld, 2007).

Therefore foster families appear to bear ill feelings towards vulnerable children as they may not have not been exposed to other ways of resolving conflict.

Of the 8 foster parents who consented to participate, 4 attended the group, 2 apologized for not attending due to work commitments, which took them out of town, one (1) experienced a family crisis and one (1) was absent.

Thirteen individual in depth interviews were conducted with the child participants and two focus groups were held with their caregivers. The researcher conducted the interviews by herself but was assisted by one other social worker in conducting each focus group. A dictaphone was used to record the responses, the researcher

having obtained prior permission to do so from each child participant and focus group.

The findings of the study and discussions follow hereunder. The responses presented in italics typify the general responses obtained from the participants.

3.3 THEME 1: LEGISLATION

Theme 1 was explored with both **child participants** as well as **caregivers**.

The participants generally appeared to have a poor understanding of the legislation that guided the process of children who came into the child and youth care system. Very few children understood the reasons for being placed in alternative care.

Some of their responses were as follows:

Social workers took me away from home...(my) mother wasn't there...(I) didn't ask where I was going...(I) was 6 years (when I was removed)(M-10yrs)

I didn't know I was going to (Children's) Homes. Aunty S packed my bags (and) said we going to town but took me to (the) Homes. No one asked if I want to go. (E-11yrs)

There was one (1) participant who had a good understanding of the legislation and processes.

I did go to court. It is an office where I was asked whether I want to stay with (foster) mum. I knew what I was going (to court) for. (C-16yrs)

Some of the responses appeared common to the caregivers as well, as they also indicated that they had little or no knowledge of how the Child Care Act contributed to a child being placed in alternative care. The foster parent group highlighted the role of the agency social worker in facilitating the foster care placements. The group with childcare workers indicated that the residential social worker took care of all the administrative aspects, which included court processes.

It is therefore evident from the child participants as well as from the focus groups that social workers (agency and residential) should bear the responsibility of educating and informing children, foster parents and childcare workers of

processes pertaining to a child's removal and placement in alternative care. Literature supports this finding, since as suggested by Shaefor et al. (1994) that one of the roles of the social worker is to prepare clients with knowledge and skills necessary to prevent a breakdown in a child's placement as the social worker would have adequately prepared the child and the caregiver for all the processes pertaining to a child's removal with specific reference to legislation (court processes) and its importance in serving a protective function for a vulnerable child. In the absence of adequate preparation by the social worker prior to a child's removal, the child as well as the caregivers' emotional functioning may become unbalanced at the thought of appearing in court, making the process of removal traumatic.

Themes 2 and 3 were explored with the **child participants only**

3.4 THEME 2: PERSONAL HISTORY OF PLACEMENTS

3.4.1 Length Of Time Spent In Each Placement

The child participants were not sure of the length of time (in years) they spent in each placement. They did however, allow the researcher to estimate the length of time by them sharing experiences such as the following:

I stayed with my father till he died. Then I went to stay with Aunty S. She took me to the Homes – where you don't stay long. Then I went to another Home and from there I went to stay with Aunty D. Since I'm staying with Aunty D, I got three school reports (E-11yrs).

They were able to clearly identify the different placements through which they moved:

I stayed with my aunty in Ficas Road. When I was 8 years, she packed my bags and took me and my brother to stay at the Homes. We stayed there till we went to my aunty in Jo'burg. She sent us back to the Homes. The Homes sent me to another Home. I ran away from there and the social worker took me to the Place of Safety. I ran away from there. Now I'm staying with my friend (M-16yrs).

Although it is common for children in the primary school stage of development to be less likely to conceptualize length of time in years, the adolescent participants also appeared unable to measure length of time in years. Children, such as the child participants in this study, who face developmental challenges (vulnerable children) are often dependant on the assistance and guidance of adults for such information. The adults in this instance would be the agency and/or residential social worker and the caregivers, viz. the foster parents or childcare workers.

The findings suggest a lack of understanding on the part of vulnerable children in relation to:

- being placed in alternative care as well as
- the reasons for moving through various alternative care placements.

This lack of understanding could possibly be due to insufficient infrastructural support being provided to caregivers, which inevitably impacts on the care provided to children. Should the caregivers have been adequately trained and supported, they may have been able to assist the children in their care to identify the length of time (in years) spent in alternative care. This assistance may have further enabled the child participants to understand the reasons for their moves to different placements. The researcher, being a social worker, was able to assist and guide the child participants in estimating the length of time a child spent in each placement. This was done by taking into account the child's developmental stage, age and maturity as outlined in Brandon, Schofield and Trinder (1998).

3.4.2 Positive Memories of Living in Foster Care and Positive Memories of Living in a Children's Home

The child participants' positive memories of living in both placements are tabulated below, however there was one (1) child participant who had no positive memories in both placements and consistently reinforced her longing to go home to her biological mother:

A (16 yrs):

in foster care: ***There's*** nothing ***nice here... (I) want to be with my mother...***

in the Children's Home: ***I was never happy at the Homes...(I was) always depressed can't remember any happy times. I used to wait for my mother to visit...***

The response of this child is indicative of Laird's concept in Maluccio, Fein and Olmstead, 1986, that the bonds between natural parents and children continue to be prominent long after they are separated. It appeared likely to the researcher that this child may not have adjusted to any alternative care placement since she longed to be permanently in her mother's care in spite of her mother's circumstances being unfavourable to necessitate her return.

The responses contained in the following table poignantly reflect some of the actual words of some of the child participants.

Table 1 Summary: Typical responses of some positive memories of child participants

FOSTER CARE	CHILDREN'S HOMES
SOCIAL OUTINGS ***Going to malls, the beach and restuarants and also visiting friends.***	SOCIAL OUTINGS ***We went to Ushaka Marine and we go to the beach and malls and restaurants.***
CELEBRATIONS ***Christmas and birthdays with cousins and we have fun.***	CELEBRATIONS ***We bake a cake when it's someone's birthday and all celebrate in the cottage or by the pool.***
BASIC NEEDS BEING MET ***They buy me clothes.*** ***We have good food.***	SPECIAL TREATS ***We get nice food like pizza when donors come.*** ***We get new clothing for our birthday and Christmas and we can choose in the shops.***
SENSE OF BELONGING ***(Foster) mum gives me support all the time.*** ***We go to church like a family.*** ***Visit with cousins (of foster siblings)***	RELATIONSHIPS WITH OTHER CHILDREN ***We made friends there.*** ***We shared things with others and helped them.***
CONTACTS WITH NATURAL FAMILY ***My mother visits us whenever she has money and takes us shopping. We don't have to wait for the social worker to say it's okay for mummy to come.***	SPORT ***We play soccer, swim and go fishing.***

FOSTER CARE	CHILDREN'S HOMES
	REWARDS LINKED TO A CHILDREN'S HOME PROGRAMME ***If you behave, you become a leader in the program and you get your own room and more pocket money.***

As is evident from the aforegoing, the child participants identified similar positive memories in both placements. The differences however, lay in human relationships in both placements. The child participants identified a sense of belonging and non-conditional parental contacts as positive whilst living in foster care. One of the key constructs in the Circle of Courage, in order to ensure the holistic development of a child is Belonging (Department of Welfare, 2000). Belonging has to do with a deep sense of relationship or attachment with other human beings, and is seen to be reflected in a sense of relatedness, of care, of love and respect for each other. The findings suggest that the sense of belonging that the child participants identified appeared to be superficial as the child participants did not identify emotional aspects related to "belonging" to a family e.g. a sexually abused child participant not saying: ***"I feel safe now that I'm here (in foster care)."***

It appears possible to the researcher that the above may be so since:

- As indicated earlier, the child participants were unsure as to the reasons pertaining to their removal. Therefore, if the child was not aware that he/she was removed from parental care because he/she was abused there, they may well be unable to link their new placement to being a safe haven for them.
- Children share strong bonds with their natural families and that the bonds between natural parents and children continue to be prominent long after they are separated (Laird in Maluccio, Fein and Olmstead, 1986). It may therefore be possible that the child participants did not identify a deep sense of belonging in foster families, as they felt a sense of loyalty to their natural families with whom they continue to share strong bonds even after being removed from their care.

The child participants linked their positive experiences, whilst living in a Children's Home to material aspects such as good food, clothing and going on social outings. It is of concern to the researcher that human relationships with caregivers and contacts with natural families were not identified as positive experiences in a Children's Home. Child participants did however, identify relationships that they developed with other children at the Children's Home as positive whilst living in a Children's Home.

This lack of a sense of belonging with significant adults in a Children's Home may be due to the following structural challenges:

- Lack of support and training for childcare workers to enable them to be attentive to a vulnerable child's psychosocial needs.
- High social work and childcare worker staff turnover resulting in a lack of continuity as well an inability for a child to develop meaningful, trusting relationships.
- Although the need for human relationships appears to be fulfilled by peers in a Children's Home, this may not always be in the child's best interest. As indicated by Brandon, Schofield and Trinder (1998) peer groups are valued and there can be a great fear of being different or of rejection should a child not follow the behaviour of his peers. As Children's Homes accommodate vulnerable children from differing backgrounds, this may lead to children copying negative behaviours.

3.4.3 Influence of These Experiences Before and After the Placements

The child participants were unable to relate their positive experiences of living in alternative care to significant changes that it had made to their lives.

3.4.4 Memories of Difficult Times Whilst Living in Foster Care and Living in a Children's Home

The following table outlines the memories of the difficult times experienced by some of the child participants whilst living in both placements:

Table 2 Memories of child participants' difficult times

FOSTER CARE	CHILDREN'S HOMES
MISTRUST ***We always argued about my untidiness and dishonesty.*** ***When things go missing they say I'm stealing.***	MISTRUST ***The Homes don't trust us. We cannot have friends outside the Homes. They always checking where we are.***
POOR INTERPERSONAL RELATIONSHIPS BETWEEN FOSTER FAMILY AND CHILD ***My foster sister and I always fight***	NO RELATIONSHIP WITH STAFF ***The social worker came and tried to make a routine but then she left. The principal only gives orders-he doesn't talk or guide us***
ABUSE ***When they thought I stole the beer bottles, they put me out on the veranda to sleep for one week.***	ABUSE ***The childcare workers hit us with wet face cloths, even with the belt.***
METHODS OF DISCIPLINE ***When they caught me smoking, they made me eat two cigarettes and I felt so sick.***	METHODS OF DISCIPLINE ***If we misbehave they give us one chance to change our behaviour but don't say they can help us to change our behaviour.***
CONTACTS WITH NATURAL FAMILY AND FRIENDS BEING BLOCKED ***I really miss my father. My foster mum won't let me contact him so I phoned him from school but he didn't answer.***	CONTACTS WITH NATURAL FAMILY AND FRIENDS BEING BLOCKED ***When my cousin came to visit, she was sent back because she didn't make an appointment. It really hurt me.***
INSUFFICIENT FINANCES ***My foster mum sometimes doesn't have enough money so I have to walk 45 minutes to school. I can't take the taxi.***	LACK OF TRAINED STAFF ***We do our own thing-there's no one to help us with homework or when we upset.***

FOSTER CARE	CHILDREN'S HOMES
CHORES ***They make me do all the hard work...sweep the yard, scrub the pool and you don't get any rewards.***	PEER INFLUENCE ***I feel so lonely so I join the boys that do bad stuff like smoke dagga and benzene.***
DISRUPTION OF PLACEMENT BY NATURAL FAMILY ***When it was my birthday, my father came drunk and smashed everything.***	SURVIVAL OF THE FITTEST ***You get bullied by the popular children and you have to learn to cope cos' no one's gonna help you. If you small you just get ignored.***
FOOD ***My foster mother is sickly and she eats boiled food. I have to eat the same but when she was hosting me, she used to cook separately for me***	

Whereas the child participants were meant to be protected by the Children's Act 38/2005, it appears from the aforegoing that some children's physical, as well as emotional wellbeing was compromised. The child participants identified, among other things, mistrust, abuse and lack of a sense of belonging as common in both placements. Although mistrust whilst living in foster care related to the child participant being blamed for stealing, without any investigations being done by the foster parent, mistrust whilst living in a Children's Home related to the structures of the Children's Home not allowing child participants to have friends/contacts outside of the Children's Home. This lack of trusting relationships in the Children's Home may be due to:

- the caregivers not sharing significant bonds of attachment with the child participants or,
- the caregivers not being adequately trained to cope with caring for a vulnerable child resulting in the caregivers wanting to overprotect children and not taking into account children's needs at the various developmental stages.

The child participants' identification of abuse that they experienced in both placements is also of concern to the researcher as vulnerable children come into the child and youth care system so that they may be protected from all forms of harm and abuse. For the caregivers to use corporal punishment and inhumane methods of discipline such as forcing a child to sleep on the veranda for a week, is indicative of caregivers' inability to cope with challenging behaviour that a vulnerable child may present.

Of further note were foster parents' attempts at creatively accessing foster care grants which is evident in the instance where special food was prepared for the child during the hosting period (pre placement). It appears that during this period, prospective foster parents are "on their best behaviour" in order to ensure that a foster placement is formalized presumably because then a foster care grant may be accessed. Once that child was formally placed in foster care, there appeared to be no further need to "win over" the child or relevant authorities. This appears understandable in view of the high levels of poverty in the country, the lack of alternative social security options and the encouragement from the government to foster children. It is, however, the vulnerable children who become more vulnerable under such circumstances (Jacobs, Shung-King and Smith, 2005).

Another similarity highlighted by some of the child participants was the barriers to reunification in both placements. It was noted that some of the child participants recalled that contacts with their parents and natural family were blocked. This appeared to have had an emotional impact on these child participants as the one participant indicated that she ***felt hurt*** when her cousin was not allowed to visit her without an appointment, when she lived in a Children's Home.

Whilst living in a Children's Home, the child participants shared their feelings of loneliness, helplessness and being left to their own devices as some of their memories of difficult times. This may be attributed to:

- A lack of qualified, trained caregivers and staff
- A lack of trusting relationships between caregivers and children
- A lack of programmes or ability of caregivers to implement programmes
- High childcare and social work staff turnover
- Rules and procedures that are not child friendly

According to the child participants, this lack of support and poor relationships that they shared with their caregivers impacted on them emotionally, causing them to feel a sense of loneliness and thereby resorting to socially unacceptable and self-destructive behaviour such as smoking dagga. Brandon, Schofield and Trinder (1998) confirm this by mentioning that adolescents have a continuing need for attachment relationships and that for adolescents in vulnerable life circumstances, this may result in attachment to negative peer groups. It is therefore necessary for caregivers to be aware of a child's need for belonging and a secure emotional base.

It therefore appears that both foster care and Children's Homes are similarly challenged in providing optimum care for vulnerable children and would benefit from structural support in their efforts to care for vulnerable children.

3.4.5 Influence of These Experiences Before and After the Placements

The child participants handled their difficult times in various ways such as:

- Depriving themselves of food and going to bed.
- Retaliating (fighting back)
- Withdrawing ("keep things to myself")
- Joining negative peer groups and getting into trouble
- Thinking positively and turning bad situations around

The coping mechanisms identified above appear consistent with a vulnerable child's developmental stages (Brandon, Schofield and Trinder, 1998) since vulnerable children are known to be more cautious about revealing their thoughts and fears and may therefore react in ways that internalize their pain e.g. withdrawing or depriving themselves of food or externalizing their pain e.g. fighting back and acts of delinquency. It is further suggested by Brandon, Schofield and Trinder (1998) that children who have struggled to make sense of difficult situations be provided with professional help. This professional help appears to be missing in the instances cited above.

It is further outlined by Brandon, Schofield and Trinder (1998) that in developing a self concept, children:

- Develop a relatively stable and comprehensive understanding of the self
- Refine their understanding of how the social world works
- Develop standards and expectations of their own behaviour
- Develop strategies for controlling or managing their behaviour

It therefore appears evident from the way in which the child participants handled their difficult times, that the self concept that they developed would have dwindled towards "poor", since children who resort to negative peer pressure as well as violence in dealing with challenges are often categorized as having a poor self concept.

The following responses however relate to child participants who were able to think positively and turn bad situations around:

Made me grow up quickly...realized I had to come up with a plan for myself (C-16yrs).

Taught me how to relate to others...found that others are worse off than me (A-14yrs).

Always keep strong, don't let your thoughts drop you (M-15).

The above responses however appear indicative of a lack of support from caregivers, which resulted in children taking on adult responsibilities. According to Brandon, Schofield and Trinder (1998) it is developmentally appropriate for adolescents, the age group to which the above child participants belong, to be able to take responsibility for the decisions that affect their lives. However, most adolescents especially those from vulnerable life circumstances, continue to need consultation with adults who are trusted by the young person and can treat the young person with respect and support them in expressing their wishes and feelings. Therefore, the need for social work intervention as well as trusting, supportive relationships with caregivers appear crucial in the lives of vulnerable children.

Some participants were unsure of the influence of difficult times on their lives:

Can't really say (E-11yrs).

This may be attributed to children blocking out negative memories as a coping mechanism in line with their age and maturity.

3.5 THEME 3: CHILD'S INVOLVEMENT IN PLACEMENTS

3.5.1 Preference of Placement

Although there were child participants who chose to live in Children's Homes, there were also those who chose to live in foster care. These choices appeared to be directly related to who the caregiver was, as well as the child's experiences in that placement e.g. in instances where children experienced abuse whilst living in foster care, those children chose to rather live in a Children's Home. Similarly, children who experienced abuse in the Children's Home were keen to live in foster care.

The overwhelming response was however, in favour of living with natural/biological families with specific reference being made to living with their mothers.

I would like to bring my mum back and hope she gets a good job so I could stay with her. But since that's not possible I'd like to go to a family, any family.

(A-14yrs: removed from mother at age 3, mother died in 2005).

Although children, from early infancy, did not share close bonds with their parents, especially with their mothers, they indicated a desire to live with their mothers. This may be due:

- to an unfulfilled belonging need as well as;
- living with one's natural parents being the socially accepted norm and;
- the romanticized view of natural family superseding all other forms of care.

In the absence of natural family, children chose to live in foster care as they felt that they did not have to ***"watch their backs"*** and ***"compete with other children for attention"*** whereas in the Children's Home ***"you got ignored if you were small"*** and ***"you had to learn to survive."***

The researcher's assumption therefore, that Children's Homes may be better resourced to care for vulnerable children as opposed to foster care, appeared to be disproved in light of the above.

Although both alternative care placements presented challenges to vulnerable children, Children's Homes appeared to face the following challenges:

- A lack of qualified, trained caregivers and staff
- A lack of trusting relationships between caregivers and children
- A lack of programs or ability of caregivers to implement programs
- High childcare staff and social work staff turnover
- Existence of rules and procedures that are not child friendly

This is of concern as informal discussions with stakeholders at the Department of Welfare in the Pietermaritzburg region suggests that infrastructural support exists for Children's Homes, costing the state almost 60% more to care for a child in a Children's Home as opposed to care for a child in a foster home. It appears from the aforegoing, that financial support and aid to Children's Homes may not necessarily amount to optimum care for vulnerable children if human resources, as indicated in the bulleted points above, are not strengthened in the Children's Home. The state therefore needs to address the bulleted points above to ensure that Children's Homes meet their objectives in caring for vulnerable children.

It therefore appears clear that the centrality of the family, which supports the dominant ideology that family care should supersede care in a Children's Home, cannot be negated. Every effort needs to be made to support the family, to enhance its functioning and to avoid separation (Maluccio, Fein and Olmstead, 1986).

Perhaps by asking the state to:

- balance the emphasis on the concept of Ubuntu , which emphasizes collective solidarity that enhances group care and self reliance (Sewpaul, 2005); with
- accepting more responsibility in respect of capacitating families (such as providing a Basic Income Grant to all poverty stricken families),

foster families may be better able to respond to the needs of vulnerable children.

It would therefore appear logical that:

- if a child's best interests are paramount and;
- foster care is considered superior to care in a Children's Home,

that foster families would be adequately supported by the state to ensure optimum care for vulnerable children. This however, does not appear to be happening in South Africa.

Therefore the need for structural sources of support to families in the South African context needs to be magnified.

This may result in families possibly moving away from trying to access a foster care grant as a poverty alleviation mechanism and rather genuinely wanting to care for its children (Jacobs, Shung-King and Smith, 2005).

However, the provision of financial support may not necessarily translate to optimum care for vulnerable children. Therefore, similar to Children's Homes, families may also need to be supported by the existence of a human resource component, such as social work intervention, to bridge the gap between financial aid and quality of care to children. According to Barrat (2002) the ecological perspective suggests that the role of the social worker be redefined as that of a catalyst or enabling agent to identify, create and use necessary resources. This redefinition of the social worker's role may further enhance the operationalisation of the Children's Act 38/2005.

3.5.2 Changes Child Participants Would Have Liked in the Different Placements

The researcher noted that the changes the child participants would have liked in the different placements were directly related to them (child participants) taking responsibility for such change:

If I stay(ed) in (the) Children's Home, I should have not be(en) pregnant (T-17yrs).

It was also evident from the responses received that, in instances where placements broke down, the children felt responsible for the break down in the placement:

I should've stopped smoking so Aunty D wouldn't have sent me back to the Homes. I want to go to my family. (M-15yrs).

From the aforegoing, it appears that the need to feel responsible for everything that goes wrong in their lives, is inherent in vulnerable children. More so if children have moved through multiple placements, irrespective of their age and understanding, it was felt that the problem must lie with them and not with everything around them. This illustrates the goodness of fit, which is central to ecological theory. As a result a child's self esteem becomes depleted and their quest for secure emotional relationships wanes (Brandon, Schofield and Trinder. 1998). This is of concern as it may result in long-term repercussions and problematic behaviour resulting in low self-esteem following even into adulthood.

It is therefore necessary for adults and helping professionals not to underestimate the need for children to have an understanding of the happenings around them in order for them to make sense of difficult situations. Should children have such an understanding, they would be able to refine their understanding of how the social world works therefore enabling them to see where they actually fit in (which may not necessarily translate to them being responsible for everything that goes wrong around them) (Brandon, Schofield and Trinder, 1998).

3.6 Theme 4: Motivation, Perceptions and Experiences

Themes 4 and 5 were explored with the **caregivers only**

3.6.1 Reasons for Caring for a Vulnerable Child

Childcare workers

The responses obtained from childcare workers varied very slightly. Apart from one (1) childcare worker who indicated that she had studied childcare by default by assuming that it was home based care, the others indicated that they had got into the field of childcare for the love of children and the need to understand vulnerable children's emotional and physical needs:

I studied it because I identify with vulnerable children.

Although the childcare workers identified their reasons for pursuing childcare as being rooted in emotional aspects such as wanting to "give" unconditionally to a vulnerable child, the child participants did not identify a sense of emotional security

whilst living in a Children's Home. This may be due to childcare workers possessing the right ingredients to care for a vulnerable child, however not being trained and supported adequately to use these ingredients. In the past, the primary reasons for children being placed in Children's Homes were because they were orphaned, needy or child victims of epidemic outbreaks (Vos, 1997). Presently, according to Knuttson (1997) children requiring alternative care come from dysfunctional families. In order to provide appropriate care for such children, caregivers possessing only the emotional aspects may not suffice.

Foster parents

The foster parent focus group comprised foster parents who were either known to the children prior to placement in their care or were relatives of the children.

They felt that it was their responsibility to care for their kin.

The child is my husband's nephew, his mother died...he went to (a) Children's Home...I must look after him otherwise whose gonna see for him (look after him)?

This response appears to fall in line with the state's emphasis on moral regeneration having its roots within families (Draft National Family Policy, 2005) thereby forcing dispossessed and helpless families to care for vulnerable children with minimal structural support which suggests the state's abdication of its responsibility towards its people (Sewpaul, 2005). It further appears that families believe that it is solely their responsibility to care for their kin, which also makes it easier for the state to abdicate its responsibility to families.

I wasn't gonna go to the Children's Home looking for a child, I got my own children but this child (foster child) my daughter knows her from grade1; now they (are) in grade 11.

I saw the problem she was having in the Children's Home and said she must come to me.

There was one foster parent who indicated that she had always wanted to care for vulnerable children as she considered it a ***"calling and a blessing"*** and ***" wanted to give a less fortunate child motherly love."***

These responses are indicative of foster parents who appear to carry the concept of Ubuntu through by feeling the need to ensure equality and dignity of vulnerable children and to show compassion for such children who are not their kin. Again structural support needs to be provided to such families as will be discussed under the positive experiences and challenges that foster parents experienced.

3.6.2 Perceptions of Fostering / Caring for a Vulnerable Child

The following table outlines the perceptions of caregivers in caring for vulnerable children:

Table 3 Caregivers' perceptions

CHILDCARE WORKERS	FOSTER PARENTS
• To provide a ***sense of belonging*** for the child in order for the child to survive • Need to be a ***role model*** (mentor) to the child as children moving through the system lose hope and self esteem • Need to ***provide what every biological parent provides*** for their children • ***Reunification*** must be active as children often want to be with natural family • Schooling and ***educational needs*** must be met as this has a ripple effect on children's behaviour • ***Love.*** Most children want motherly love. • Childcare workers' ***time and attention*** must be divided equally among all children	• Must be ***motivated*** • ***Spiritual support*** and bible teachings are important in shaping a child's life • Need to ***support and guide*** children as it is important for a child's development • Schooling and ***educational needs*** must be met • A foster child must be ***treated like your own biological child***

CHILDCARE WORKERS	FOSTER PARENTS
• Childcare workers must be ***guided by the job*** and not expect much from children especially because of their circumstances • Understand and know your own limits and that ***"you are the child's nearest punching bag"*** • Need to ***teach responsibility*** by delegating chores e.g. cooking	

The childcare workers and foster parents appeared to share similar perceptions of caring for a vulnerable child. These similarities related to:

- Providing a sense of belonging for vulnerable children
- Supporting and guiding vulnerable children
- Providing and meeting the educational needs of vulnerable children
- Treating vulnerable children as their own biological children

It is noted that although the caregivers identified the above as their perceptions of caring for vulnerable children, the child participants identified a lack of support and guidance from caregivers whilst placed in a Children's Home. The findings also suggest that the child participants were left to their own devices with no one to assist with homework, etc. The caregivers' experiences of caring for vulnerable children and the child participants' accounts of their experiences in the different placements appear to contradict each other. Therefore a gap appears to exist between the children's voices and that of the caregivers but it also appears necessary to take into account Olson, Sibanda, Knight and Foster's (2005) view that children are the experts in their own lives and often bring valuable ideas, information and viewpoints that adults may overlook. It is therefore important to listen to their voices, respond to their concerns and involve them in decisions that affect their lives. Although it appears that adults may have theoretical knowledge in respect of caring for children, they cannot execute this knowledge as there appears

to be a lack of structural support for caregivers to comprehensively attend to a child's needs.

3.6.3 Positive Experiences in Caring for a Vulnerable Child

The following table outlines the positive experiences of caregivers in caring for vulnerable children:

Table 4 Caregivers' positive experience

CHILDCARE WORKERS	FOSTER PARENTS
• Achievements/Personal milestones e.g. obtaining academic awards.	• Achievements E.g. excelling in school and receiving accolades.
• Showcasing talents in national arenas e.g. Reach for the Stars held in Cape Town ***(Our home was so proud.)***	• Showcasing talents in an international arena e.g. S represented his school in gymnastics in Australia ***(We were so frightened when he got on the plane...we never went on a plane. He made me so proud).***
• When children show community responsibility by helping those less fortunate than themselves on a voluntary basis ***(reaching out to street children and sharing their negative experiences because some of them come from the same background)*** Seeing children moving towards fulfilling their goals and seeing their talents.	• Participation in church • ***When the child acknowledges and appreciates our love and caring.*** • ***When the child shows us respect.*** • ***When the child is happy and not showing self- pity.*** When the child shares a close relationship with foster siblings like: ***"we are one family and our blood doesn't make a difference"*** • To see the child portray leadership traits.

The positive experiences similar to both the foster parents and the childcare workers appeared to relate to a sense of pride they felt when the children in their care excelled in school, showcased their talents and showed community responsibility.

The foster parents however, highlighted love, respect and a child being happy as positive experiences (which all relate to a sense of belonging). These emotional growth aspects are necessary for a child to develop a strong self-concept, which ultimately leads to a well-adjusted adult (Brandon, Schofield and Trinder, 1998). Although this appears to illustrate the state's concept that a sense of belonging is unique to family care and perhaps, therefore, the state idealizes family care, it appears to remain a tall order for South African families with minimal assistance from the state.

3.6.4 Challenges Related to Caring for a Vulnerable Child and Managing These Challenges

The following table outlines the challenges that caregivers' experienced in caring for vulnerable children and the ways in which they overcame these challenges:

Table 5 Caregivers' challenges

CHILDCARE WORKERS CHALLENGES	CHILDCARE WORKERS SOLUTIONS
Routine is disrupted when children go home for holidays	Re-teach rules when children return from holidays.
Alcohol and drug abuse due to availability in the community	Refer to SANCA and NICRO Use spirituality and bible teachings Counselling Access rehabilitation services
Absconding and influencing other children to abscond	Change methods of discipline Set realistic rules
Manipulation	Enhance and maintain communication among all caregivers, including the guards
Stigma attached to children coming from Children's Homes (often referred to unloved rejects)	Positive reinforcement and encouragement
Anger and aggression	Need to possess a high degree of tolerance and remember the parameters of the job. Need to remember that you are the child's nearest "punching bag."
Children being unable to see bad in biological families	Provide a loving and supportive environment
Filling children's spare time	Formulate programs to use up spare time
FOSTER PARENTS CHALLENGES	**FOSTER PARENTS SOLUTIONS**
Foster child became pregnant	Kept the baby and prevented baby's father from visiting
Mood swings	Leave child to herself by giving her space Communicate when she is calm and ready

FOSTER PARENTS CHALLENGES	FOSTER PARENTS SOLUTIONS
Child not feeling a sense of belonging in the family	Open family discussion welcoming the child when the child first arrived Getting the foster child and own children to do grocery shopping on their own
Untidiness/Chores/Rules	If the foster child does not iron clothing the night before, foster parent hides away the iron When the foster child does not put his washing into the wash basket but piles it up in the cupboard, he has to do his own washing
Physical disabilities (Visually impaired child)	Foster parent focuses on the foster child's positives e.g. he reads well – gets him to "read off" with other children, who have good vision. Foster child performs better than other children which boosts child's confidence
Missing natural parents	Talk about it Try to fill the gaps e.g. getting biological adult son to carry foster child on his shoulders as the child experienced with his father Show extra love and affection Pray and draw on spirituality
Children in the community labeling foster children	Reinforce your love for the child

The childcare workers as well as the foster parents identified the challenges tabulated above with seemingly appropriate, practical ways to manage these challenges. Of concern though, is the instance where a foster child became pregnant whilst in foster care. It appears that should adequate social work support have been provided to that family, the child may have been educated on precautionary measures pertaining to pre marital sex, which may have prevented the teenage pregnancy. Further to this, the foster parent continues to appear unable to cope with the situation by disallowing the baby's father access to the baby. This may lead to the foster child resorting to defiant methods to maintain ties with the baby's father, ultimately resulting in a breakdown of the foster placement. Hence the need for active social work intervention with foster families.

3.7 THEME 5: EDUCATION AND TRAINING

3.7.1 Knowledge, Skills and Attitudes Necessary to Cope With Caring for a Vulnerable Child

The following table outlines the knowledge, skills and attitudes that caregivers considered necessary in caring for a vulnerable child:

Table 6 Knowledge, Skills and Attitude Comparison

	CHILDCARE WORKERS	FOSTER PARENTS
Knowledge	Learning from personal experiences 90% of learning comes from within ourselves National Association of Childcare Workers (NACCW) training Basic Qualification in Childcare (BQCC) Other trainings related to the various sports codes Life-skills training Reading literature In-service trainings (keeps you motivated and refreshed) Daily meetings to brainstorm ideas Networking with other Children's Homes	Background information on the child is necessary to cope with challenging behaviour Need to possess appropriate knowledge of children's development and current issues relating to development Group support from other foster parents
Skills	Social skills Teaching children to care	Being able to adapt to a vulnerable child's needs

	CHILDCARE WORKERS	FOSTER PARENTS
	for themselves To be multi skilled in sport (swimming, cricket, etc) Mindful and respectful of other cultures Accountability Uniform rules Empathy Conflict resolution Speak in one voice	Ability to discipline a vulnerable child Address problems as soon as they occur Teaching values and morality
Attitudes	Keep reminding yourself of what your job is Keep positive Resolve conflict immediately – do not take to heart Tolerance Responsibility Self awareness	Responsibility Honesty Respect for self and others Perseverance

Childcare workers identified formal trainings such as the Basic Qualification in Childcare (BQCC) as knowledge necessary to care for a vulnerable child. In contrast to these formal trainings, foster parents identified the need to be knowledgeable about a vulnerable child's background and the developmental stages of children, in order to cope with their care. This may be attributed to:

- childcare workers having an expectation of formal training as part of their job as well as knowing what is out there having been exposed to previous formal training whereas;
- foster parents not being aware that they may also be trained as foster parents as is done in other countries e.g. caregiver orientation and completion of eight-three hour modules is one of the recommendations necessary to qualify as a foster parent in Canada. (www.child.gov.ab.ca).

Although the skills and attitudes identified by the caregivers appear to bear similarities, the differences lie in foster parents tapping into the human element with emphasis on morality and values and the ability to impart such values to vulnerable children. The childcare workers identified the need to be able to impart survival skills to children such as teaching children to care for themselves e.g. personal hygiene and taking care of their belongings as well as teaching them to swim so that they may be able to keep themselves safe at the pool and beach. This ties in with the social outings that children identified as positive whilst living in a Children's Home and therefore makes sense that children need to possess these skills to keep them safe at the beach. The foster parents may not have identified these skills as necessary as their circumstances may not allow them to go on such social outings where children require such skills but rather to go to church as a social outing where emphasis is on morality and values.

The attitudes identified by the childcare workers related to being positive and taking charge of situations as their role in caring for children was their employment and as in any job situation, one needs to be responsible, tolerant and aware of one's self. They further identified resolving conflict and not taking conflict situations to heart as helpful. Caring for children is an emotional responsibility and since childcare is a form of employment, it may be easier for childcare workers to let go of the emotional aspects related to caring for children. However, foster parents may

struggle to do the same as their role is that of a substitute parent (Barrat, 2002). As is evident from the foster parents' responses, the attitudes identified by them contained a strong human element, with respect, honesty and perseverance being key elements.

From these it may therefore appear no wonder that family care remains the dominant ideology. However, South African families need the state to provide structural sources of support to enhance this function.

3.7.2 Recommendations to Enhance Capacity in Caring for a Vulnerable Child

The following recommendations were made by the caregivers to enhance their capacity in caring for a vulnerable child. These recommendations appear to support the aforegoing discussion with emphasis on the need for structural sources of support for foster parents as identified below:

Table 7 Recommendations to enhance caregivers capacity

CHILDCARE WORKERS	FOSTER PARENTS
• Team work: inter team support, speaking in one language and employing uniform rules	• Group support • Support from the social worker • Pre preparation for placement

3.8 THEME 6: CRITIQUE OF PROFESSIONAL SERVICES

Theme 6 was explored with **both** child participants as well as caregivers with critique of professional services and recommendations.

3.8.1 Critique of Professional Services by Child Participants

Although the child participants were asked to critique the professional services that they received before, during and after their placement in alternative care, they appeared unable to differentiate along those timelines.

The children highlighted the counselling and supportive services that they received from social workers as helpful and specifically outlined the social workers' role in securing host and foster families for them. Reunification services therefore appear to be active and important to children in alternative care. The social worker's visibility further enhances a child's ability to form trusting relationships with significant adults.

3.8.2 Critique of Professional Services By Caregivers Before the Placement

Unlike the child participants, childcare workers as well as the foster parents were clearly able to critique professional services along the specified timelines. The foster parents found the agency social workers very helpful in preparation for a foster placement. However, in contrast to the child participants and foster parents' views, childcare workers felt that there needed to be more consultation with them, prior to the child's placement, as this is often not done. Often this may be attributed to communication structures within the Children's Home being dented by high staff turnover or staff shortages.

There were those child participants who were confused as to who the agency social worker was, who the institutional social worker was and who the childcare worker was. They further indicated that social workers placed them in alternative care and provided no follow up services, which is consistent with the responses of the childcare workers. According to one (1) child participant, the quality of care in the Children's Home changed negatively when the management had changed. One (1) child participant felt that the counselling services offered by the social worker at the Children's Home was unhelpful as it was painful for her to relive the past since she had moved through multiple placements, having retold her story many times along the way. This may be due to the lack of continuity in the social work profession resulting in inexperienced social workers dealing with vulnerable children, unknowingly, causing more stress and trauma to children.

3.8.3 Critique of Professional Services by Caregivers During the Placement

The childcare workers reported that the agency social workers rarely have contact with children once placed in the Children's Home. The childcare workers further outlined that they are dependant on the institutional social worker for support in caring for a vulnerable child. This could again be related to the communication structures that exist in Children's Homes, where institutional social workers and agency social workers conduct case reviews excluding childcare workers, who are essentially the primary caregiver of a child in a Children's Home.

The foster parents who attended the group still have foster children in their care and indicated that they presently continue to receive support from the agency social worker.

3.8.4 Critique of Professional Services by Caregivers After the Placement

The childcare workers indicated that there is hardly any contact with the child or the agency once the child has left their care. Some Children's Homes have school leavers' programs, Old Boys' Clubs and their own tracking systems to keep in contact with the children who have passed through their care. There were Children's Homes that appeared proactive in preparing children to leave their care, thereby reducing their dependency on agencies especially in view of the lack of services from agencies post placement.

3.9 THEME 7: REUNIFICATION SERVICES

Theme 7 was explored with the **child participants only**

3.9.1 Contacts with Natural Family and Significant Others in the Community

Seven of the child participants had contact with their natural family, 4 did not have contact with family, one (1) visited hosts and one (1) visited friends in the community. Reunification services therefore seem to be given prominence as contacts with natural family and significant others were maintained in most instances. This is consistent with current legislation, which makes specific provision for reunification with natural families provided that it is in the best interest of the child (Children's Bill [B19-2005]). In those instances where children did not have contact with family, they indicated a desire to visit host parents in the community. It again appears evident that children prefer family care as opposed to living in a Children's Home.

3.10 THEME 8: RECOMMENDATIONS

Theme 8 was explored with **both** child participants and caregivers

The following were the recommendations made by children:

If you are living in a (Children's Home), hang on as tight as you can and make the most of it (M-15).

Children can't always make decisions for themselves but should be given the opportunity to participate in decisions made for them (C-16)

Watch your back when you live communally (S-14)

Talk to someone you trust (A-17)

In making recommendations, the child participants appeared to refer to turning situations around or methods of coping with situations whilst living in a Children's Home. No recommendations were made with regard to living in foster care. This appears indicative of children preferring to live in foster care and therefore not wanting to change anything related to foster care.

The following were the recommendations made by childcare workers

Involve children in decision-making

Acknowledge the differences between the childcare worker and the social worker and use these differences to complement each other in caring for children

Acknowledge the role of the childcare worker

The foster parents did not make any recommendations apart from those in 3.7.2 above.

3.11 CONCLUSION

In this chapter, the researcher presented the findings in respect of the key questions outlined in Chapter One. It appeared clear from the findings that the centrality of the family, which supports the dominant view that family care should supersede care in a Children's Home, cannot be negated. It appeared that every effort must be made to support the family to enhance its functioning, as children preferred to live in family settings as opposed to Children's Homes. In spite of Children's Homes receiving financial support from the state to care for children, it appeared that human resources within Children's Homes needed to be strengthened to ensure optimum care for children. This was in direct contrast to the researcher's assumption that Children's Homes may be better resourced to care for vulnerable children as opposed to foster families. However, the need for structural sources of support for both alternative care options was magnified in light of the above.

CHAPTER FOUR

4. SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

4.1 INTRODUCTION

This chapter contains the conclusions and recommendations of the study.

The conclusions will be contained under the main objectives of the study which were conflated for ease of reading and will be linked to the key assumptions of the study. Following these conclusions will be the recommendations suggested by the caregivers as well as the recommendations suggested by the researcher.

The ***main objectives*** of the study are listed below.

Objective 1: To understand children's perceptions of foster care

This objective incorporates the objective pertaining to children's positive and negative perceptions and experiences of living in foster care.

Objective 2: To understand children's perceptions of a Children's Home

This objective incorporates the objective pertaining to children's positive and negative perceptions and experiences of living in a Children's Home.

Objective 3: To understand the experiences and challenges of foster parents and of key informants in Children's Homes in caring for vulnerable children

The ***key assumptions*** of the study were the following:

- The experiences of children in alternative care settings may be overlooked when acting in their best interests.
- Foster families may be inadequately equipped to deal with the challenges presented by children in need of care.

- Children's Homes may be better resourced than foster families to cope with the challenges presented by children in need of care.

These were researched via a qualitative study that was based on the exploratory and descriptive designs. A purposive sampling strategy was used in this study as there were clear criteria for the selection of participants. There were two sample groups: one consisted of child participants and the second consisted of caregivers viz. foster parents and childcare workers.

Data was collected by means of semi-structured in depth interviews with the child participants. Two focus groups were held with caregivers for the purposes of enhancing reliability, validity and trustworthiness of the study. Both the in depth interviews as well as the focus group discussions were guided by similar themes that were linked to the main objectives of the study.

4.2 CONCLUSIONS

The conclusions pertaining to Objective 1 and Objective 2 will be presented together as this study contained an element of comparison between the two alternative care placements.

Objective 1: To understand children's perceptions of foster care

This incorporated the objective pertaining to children's positive and negative perceptions and experiences of living in foster care.

Objective 2: To understand children's perceptions of a Children's Home

This incorporated the objective pertaining to children's positive and negative perceptions and experiences of living in a Children's Home.

In meeting these objectives, the researcher explored what the child participants considered as positive and what they considered as negative whilst living in both placements. In addition to exploring children's experiences, this study also explored child participants' understanding and level of involvement in decisions that were made for them regarding their alternative care placements.

The researcher concluded that children were:

- Not party to the decisions that were made for them regarding their best interests
- Not aware of the reasons for their removal from their families of origin
- Not aware of the legal processes pertaining to their removals
- Were unable to identify the length of time they spent (in years) in each placement as they were not adequately supported by their caregivers to provide such information.

This conclusion supports van Niekerk's (2007) call for increased child participation in policy formulation. The researcher agrees with van Niekerk (2007) that professionals traditionally work from a position of authority that is based on hard earned years of experience and training. This experience and training, may at times, prevent these professionals from realizing that children and young people may actually be the best experts on childhood and youth. It is therefore necessary to complement professionals' voices with children's voices in acting in children's best interests. As Fowler (2003) suggests, including children in decision-making, contributes significantly to decisions that are to be made about them without leaving them with the responsibility of decisions that are made for them.

In this study it was evident that child participation was absent in acting in the child's best interests.

In light of the above, the researcher's assumption that:

- the experiences of children may be overlooked when acting in their best interests; was confirmed.

In exploring children's positive experiences of living in foster care and living in a Children's Home, it was concluded that:

- In both placements, positive experiences for children translated to their material and basic needs being met e.g. social outings and celebrations were highlighted as positive

In foster care:

- Children identified nurturing relationships with foster families as positive
- Contacts with their natural families were also identified as positive
- Children felt a sense of loyalty to their natural families irrespective of the families' circumstances

The findings in this study confirm a child's need to remain in contact with his/her natural family even after he/she is placed in alternative care (Mallucio, Fein and Olmstead, 1986).

This finding further proves what the Children's Bill [B19-2005] identifies as the two main purposes of foster care:

- To protect and nurture children and,
- To be committed to family reunification

According to Mallucio, Fein and Olmstead (1986) ecological theory makes room for the significance of the biological family in the development and functioning of a child. In child welfare practice, ecological theory moves away from pathology to a developmental (health/growth) orientation. Ecological theory in child welfare practice recognizes parents as full partners in the helping process and family preservation is given prominence. Children too feel a deep sense of belonging and loyalty to their families of origin.

In South Africa, the Department of Welfare (2000) proposed a tool for social workers, working with children and families, called the Developmental Assessment of Children, Youth and Families to meet this developmental need. The four key areas of development outlined in this tool are: Belonging, Mastery, Independence and Generosity which focuses on the inherent strengths of families to meet a child's developmental needs. However, social workers are not adequately trained to use this tool nor are there resources available to effect the use of this tool with poverty stricken families. Therefore there is need for these structural constraints to be addressed.

In the Children's Home:

- Sport, rewards linked to the Children's Home programme and relationships with other children were seen as positive
- Children's emotional needs were fulfilled by their peers, hence the relationships with other children were viewed as positive

Findings thus pointed to Children's Homes valuing peer support over nurturing relationships as discussed by participants in foster care. A Children's Home is not mandated by legislation to provide the "human element" of nurturance in caring for a child, rather its (Children's Homes) main purpose is to provide care for more than six children in accordance with a residential care programme suited to children in a specific facility (Children's Bill [B19-2005]). The researcher agrees with Brandon, Schofield and Trinder (1998) that children in alternative care need secure emotional relationships with adults.

Vos (1997) confirms that the childcare staff play a critical role in assisting a child with his/her development in a Children's Home and therefore a child may easily be reintegrated into society if mentored adequately by childcare staff.

However, peer groups play a significant role in a child's development (Brandon, Schofield and Trinder, 1998) and it becomes easier for children in the absence of emotional relationships with adults, to look to their peers for this support. Unsupervised, children's future may be ominous. The dangers of peer support without adult monitoring may result in poor decision making by children, a poor self-concept and tendencies to move towards negative peer influences such as gangs, etc.

In exploring children's negative experiences of living in foster care and of living in a Children's Home, the overall conclusion was that:

- The physical and emotional wellbeing of children were compromised in both placements.

In foster care:

- Insufficient finances, chores and creative ways of accessing the foster care grant were highlighted as concerns.

The researcher agrees with Germain and Gitterman (1980) that people can best be understood and helped within their significant environment and that the family is the most intimate environment of all. However, according to Jacobs, Shung-King and Smith (2005) there is an increasing number of poverty stricken families who are caring for orphaned children and relying on foster placements as a way to access the more substantial financial support offered by the foster care grant; which supports the conclusion above.

Instead of the state responding creatively to these families by providing a Basic Income Grant (BIG) for all or extending the child support grant, it has implemented systems such as the South African Social Security Agency (SASSA). Although one of SASSA's functions is to speed up the foster care grant application process, the other is to root out social security fraudsters. These social security fraudsters include poverty stricken grannies, in receipt of foster care grants, who are taking care of multigenerational families. Therefore these grannies obtaining foster care grants although the parent/s of their grandchildren reside in the same home, will be prosecuted if reported to SASSA. Suspending their foster care grants and prosecuting them inevitably places financial strains on foster families which compromises their capacity to cope with children in their care. In view of the above it is not possible to provide vulnerable children with optimum care within a family setting, without supportive infrastructure. Thus it appears that the ecological framework needs to be supported by a structural approach to address these inequalities and provide for families' basic needs.

In the Children's Home:

- A lack of trained staff, negative peer influence and survival of the fittest were highlighted as negative experiences

It may therefore be concluded that although Children's Homes are financially better off than foster families, there is a distinct weak human resource component that

exists in Children's Homes. According to Vos (1997) and Knuttson (1997) historically, Children's Homes were established to care for orphaned, needy and child victims of epidemic outbreaks.

However, presently children requiring alternative care come from dysfunctional families. The researcher agrees with Barrat (2002) that for some children who have experienced emotional, physical and/or sexual abuse in their biological families, the closeness of living in another small nuclear family such as a foster family may be frightening. The emotional distance offered by a Children's Home may therefore provide a protective environment for the child. As indicated earlier, childcare staff play a critical role in assisting children in their development and as such need to be skilled and trained (Vos, 1997).

In this study, the support of significant adult caregivers in the Children's Home appears absent. This results in children depending on their peers as opposed to children depending on adult caregivers. There is therefore an urgent need for therapeutic programmes to address such a child's social development through specialized and professional interventions before irreparable damage takes hold. According to Brandon, Schofield and Trinder (1998) children depend on their peers throughout their development but would need consultation and support from significant adult caregivers to make the right choices in life.

The above are concerns necessitating a structural approach to create supportive infrastructure for both foster parents as well as childcare workers e.g. the need for social work intervention to support caregivers, as well as caregivers possessing skills in developing trusting, supportive relationships with children.

In exploring the influence of these positive and negative experiences on the child participants, it was concluded that in both placements:

- Children either internalized their pain (by becoming withdrawn) or externalized their pain (by joining negative peer groups)
- Children assumed adult responsibilities in the absence of support and encouragement from their caregivers

In understanding children's experiences, it is necessary to understand their stages of development. In so doing, the researcher agrees with Brandon, Schofield and

Trinder (1998) that young people who have experienced adversity in the form of abuse or neglect may find the changing nature of personal relationships (e.g. new caregivers and/or peers) very challenging. It is therefore necessary, as indicated earlier as well, for these young people to have a chance to consult with adults who are trusted by them. Coupled with this trust, is the need for the adult to provide support and respect to the young person, which was largely found to be absent in this study.

In exploring where the child participants preferred to live, it was concluded that:

- Children preferred to live with their families of origin irrespective of their families' circumstances or inability to keep them safe

However, between the alternative care options viz. foster care and Children's Homes:

- A majority of the children preferred to live in foster care as opposed to Children's Homes.

This was in spite of foster placements having broken down e.g. a child participant was put out on the veranda to sleep for a week when the foster family thought that he had stolen their beer bottles and sold them. Although this child is now in a Children's Home, he would prefer to live with another foster family as opposed to the Children's Home.

It can therefore be concluded that the centrality of the family (which supports the dominant ideology that family care should supersede all other forms of care) cannot be negated. From an ecological perspective a child's separation from their family of origin results in relationships being fractured at the micro level of functioning. The child needs to adapt to this change in environment in order to cope successfully and function harmoniously in this new system (Kasiram, 1992). However, as the aforegoing conclusions suggest, there is a need for trusting relationships between caregivers and children, which will foster a sense of belonging in the placement. These structural sources of support are needed to keep this reciprocal relationship between the child and the placement balanced.

This conclusion supports what Maluccio, Fein and Olmstead wrote in a London publication in 1986 that the bonds of attachment between a child and his family of origin remain strong even after being placed in alternative care. These strong bonds are indicative of a child's sense of belonging within his/her family of origin. The researcher concurs with Moodley (2006) that family preservation needs to be given priority as the removal of children in some instances may be avoided. Therefore there is a need for family preservation programmes with emphasis on parenting skills as part of an early intervention strategy in Child Welfare agencies. This empowerment strategy will capacitate families of origin, leading to fewer children being removed and placed in alternative care.

It was further gleaned from the findings in this study that a "true" sense of belonging may be easier to attain within a foster family as opposed to a Children's Home. It is within a family that a child grows up, develops and forms a sense of identity and competence. The state therefore needs to competently address poverty of all South African families whilst also responding to a child's placement needs.

The researcher agrees with Sewpaul (2005) that structural sources of support are necessary since the South African context testifies to a historical unequal distribution of resources for different racial groups, rendering many of them incapable of comprehensively caring for their children. Hence, the need is for an application of both a structural and ecological framework to repair inequality to ensure a goodness of fit between child and placement, at micro and/or macro levels.

In asking children to critique professional services provided to them, it was concluded that:

- Social work support was provided to children in some instances but this support was directly linked to reunification services such as visiting family of origin over holidays; and the social worker's ability to secure host and foster families for children
- Psycho social support was not prominent for children as there was no identification of any therapy that may have been provided for them

According to Sheafor et al. (1994) one of the roles of the social worker is to help individuals and families to improve their social functioning by helping them to better understand their attitudes and feelings, to modify behaviours and learn to cope with problematic situations. In the South African context, the strenuous challenges facing families are largely due to its' historical past. In addition, social workers are ill equipped and under resourced to meet these challenges. Hence the "band aid" nature of services offered by social workers to vulnerable children. The researcher therefore agrees with Sewpaul (2005:311) and Sheafor et al. (1994:16-27) that effective social work services need to be underpinned by a structural social justice approach.

Objective 3: To understand the experiences and challenges of foster parents and of key informants in Children's Homes in caring for vulnerable children

In exploring the experiences and challenges of caregivers, it was concluded that the reasons given by the caregivers for caring for vulnerable children were in most instances contradictory to the child participants' experiences of living in both placements.

The caregivers' reasons for caring for vulnerable children were the following:

- Childcare workers pursued the field of childcare since they wanted to understand vulnerable children and meet their emotional and physical needs
- Foster parents felt responsible for their kin and therefore fostered children related to them

As discussed in Chapter 3, caregivers shared similar perceptions of caring for vulnerable children, which related to providing a sense of belonging, support and guidance in meeting educational needs. However, in hearing the voices of children, it was concluded that:

- A disparity existed between the well meaning intentions of the caregivers and the actual care provided to children

According to the researcher, as well as local and international writers and researchers, such as van Niekerk (2007) and Long (2007) it appears necessary that the voices of children be magnified but balanced with social work support in determining their best interests.

This empowerment strategy will promote both a goodness of fit between children and their environments to orchestrate changes in their own lives (ecological approach) and from a structural perspective, may diminish dominant and oppressive adult influences that may not necessarily comprehensively address their needs.

In exploring caregivers' experiences in caring for vulnerable children it was concluded that positive experiences were linked to:

- Pride, joy and honour that foster parents and childcare workers felt when children in their care excelled academically, in sport or showed initiative in community projects

Although these similarities existed between the two groups of caregivers, in addition to these positive experiences, the foster parents also linked their positive experiences to obtaining an inner satisfaction when children in their care acknowledged their care and affection, showed respect and fitted into their family.

A sense of belonging therefore appears innate in families as opposed to Children's Homes (Draft National Family Policy, 2005). According to the Circle of Courage (Department of Welfare, 2000) belonging is a key construct in a child's development. However, according to the child participants, a sense of belonging did not exist in a Children's Home but existed in foster care albeit at a superficial level (as discussed in Chapter 3). McKay (1994:80) refers to children needing sensitive, individual attention, familiar surroundings and intellectual stimulation. Although none of these may be available through living in a Children's Home, it is equally true that a depleted, deprived family environment (where parents have perhaps died of AIDS) cannot hope to provide for these needs either.

Therefore the stark difference in legislative requirements and existence/insistence of programmes in both placement options is of concern and needs to be addressed using a structural-ecological framework.

The caregivers' challenges were linked to:

- Reunification
- Inability to cope with children's challenging behaviour
- Inadequate support for children with disabilities in foster care
- Fitting in to the Children's Home programme/foster family

The challenges listed above, although rooted in structural deficiencies such as inadequate support to foster families and Children's Homes, also have roots in the ecological framework. At the micro level of functioning, the child's sense of belonging and functioning within families is unbalanced when families are unable to respond to a child's reunification needs or a child's challenging behaviour.

Although Children's Homes were able to manage these challenges, foster families were more creative and resourceful in managing challenges. The bureaucracy in Children's Homes may have contributed to the lack of creativity employed in dealing with challenging behaviour. Since foster families do not have to run ideas by management structures first before implementing them, it was easier for foster families to manage challenges creatively and timeously e.g. giving all the children in the foster home (biological and foster) the task of feeding the family that evening. A foster child who is feeling left out will have to work together with the family to ensure that they all have a meal that evening. This exercise allows bonds to develop within the foster family.

These spontaneous, creative methods employed by families in coping and caring for children need to be tapped into and harnessed by social workers which may then be replicated to benefit both foster families as well as Children's Homes. Thereby, space may be created for bonds of attachment within Children's Homes, with adult supervision. However, against the backdrop of South Africa's historical past, it is necessary for these creative coping skills to exist alongside a supportive infrastructure such as education, training and support for caregivers with special attention to relationship building skills. These training programmes need to be standardized across the country and run by social workers who themselves are trained in the programme. These training programmes need to exist as a series over the period of time that a child is in alternative care.

In view of the above the following ***assumptions*** were confirmed:

- Foster families may be inadequately equipped to deal with the challenges presented by children in need of care

and

- Children's Homes may be better resourced than foster families to cope with the challenges presented by children in need of care;

However, both placements lacked supportive infrastructure as is evident in families continuing to ail under poverty stricken conditions and Children's Homes being financially able but lacking a strong human resource component. In both instances, the care of children is clearly compromised as a result of structural deficiencies such as:

- A lack of financial assistance to all poverty stricken families e.g. an increased and extended Child Support Grant (CSG) and/or a Basic Income Grant (BIG)
- Childcare workers not being adequately supported with programmes to supplement their basic qualifications and training (which include relationship building skills, forming trusting relationships, and fostering a sense of belonging with vulnerable children.
- Childcare workers not being adequately trained in legislation pertaining to children and/or specific policies formulated by the state relating to the care of children.
- Childcare workers not being equitably remunerated with market related salaries.

4.3 RECOMMENDATIONS

4.3.1 Caregivers' Recommendations

The following recommendations were suggested by the caregivers:

- Knowledge in caring for children needed to be linked to formal education
- Caregivers required skills which were linked to various training programmes e.g. life-skills training, training in sports codes, etc.

- Although childcare workers possess basic qualifications, further support was suggested in enhancing their skills
- Foster parents were unaware of the possibility of formal trainings for them as caregivers as this does not occur presently
- Foster parents required knowledge on a child's development and reasons for a child coming into care in order to enhance their care for children.

A strong need for formal education and training was identified by childcare workers as opposed to foster parents. This may be due to the belief that childcare workers need to fulfil a job function as opposed to foster parents who are tasked with nurturing children. Caring for vulnerable children is a highly skilled function and as such maximum support needs to be provided to caregivers. However, the state continues to formulate policies such as the White Paper (1997) and the Draft National Family Policy (2005) to foster self-reliance within families without taking into consideration the structural constraints families face.

Since the child participants have shown a preference for living in foster care as opposed to a Children's Home, foster parents need to be trained and equitably remunerated as is common practice in Australia, Canada, New Zealand and the United Kingdom (Cauvain, 2006).

The following conclusions were drawn from the caregivers' critique of professional services:

- Foster parents are in receipt of information pertaining to logistics from social workers, prior to a child's placement. However, there was a sense that with more engagement from social workers, they would have been better able to cope with children's challenging behaviour
- No therapeutic intervention from social workers was identified by foster parents, suggesting that the services received from social workers were 'surface level' interventions as opposed to therapeutic interventions
- Social workers (agency and institutional) do not network with childcare workers adequately prior to the child's placement thus resulting in the formulation of poor care plans for children which impacts on reunification and permanency planning.

- Childcare workers are supported by institutional social workers during a child's placement, this generally resulting in holistic services in the Children's Home. However, support from the agency social workers are absent, impacting on permanency planning.
- Contacts with agency social workers are minimal during and after a child's placement in a Children's Home, creating challenges for reunification and permanency planning.

As indicated by the researcher in Chapter 2, the high caseloads at agencies, high social work staff turnover and lack of appropriate self care alternatives such as trauma debriefing for social workers contribute to the above conclusions.

4.3.2 Researcher's Recommendations

Emanating from the conclusions and suggestions made by the caregivers, the researcher's recommendations are contained under the following themes:

- Children as partners
- Pre-placement preparation
- Standardized child protection procedures
- One-stop service centres
- Sense of belonging
- Education, training and support for caregivers
- Care for carers
- Social work services
- Families of origin
- Support groups
- Teamwork
- Future research

Children as partners

In view of the conclusion that child participation appeared absent when placing children in alternative care, it is recommended that children be considered, by social workers, as "partners" when acting in their best interests. In so doing, there is a need for social workers to engage with children directly, with therapeutic

interventions such as counselling services and/or by using child friendly resource materials. These materials may be interactive such as readers, digital video discs (DVD's), compact discs (cd's) or board games, all related to the reasons for children's removals and processes involved thereafter. This interaction will allow children to relax and participate in decision-making without feeling intimidated and stressed.

Pre-placement preparation

In deciding to place a child in alternative care, there is a need for pre-placement preparation. This would be seen to enhance a child's participation in decision-making. As part of pre-placement preparation, orientation to the new placement needs to take place, possibly in the form of a weekend stay at the proposed placement. A review should be held with the child thereafter. Although a weekend stay is not sufficient to ensure that a child fits into a placement, the child's curiosity about the placement will be satisfied prior to admission. Further, the child will be able to discuss any fears or concerns with the social worker at the recommended post-orientation review.

It is further recommended that the child be taken to court prior to a Children's Court Inquiry, for a trial run, so that the child is not intimidated during the actual finalisation of the Children's Court Inquiry. By removing the discomfort of an unfamiliar environment, a child's participation may be greater.

Standardised child protection procedures

It is recommended that national standardized child protection procedures be documented in a manual to ensure that minimum standards are upheld across the country when dealing with vulnerable children. This manual should become the social workers' (in Child Welfare) guide to child protection and should ensure that a child's voice is considered when acting in his/her best interests.

One-stop service centres

The use of one-stop service centres for children is recommended. Although this concept exists currently, these centres are under- resourced and appear to operate without updated national guidelines. As a result families are unable to access the intended services. One-stop centres need to provide for children's medical, psychological and educational needs via strengthened inter-professional

collaboration. Hence, psychologists, doctors, social workers and teachers need to be based at these centres to provide holistic assessments and services to children who are vulnerable. Inter-professional collaboration would further allow informed decisions to be made regarding children's placements. It would also allow children to deal with their vulnerabilities appropriately and therefore not have to internalise or externalise their pain in negative ways as concluded earlier.

Sense of belonging

In view of the conclusion that children's emotional needs were fulfilled by their peers in the Children's Home and that children assumed adult responsibilities in the absence of support and encouragement from caregivers, it is recommended that caregivers make use of novel ways to foster a sense of belonging in the different placements e.g. honing in to a visually impaired child's reading strengths and getting that child to "read off" with his visually able peers. By the foster family showing such belief in the child's ability to read, the child's self concept is improved and a sense of belonging is created within the foster family. Similarly in Children's Homes, it is recommended that one-on-one orientation with child and caregiver take place immediately when the child is placed in the Children's Home. Relationship building exercises must therefore be built into the orientation programme. Time should be set aside for individual attention to be given to each child throughout the child's placement. This exercise will be useful in creating a sense of belonging as well as creating and maintaining trusting relationships between child and caregiver.

Education, support and training for caregivers

It was concluded that caregivers needed to be formally educated and trained. Since caring for children should be a highly skilled function, it is recommended that caregivers possess the basic qualifications necessary in caring for children. Hence there is a need for caregivers to be formally educated. It is further recommended that this education/qualification be supported with supplementary programmes which should include the emotional aspects of caring for children e.g. relationship building skills, forming and sustaining trusting relationships and fostering a sense of belonging in the placements.

Substitute parenting skills (skills in caring for other people's children) also needs to be included in the programmes. The ratio of children to caregiver also needs to be revised, in order to allow caregivers quality time with children in their care. Caregivers also need to be kept abreast of legislation and policies pertaining to caring for children.

These programmes should be engaged with through workshops, seminars and group sessions with user-friendly manuals in languages that caregivers are familiar with. These workshops need to be continuous, eventually leading to caregivers trained in these workshops becoming mentors to newer caregivers. It is recommended that the senior caregivers ultimately assume ownership of the support and training function in the placements. Finally, caregivers need to be equitably remunerated in line with the importance of their function in childcare.

Care for carers

In South Africa presently, caregivers as well as social workers are faced with caring for and working with children who have been sexually abused, severely physically abused and/or terminally ill. Terminally ill children often die in alternative care. This experience is traumatizing for caregivers. It is therefore recommended that trauma debriefing be built into a respite care programme for caregivers and social workers e.g. a wellness centre where caregivers and social workers could retreat to. A respite care programme will allow caregivers and social workers "time-out" following traumatic experiences, to rejuvenate. This "time-out" will further restore the human element to caregivers' roles as opposed to simply building resilience to trauma. This recommendation is linked to the conclusion that caregivers are inadequately supported in dealing with the challenges presented by vulnerable children.

Social work services

In view of the conclusions that psycho social support from social workers appeared absent to children, that agency social workers were not visible once a child was placed in alternative care, and that networking between social workers, caregivers and families of origin appeared absent the following recommendations are made:

It is recommended that minimum standards for social workers in Child Welfare be developed by a national body, to ensure standardization. These minimum

standards need to dictate maximum caseloads, number of contacts with families, etc. This manual may be utilized across the country as a job handbook for social workers in Child Welfare and needs to be performance based with specific criteria that the social worker needs to meet, in ensuring that a child's best interests is upheld.

It is recommended that the top- down approach of supervision of social workers be replaced with the lateral, strengths-based approach of co-vision. In this case, social workers are stroked and supported by their managers leading from a step behind as opposed to managers racing ahead with all the answers. Co-vision empowers newer social workers with confidence to take responsibility for their decisions regarding the children they serve. Managers need to buy into this empowerment strategy for it to be effective, which may be challenging. Since there are very few opportunities for upward mobility in the social work profession, managers tend to remain in management positions for many years and as a result are set in their ways and not open to change.

It is therefore recommended that continued professional development (CPD) be built into the social work profession thereby balancing experience in the field with updated theory. This strategy will allow more experienced social workers to keep abreast of current research and trends in the profession.

Networking is recommended among agency social workers, caregivers, children and families of origin in order to ensure reunification and permanency planning e.g. by holding quarterly case reviews.

It is further recommended that all interventions be time-limited in order for children not to remain in alternative care indefinitely.

It is recommended that the status of the social work profession be restored and that the widely held belief that social workers are like missionaries be demystified. Gender inequalities also need to be addressed as social work was traditionally and historically a female occupation. Women were considered the homemakers and men the hunters and gatherers. And as such women were historically disempowered and oppressed, therefore if in the workforce earned less than men. This disempowerment continues to exist today as social workers male counterparts in the corporate sector continue to earn far more. It is therefore recommended that

social work be a market related profession where salaries are commensurate with qualifications and experience in order to restore the dignity of the profession and keep social workers in our country.

Further reducing the morale of the profession, is that social workers (acting in children's best interests) appear to be devalued by other professionals such as lawyers (acting in parents' best interests). In this instance, it is recommended that respect be maintained across the professions so that constructive communication can occur.

Families of origin

In view of the conclusion that children preferred to live with their families of origin irrespective of their circumstances or inability to keep them safe, it is recommended that a structurally balanced national family preservation programme be formulated. This programme should contract with parents from the outset ensuring their commitment to the programme. Further, the programme needs to be time-limited so that families are capacitated to resume responsibility for their children within a specified time. This programme should embody direct counselling services to parents on the micro level, group support from other parents on the mezzo level and community awareness on the macro level.

One of the core elements of this programme must be parenting skills. However, both children and parents need to be engaged as partners in this aspect of the programme to ensure effectiveness.

Another core element of the programme would be to restore the status of families of origin by providing a Basic Income Grant (BIG) to all poverty stricken families and/or extending the Child Support Grant (CSG). This financial aid must be balanced with a basic finance management course in order to reduce financial stress placed on poverty stricken families. Self-help projects would spin-off from this financial assistance with social work/community work support so that families may begin income generating projects e.g. food gardens.

It is recommended that community workers be visible in communities to provide support to families who are in the family preservation programme. This visibility could translate to an "eye on the family" concept within communities, where

community workers "look out" for families after hours and on weekends, keeping families motivated.

Support groups

In view of the conclusion that caregivers are not adequately supported by social workers and/or management structures, it is recommended that support groups be formed with foster parents, with childcare workers and with social workers. These groups would bring together people with commonalities for the purposes of sharing experiences, challenges and best practices. Group members could build on one another's ideas and formulate creative strategies in caring for vulnerable children. Support groups are also considered useful in simply "letting off steam."

Teamwork

In view of the conclusion that there exists a lack of a strong human resources component in the Children's Home, teamwork as well as open communication among staff is recommended in order to strengthen the existing human resources. This would minimize manipulation by children. This teamwork may be strengthened by holding daily eight minute morning meetings (as is done at the Pietermaritzburg Child Welfare Society) to allow all team members to touch base and stay in touch thus being able to speak in one voice on issues pertaining to children.

Future research

It is recommended that the researched evidence in this study should be used as the basis for similar but larger studies throughout the province and/or in other provinces so that generalization may be possible.

It is recommended that participatory action research be conducted into capacitating families of origin in assuming responsibility for their children, in developing countries. This type of research is recommended as it contains a bottom-up approach and the researcher and participants become partners in the process. Specific areas to be researched should include factors contributing to family disintegration, the role of children in families and formulating a national family preservation programme.

A comparative study is recommended between the Child Care Act74/1983 and the Children's Act 38/2005 with specific reference to the impact, of the changes in legislation, on vulnerable children.

4.4 Concluding Statement

In hearing the voices of children and their caregivers, it appeared that although Children's Homes were financially better off than foster families to care for vulnerable children, they were not better resourced. Both placements lacked infrastructural support, therefore being unable to adequately respond to the needs of vulnerable children. In meeting the objectives of the study, a key finding was the need for children's voices to be heard when acting in their best interests. This finding is captured in the following words of one child participant, which emphasized the need for child participation in decision-making:

Children can't always make decisions for themselves but should be given the opportunity to participate in decisions made for them (C-16).

5. REFERENCES

Babbie, E and Mouton, J 2001. **The Practice of Social Research**. Cape Town: Oxford University Press

Barrat, S 2002. Fostering Care: the child, the family and the professional system. **Journal of Social Work Practice**. 16(2): 163-173

Berridge, D and Brodie, I 1998. **Children's Homes Revisited.** Jessica Kingsley Publishers Ltd: London

Brandon, M, Schofield, G and Trinder, L 1998. **Social Work with Children**. McMillan Press: London

Briede, M and Loffell, J 2005. Making Social Work Workable. **Children First** 9(61): 17-18

Cauvain, S 2006. **Under Pressure? What is it like being a child protection social worker.** Children in a Changing World Getting it Right: XVIth ISPCAN International Congress on Child Abuse and Neglect: York United Kingdom. 3-6 September 2006

Children's Act 38/2005. http://www.acts.co.za. Accessed on 3 April 2007

Children's Amendment Bill [B19-2006]. http://www.info.gov.za/gazette/bills/2006/b19-06.pdf

Child Care Act 74/1983. http://www.acts.co.za. Accessed on 3 April 2007

Clough, R 1982. **Residential Work**. London: McMillan Press Ltd

Cordero, A E 2004. When family reunification works: Data mining foster care records. Families in Society: **The Journal of Contemporary Social Services**. 85(4): 571-580

Developmental Assessment of Children, Youth and Families 2000. **Master Trainers Guide**. Republic of South Africa

Development Corporation Ireland Aids Conference 2002. Pretoria: South Africa

De Vos, A S 2002. **Research at Grass Roots**: For the social sciences and human sciences professions. 2nd edition. Hatfield: Van Schaik Publishers

Dikwantwela Action Group and Children's Institute 2004. Children address portfolio committee: Children in action to influence the law. **Children First.** 8(57): 3-7

Draft National Family Policy 2005. Fact Sheet: Processes and Programmes that enhance family life. http://www.socdev.gov.za/media/2005/april/budget%20vote/families.htm.

Accessed on 21 May 2007.

Fowler, J 2003. **A Practitioner's Tool for Child Protection and the Assessment of Parents.** Jessica Kingsley Publishers Ltd: London

Germain, C B and Gitterman, A 1980. **The Life Model of Social Work Practice.** Columbia University Press: New York

Giese, S, Meintjes, H, Croke, R, Chamberlain,R 2003. **Health and Social Services to address the Needs of Orphans and Other Vulnerable Children in the context of HIV/AIDS**: Research Report and Recommendations. Children's Institute: University of Cape Town

Grinell, R M Jr 1988. **Social Work Research and Evaluation.** 3rd edition. Illinois: FE Peacock Inc

Hepworth, D H and Larsen, J A 1990. **Direct Social Work Practice**. 3rd edition. Belmont: Wadsworth Inc

Hochfeld, T 2007. Missed opportunities: Conservative discourses in the draft National Family Policy of South Africa. **International Social Work**. 50(1): 79-91

http://www.services.gov.za Family support services

http://www.welfare.gov.za/Documents/1997/wp.htm White Paper for Social Welfare 1997

http://www.child.gov.ab.ca Foster care policies in Alberta, Canada

Jacobs, M, Shung-King, M, and Smith, C (eds) 2005. **South African Child Gauge** 2005. Cape Town: Children's Institute, University of Cape Town

Jacques 2006 in Kasiram, M, Partab, R and Dano, B 2006. **HIV/AIDS in Africa: The Not So Silent Presence.** Print Connection: Durban

Kasiram, M I 1992. School **Social Work Service Delivery: Models for future practice**, submitted in part fulfilment of the requirements for the degree of Doctor of Philosophy, Durban: Faculty of Arts, University of Durban-Westville

Kiraly, M 2001. Residential **Child Care Staff Selection: Choose with Care.** Haworth Press Inc: United States of America

Knutsson, K E 1997. **Children: Noble Causes or Worthy Citizens.** 1st edition. Ashgate Publishing Limited: England

Long, S 2007. **Children at the Centre: A guide to supporting community groups caring for vulnerable children.** London: Save the Children

Maluccio, A N, Fein, E and Olmstead, K A 1986. **Permanency Planning for Children-Concepts and Methods.** Tavistock Publications: London

McKay, A 1994. No Love Nor Money: Institutional Child Care in South Africa. **Critical Health.** 46: 79-82

McKay, P 2002. Orphans – the case for community care: Invest in Families for the sake of the children**. Children First**. 6(42): 26-28

Mc Sherry, D 2004. CRITICAL COMMMENTARY: Which came first, the chicken or the egg? Examining the relationship between child neglect and poverty. **British Journal of Social Work.** (34): 727-733

Moodley, R 2006. **The challenges confronting social workers in meeting the objectives of permanency planning at children's homes, in the magisterial district of Durban**, Submitted in part fulfilment of the requirements for the degree of MA (Social Work), Durban: School of Social Work, University of Kwa Zulu Natal

Mudaly, B 1985. The life world of youth in Children's Homes. **The Child Care Worker.** 3(4): 3-5

Mullaly, R 1993. **Structural Social Work: Ideology, Theory and Practice.** McClelland and Stewart Inc: Toronto

Morei, N 2002. The right to family life: Courts start to see household diversity. **Children First**. 6(45): 7-10

Olson, K, Messinger, R, Sutherland, R and Astone, J 2005. **The Promise of a Future:** Strengthening Family and Community Care for Orphans and Vulnerable Children in Sub Saharan Africa. Santa Cruz

Olson, K, Sibanda Knight, Z and Foster, G 2005. **From Faith to Action**: Strengthening Family and Community Care for Orphans and Vulnerable Children in Sub Saharan Africa. Santa Cruz

Padayachee, S 2005. **Children and the Law**. 2nd edition. Child Rights Project: Mills Litho: Pietermaritzburg

Perumal, N 2003. **The challenges facing South African Social Workers**: Women's Day Commemoration. FOKUS: SABC 2 August 2003

Sewpaul, V 2005. A Structural Social Justice Approach to Family Policy. **Social Work/Maatskaplike Werk.** 41(4): 311-323

Sewpaul, V (2007). **Community Intervention and Social Activism.** Unpublished

Shaw, I and Lishman, J 1999. **Evaluation and Social Work Practice.** Sage Publications Inc: London

Sheafor, B W, Horejsi, C R and Horejsi, G A 1994. **Techniques and Guidelines for Social Work Practice.** 3rd edition. Needham Heights: Simon and Schuster Inc

Tau 1989 in Mason, J and Rubenstein, J (eds) 1989. **Family Therapy in South Africa Today**. Congella Durban: Tegwen Publication

The Child and Family Welfare Society of Pietermaritzburg 2004. **Annual Report**. Pietermaritzburg: City Printing Works

The Child and Family Welfare Society of Pietermaritzburg 2007. **Kinship Care Report**. Pietermaritzburg

Tod, R 1971. **Social Work in Foster Care**. London: Longman Group Ltd

Van Niekerk, J 2007. Child Participation – The Challenges for Child Protection Workers: **The International Society for the Prevention of Child Abuse and Neglect – Special Report.** 1(2007): 10-11

Vos, M S 1997. The Social Orientation of a Child in a Children's Home. **Social Work Practice.** 97(2): 15-20

White Paper For Social Welfare 1997 http://www.welfare.gov.za/Documents/1997/wp.htm

Williamson, J 2002. Caring for Orphans: A child's place is in a family**. Children First.** 6(44): 24-25

Yoganathan, P 2002**. Integrating massage therapy with social work interventions in children's homes**, submitted in part fulfilment of the requirements for the degree of Master in Social Work, Durban: Faculty of Humanities, University of Durban-Westville

6. ANNEXURES

6.1 ANNEXURE 1

6.1.1 Interview Themes

- Understanding of reasons for removal and related legislation
- Understanding of processes followed when you were placed in foster care and/or when you were placed in a Children's Home
- Length of time spent in each placement
- Positive memories of living in foster care and living in a Children's Home.
- Your views on how these influenced and shaped your life (during the placement and after the placement)
- Memories of difficult times and how these were handled. Influence of these experiences during the placement and after the placement.
- Relationship with agency social worker
- Contact with natural family
- Preference of placement
- Going back in time, changes you would have made in your life
- Recommendations

6.1.2 Focus Group Themes

- Understanding legislation used in the process of having a child placed in alternate care
- Critique social work intervention
- Positive experiences and perceptions of fostering/caring for a vulnerable child
- Challenges related to caring for a vulnerable child and management thereof
- Reasons for caring for vulnerable children
- Suggestions regarding the removal of a child/ care of children
- Recommendations

6.2 ANNEXURE 2

INFORMED CONSENT

P.O Box 748

PIETERMARITZBURG

3200

15 April 2007

The Principal/Director/Mr/s

_____

_____

Dear Sir/Madam

I am a master's student in social work at the University of Kwa Zulu-Natal. In part fulfilment of the requirements of the degree, I shall be conducting research on the following topic:

Living in Foster Care and Living in a Children's Home: Hearing the voices of children and their caregivers.

Purpose:

The purpose of the study is to understand children's experiences of having moved through a foster care placement to a Children's Home placement or vice versa. It is further envisioned that this study will lay the foundation for future studies in an effort to consider child participation in determining legislation.

Sample:

The sample in this study will comprise children on the Child and Family Welfare Society of Pietermaritzburg's caseload who have moved through a foster care placement to a Children's Home placement or vice versa between 2003 and 2006.

Participation:

Your child's participation as well as your participation in this study are essential and shall be highly appreciated. No identifying details will be required of you/your institution or your child. All responses will be kept highly confidential. The

researcher will not at any point in the study or the report identify any participant. The study will be undertaken under the guidance of the School of Social Work and Community Development at the University of Kwa Zulu-Natal (Howard College). All ethical considerations in working with children will be taken into account. There will be no payment made for participating in the study. You/your child have a right to withdraw from the study at any stage and for any reason with no penalty. Should you wish to add any comments or require any further information, kindly contact me.

Kindly complete the consent paragraph below and return to the above address. Alternatively, I shall collect them by 30 June 2007.

Yours faithfully

Nevashnee Perumal	Prof M.I Kasiram
Tel: 033 342 8971	031 260 7443
083 394 3090	

Informed Consent:

I **agree/do not agree** to participate in the study under the conditions mentioned above.

I **agree/do not agree** to consent to my child's participation in the study under the conditions mentioned above.

(Delete whichever is not applicable)

I, _____ the undersigned understand the contents and conditions of the study and consent to me, my child/ren, my Children's Home participating in the study.

Signature _____ Date _____