

**GRANDPARENTS AND THEIR ADOLESCENT FOSTER CHILDREN:
EXPERIENCES OF LIVING TOGETHER**

BY

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Submitted in partial fulfillment of the academic requirements for the Degree of Master of Social Work (Family Therapy) in the School of Applied Human Sciences, College of Humanities, University of KwaZulu-Natal.

DECLARATION

Submitted in partial fulfillment of the academic requirements for the Degree of Master of Social Work (Family Therapy) in the School of Applied Human Sciences, College of Humanities, University of KwaZulu-Natal.

I declare that this dissertation is my own unaided work. All citations, references and borrowed ideas have been duly acknowledged. I confirm that an external editor was used and that my supervisor was informed of the identity and details of the editor. This dissertation is being submitted for the degree of Master of Social Work (Family Therapy), in the School of Applied Human Sciences, College of Humanities, University of KwaZulu-Natal, South Africa. None of the present work has been submitted previously for any degree or examination in any other University.

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ABSTRACT

Nationally there has been an increase in the number of children requiring care and protection who have been placed in foster care in South Africa. This increase has also been evident at the Child and Family Welfare Society of Pietermaritzburg. Many of the children needing care and protection are placed in foster care with their grandparents. The aim of this study was therefore to explore the experiences and support networks of grandparents and their adolescent foster grandchildren. The study was guided by the ecological framework.

This was a qualitative study with the purpose being descriptive. Semi-structured interviews were conducted with 10 adolescent foster children and one focus group discussion was conducted with 8 grandmothers. Although the plan was to include both grandparents in the study, it became evident at the sampling stage that many of the children were placed with their grandmothers, even if the grandfather was present. A significant finding of the study was that it was mainly grandmothers, rather than both grandparents, who had the responsibility for caring and nurturing the children in their care

Although five of the adolescents lived with both their grandmothers and their grandfathers; grandfathers were not seen as playing a significant role in their lives. Grandmothers were the decision-makers, responsible for discipline and a source of support for the adolescents. Grandmothers experienced financial and housing difficulties. Adolescents expressed feelings of loneliness and loss in relation to their parents. Social workers have focused mainly on assisting grandmothers to access the foster care grant and grandmothers and adolescents have not received grief and bereavement counseling and therapeutic services.

Recommendations include the need for social workers to respond to the therapeutic needs of adolescents and the employment of social service professionals. Recommendations at a policy level include the improvement of the partnership between the Department of Social Development and NGOs.

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DEDICATION

This study is dedicated to my late grandmother and my parents, for teaching me the value of hard work, determination and courage and encouraging me to be the best that I can be.

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CHAPTER ONE

INTRODUCTION

1.1 BACKGROUND

An increase in the number of children in need of care and protection in South Africa has been noted and supported by statistics (UNICEF, 2010; Foster, Laughharn, and Wilkinson-Maposa, 2010). The country has inherited a legacy of violence and inequality that has resulted in many children being abused, neglected and abandoned. In addition, the impact of HIV and AIDS on family life has contributed to the decline in traditional family structures and increased the number of children needing alternative care when parents die and leave behind orphaned children (Alpaslan and Mabutho, 2005; Nyasani, Sterberg and Smith, 2009 and Roux, Bungane and Strydom, 2010).

There are an estimated 3.7 million orphans in South Africa and this has increased the number of children officially placed in foster care with extended families (UNICEF, 2010). Foster care refers to the placement of a child in the care of a person who is not the parent or guardian of the child (Section 180 of the Children's Act 38/2005 [Thereafter referred to as the Act]). The placement of a child in foster care is effected by an order made by a children's court (Section 156 of the Act) or a transfer order issued by the Department of Social Development (Section 171 of the Act). The main purpose of foster care is to protect and nurture children by providing a safe and healthy environment with positive support and create lasting family relationships (Section 181 of the Act). This is in line with South African legislation pertaining to the care and protection of children that prioritizes family living when determining alternative care placements for children in need of care and protection (Section 7(1) (k) of the Act). According to the Children's Institute (2011), there were 552 676 children in foster care as at 31 August 2011.

This chapter provides a description of the research problem and the rationale for the study, followed by the aim, objectives and the significance of the study. The theoretical framework that formed the basis of this study is also included followed by the definition of terms and the structure of the dissertation.

1.2 DESCRIPTION OF THE PROBLEM AND RATIONALE FOR THE STUDY

Research released by Help the Aged in the United Kingdom reveals that worldwide the number of grandparents caring for grandchildren has doubled during the past ten years (Hindman, 2008). According to Hindman (2008), half of the globe's 15 million orphans are cared for by a grandparent and if this trend continues, the number of grandparents caring for AIDS orphans will double again by 2015.

Foster (2004) notes that in sub-Saharan Africa the extended family safety net has been the most effective response to social and economic crises. HIV has however reduced the numbers of prime age caregivers, like aunts and uncles, resulting in grandparents becoming the alternate safety net. Mall (2005) agrees that in sub-Saharan Africa, it is most likely that elderly grandmothers will assume the responsibility of caring for orphans.

South African grandparents are also assuming the role of primary caregivers to children in need of care and protection and are required to meet their physical and psychosocial needs (Nyasani *et al.*, 2009). They are facing increased financial and emotional demands while dealing with ill-health and the challenges of aging (World Federation for Mental Health, 2009). Adolescent orphans, facing the challenges of physical, cognitive, emotional and social changes are among children being cared for by their grandmothers (Louw and Joubert, 2007).

Internationally, the United Nations Convention on the Rights of the Child (1989) and the African Charter on the Rights and Welfare of Children (1999), which were ratified and adopted by South Africa advocate strongly for listening to the views of

children. This principle was written into the Children's Act 38/2005 that governs the work of child protection agencies' making it compulsory for children to be consulted on decisions regarding their care. Studies conducted by Messing (2006), Barber and Delfabbro (2005), and Perumal and Kasiram (2009) confirm the value of consulting foster children on decisions regarding their care. The voices of adolescents were therefore integral to this study, because children themselves play an important role in reaching decisions about their care. In this regard, social workers are pivotal in encouraging the voices of children to be heard and in supporting foster children and their foster parents (Toutbatla, 2009; Kgomo, 2009; Roux *et al.*, 2010; Perumal and Kasiram, 2009 and Petty, 2002).

The researcher is employed at the Child and Family Welfare Society of Pietermaritzburg whose mission is the care and protection of children within the magisterial district of Pietermaritzburg. Statutory services are a core function of the organization. The researcher noted an increase in the number of grandparents fostering their grandchildren, whether through choice or not. A literature review revealed that several studies have been conducted with grandparents and their foster children. However, limited studies have been conducted specifically to explore the experiences of grandparents and their adolescent foster grandchildren. There is a need to understand the experiences of grandparents and their adolescent foster grandchildren and add to the existing body of knowledge. It is equally important to understand how grandparents cope with the challenges in caring for adolescent foster children and how these adolescents, in addition, to dealing with the challenges associated with adolescence cope while in the care of their grandparents. This research therefore aimed to explore the experiences and support networks of grandparents and their adolescent foster grandchildren.

1.3 AIM OF THE STUDY

The aim of the study was to explore the experiences and support networks of grandparents and their adolescent foster grandchildren.

1.4 OBJECTIVES

- To explore the experiences of grandparents caring for adolescent foster children.
- To explore the experiences of adolescent foster children living with grandparents.
- To ascertain current support networks of grandparents and adolescent foster children.
- To ascertain what further assistance grandparents and adolescent foster children need to enhance their functioning.

1.5 KEY QUESTIONS

- What are the experiences that elderly grandparents have in caring for adolescent foster children?
- What are the experiences of adolescent foster children living with grandparents?
- What are the current support networks of grandparents and adolescent foster children?
- What additional support do grandparents and adolescent foster children identify as needed to enhance their functioning?

1.6 ASSUMPTIONS OF THE STUDY

- Grandparents are struggling to cope with the challenges presented by their adolescent foster grandchildren.
- Adolescent foster grandchildren have unique needs that their grandparents are unable to meet.
- There are limited support systems for grandparents and their adolescent foster children.

1.7 SIGNIFICANCE OF THE STUDY

It is envisaged that this study will serve to enhance social work services to adolescents and their foster grandparents and facilitate the development of strategies to strengthen and improve family relationships, and ensure that children remain within the family unit. In addition, this research is intended to provide a foundation for further studies as well as add to the existing body of knowledge in social work practice, specifically in the field of Child Welfare. Finally, this study intends to offer recommendations and suggestions to service providers in respect of related foster placements and to inform policy makers at local, provincial and national levels.

1.8 THEORETICAL FRAMEWORK

Ecological theory is the theoretical framework that guided this study. According to Maguire (2002), the ecological perspective is a holistic approach that views people in the context of their environment. More specifically, the ecological perspective views human beings as adaptive and in constant interchange with all the elements of their environment (Germain and Gitterman, 1980).

Zastrow and Kirst-Ashman (2007:18-19) identified the following important concepts related to ecological theory:

- The **social environment** involves the conditions, circumstances and human interactions that encompass human beings. Individuals must have effective interactions with this environment in order to survive and thrive. This social environment also includes individuals, groups, organizations, family, friends, governments and social institutions.
- People communicate and interact with others in the environment. These interactions are referred to as **transactions** and may be positive or negative.

- **Energy** is the natural power of active involvement between people and their environments.
- **Adaptation** refers to the capacity to adjust to surrounding environmental conditions and implies change to continue to function effectively.
- **Coping** is a form of adaptation that implies a struggle to overcome problems.
- **Interdependence** within the ecological perspective implies mutual reliance of each person upon every other person.

Berk (2010:20) adds that the ecological systems theory views the person as developing within a complex system of relationships affected by multiple levels of the surrounding environment. A system refers to a set of elements that are interrelated to make a functional whole. The four basic systems identified by Bronfenbrenner (cited in Berk, 2010) include the micro, mezzo, exo and macro systems.

The micro system refers to the individual and focuses on the individual's needs, problem and strengths. The micro systemic level is the immediate setting that contains the child. The more positive and nurturing the relationship a child has at the micro level, the better adjusted the child will grow up. In this study the micro system in most cases included the adolescent, their grandmothers, sometimes grandfathers and siblings and other family members within the household (Berk, 2010).

The mezzo system encompasses interactions between the micro systems and includes the extended family and relatives, schools, teachers, work groups, other social groups. At the mezzo systemic level, the relationships between the different settings will become apparent, such as the link between the home and school. If a grandparent has contact with a child's school and becomes involved in the child's academic and extra-curricular activities, this could also help the overall growth of the child (Berk, 2010).

The exosystem consists of social settings that do not contain the child and grandparents but may nevertheless influence the child's life. This could include health and welfare services as well as informal social networks that may provide support and possibly financial assistance to grandparents (Berk, 2010).

The macro system consists of cultural values, laws, customs and resources and focuses on the social, political and economic conditions and policies that will affect people's overall access to resources and quality of life (Berk, 2010; Zastrow and Kirst-Ashman, 2007 and Healy, 2005). At the macro systemic level, legislation governing the care and protection of children (Children's Act, 38/2005) has an impact on the child's life (Greig, Taylor and McKay, 2007). The ecological theory proposes that a more encouraging and nurturing environment will have a positive effect on the development of a child. But within the South African context of apartheid, inequality, and an unequal distribution of resources; the macro system appears to further disadvantage poor families by placing the responsibility of caring for orphaned children, solely on their shoulders, with minimal state support.

Germain and Gitterman (1980) developed the life model of practice based on the ecological perspective. The life model of practice includes seven concepts. Only four of these concepts are relevant to this study and are discussed below.

- Life transitions as a source of stress: Developmental changes can be sources of stress. In this study, adolescents are dealing with biological and physical changes, increased sexuality, cognitive changes such as enhanced reasoning and thinking as well as challenges from the environment that include peer pressure and attaining academic success. Likewise, elderly foster parents are dealing with developmental tasks associated with old age such as health related problems, social isolation due to health problems and loss of financial independence.
- Status change and role demands: When grandparents are suddenly placed in a position of caring for their grandchildren, they have to assume a different role. They are suddenly forced into the role of primary caregiver,

needing to ensure that all the basic needs of children are met, instead of playing merely a supportive role. Similarly when adolescents become orphans, they assume a parental role over their siblings, as well as sometimes becoming caregivers to their grandparents.

- Crisis events refer to sudden changes that have an enormous and immediate impact. For children it is dealing with the overwhelming loss of their parents and the changes to their lives as a result of this. These changes could include moving into a new home, school and environment. For grandparents it is dealing with the loss of their children and as a consequence suddenly becoming parents again.
- The environment may also be a source of stress and includes the social environment as well as the broader political, economic and cultural forces. Organizational structures and bureaucracies add to the stress and grandparents may experience challenges in accessing services and resources. The devastating and global impact of HIV and AIDS on traditional family and community structures is also a contributory source of stress.

The life model of practice states that people are constantly and dynamically involved in interactions with their social environment that may cause stresses in their lives. The value of considering the life model of practice within the ecological approach is that it provides a perspective for assessing many aspects of a situation. Individuals are affected by and are in constant dynamic interactions with other systems (Zastrow and Kirst-Ashman, 2007). According to Maquire (2002), while the life model is a conceptual framework that views individuals as being in constant exchange with the environment, some people can adapt and others cannot. The ability of an individual to adapt and fit within one's environment will depend on human relatedness, self esteem and competence. In this regard the social worker plays a role in facilitating this "fit", between people and their environments. This would include interventions at the micro level with families, and at the macro level to influence policies to facilitate this "fit". The result of

intervening at a micro and macro level would be a holistic approach to rendering services to families (Cox, 2003).

From the above, what becomes apparent is the interdependence between people and their environment and how these influence each other (Germain and Gitterman cited in Payne, 2005). The aim of social work would therefore be to enable people to cope by finding the fit between people and their environment; through appraising their situation, finding out what they need to do and receiving feedback from the environment to see the success of their coping. This implies that the process of feedback and change is slow and manageable. However what happens if a radical change is needed (Payne, 2005)? If a child is orphaned, the urgent priority is the care, protection and placement of that child within a family environment urgently. The child may be placed with a grandparent who does not have adequate accommodation or financial resources, and although this may not be the ideal fit for the child and the grandparent, they both have to adapt to this situation. According to Perumal and Kasiram (2008) the function of the social worker would be to assist families with children in alternative care to restructure their environments. However the authors add that in the South African context, it may not be possible for families to adjust or change their living conditions.

The ecological perspective also assumes that the environment is supportive and enabling to human beings. However, the environment is not always supportive and this suggests that human beings are forced to adapt to a negative environment. As stated by UNICEF (2010) the country's inherent legacy of inequality perpetuates the vulnerability of adolescents, depriving them of a sense of belonging at the micro level of functioning. This clearly is a negative environment in which adolescents succumb to social ills such as peer pressure, alcohol and drug abuse, teenage pregnancy and HIV and AIDS. In this context the social worker's role would be to challenge the environment so that adolescents are not forced to "fit" to a maladaptive environment.

The value of the ecological perspective is that it illustrates that people interact with many systems within their environment. The life model of practice in relation to adolescents and their grandparents allows the social worker to assess the family's functioning at the various levels, by identifying gaps where reconstruction is necessary to restore balance. However, social workers must be wary of assuming that everyone has the ability to adapt and that the environment is always supportive. Therefore the social worker must also not limit their intervention to the micro level. They need to accept their responsibility to intervene at the mezzo and macro level for changes in policies and if possible legislation that impact on services to children and their families.

1.9 DEFINITION OF TERMS

Child:

In terms of the Constitution of the Republic of South Africa, a child is defined as someone under the age of 18 years.

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 as a result of an order of the Children's Court or a transfer order of the Department of Social Development (Section 180 of the Children's Act 38/2005).

Kinship Care:

Kinship care refers to any arrangement in which children are cared for by relatives or someone with whom they have had a prior relationship (Pretorius and Ross, 2010).

Adolescence:

Adolescence refers to the transitional period between childhood and adulthood during which young people mature physically and sexually and usually extends from between eleven and twelve years to the late teens and early twenties (Zastrow and Kirst-Ashman 2007).

Grandparenthood:

According to Zastrow and Kirst-Ashman (2007), later adulthood is the last major segment of the lifespan and includes changes in physical appearances and the nervous system, decline in the senses and restricted mobility. Berk (2010) adds that grandparenthood is a significant milestone for older people.

Non-governmental organizations (NGOs):

NGOs are voluntary, not-for-profit, non-partisan and independent organizations or associations engaged in serving the public good.

1.10 STRUCTURE OF DISSERTATION**Chapter One: Introduction**

This chapter contains the background, description of the problem, rationale and main focus of the study. The theoretical framework underpinning the study is also included in this chapter.

Chapter Two: Literature Review

This chapter contains a review of the existing knowledge on the study and provides a contextual framework for the study.

Chapter Three: Research Methodology

This chapter outlines the research methodology that was utilized for the study. It includes the research design, sampling, data collection methods, analysis and interpretation of the data, ethical considerations and limitations of the study.

Chapter Four: Results and discussion

The results of the study and the analysis and interpretation of the findings are included in this chapter.

Chapter Five: Summary, Conclusions and Recommendations

This chapter includes a summary of the findings, conclusions reached as well as recommendations.

CHAPTER TWO

LITERATURE REVIEW

2.1 INTRODUCTION

In the child care and protection field, foster care has long been regarded as the preferred form of care for children that are not living with their parents. The primary advantage of this is that it allows the child to live as part of a family and it is commonly believed that this is the context within which the developmental needs of children can best be met (Gallinetti and Loffell, 2007). In Africa, aunts, uncles and grandparents have always assumed the responsibility for parenting orphaned children. However, the extended family is under pressure as aunts and uncles are passing away due to HIV and AIDS (World Federation for Mental Health, 2009). This has resulted in the burden of care falling on other people such as grandparents (Pretorius and Ross, 2010 and Abebe and Aase, 2007).

This chapter discusses the international treaties that focus on the care and protection of children, relevant South African legislation; policies created by the Department of Social Development for services to children, the partnership between the Department of Social Development and the NGO sector, adolescents in foster care and grandparents as foster parents. The chapter concludes with a discussion on the role of the social worker in statutory cases.

2.2 INTERNATIONAL TREATIES THAT FOCUS ON THE CARE AND PROTECTION OF CHILDREN

This section includes a discussion on the 1989 United Nations Convention on the Rights of the Child (CRC); the 1999 African Charter on the Rights and Welfare of Children (ACRWC) and the 2009 United Nations Guidelines for the Alternate Care of Children.

The CRC and the ACRWC both recognize that the family has the first responsibility for the care of children. These international instruments emphasize that a child who is parentless and deprived of his/her environment has the right to alternative care; with placement in a family environment as the first option. They state that in the absence of the family, the State has the responsibility to set up procedures for the alternative care of children. Both the CRC and the ACRWC contain several articles that must be considered when determining alternative care for children and are relevant to this study. The CRC and the ACRWC make provisions for ensuring that the best interests of children are maintained even when they are placed in alternative care and for respecting the views of children when decisions are made on their behalf (Office of the United Nations High Commissioner, 1989 and Organization of African Unity, 1990).

Even when foster care is considered, cognizance must be given to the child's ethnic, religious, cultural and linguistic background. The implication here is that when considering foster care for the child, the child's extended family would best meet the child's ethnic, religious, cultural and linguistic needs. One noticeable difference between these treaties is that only the CRC contains an article (Article 26) that makes provisions for all children to access social security; including children in foster care. Another difference is that the ACRWC contains an article (Article 31) that outlines the responsibility of children to their families, elders, communities and the state. While it is important to recognize the responsibilities of children, children in alternative care might have difficulties in executing these due to their circumstances. South Africa has ratified these treaties, and therefore the articles contained in them are binding and ensures that the rights of children are fully recognized (Office of the United Nations High Commissioner, 1989 and Organization of African Unity, 1990).

On 20 November 2009 the United Nations adopted the Guidelines for the Alternative Care of Children. These Guidelines are intended to enhance the implementation of the United Nations Convention on the Rights of the Child and

other international provisions regarding the protection and well-being of children deprived of parental care or at risk of being so. Pertinent to this study are the principles on alternative care that highlight the importance of ensuring that children have a stable family environment, where their basic needs are met within a context of promoting and safeguarding their rights (para 12 and 16). These guidelines make provisions for different types of alternative care such as informal and formal care and include kinship care, foster care and other types of care (United Nations General Assembly, 2010).

Of relevance to this study is the provision of kinship care in the guidelines. According to para 29 (c) (i), kinship care is defined as “family-based care within the child’s extended family or with close friends of the family known to the child, whether formal or informal in nature”. These guidelines prioritize the family environment as a first option when determining the alternative care of children. However, even if placing children within a family environment, the emphasis is on placing children with their kin first and only in foster care with other families in the absence of kin. Another point of note is that the guidelines stipulate that when a decision is made regarding the alternative care of a child, the permanency of that placement must be considered at the outset to prevent further disruptions to the child’s life (United Nations General Assembly, 2010).

In the South African context, the provision of different types of care is important in light of the number of children being cared for informally by kin and the increase of children in formal foster care. The guidelines therefore afford protection to all children in alternative care. South African legislation is already in line with the guidelines because the Children’s Act 38/2005 includes a section on long term foster care. This will be discussed in more detail later in the chapter.

These treaties signify the value that the international community places on children, ensures that their rights are respected and clearly outline the responsibilities of governments and other relevant role players in realizing the

rights of children. It is against this background that the South African legislative framework is discussed below.

2.3 SOUTH AFRICAN LEGISLATIVE FRAMEWORK

South Africa has made significant progress since the end of apartheid in 1994 in realizing the rights of children (South African Human Rights Commission/UNICEF South Africa, 2011). In this section the South African Constitution and legislation pertaining to children will be discussed.

2.3.1 The South African Constitution

The South African Constitution guides legislation and policies that makes provisions for the care and protection of all children. Section 28(1) (b) and (c) of the Constitution states that all children have the right to family care, or parental care or to appropriate care when removed from the family environment, and to basic nutrition, shelter, basic health care services and social services respectively. In keeping with the principles of the CRC and the ACRWC, the Constitution prioritizes that children should live with their families and in the absence of family, in alternative care within a family environment. Families have the primary responsibility to care for children. This principle was emphasized in *Grootboom versus the Republic of South Africa* (Case citation 2001[1] SA 46 [CC]). The state only assumes responsibility once children have been removed from their parents' care. The *Grootboom* case shows that although section 28(1)(c) provides that all children have the right to basic nutrition, shelter, health care and social services; this appears to only apply to children who are in alternative care (Gallinetti and Loffel, 2007). This clearly has implications for the millions of children in South Africa who are living with their parents in impoverished circumstances, because in terms of Section 28(1)(c) the state cannot be held responsible for them. This section also makes provisions for the right of children to social services and the challenges of realizing this right are discussed later in the chapter.

The discussion below focuses on legislation that gives effect to the rights of children stipulated in the South African constitution. The two Acts that will be described below are the Children's Act 38/2005 and the Social Assistance Act 13/2004.

2.3.2 Children's Act 38 of 2005 (the Act)

The Act came into effect from 1 April 2010 and provides the legislative framework that governs child protection work with children and finally brings South African law in line with international treaties. According to Matthias and Zaal (2009), the Act aims to keep children in families and communities with institutional care being the last resort. The authors' note that the Act adopts a developmental approach as it incorporates early intervention and prevention, which supports keeping children in families and communities.

Children are found to be in need of care and protection in terms of Section 150 of the Act. Once a child is found to be in need of care and protection, the Act makes provisions for various orders to be made in respect of the child in terms of Section 156 of the Act. This is consistent with the United Nations Guidelines for the Alternative Care of Children where different types of orders may be made in respect of children. One such order is a foster care order that is issued in terms of Section 156 (1) (e) (i) of the Act or as a transfer order by the Department of Social Development (Section 171). The main purpose of foster care is to protect and nurture children by providing a safe and healthy environment with positive support and create lasting family relationships (Section 181).

According to Gallinetti and Loffel (2007), foster care in South Africa has broadly addressed two categories of needs. Firstly, children who have been abused, neglected and abandoned are afforded protection by order of the Court. Secondly, children who are living with relatives due to the death, incapacity and disappearance of their parents are placed in foster care to gain access to the foster care grant and obtain a court order that legally recognizes this care arrangement.

In view of the steady increase in the number of children already residing with family and needing placement, various child protection agencies including the Child and Family Welfare Society of Pietermaritzburg lobbied for the inclusion of kinship care in the Act. There would have been two aspects to this; court ordered kinship care which was essentially foster care by relatives, and informal kinship care that could be supported by a grant without the need for court intervention (Budlender, Proudlock and Jamieson, 2008). The authors add that this would be an administrative process without the rigorous court interventions that is applied to foster care. This would have therefore reduced the burden on already overburdened social workers and resulted in family and relatives not having to wait for their foster care applications to be processed.

However, kinship care was not included in the Act which Matthias (2010) refers to as a serious deficiency. Although kinship care was not included in the Act, provisions have been for the long term placement of children with family members (Section 186). The inclusion of Section 186 is positive in that it allows for permanency planning in respect of the child and is in line with the United Nations Guidelines for the Alternative Care for Children. Furthermore, Section 186 does not require a social worker to monitor these placements regularly. A negative aspect to this type of placement is that grandparents who are assuming the role of primary caregivers for their grandchildren may need the support of the social workers so that they can fulfill their responsibilities adequately and social workers may not be able to meet the demand for therapeutic services to them. The reasons for this are discussed later in section 2.8 of this chapter.

An important principle that has been included in the Act bringing it in line with international treaties is that of consulting with children on issues that affect them. Section 10 of the Act makes it mandatory for children to be consulted on issues pertaining to them and for their views to be given due consideration. However, despite this legislation, there are barriers to this process. On a macro level, there are not many opportunities to engage children on governance issues (Nomdo and

Roberts, 2011). Edstrom and Khan (2009) add that the voices of children are absent when it comes to policies and programs on issues that affect them. On a mezzo level, service providers such as the Departments of Education, Welfare and Health also make little effort to consult with children (Pendlebury, 2011 and Kruger and Coetzee, 2011). From the experience of the researcher, this is evident in child protection agencies as well. The intention to consult with children is there, and definitely more concerted efforts are being made to engage with children. However high caseloads, a lack of infrastructure and resources makes this challenging in practice. On a micro level, it appears that culture may prevent and discourage the voices of children being heard because this may be considered disrespectful. Jamieson (2011) cites religious beliefs and cultural practices as barriers to engaging and listening to children. For example, in some cultures, children may not be allowed to voice an opinion on issues that affect them as it may be considered disrespectful to do so.

While the Act was intended to bring South African law in respect of children in line with international charters, many challenges are being experienced in implementing it. These challenges are discussed below.

Social workers received no training on the provisions of the Act, which has resulted in different interpretations and this has impacted on service delivery. An example of this is the interpretation of Section 150(1) (a) of the Act states that a child may be found to be in need of care and protection if the child has been abandoned or orphaned and is without visible means of support. Some presiding officers have interpreted this section to mean that if children are left in the care of their grandparents who receive an old age pension; these children are not without visible means of support. Hall and Proudlock (2011) cite a case in Krugersdorp where the presiding officer did not place a child in foster care as it was felt that the foster care application was merely to collect an income. This judgment is presently being appealed in the High Court and if the judgment is upheld, then orphans living with relatives will no longer qualify for the foster care grant.

In an effort to protect children, the Children's Act provides for a National Child Protection Register and the Sexual Offences Register (Sections 113 and 118 of the Act). Part A of the National Child Protection Register contains a database of children who have been abused to prevent further abuse being perpetuated against them; and of persons not suitable to work with children. Part B of the National Child Protection Register and the Sexual Offences Register contains details of all persons who are not suitable to work with or care for children including any foster parents and social workers. However, although a budget of R 1.7 million was allocated to set up the Registers, it is of concern that there is only one name on the National Child Protection Register (Davids, Grobbelaar and SAPA, 2011).

The Registers not set up has resulted in child protection agencies experiencing difficulties in meeting the requirements of Children's Court at a practice level. Children's Court requires a clearance certificate for all persons working with children and foster parents in respect of the National Child Protection Register and the Sexual Offences Register. This is a criterion for the Court to place children in foster care and extend court orders for children in terms of Section 159 of the Act, and means that foster parents need to apply for this clearance certificate. But since the Register is not operational, clearance cannot be granted to foster parents. The resulting delays in processing cases at Children's Court mean that foster care grants are not being accessed, and the well-being of children is compromised. To circumvent this, magistrates have requested that affidavits be completed so that the process is not delayed.

The Act is difficult to implement because of the shortage of social workers in both the NGO sector and the state, and the number of social work graduates each year will not meet the demand to effectively implement the Act in future (Parliamentary Monitoring Group, 2011). NGOs also experience high staff turnover which impacts on the implementation of the Act (Matthias and Zaal, 2009).

A further challenge is the lack of foresight by the law makers of the cost to implement the Act. A full cost analysis was conducted by Budlender, Williams, Saal, Sineke and Proudlock (2011), and illustrates clearly that the funds from government and donors will not meet the cost of the required services. This is already being felt at the Child and Family Welfare Society of Pietermaritzburg where the subsidy received from the Department of Social Development is not adequate to meet the statutory obligations to children. The problem is exacerbated by the reduced donor funding that is being channeled to NGOs.

2.3.3 Social Assistance Act

The Social Assistance Act, 13 of 2004 governs social security in the country and provides a national framework for the provision of different types of social grants such as the foster care grant, the old age pension, the child support grant and social relief of distress grant. To give effect to the stipulations of the Social Assistance Act, The National Department of Social Development created the South African Social Security Agency (SASSA). The primary function of SASSA is budgeting for and administering social grant payments from the provinces. This was intended to facilitate services to social assistance recipients (Streak and Poggenpoel, 2005).

The two types of grants that are available for children are the child support grant and the foster care grant. At the time of the study, the child support grant amounted to R 260 in comparison to the foster care grant which was R 740. Therefore, many families prefer to apply for the foster care grant, rather than the child support grant. This has resulted in authors like Meintjies, Budlender, Giese and Johnson (2003) and Patel (2009) arguing that rather than being in “need of care” most children are in “need of cash”. For example, if adoption was subsidized, more children would have been adopted, rather than remaining in long term foster care.

In addition to facilitating the payment of grants, SASSA also has the responsibility of dealing with fraud, corruption and maladministration (September, 2007). In practice this leads to many foster parents having grants suspended because they are unable to present themselves at reviews, mainly due to ill health and lack of financial means. On a micro level, this places additional pressure on social workers to assist families with material support, so that the basic needs of children can be met. On a mezzo level, social workers are constantly liaising with SASSA for the re-instatement of the grants so that the basic needs of children are not compromised.

As discussed above, South Africa has made tremendous progress in terms of legislation to give effect to children's rights. However there still are challenges that all stakeholders working with children are dealing with in implementing the legislation.

The discussion focuses on policies created by the Department of Social Development to facilitate service delivery to children and their families.

2.4 DEPARTMENT OF SOCIAL DEVELOPMENT POLICIES ON SERVICE DELIVERY TO CHILDREN

After South Africa ratified and adopted the international treaties discussed in section 2.2, the Department of Social Development drafted the White Paper for Social Welfare. The Department of Social Development White Paper (1997) is based on a developmental approach to welfare and provides the framework for the transformation of social welfare services. The White Paper commits government to "giving the highest priority to the promotion of family life, and the survival, protection and development of all South African children" (Ministry for Welfare and Population Development, 1997: 61). According to Lombard (2007), the developmental approach to welfare intends to address issues of inequity and poverty and promote social development by incorporating economic development.

A review of the implementation of the White Paper by Lombard (2008) illustrates that it has marked a turning point in the history of social services provision in South Africa. She adds that the White Paper has been effective in reshaping welfare policy and there is evidence that the welfare sector has made a shift to the developmental approach. When the White Paper was created, one of the aims was to review foster care policies, procedures and programs (Ministry for Welfare and Population Development, 1997). A significant measure of progress would be the implementation of the Children's Act which adopts the developmental approach as discussed above. The discussion below focuses on some of the policies developed to render a more effective service to children.

The Policy Framework for Orphans and other Children made vulnerable by HIV and AIDS (2005) is intended to facilitate services to orphans and other vulnerable children and promote an enabling environment for more effective service delivery at legislative, policy and programmatic levels. The Policy Framework takes into account the rights of children stipulated in the South African Constitution, the CRC and the ACRWC and includes strategies to strengthen and support the capacities of families to care for and protect children. The Policy Framework is similar to the international treaties and the South African Constitution, because it also identifies the family as the primary source of care for children, followed by the community. Thus the Policy Framework ensures that legislation, policies and service delivery are appropriate to meet the needs of vulnerable children and contains strategies to strengthen families and communities to support them (Department of Social Development, 2005).

The Policy Framework also outlines the financial and human resources required for implementation. However in reality, child protection agencies and the Department of Social Development do not have the financial and human resources to implement the strategies contained in the Policy Framework. Therefore, it appears that the Policy Framework was created at the macro level by policy makers, with

agencies at grassroots level being unable to implement it at mezzo-level (Department of Social Development, 2005).

Following the increase in the number of foster placements, the Department of Social Development developed the Guidelines for the Effective Management of Foster Care in South Africa (2010). These Guidelines are intended to inform practice and facilitate the realization of the rights of children to care and protection and were developed in the context of international treaties, the South African Constitution and legislation affecting children. The objectives of the Guidelines include the development of an effective foster care system and a framework for service delivery that guides practice at grassroots level; facilitates the implementation of legislation through standardized interpretation and facilitating the monitoring and evaluation of the Children's Act (Department of Social Development, 2010).

In addition the Guidelines set out the roles and responsibilities of all role players, including those of foster parents and it also outlines the process of foster care in an attempt to standardize requirements. These Guidelines are important and relevant when determining if a child is in need of care and protection. Although the Guidelines do take cognizance of backlog of cases and the shortage of social workers it is not feasible to adhere to them because of the large number of families applying to foster children. Instead the Department of Social Development should have created two sets of guidelines; one for kinship care placements and one for foster care placements (Department of Social Development, 2010).

The country has created relevant and essential policies to give effect to children's rights. However, an analysis conducted by the South African Human Rights Commission and UNICEF South Africa (2011) has revealed that although the delivery of services to children has been expanded, it appears that services to the poorest children in South Africa are still lacking. This sentiment is echoed by September (2006) who conducted a review of child protection services in South

Africa. According to September (2006), while stakeholders rendering services to children in the child protection field are aware of their responsibilities, services are still fragmented and uncoordinated. This clearly impacts on service delivery to children.

The discussion below focuses on the partnership between the NGOs and the Department of Social Development.

2.5 THE PARTNERSHIP BETWEEN THE NON-GOVERNMENTAL ORGANIZATIONS AND THE DEPARTMENT OF SOCIAL DEVELOPMENT

Services to children in terms of the Children's Act are provided by designated non-governmental child protection agencies and the Department of Social Development. Several authors refer to the critical role that NGOs play in service delivery (Matthias and Zaal, 2009; September, 2007 and Lombard, 2007). NGOs are subsidized by the Department of Social Development to render developmental social welfare services which includes statutory services and community development services (Matthias and Zaal, 2009).

A concern for NGOs is the inadequate funding they receive from the state to render developmental social welfare services (Lombard, 2005, 2007). This has long term consequences for NGOs to render services to vulnerable groups, particularly children (Streak and Poggenpoel, 2005 and Patel, 2009). Landman and Lombard (2006) cited in Matthias and Zaal (2009) add that since the Department of Social Development is the main funder for NGOs, they threaten them with a cut in funding when they are not able to deliver developmental social work services. In addition, NGOs face challenges with the funding that they do receive from the state, which is erratic and subject to delays (Parliamentary Monitoring Group, 2011).

A further problem experienced by NGOs is staff turnover due to the disparity in salaries and benefits between the state department and the NGO sector. Social workers employed by the State earn more than social workers employed in the NGO sector despite having the same qualification. In this regard NGOs are constantly lobbying with the state department at various forums with regards to equal funding; however, little progress has been made. While the state refers to the relationship with NGOs as a “partnership”, it can never be a true partnership as long as NGOs receive inadequate and unequal funding for social service delivery. There is an urgent need for the state to recognize the important role of NGOs and create a true partnership with them (Lombard, 2005). More importantly, the state needs to recognize that the NGO sector is pivotal in implementing the developmental approach embedded in the White Paper for Social Welfare (2007), and needs to empower and support them as valuable partners (Lombard, 2007).

Social workers are also lured by the lucrative offers made by countries overseas placing increased demands on remaining social workers (September, 2005). Naidoo and Kasiram (2006) cite several reasons for losing staff to countries overseas. Social workers in South Africa carry high case loads due to the increased demand for statutory services. The nature of their work is mostly crisis intervention leaving no time for therapeutic and supportive services to foster children and their families. Furthermore social workers carry out their tasks within a context of limited funding, lack of resources, poor service conditions and poor salaries.

It has been observed by the Child and Family Welfare Society of Pietermaritzburg that social workers are further stressed by the administrative requirements of the Department of Social Development. This includes the time consuming compiling of statistics in various formats in respect of the funding received and being constantly under threat of losing this funding if these requirements are not met. Why then would social workers not leave the country and work in organizations where caseloads reach a maximum of 15?

In December 2010, the Minister of Social Development declared that South Africa has a shortage of social workers to deal with the issues affecting children and that the demand for social workers exceeded supply. She further announced that the Department of Social Development has implemented a recruitment and retention strategy in respect of social workers (Dlamini, 2010). This includes offering bursaries to encourage students to study social work and introducing the Occupation Specific Dispensation (OSD). However as Matthias (2010) points out; these strategies do not benefit the NGO sector who continue to lose staff to the state. NGOs have to develop their own retention strategies to retain staff just as the Child and Family Welfare Society of Pietermaritzburg did. In addition, NGOs are constantly trying to fundraise so that they can continue to render an effective service. From the experience of the researcher, many overseas funders are not keen to fund statutory services that they consider to be the responsibility of the state. This results in the NGO sector being forced to render statutory services with a limited budget, sometimes compromising service delivery.

The discussion thus far has focused on the services rendered by NGOs and the challenges they face. It was mentioned previously that there is an increase in the number of kinship care placements that are being formalized. In the two sections below adolescents in care and grandparents as foster parents will be discussed.

2.6 ADOLESCENTS IN CARE

Adolescence refers to the transitional period between childhood and adulthood during which young people mature physically and sexually. Adolescence usually extends from between eleven and twelve to the late teens and early twenties (Zastrow and Kirst-Ashman 2007). According to Guerra and Bradshaw (2008), adolescence is considered a time of experimentation and increased involvement in what has been called risk behaviors or problem behaviors. They further identified five core competencies that characterize a psychologically well-adjusted youth that provides a foundation to reduce risk behavior. This includes a positive sense of

self; the ability to control behavior, depending on the situation; decision-making skills; a moral system of belief and a state of belonging where youth perceive that they are cared for, trusted and acknowledged. In the section below, the development during adolescence will be discussed.

2.6.1 Development during adolescence

All children develop along the same path towards adulthood (International Institute for Child Rights and Development, 2008). Child development can thus be considered dynamic, interrelated and continuous, influenced by a variety of internal (physical, psychological, socio – cultural and spiritual) and external (family, peers, community and government) factors and contexts. Child development is also influenced by the child's individual capacities and active involvement and partnerships in decisions affecting them (International Institute for Child Rights and Development, 2008).

Adolescence is characterized by many developmental tasks. Physical development becomes more pronounced and there is a growth spurt that results in weight and height increases. These physical changes could result in a change in identity and the adolescent needs to adapt to these changes (Berk, 2010). Berk, (2010) elaborates that the ability to start thinking and reasoning is evident during adolescence. Cognitive development starts influencing the attitude and behavior of adolescents as they strive for individual thinking and independence.

According to Coleman and Hendry (1990), self-concept development during adolescence is enhanced. This is important because the way young people perceive themselves, impacts on the way they interact with other people. Central to adolescence is the attainment of independence from the family. On one hand the adolescent wants to be independent, on the other hand the adolescent may want to be dependent. Caregivers contribute to this confusion because while they may want their children to be independent and make their own decisions, they may also be afraid of the consequences of this. The “generation gap” becomes more

noticeable as the adolescent starts developing their own opinions and testing the boundaries of authority and discovering their own beliefs. Coleman and Hendry (1990) add that it is important for parents to be aware that although the adolescent needs direction, they also should have the opportunity to play a part as a responsible member in the family decision-making process.

Peers are significant in the adolescent's life and it is important for the adolescent to be accepted by their peers. Peers play an important role in helping the adolescent make the transition from parental dependence to independence and are a source of support (Zastrow and Kirst-Ashman, 2007). The development of sexuality is also evident during adolescence and the adolescent needs to be able to understand sexual decision-making and the consequences of sexual behavior (Coleman and Hendry, 1990).

As adolescents strive to reach their developmental milestones, they need to be supported, both in terms of their present needs and their future potentials. Their needs include physical, social, economic, cultural psychological, intellectual, emotional and spiritual. These needs are translated into rights as stipulated in the CRC. While the rights of children are important in promoting the development of all children in society, equally important are the roles played by adults, families, communities, institutions such as governments and children themselves in protecting and supporting the fulfillment of those rights (International Institute for Child Rights and Development, 2008).

2.6.2 Adolescents in foster care

Algate, Maluccio and Reeves (1989) state that all adolescents, irrespective of whether they need alternative care or not should live in a family. Within the South African context, family living is prioritized in the Children's Act. Thus every effort is made by child protection agencies to ensure placement of children with families as it is considered that the needs of children are best met within a family environment.

Algate *et al.* (1989) add that there are similarities between adolescents in care and adolescents in general. All adolescents experience common problems and challenges that include physical and sexual abuse, pregnancy and loss of family. However, when you consider the developmental tasks of adolescents in care, there are additional challenges that they are faced with. This would include the loss of parents, change in home and financial circumstances, increased responsibilities towards younger siblings and a change in the school environment.

Children who are orphaned and in care may start to display psychological reactions such as depression, anxiety, withdrawal, social isolation, low self esteem and aggression. This could result in children being at higher risk of developing long-term psychological problems (Roux *et al.*, 2010; Louw and Joubert, 2007 and Cluver and Gardner, 2006). For adolescents, their cognitive, emotional and social development all influence and determine their understanding of loss and grief. The development changes during adolescence places young people at risk. Their emotional reactions are characterized by “ups” and “downs” and any experience of loss intensifies the emotional responses. If adolescents are not afforded the opportunity to deal with these losses, this is likely to have consequences for their development (Pretorius and Ross, 2010).

The normal developmental tasks for adolescents are complicated by the added stress brought about by their orphaned status. They take on the care giving role for their siblings while still being children themselves. Sometimes siblings are split and this could cause emotional stress. Richter (2004) notes the negative impact on sibling relationships that may result when siblings are orphaned and are placed with different families. Sibling relationships play a vital role on individual development. Siblings play with each other, they learn to problem solve and negotiate with each other, older siblings become attachment figures for younger siblings and they give each other a sense of family and belonging. Siblings tend to grow more attached to each other in the face of trauma (Groza, Maschmeier, Jamison and Piccola, 2003). Research conducted by Hegar and Rosenthal (2003),

illustrates that keeping siblings together shows improved school results. Further research conducted by Pretorius and Ross (2010), confirmed that siblings that are placed together have a sense of family, unity and togetherness. From the experience of the researcher, siblings do adjust better when they are placed together. However, in the context of grandparents caring for more than one child, especially if one child is a toddler and the other is an adolescent with varying development needs, the quality of care may be compromised.

Clearly from the above, adolescents need to be supported and foster parents' play an important role in promoting their resilience in the face of what has gone wrong in their lives. Gilligan (2000) suggests various ways of doing this. Firstly, foster parents need to maintain a stable relationship with their foster children and provide them with a secure home base. Secondly, foster children need to be re-affirmed and their self worth and self esteem enhanced; and foster parents are in an ideal position to do this. Thirdly, foster parents need to help foster children develop a sense of self-efficacy and they could start by listening to their voices with regards to their care (Gilligan, 2000).

Gilligan (2000) suggests that foster parents can also create conditions to facilitate the progress of the child's development. On a micro level, this would include consultation with the child on decisions regarding their care. Foster parents also need to establish trust and rapport in the home and encourage a sense of belonging in the home. The foster parent ultimately needs to create the living environment that fits the adolescent's needs. When you consider that most grandparents are older and face many challenges themselves, they may face difficulties in encouraging optimal development of the children in their care. On a mezzo level, the broader community such as the school, neighbors and other community organizations can be enlisted to support the development of a child. They can all offer opportunities which may meet the child's needs (Gilligan, 2000).

In the next section, grandparents as foster parents will be discussed.

2.7 GRANDPARENTS AS FOSTER PARENTS

According to Zastrow and Kirst-Ashman (2007), later adulthood is the last major segment of the lifespan. Later adulthood is characterized by developmental changes such as changes in the nervous system, decline of the senses, changes in physical appearances, restricted mobility, frailty, memory loss and speech impairments. They also experience emotional and social development issues such as retirement and loss of income, social isolation and lack of social support (Berk, 2010). It is against this background that grandparents as foster parents will be discussed in the sub-sections below.

2.7.1 Kinship care placements

Studies have shown that kinship care placements with grandparents in the US and UK have increased (Coakley, Cuddeback, Bueher and Cox, 2007; Harden, Clyman, Kriebel and Lyons, 2004 and Gordon, McKinley, Satterfield and Curtis, 2003). Similarly, studies in South Africa have also reflected a marked increase in kinship care placements with grandparents (Petty, 2002; Mokone, 2006 and Nyasani *et al.*, 2009). These studies have however reflected that the reasons for the increase in kinship care placements were different. In the USA, Gordon *et al.* (2007) cites substance abuse, poverty, parental incarceration, homelessness and HIV and AIDS as reasons that children required placement in foster care. In South Africa the devastating impact of HIV is one of the primary reasons for many orphans requiring formal placement in foster care (Nyasani *et al.*, 2009).

The increase in kinship care placements is also evident at the Child and Family Welfare Society of Pietermaritzburg where for the year 1 April 2010 – 31 March 2011, 450 new foster care applications were received. This is a marked increase from the previous year (1 April 2009 – 31 March 2010) where 259 new foster care applications were received (The Child and Family Welfare Society of Pietermaritzburg 17th and 18th Annual Reports 1 April 2009 to 31 March 2011).

Studies conducted by Lorkovich, Piccola, Groza, Brindo and Marks (2004); Messing (2006) and Petty (2002) identified many benefits of placing children with grandparents. Firstly, since they are familiar, it reduces the trauma of separation for children. Secondly, placing a child with a grandparent reinforces the child's sense of self esteem and identity. Thirdly, it promotes sibling relationships and creates emotional security. Lastly, it creates more stability and permanency in the child's life as the placement is unlikely to change.

2.7.2 Profile of grandparent foster parents

Grandparent foster parents are more likely than non relative foster parents to be single, less educated, unemployed, of lower socio-economic status, older and in poorer health (Smithgall, Mason, Michels, LiCalsi and Goerge, 2009; Falconnier, Tomasello, Doueck, Wells, Luckey and Agathen, 2010 and Lorkovich *et al.*, 2004). Hindman (2008) adds that low income grandparents in fulfilling their roles do not get enough food, rest and medicine for themselves and are forced to go out and work in strenuous jobs to support themselves and their grandchildren.

2.7.3 Responsibilities of foster parents

Section 188 of the Act contains the responsibilities and rights of foster parents. The responsibilities of foster parents are expanded on in the Section 70 of the Regulations pertaining to the Act (Department of Social Development Regulations, 2010). The following responsibilities of foster parents are relevant within the context of this research:

- Ensure that any state grant is used towards the upbringing of the child and applied in his or her best interests;
- Ensure that if such child is of school-going age, he or she attends school on a regular basis;
- Permit a designated child protection agency or designated social worker to have access to his or her home and to the child concerned, for the purposes of monitoring of the foster care placement, review of the foster care order or for any other matter relevant to the foster care placement;

- Respect the views of such child and generally promote his or her well-being, best interests and physical, emotional and social development;
- Guide the behavior of such children in a humane manner and must not impose any form of physical violence or punishment, or humiliating or degrading forms of discipline;
- Ensure that such child is treated in a manner substantially similar to other children living in the same household, except where the special needs of such child or any other child in the household require otherwise.

The regulations are explicit regarding the responsibilities of foster parents. However, in light of their financial status, health and life stage changes, foster grandparents are going to be faced with challenges while fulfilling their responsibilities. The challenges experienced by foster grandparents are discussed below.

2.7.4 Challenges experienced by grandparents as foster parents

The main purpose of kinship care placements is to keep children within their families. As grandparents raise their grandchildren, they face many challenges that impact on their own well-being, their grandchildren and their ability to continue in their roles. Grandparents find it hard to start over in caring for their grandchildren. They have a different role now, that of a “parent figure”, that needs to also exert discipline, rather than just seeing their grandchildren sometimes and then lavishing them with love. Since grandparents are often thrown into the role of being a parent they often feel incompetent and overwhelmed as they have little or no preparation for this role (Gordon *et al.*, 2003 and Cox, 2003, 2007).

Grandparents are often dealing with their own grief over the loss of their children. This loss is compounded by the fact that grandparents have to relinquish their own activities to meet the responsibilities of parenting their grandchildren. Foster children are reluctant to share their own grief with their grandparents for fear of

upsetting them and sometimes start displaying behavioral problems, which can cause further stress for grandparents (Cox, 2007).

Grandparents also experience emotional exhaustion. This may be due to the financial implications of caring for their grandchildren as well community stigma and reactions to having a child whose parent may have died because of HIV. They also experience physical exhaustion as a result of having to care for young children and work more to cover the cost of caring for their grandchildren (Alpaslan and Mabutho, 2005). In a study conducted by Alpaslan and Mabutho (2005) in Botswana, grandparents cited not having family support, being unable to meet the basic needs of children as well as children in their care not accepting their authority as difficulties they experience. Studies in Cambodia and Tanzania revealed similar challenges experienced by grandparents (Mall, 2005). In a study conducted by Nyasani *et al.* (2009) in South Africa, the disharmonized intergenerational relationships became evident where grandparents cited poor communication, disrespect, substance abuse and teenage pregnancy as sources of stress. Linked to this is the aspect of disciplining. Grandparents are of the old school of thought where physical punishment was common. Now children know their rights and if physically punished, report the matter to the relevant authorities.

Grandparents also face challenges such as illiteracy and lack of finances that contribute to them being unable to meet the educational demands of the children in their care (Lawrence-Webb, Okundaye and Hafner, 2003 and Smithgall *et al.*, 2009). The physical health of grandparents may also be compromised as they minimize their own health problems in favor of meeting the health needs of the children in their care (Cox, 2007). To add to their difficulties is the fact that the experiences from when they were parents are different now with increased alcohol and drug abuse, but mostly the impact of HIV and AIDS that they are forced to deal with (Lawrence-Webb *et al.*, 2003 and Mokone, 2006).

According to Lorkovich *et al.* (2004) and Petty (2002) grandparents experience many barriers at a mezzo level that hinder their care for children. The authors elaborate that they receive less supportive services from social workers. They also have limited access to knowledge and resources to meet the demands of their newly acquired parenting roles. While there is much emphasis on educating children on their rights and responsibilities, there appears to be limited education for grandparents on how to deal with their foster children.

Despite the challenges faced by grandparents, they show a commitment to caring for their grandchildren, providing a home for them and accepting the responsibility of being primary caregivers to their grandchildren (Coakley *et al.*, 2007 and Gordon *et al.*, 2003). They see it as being given a second chance at parenting and undertake to meet the needs of their grandchildren, sometimes to their own detriment. Grandparents also feel an obligation to provide their grandchildren with a safe place to stay. But mostly they want to give their grandchildren a sense of belonging and they want to care for them because they love them (Gordon *et al.*, 2003; Farmer, 2009; Mokone, 2006; Coakley *et al.*, 2007 and Roux *et al.*, 2010)

In light of the challenges that adolescents in care and their foster grandparents face, they need to be supported on an ongoing basis. In the section below, the role of the social worker is discussed.

2.8 THE ROLE OF THE SOCIAL WORKER IN RELATION TO FOSTER CARE PLACEMENTS

Social workers play a pivotal role in supporting grandparents and their foster children. Their intervention begins even prior to the placement of the child and continues until the child is no longer in care.

2.8.1 Pre - placement

Research conducted by Perumal and Kasiram (2009) and Pretorius and Ross (2010) shows the lack of social work services to children prior to their placement in alternative care. From a practice point of view, social workers should play a central role in consulting with children prior to their placement in foster care. This would ensure that at a micro level, children are being consulted on issues relating to their care. Social workers should also inform children about what foster care entails so that they too are familiar with the procedures involved and this would result in their meaningful contribution.

Similarly Pretorius and Ross (2010) suggest that social workers need to adequately prepare the prospective foster parents and inform them of the procedures involved in foster care as well as the documents required. This provides clarity for the prospective foster parent and facilitates the application for the foster care grant. To cope with the demand for this service, the Child and Family Welfare Society of Pietermaritzburg conducts monthly workshops that focus on foster care procedures. Other NGOs have also adopted the strategy of conducting similar workshops to cope with the demand for services (Matthias, 2010).

2.8.2 Post placement

A review of the studies conducted in the UK, USA and African countries all highlight the need for supporting grandparents and their foster grandchildren post placement. The status or well-being of grandparents has significant implications for the overall family well-being and their ability to provide good care for their grandchildren (Smithgall *et al.*, 2009). A study conducted by Smithgall *et al.*, (2009) and several studies cited by them confirm the interconnectedness between the emotional and mental well-being of grandparents and that of their grandchildren. This clearly highlights the importance of making sure that the emotional and mental health needs of foster grandparents are addressed by social workers. Falconnier *et al.* (2010) adds that grandparents are unique and social work services to them

need to be tailor made to suit their needs. Gordon *et al.* (2003) and Mokone (2006) highlight the important role that grandparents play and the need for the social worker to support and link them to resources, so that children are kept in a safe and nurturing environment that minimizes the impact of growing up without their parents.

Adolescents in care also need therapeutic support from the social worker so that their emotional and psychological needs are met. The social worker also needs to monitor the academic performance and scholastic attendance of foster children; ensure that the basic needs of foster children are met by the foster parent and that the placement continues to benefit the child.

Services to foster children and foster parents should not happen in isolation of each other. The life model of practice developed by Germain and Gitterman (1980) emphasizes the role of the social worker in assisting families deal with the stresses in their lives. The social worker's role is to help people move through their stressful life transitions in such a way that their adaptive capacities are supported and the environmental responsiveness to coping is increased. Within the ecological framework, part of the social worker's interventions must ensure that the needs of both the individual and the systems with which they interact are met (Cox, 2003; 2007). This perspective encourages the social worker to recognize that problems arise because of a "poor fit between a person's environment and his/ her needs, capacities, rights and aspirations" (Germain and Gitterman, 1996 cited in Healy, 2005). The aim of social work would therefore be to find the "fit" between people and their environment or change the environment.

From the literature presented on adolescents in care and their foster grandparents it appears that this relationship is faced with many challenges. The role of the social worker is to assist grandparents in fulfilling their responsibilities and keeping children with families. The social worker also has the responsibility of supporting

foster children. However, throughout this review of the literature the challenges that social workers face have been noted.

While it is evident that social workers play an important role in supporting foster children and their foster parents, the social worker may not always be readily available to be of assistance. This is due to a lack of financial resources and related challenges with the state department that are fully discussed in the partnership between NGOs and the Department of Social Development.

In addition, implementation of the Children's Act 38/2005 with effect from April 2010 has been a major challenge for social workers. One reason for this is that social workers are dealing with high caseloads and cannot cope with the demand for services (Matthias, 2010 and Pretorius and Ross, 2010).

Finally, social workers are dealing with the devastating impact of HIV and AIDS that is taking an emotional toll on their well being.

2.9 THE ROLE OF SOCIAL SERVICE PROFESSIONALS

Social services professionals refer to social auxiliary workers and child and youth care workers that are registered in terms of Social Service Professions Act 110 of 1978 (Lombard, 2008). According to Lombard (2008) when the White Paper for Social Welfare was created, it made provisions for the appointment of social services professionals who would play a role in implementing developmental social work services, together with social workers. The Children's Act also provides for appointment and utilization of social service professionals in rendering services to children and their families (September, 2007). These social service professionals are intended to relieve the over-reliance on social workers as well as address the shortage of social workers in the country (Lombard, 2007; 2008).

However, Lombard (2008) points out that the full potential of utilizing social service professionals has not been realized. This is evident at a practice level, where social workers continue to render services that auxiliary workers could. This includes conducting home visits, obtaining documents from clients and visiting children at school. At the Child and Family Welfare Society of Pietermaritzburg, the Department of Social Development does not subsidize auxiliary worker posts. As a result the organization does not employ auxiliary workers that could assist social workers.

Social service professionals could be a resource for rendering an efficient service to children and their families. However this can only happen if they are provided with proper training and the Department of Social Development makes funding available to employ them.

2.10 CONCLUSION

South Africa has made tremendous progress in realizing the rights of children. The adoption and ratification of the CRC and the ACRWC committed the country to uphold the principles contained in them. This was evident in the Children's Act that brought South African legislation for children in line with international instruments. The Department of Social Development also developed relevant policies to make services more effective to children and their families.

However, this review has illustrated the challenges that make it difficult to fully realize the rights of children and their foster parents. These include the need for the state to allocate a bigger budget for the implementation of policies and legislation and to review their relationship with the NGO sector. The shortage of trained social workers and social service professionals was highlighted throughout this review and needs to be addressed as a matter of urgency so that service delivery to children and their families is efficient and effective.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 INTRODUCTION

The purpose of this chapter is to provide an overview of the research methodology utilized. This includes a discussion of the research approach, sampling, data collection methods, data analysis, reliability and validity, ethical issues and limitations pertaining to the study.

3.2 RESEARCH APPROACH

A qualitative research paradigm was utilized for the purposes of this research. Babbie and Mouton (2001) point out that the primary goal of qualitative research is to understand and describe human behavior rather than provide an explanation and prediction of human behavior. Babbie and Mouton (2001) further indicate that the qualitative researcher is to be seen as the main instrument in the research process. Yegidis and Weinbach (2002) also state that in qualitative research, the researcher is the primary instrument for data collection and analysis. According to Yegidis and Weinbach (2002), sometimes in qualitative research the relationship between the researcher and the sample participants is openly supportive and therapeutic at times. In this study, the researcher who is a qualified and experienced social worker recognized that some of the participants required counseling services and they were referred to their social workers with their permission. In this research study, the researcher intended to gain greater understanding of the experiences of grandparents and their adolescent foster children.

In keeping with the qualitative nature of the research, the purpose of this study was descriptive. Descriptive studies aim to describe phenomena accurately without

providing causal explanations of the phenomena (Durrheim, 2006). Descriptive research is an intensive examination of phenomena and their deeper meanings, resulting in thick description (Rubin and Babbie, 2001 cited in Fouche and De Vos, 2005). In this instance grandmothers and adolescents were expected to provide rich and thick descriptions of their experiences of living together.

3.3 SAMPLING

Non-probability sampling methods were utilized for this study. According to Rubin and Babbie (2008) social work research is often conducted using non-probability sampling. Van der Riet and Durrheim (2006) define non-probability sampling as the kind of sampling where someone is not chosen randomly. Rubin and Babbie (2008) point out that sometimes a sample is selected on the basis of the knowledge of the population and the nature of the research aims. In this study, purposive sampling was utilized. Van der Riet and Durrheim (2006) refer to purposive sampling as based on careful selection of cases that are typical of the population being studied.

In this study two sample groups were drawn from clientele receiving services from the Child and Family Welfare Society of Pietermaritzburg. Permission was granted by the organization to reflect its name and conduct this study with their clientele, provided the anonymity of clients was maintained.

The first sample group consisted of adolescents between the ages of 13-15 years. The sampling criteria included children who have been in foster care for at least two years with a grandparent 60 years and older and who were willing to part of the study. Adolescents were included in the study because it was considered that their participation will provide a more holistic view and add value to this study. More importantly though, is that legislation pertaining to the care and protection of children mandates that their voices be heard.

According to Lewis (2004) including children and young people in research can provide important information on various issues including family life. This view is supported by Greig *et al.* (2007) who states that with appropriately designed tools, children can give constructive feedback on issues that affect them. Nomdo and Roberts (2011) adds that by taking the views of children into account with regards to service delivery and design, we would be able to respond to their actual needs. Research conducted by Barber and Delfabbro (2005); Messing (2006) and Perumal and Kasiram (2009) also argue that foster children should be consulted on decisions regarding their care. By listening to children's unique experiences, we are able to gain the best understanding about their care from the perspective of those most affected. Listening to the voices of children in care strengthens their capacity to function both in social relationships and as full citizens in society (Gilligan, 2000).

In planning this study, it was envisaged that both grandmothers and grandfathers would participate and share their experiences. However, in drawing the sample from the case files, it was noted that children are mostly placed in foster care with their grandmothers, even where grandfathers were present. The sample therefore included grandmothers only. However, in the interviews and focus group discussion, the role of grandfathers was explored.

The second sample group consisted of grandmothers in the age range of 60 years and older. The sampling criteria included grandmothers who have fostered their grandchildren between the ages of 13-15 years for at least two years and who were willing to participate in the study. Grandmothers were included in this study as it was envisaged that their participation would broaden the research. In addition, as outlined in Chapter Two, there is an increase in the number of foster grandparents. There is therefore a need to understand their experiences so that service providers are able to respond to their unique situation appropriately.

The researcher identified adolescents and their foster grandmothers who met the criteria by referring to the organization's allocation register that provides details on foster care cases that have been finalized. Ten adolescents and their foster grandmothers who met the above criteria were selected. All the adolescents and their foster grandmothers live in different geographical areas, but within a radius of 15 km to central Pietermaritzburg and were on the caseloads of six different social workers.

The six social workers approached the adolescents and their foster grandmothers and explained the purpose and nature of the research. The adolescents and their grandmothers were informed that their participation in the research was voluntary. All ten of the adolescents and their grandmothers who were approached agreed to participate in the study. The grandmothers who are the legal guardians of the adolescents also gave consent for them to participate in the study. The consent forms [Annexure 1(a) and (b)] were given to the grandmothers and the adolescents to read and complete.

3.4 DATA COLLECTION METHODS

Qualitative data collection techniques were utilized. This included semi-structured interviews with the adolescents, a focus group discussion with their grandmothers and an analysis of the case files of the participants. Pilot interviews were held separately with an adolescent and a grandparent to ensure that the questions asked were useful and asked in an appropriate manner.

3.4.1 Semi-structured interviews

According to Rubin and Babbie (2008:462) "a qualitative interview is an interaction between the interviewer and the respondent in which the interviewer has a general plan of inquiry but not a specific set of questions that must be asked in particular words and order". Gillham (2000) adds that the purpose of the interview is to

obtain information and understanding of the issues relevant to the aim and objectives of the research.

Once the adolescents had agreed to participate in the study, the interviews were set up. The interviews were conducted at the offices of the Child and Family Welfare Society of Pietermaritzburg. At the start of each interview the researcher ascertained if the adolescent preferred a Zulu speaking social worker to assist in the interviews. Four of the adolescents wanted their interviews to be conducted in Zulu and were accommodated in this regard. The interpreters that assisted in the interviews were not the social workers supervising the adolescents' foster placement, to ensure that the adolescents shared their experiences openly without fear of offending their social workers.

The in-depth individual interviews that were held with the adolescents were guided by a semi-structured interview guide [Annexure 2]. Before the interview began, the researcher confirmed that the adolescent was participating voluntarily in the study; had completed the consent form and that the grandmother had given written consent. Permission to tape the session was also obtained. The interviews lasted between forty five minutes to an hour. Some of the adolescents required counseling services and with their permission were referred to their social workers. All ten of the adolescents who had agreed to participate in the study were interviewed.

Individual interviews were conducted with the adolescents to enable them to share their experiences freely in a safe and comfortable environment without fear of offending their grandparents. The individual interviews also allowed the researcher to obtain clarity when necessary and observe and note non-verbal communication of the adolescents. They were also able to express their emotions and not feel embarrassed by this. In view of the nature of this study, it was anticipated that the adolescents would share painful experiences. Many of them did share painful

experiences and with their permission, the researcher referred them to their social workers for counseling services.

3.4.2 Focus group

A focus group is a general term given to a research interview conducted with a group who share a similar type of experience (Kelly, 2006). According to Rubin and Babbie (2008) focus groups are also called group interviews and are used in qualitative research. It allows the researcher to question many individuals at the same time. Focus groups allow for a group of people to be brought together in a private, comfortable environment to engage in a guided discussion of a specific topic.

The researcher chose to conduct a focus group discussion with the grandmothers as it was envisaged that they would be able to share their experiences and build on the responses of others. It was felt that grandmothers would be more forthcoming with their experiences within a group environment that would be seen as safe and non-threatening. Furthermore, it was expected that the participants will support each other. In addition, conducting the focus group would allowed the researcher to interview many participants at the same time as opposed to individual interviews.

Nine of the adolescents were placed in foster care with their grandmothers. One adolescent was placed in foster care with both her grandparents. Only the grandmothers responded to the request to participate in the study. Once the grandmothers had agreed to participate in the study, the focus group discussion was held at the offices at the Child and Family Welfare Society of Pietermaritzburg. This venue was chosen as it was easily accessible for all the grandmothers. Only eight of the ten grandmothers who had agreed to participate in the study were part of the focus group discussion. The other two grandmothers did not give reasons for not attending the focus group discussion. They had read and signed the consent form which was indicative of the fact that they did intend to participate.

Before starting the focus group discussion, the researcher confirmed that all the grandmothers were participating voluntarily in the study and had completed the consent forms. Permission to tape the discussion was also obtained. The researcher was assisted by a Zulu speaking social worker to facilitate the focus group discussion. In addition, despite the discussion being recorded, another social worker observed and took notes of the responses and non-verbal gestures during the discussion. The notes were valuable when the data was being transcribed and ensured that the contents of the focus group discussion were accurately captured.

Conducting the focus group with the grandmothers was advantageous as they felt empowered to share their experiences and problem solve within a group environment where there were other people in similar circumstances. Grandmothers supported each other when sharing their experiences so that they did not feel alone and comforted each other when the experiences they shared were painful. The grandmothers also shared that they felt worthy to be invited to share their experiences with other grandmothers and the researcher.

3.4.3 Case Files

A further method of data collection was an in-depth analysis of the case files of all the participants in the study at the Child and Family Welfare Society of Pietermaritzburg. Background information pertaining to the foster placement of the adolescents was obtained from the files. This enabled the researcher to create profiles of all the participants, thereby providing a context within which to see them.

3.5 DATA ANALYSIS

According to De Vos (2005:333), data analysis is the process of bringing order, structure and meaning to the mass of data collected. Marshall and Rossman (1999:150) cited in De Vos (2005) add that qualitative data analysis is a search for general statements about relationships among categories of data.

Terre Blanche, Durrheim and Kelly (2006) and De Vos (2005) identify various steps that were employed in analyzing the data. The interviews and the focus group discussion were transcribed individually. The researcher thereafter read the transcripts to become familiar with the data. The responses of the adolescents were then combined into a single document. This enabled the researcher to identify different and similar responses which were color coded. The different and similar responses of the focus group discussion were also color coded. This resulted in categories and themes emerging. The researcher also compared the responses from the adolescents to those of the grandmothers. From this comparison, the researcher highlighted similar and different themes. The final step was writing up the analysis in terms of categories, themes and sub-themes, comparing the findings of this study with other studies and supporting these findings with relevant literature.

3.6 RELIABILITY AND VALIDITY

According to Babbie and Mouton, (2001), while a qualitative study may strive towards objectivity, validity and reliability; the nature of the study might make this challenging. Therefore, it became necessary for the researcher to employ other methods to assess the validity and reliability in this study. Lincoln and Guba's model of assessing the trustworthiness of a study was utilized (Lincoln and Guba, 1985, cited in Babbie and Mouton, 2001:276). For them the key principle of a good qualitative research is found in the notion of trustworthiness, or the neutrality of its findings. The model is based on four constructs; credibility, dependability, transferability and confirmability which are discussed below.

Credibility is also referred to as truth value. Truth value in qualitative research is obtained from the discovery of human experiences as they are perceived by the informants. To inform the credibility of this study, triangulating different sources of information and different methods of data collection from grandmothers, their adolescent foster children and case files was utilized (Lincoln and Guba in Babbie

and Mouton, 2001). In addition, participants were assured of confidentiality and were encouraged to openly share their experiences.

Dependability refers to whether the findings will be consistent if the research was conducted with the same people or in a similar context. Triangulating different sources of information and different methods of data collection added to the dependability of this study.

Transferability refers to whether the findings of the research can be applied to other settings. However in qualitative research, the researcher is not primarily concerned with generalizations. The purpose of qualitative research is to obtain thick descriptions; and as such in this research, rich and thick descriptions of the experiences of foster parents and foster children were obtained and reported with sufficient detail and precision to allow the reader to decide on transferability of the study (Lincoln and Guba in Babbie and Mouton, 2001).

Confirmability refers to freedom from researcher bias in the research procedures and results. However in qualitative research, it is believed that the researcher can increase the worth of the findings by being close to the participants (Lincoln and Guba in Babbie and Mouton, 2001). The authors therefore suggest that rather than considering neutrality in terms of the researcher, neutrality in terms of the data should be considered. This involves leaving an adequate trail to enable the reader to determine if conclusions, interpretations and recommendations can be traced to their sources, and if they are supported by the inquiry. In this research, all aspects of the data collection and analysis were documented to confirm neutrality.

3.7 ETHICAL ISSUES

Ethical clearance for the study was obtained from the University of KwaZulu-Natal's Research and Ethics Committee (Protocol Reference Number: HSS/0584/011M).

Since this study involved children, written informed consent was obtained from their foster grandmothers. According to Masson (2004) when children are to be involved in research, someone who has parental responsibility has to consent and in this instance it was the foster mother. The written informed consent of the adolescents was also obtained. Adolescents and their foster grandmothers were informed in writing and verbally of all aspects of the research and that their participation was voluntary and could be withdrawn at any point, with no consequences. Permission to tape the interviews was obtained from the participants. Adolescents and their foster grandmothers were informed about their roles in the research, and were advised what would happen to the data obtained from the research. The participants were treated with dignity and respect throughout the research process. Confidentiality was maintained at all times. Since the children forming part of the sample were known to be vulnerable, it was envisaged that they would share painful experiences. Since the researcher is a qualified social worker, this was dealt with appropriately and the children were referred to their social workers for supportive services. The participants have been acknowledged in the research report for their contribution to the study.

3.8 LIMITATIONS OF THE STUDY

Limitations were identified in the study. Some of the interviews with the children and the focus group were conducted through an interpreter. Despite the interviews and focus group discussions being tape recorded, the concern is the loss of data during the process of interpretation. The researcher's ability to probe in those interviews that were interpreted was limited. To address this issue detailed notes were also taken during the interviews and the focus group discussion.

Since two grandmothers did not participate in the research for unknown reasons, the number of participants in the focus group was reduced. However, the researcher was still able to obtain rich data from the participating grandmothers.

The children and the grandmothers shared painful experiences. In these instances the researcher referred the children and their grandmothers for follow up services and this proved to be time consuming.

While there was related literature on the topic, there was limited literature available both locally and internationally specifically on the experiences of grandparents and their adolescent foster children.

3.9 CONCLUSION

This chapter provides a detailed overview of the research methodology utilized in this research. A discussion on the ethical considerations and limitations of the study is also included. In the next chapter, the research findings will be discussed and presented.

CHAPTER FOUR

ANALYSIS AND DISCUSSION OF FINDINGS

4.1 INTRODUCTION

This chapter presents the research findings with the intention of understanding the experiences of grandparents and their foster grandchildren which was the purpose of this study. As noted in Chapter Three only grandmothers and not grandfathers participated in the focus group discussion.

Individual in-depth interviews were held with the adolescent participants and a focus group was held with the grandmothers. The individual interviews with the adolescents and the focus group discussion were guided by semi-structured interview guides. These guides were formulated in line with the objectives of the study discussed in Chapter One. The individual interviews with the adolescents and the focus group discussion with the grandmothers were held independently of each other. Since many of the categories explored are similar, the results are presented jointly. The responses of the participants in the study are reflected in italics.

The findings are presented in seven sections beginning with a profile of the grandmothers and their adolescent foster children which provides a contextual background for them. Next, a discussion on the experiences of the adolescents and their grandmothers prior to the formalization of the foster care placement is presented. This is followed by a discussion on the experiences of adolescents and their foster grandmothers of living together, the psycho-emotional needs of adolescents and the psycho-emotional needs of grandmothers. The next section focuses on the experiences of adolescents in relation to friends and schooling. A discussion on the support systems for grandmothers and their foster children is

also included. The chapter concludes with a discussion on the role of the social worker and the supervising agency.

4.2 PROFILE OF THE PARTICIPANTS

The information used to compile the profile of the participants which is presented below, was obtained from the case files at the Child and Family Welfare Society of Pietermaritzburg. All the participants reside on the outskirts of central Pietermaritzburg. Names have been omitted to protect the anonymity of the participants. AP refers to the adolescent participant and G to the grandmother.

AP1: 15 year old male who was placed in the foster care of his maternal grandmother (G1 aged 68) at a Children's Court Inquiry held in 2005. The initial application for foster care was made in 2003. His natural parents are deceased and he has no siblings. At the time of the study the child was in Grade 9. The family sources of income are the foster mother's old age pension, her husband's old age pension and the child's foster care grant. In addition to the adolescent participant, the foster mother is caring for three other school going children (two of whom are her grandchildren and one is her niece) without financial assistance. All three of these children are adolescents. The family resides at Esigodini Location, Edendale.

AP2: 13 year old female who was placed in the foster care of her maternal grandmother (G2 aged 79) at a Children's Court Inquiry held in 2006. The initial application for foster care was made in 2005. Her mother is deceased and the identity and whereabouts of her father are unknown. She has one sibling aged 16 who is also in foster care with this grandmother but was not interviewed for the purpose of this research as she did not meet the age criteria. At the time of the study AP2 was in Grade 8. The sources of income are the foster care grants, the foster parent's old age pension and her husband's old age pension. There are five

other family members living in the home; two are unemployed and three are attending school. The family resides in Snathing Location, Edendale.

AP3: 15 year old male who was placed in the foster care of his maternal grandmother (G3 aged 63) at a Children's Court Inquiry held in 2008. The initial application for foster care was made in 2007. Both his parents are deceased and he has no siblings. He is attending a special school for children with learning difficulties. The sources of income are the foster care grant and the foster parent's old age pension. There are three other family members living in the home; two unemployed and one who is attending school. The family resides in Edendale.

AP4: 14 year old female who was placed in the foster care of her maternal grandmother (G4 aged 62) at a Children's Court Inquiry held in 2008. The initial application for foster care was made in 2006. Her natural mother is deceased and the identity and whereabouts of her natural father are unknown. She has one sibling aged eight who is also in foster care with this grandmother but was not interviewed for the purpose of this study as she did not meet the age criteria. At the time of the study AP4 was in Grade 7. The sources of income are the foster parent's old age pension and two foster care grants in respect of AP4 and her sibling. The family resides in Thamboville, Glenwood.

AP5: 14 year old male who was placed in the foster care of his paternal grandmother (G5 aged 72) at a Children's Court Inquiry held in 2008. The initial application for foster care was made in 2007. Both his parents are deceased and he has no siblings. The foster parent is caring for three other grandchildren. Only one of these children is in her foster care. At the time of the study AP5 was in Grade 8. The sources of income are the two foster care grants she receives for AP5 and her other foster child and two old age pensions received by herself and her husband. The family resides in Woodlands.

AP6: 15 year old female who was placed in the foster care of her paternal grandmother (G6 aged 61) and paternal grandfather (aged 64) at a Children's Court Inquiry held in 2008, the same year that an application for foster care was made. Both her parents are deceased and she has no siblings. At the time of the study the child was in Grade 10. The foster mother is employed and is the sole breadwinner in the family as her husband is unemployed. The family also receives a foster care grant. The foster mother's income disqualifies her from receiving a state old age pension, despite her age. The family resides in Glenwood.

AP7: 15 year old male who was placed in the foster care of his maternal grandmother (G7 aged 69) at a Children's Court Inquiry held in 2008. The initial application for foster care was made in 2006. Both his parents are deceased and he has no siblings. He is presently in Grade 10. The sources of income are the foster care grant and the foster parent's old age pension. The foster mother is also caring for one grandchild without financial assistance. The family resides in Esigodini Location, Edendale.

AP8: 15 year old male who was placed in the foster care of his paternal grandmother (G8 aged 80) at a Children's Court Inquiry held in 2008, the same year that an application for foster care was made. Both his parents are deceased. He has two siblings that reside in Port Shepstone. He was in Grade 10 at the time of the study. The only sources of income are the foster care grant and the foster parent's old age pension. The foster mother's daughter also resides with her. The family resides in Dambuza Location, Edendale.

AP9: 13 year old female who was placed in the foster care of her maternal grandmother (G 9 aged 74) at a Children's Court Inquiry held in 2008. The initial application for foster care was made in 2006. Both her parents are deceased and she has no siblings. At the time of the study, the child was in Grade 8. The sources of income are the foster care grant and the foster parent's old age pension. The family resides in Grange.

AP10: 15 year old male who was placed in the foster care of his maternal grandmother (G 10 aged 62) at a Children’s Court Inquiry held in 2008. The initial application for foster care was made in 2007. His mother is deceased and the identity and whereabouts of his father are unknown. He has no siblings. The child was in Grade 6 at the time of the study. The child’s uncle and great – grandmother also reside in the home. The sources of income in the family include the child’s foster care grant, the foster mother’s old age pension and the great – grandmother’s old age pension. The family resides in Kwa Pata.

The table below provides a summary of the profile of the participants.

TABLE 4.1: PROFILE OF THE PARTICIPANTS

GRANDMOTHER (G)	AGE	ADOLESCENT (AP)	AGE	GENDER	YEAR OF PLACEMENT IN FOSTER CARE
G 1	68	AP 1	15	Male	2005
G 2	79	AP 2	13	Female	2006
G 3	63	AP 3	15	Male	2008
G 4	62	AP 4	14	Female	2008
G 5	72	AP 5	14	Male	2008
G 6	61	AP 6**	15	Female	2008
G 7	69	AP 7	15	Male	2008
G 8	80	AP 8	15	Male	2008
G 9 *	74	AP 9	13	Female	2008
G 10 *	62	AP 10	15	Male	2008

* Did not participate in the focus group discussion.

** AP 6 was placed in foster care with both her grandparents.

All the participants in the focus group were grandmothers. A significant finding was that although five of the grandmothers are married, they and not their husbands undertook to approach the organization to apply for the foster care grant. Of the five children who were residing with their both their grandparents, four of them were placed only in the care of their grandmothers. Only one child was placed in the foster care of both her grandparents. It appears that from the outset that the grandfathers played a minimal role in assuming responsibility for the care of their grandchildren. These findings are consistent with a study conducted by Alpaslan and Mabutho (2005) who found that grandmothers assumed primary responsibility for the care of their grandchildren. Similarly Raniga and Simpson (2010) and de Jager (2011) found that grandmothers have the responsibility of caring and nurturing in households.

Most of the foster parents are maternal grandmothers with only three paternal grandmothers fostering their grandchildren. Five of the grandmothers are married, three are single and two are widows. Only one of the grandmothers is employed, the rest of them are in receipt of an old age pension. Seven of the foster families are also caring for other family members without additional financial assistance.

All the grandmothers made the initial contact with the Child and Family Welfare Society of Pietermaritzburg for financial assistance to care for their grandchildren. At the point of contact with the organization, the biological mothers of all the children were deceased and the biological fathers of seven of the children were deceased. All, except one grandmother, began caring for their grandchildren following the death of their mothers. The one grandmother has been caring for her grandson since his birth as his mother had abandoned him in her care. All the children, except for the one child who was abandoned with his grandmother had relationships with their parents. The identity and whereabouts of the biological fathers of three of the adolescents are unknown and there is no contact with them. Seven of the adolescent participants have no siblings.

As is evident from the profile of the participants above, most of the adolescents are being raised in homes with other children and family members. The micro system in these families therefore consists of the grandmothers, sometimes grandfathers, the adolescent, siblings, cousins, aunts and uncles with the grandmother as the head of the household. These findings are consistent with research conducted by Mdletshe (2008); Schatz, Madhavan and Williams (2011) and United Nations Children's Fund (2007) who found that most households are headed by females who are elderly and includes the extended family. This implies that the responsibility of caring and nurturing falls on elderly women.

Nine of the adolescent participants are attending secondary school. One is attending a special school for children with learning difficulties and the rest are in senior primary school. All the adolescent participants have been in foster care for more than two years. At the time of placement in foster care, seven of the children were at the early adolescent stage of development. The other three were still at the middle childhood stage of development. This meant that the grandmothers were responsible for caring for adolescents who were trying to cope with the loss of their parents and the changes in their circumstances, while at the same time were also coping with all the changes associated with adolescence. At the time of the study, the average age of the grandmothers was 69 and the average age of the adolescents was 14. This highlights the generational gap between the grandmothers and adolescents as well as the gap in their stages of development.

In the next section the experiences of adolescents and their grandmothers prior to the formalization of the foster care placement will be discussed.

4.3 EXPERIENCES OF ADOLESCENTS AND THEIR GRANDMOTHERS PRIOR TO THE FORMALIZATION OF THE FOSTER CARE PLACEMENT

The discussion below focuses on the experiences of adolescents and their grandmothers prior to the formalization of the foster care placement. The themes

that emerged in this category are the initial application for the foster care grant, and consultation with the adolescents and their grandmothers with regards to the foster placement.

4.3.1 Initial application for the foster care grant

Two sub-themes emerged: workshops and lack of documentation.

i) Workshops

When the grandmothers initially approached the Child and Family Welfare Society for financial assistance to care for their grandchildren, they were invited to attend a workshop where the requirements for foster care and the procedures to access the foster care grant were discussed. Grandfathers did not respond to the invite to attend the workshops.

These workshops focused only on procedures to access the foster care grant. Grandmothers obviously had a different role to play now as primary caregivers to their grandchildren; and children were faced with the overwhelming loss of their parents and changes to their lives as a result of this. Issues such as care of children, helping children deal with the loss of their parents as well as helping the grandmothers' deal with the loss of their children were not included in the content of the workshop. In addition to assisting the family access the foster care grant; the social worker should have facilitated a "fit" between people and their environment. This was clearly lacking in the initial services to grandmothers and the adolescents.

The organization held these workshops to cope with the demand for foster care services as there were only two social workers allocated to render this service. The organization also did not have the support of social services professionals to assist the social workers. Organizations that participated in a study conducted by Matthias (2010) similarly held workshops to deal with the high number of foster

care applications. It appears that conducting these workshops is a common strategy adopted by organizations to cope with the demand for this service.

A significant finding was that grandmothers were interested mainly in obtaining financial assistance and not legal guardianship of their grandchildren because when they contacted the organization, they requested financial assistance. Grandmothers preferred to access the foster care grant and not the child support grant as the foster care grant was substantially more than the child support grant. However to access the foster care grant, it was necessary for a court order to be issued, thus making the grandmothers guardians of the children. This is consistent with a study conducted by Gerrand and Ross (2009) where the grandmothers' primary concern was also to access the foster care grant.

ii) Lack of documentation

Many grandmothers also did not have the necessary documentation required by the court for a child to be placed in foster care. For example, an unabridged birth certificate with the identifying details of biological parents is required. This is a requirement of the court to prevent fraudulent applications for foster care grants. Grandmothers apply for this document at the Department of Home Affairs and at the time of the study was approximately R70. Many grandmothers who were already struggling financially could not afford these documents, but had to apply for them in order to access the foster care grant. The situation was exacerbated by the fact that the Department of Home Affairs took many months to process these unabridged birth certificates. Social workers assisted grandmothers to access these documents by liaising with the Department of Home Affairs on an ongoing basis. In a study conducted by Gerrand and Ross (2009) grandparents also struggled to obtain the necessary documentation which ultimately delayed their foster care applications being processed. This resulted in grandmothers having to care for their grandchildren, with limited financial resources until the foster care grant was processed. This may have impacted on the quality of care that grandmothers were able to provide for their grandchildren.

The workshops assisted the organization to cope with the increase in the number of foster care applications. However, once grandmothers had the relevant documents required they still had to wait for their applications to be processed due to a backlog of cases. The grandmothers in this study waited between 5 months to 2 years for their application to be processed without financial assistance. The organization which is an NGO was only able to offer limited material support to the grandmothers while they waited for the foster care applications to be processed as this was dependent on donations received. Likewise participants in a study conducted by Gerrand and Ross (2009) also complained about the long wait for their grant applications to be processed and the financial difficulties they faced as a result of this.

The second theme in this category focuses on consultation with the adolescents and their grandmothers with regards to the foster placement.

4.3.2 Consultation with adolescents and grandmothers with regards to the foster placement

Three sub-themes emerged: reasons for the placement, understanding the meaning of foster care and consultation with the adolescents and grandmothers regarding the placement.

i) Reasons for the placement

The reasons for the placement of the children in foster care were explored with both the adolescents and their grandmothers. The adolescent participants were generally able to attribute their placements to the fact that they had no family and that their parents were deceased. Responses from them included:

"I did not have any other family to care for me." (AP 2)

"I don't have parents. They died." (AP 7)

The grandmothers similarly responded that the reason for the placement of the children in their care was because the children had no parents.

These findings reflect an accurate understanding of reasons for placement by both the adolescents and their grandmothers. A study conducted by Pretorius and Ross (2010) in South Africa similarly reflects that most children attributed their placement in foster care to their parents being deceased. In comparison, a study conducted by Roux *et al.* (2010), also in South Africa, reflected that over 50% of the participants in that research did not know why they were placed in foster care.

ii) Foster Care

The concept of foster care was also explored with the adolescent participants and at least half of them did not understand the meaning of foster care. The rest of the participants were able to provide a basic understanding of foster care and related it to having no one to care for them. However, none of the adolescents were able to provide an explanation that suggested that they were placed in foster care by an order of the court even though they were all present at the court inquiry. Some of their responses were:

“When someone takes care of children who do not live with their parents.” (AP 6)

“It is when you lost your parents and live with someone else.” (AP 8)

These findings show that the nature of foster care was not explained to the adolescent by the social worker at the time of the placement. As indicated in section 4.3.1, at the Child and Family Welfare Society of Pietermaritzburg, the nature of foster care and all that it entails is explained to the grandmothers when they come to apply to foster their grandchild at a workshop. These findings highlight the need for social workers to include children in these workshops so that they too are informed and are able to participate actively in issues relating to their care. The first contact that social workers had with adolescents in this study was when the social worker conducted a school visit to confirm the information provided by the grandmother. This intervention did not include bereavement counseling services, counseling in respect of the change in their circumstances nor preparing the child for the court proceedings. The contact was merely for administrative purposes. This implies that the demand for foster care services and the shortage

of social workers has resulted in compromising good social work practice. As discussed previously, the organization also does not employ social auxiliary workers who could relieve the pressure on social workers by conducting home visits, obtaining documents and visiting the child at school. This is due to the fact that the Department of Social Development does not fund social auxiliary worker posts at the organization.

iii) Consultation with the adolescents and grandmothers

The issue of consultation was explored with both the adolescents and grandparents. Consultation occurred at two levels and included consultation by the extended family and the social worker.

In relation to the first level of consultation the findings reflected that some of the adolescents indicated that they were asked by family members where they wanted to stay. It appears that parents did not make decisions prior to their deaths about where children would live following their death. This is contrary to the findings of Pretorius and Ross (2010), who found that it is a common cultural practice in African families to make the decision about where children would live after their parents pass away.

At the second level of consultation, most of the adolescents reported that they were not consulted by the social workers with regards to their placement. In section 4.3.1, it was noted that the workshops on foster care procedures were only conducted with the grandmothers and did not include the adolescents. Only one adolescent recalled attending the workshop where foster care was explained to him and he was asked by the social worker if he wanted to stay with his grandmother. The common response of the adolescents was that the social worker did not tell them anything. One adolescent however clearly recalled: *“Yes granny did and I wanted to stay with her. I could have stayed with my father’s mother, but I did not like to. Yes, the social worker told me I had rights. I had the right to security and shelter.” (AP 7)*

Research conducted by Perumal and Kasiram (2009) and Pretorius and Ross (2010) in South Africa produced similar findings regarding the lack of consultation with children by the social worker prior to their placement. Youth, in a study conducted by Geenen and Powers (2007) in the United States, shared their dissatisfaction about not being consulted about their care and suggested that they be involved in decisions in this regard. The lack of consultation with the adolescent participants by the social workers may be due to various reasons. Firstly, there is a high volume of applications received by agencies for foster care and the lack of capacity to deal with these applications. For example, for the year 1 April 2010- 31 March 2011, 450 new foster care applications were received at the Child and Family Welfare Society of Pietermaritzburg and there are only two social workers allocated to deal with these applications (The Child and Family Welfare Society of Pietermaritzburg 18th Annual Report 1 April 2010 to 31 March 2011). Secondly, the adolescents had already been living with their grandparents and social workers may have perceived that it is not necessary to consult with them as there were no other placement options for them. Lastly, social workers may consider that the foster care applications is merely a formality to access the grant, and may not consider it important to consult with the children (Meintjies *et al.*, 2003 and Patel, 2009).

These are legitimate reasons for the lack of consultation. However, this is clearly in violation of the Children's Act 38/2005 that legislates consulting with children on decisions regarding their care. Gilligan (2000) suggests that plans and decisions are more likely to be better informed and more likely to stick if the child feels heard and has his/her view genuinely considered. Gilligan (2000) elaborates that it is also good for children's recovery from trauma and for their self-esteem to be consulted in influencing their destiny. Research conducted by Richter and Muller (2005) illustrates the benefit of listening to children. Their research focused on listening to the voices of children who have been orphaned by HIV and AIDS as each of them has a unique story to tell. The findings of Richter and Muller (2005)

reflect that by using story telling and the narrative approach pioneered by White and Epston (1990), children are helped to re-author their stories and deal with grief and loss related to the death of their parents. This could positively impact on their emotional development and result in well-adjusted adolescents.

The discussion above signifies the importance of hearing the voices of children. This calls for all role players involved in a foster child's life to firstly look at the barriers that they encounter in consulting children. Secondly, these role players need to put measures into place so that children are consulted on issues that affect them.

The grandmothers in this study unanimously responded that when their grandchildren came to live with them, they felt that they had no choice but to care for them. G3 responded as follows: *"It was painful, but we did not have a choice. It was our grandchildren; we had to care for them."*

What clearly emerged was that grandmothers saw it as their responsibility and obligation to care for their grandchildren, despite the many difficulties they encountered and illustrates their resilience and commitment to caring for their grandchildren. The grandmothers assumed this responsibility as there was no one else to care for their children's children. They accepted this responsibility and subsequently approached the Child and Family Welfare Society of Pietermaritzburg to foster their grandchildren. Pretorius and Ross (2010) and Nyasani *et al.* (2009) too, note the lack of choice that grandparents had in caring for their grandchildren. These studies also found that even though grandmothers did not have a choice, they accepted the responsibility for caring for their grandchildren.

In the next section, the experiences of adolescents and their foster grandmothers of living together is discussed.

4.4 EXPERIENCES OF LIVING TOGETHER: ADOLESCENTS AND THEIR FOSTER GRANDMOTHERS

The themes that emerged at this micro level include the initial adjustment to living together, housing, communication, decision-making, disciplining, adolescents' roles and responsibilities in the home, relationships between the adolescents and their foster grandmothers, financial challenges of grandmothers and grandmothers planning for the long term care for their grandchildren.

4.4.1 Initial adjustment to living together

All the adolescent participants responded that they had no problems adjusting to living with their grandmothers. Many of them attributed their positive adjustment to their grandmothers taking care of them and buying them material things. It was interesting to note that the emphasis in the responses was on their physical needs being met rather than their emotional needs. Some of the responses were:

"Was easy, she gives me what I want, buy me clothes and things I want." (AP 3)

"It was different, in Ladysmith I was staying in poverty. It was not hard to stay with granny. It was not living in poverty; it was like I was free." (AP 6)

Another participant indicated that although she did not have a problem living with her grandmother she was not happy because she would have preferred to live with her parents (who were deceased). This is evident from her response: *"I did not have a problem but I was not happy. I wanted to stay with mum and dad, but they passed away. Grandma said I should not be angry, she will provide for me, if I needed something she will buy it for me." (AP 4)*

AP 7 responded as follows *"It was easy to stay with granny because I knew her"*. These findings reflect that since the adolescents had already developed a relationship with their grandmothers, adjustment was not an issue for them. Similarly studies conducted by Petty (2002); Messing (2006) and Lorkovich *et al.*

(2004) echo these findings that the placement of children with their grandparents reduces the trauma of separation for the children as the grandparents are familiar to them.

From the above, it is apparent that the adolescents had no adjustment difficulties. This is significant as a nurturing and positive relationship within the micro system will contribute to a more adjusted child.

Grandmothers however commonly responded that it was difficult for them initially when their grandchildren came to live with them as some of the responses below indicate:

“It was painful and difficult at first, but as time went on it became better and everyone was happy.” (G 3)

“I was stressed, it was hard, I had no control, I had to take care of my grandchildren even though it was hard at the beginning.” (G 5)

Although grandparents indicated that it was hard for them initially, it became easier for them as time passed. These findings are consistent with research conducted by Gordon *et al.* (2003) where grandparents also found that living together was initially difficult, but the situation improved over time.

4.4.2 Housing

When grandmothers assumed responsibility for their grandchildren, one of the primary needs of their grandchildren would have been for shelter. In this study some of the grandmothers identified a lack of adequate housing as a challenge for them as is indicative from the responses below:

“My house was damaged by the flood; I don’t have enough money to build a new house.” (G1)

“Since my grandchild is 15, it is a boy; we are all sleeping in one room. If he wants to bath, he has to go outside; he can’t bath in front of us.” (G3)

"I have 4 rooms; I am forced to sleep with my grandson. He is old now, he needs his own room. I am trying to build another two rooms but I can't finish it because I don't have the money. I live in a mud house." (G7)

Clearly what also becomes evident from the grandmothers' responses is that the lack of finances contributes to their inability to build larger homes. Grandmothers' only source of income is their old age grant and the foster care grants for the children in their care. This income is utilized to meet the needs of the entire family and there is no extra money for other uses. Similarly Nyasani *et al.* (2009) and Lorkovich *et al.* (2004) also found that rural foster grandparents and other kinship caregivers experienced inadequate housing and a lack of space to accommodate children. In this study the inadequate accommodation resulted in a lack of privacy as the family is forced to sleep together. Adolescents are at the stage of development where their bodies are developing and maturing, and privacy is important to them as they get familiar with these body changes. This results in both the adolescents and their grandmothers being forced to adapt to an unsuitable environment. When social workers compile reports for court, one of the aspects that they comment on is housing and even if the accommodation is inadequate, this may be overlooked so that the adolescent is placed within a home environment. When you consider this in light of Article 27 contained in the CRC and Section 28(1) (c) of the South African Constitution that stipulates that every child has the right to shelter, it appears that the basic rights of children are being compromised (South African Human Rights Commission/UNICEF, 2011). However, this needs to be weighed against a child's right to care in a family environment. Furthermore, only the grandparents saw the lack of housing as a challenge, as the adolescents did not identify the lack of privacy and accommodation as a problem. Rather, one of the adolescents found the living conditions with her grandmother an improvement from over her previous home.

4.4.3 Communication

According to Zastrow and Kirst-Ashman (2007), good communication is a characteristic of a healthy family. It involves a clear expression of personal ideas and feelings even when family members disagree with each other. The findings of this study indicate that most of the children found it easy to talk to their grandmothers about school, their problems, their parents and family. Some responses included:

“I can talk to grandma, when I have a problem and am unhappy.” (AP 10)

“I can talk about school and problems, my goals, my family.” (AP 5)

Similarly the grandmothers commonly responded that they also found it easy to communicate with their grandchildren. Most of the grandmothers indicated that they shared stories with the grandchildren from when they were young. Clearly grandmothers enjoyed reminiscing with their grandchildren, as was evident from the laughter and joy when discussing this in the focus group. One grandmother however, responded that she feels that she does not have enough time to sit down and talk with her grandson and this is mainly because he is involved with school and homework.

These findings therefore reflect generally that both the children and their grandparents found it easy to communicate on some issues.

Two further sub-themes that emerged are communication with regard to teenage sexuality and relationships and talking about parents. These are discussed below.

i) Teenage sexuality and relationship issues

Most of the adolescents are not in relationships. Some of them reported that they are not interested in relationships at this point and want to focus on their studies. Yet others reported that they just wanted to be friends with the opposite sex. All the children reported that they are not engaging in sexual relationships as they are not ready to take their friendships to the next level.

A significant finding in this study was that the adolescents found it difficult to talk to grandmothers about relationships and feared talking about sexuality. Many adolescents expressed a concern that if they spoke to their grandmothers about relationships, they would react in anger. This is illustrated by some of their responses below:

"I have a girlfriend, grandma does not know. It is a secret. I will not talk to her about it." (AP 10)

"No, I am scared to talk to granny. She may hit me." (AP 1)

"I will not talk to granny. She will shout at me. She will not like that I have a girlfriend because I am underage." (AP 8)

One of the reasons provided by the adolescents was the age of the grandmother, concern that she would not understand and that she would disapprove. Zastrow and Kirst-Ashman (2007) point out that disagreement about appropriate sexual behavior are common between parents and adolescents. Obviously for adolescents in the care of the grandmothers, the situation is exacerbated as the generation gap between them is much wider. This was also evident in a study conducted by Nyasani *et al.* (2009) where grandparents shared their uncertainties about talking to their foster children about sexuality issues.

In the focus group some grandmothers indicated that they talked to their grandchildren about the changes in their bodies. One grandmother reported that while she spoke to the girls, other male figures in the family spoke to the boys about the changes in their bodies.

According to Zastrow and Kirst-Ashman (2007) adolescence is the transitional period between childhood and adulthood during which young people mature physically and sexually. There are body changes that result in psychological reactions such as body image and self-image. Clearly at this stage in their lives adolescents need to be supported to cope with these changes. Berk (2010) points out that parents play a role in providing sex education to children. In this instance,

in the absence of parents, one would assume that grandparents would provide sex education to their grandchildren. These findings reflect that the opportunity does not exist for children to discuss these issues with their grandmothers. This might not be intentional, as clearly when the grandmothers were teenagers, they did not talk to their parents about sexuality and relationship issues. In fact when they were teenagers, there was a designated respected community member to talk to about these matters. However, it appears that it is different now as this option does not currently exist for children. The grandmothers also did not identify someone in the family or the community that the adolescents could talk to.

In the focus group, grandmothers caring for male adolescents reported that they would accept their grandsons having girlfriends but not their granddaughters having boyfriends. One grandmother reported that even if her grandson did not tell her about having a girlfriend, she will know, because he will become neat and take more care with his grooming. This grandmother reported that her grandson had a girlfriend. However in his interview with the researcher, he reported that he did not have a girlfriend. Possibly he did not trust the researcher, despite being assured of confidentiality or that the grandmother may have been wrong. Clearly these findings reflect the differences in how grandmothers bring up their male and female grandchildren. It appears that it would be more permissible for their grandsons to have girlfriends, than their granddaughters to have boyfriends. According to Zastrow and Kirst-Ashman (2007), girls and boys are treated differently from birth. This continues during adolescence where girls and boys are forced to conform to gender stereotypes. For male adolescents, they must be successful in athletics, be interested in girls and sex and not show interest in anything feminine. For female adolescents on the other hand, they need to be able to be feminine and popular, hide their achievements and assume a care giving role. The authors elaborate that culture also plays a role in gender stereotypes. Similarly a study conducted by Kambarami (2006) in Zimbabwe highlighted that gender stereotypes impact on the way that girls and boys are socialized.

The grandmothers shared their concerns about their granddaughters engaging in sexual relationships and teenage pregnancy. Zastrow and Kirst-Ashman (2007) and Berk (2010) have noted an increase in teenage pregnancy. They elaborate that the consequences of teenage pregnancy on the adolescent will include not completing school, poor financial and home circumstances and possibly poor relationship choices. Clearly, grandmothers have valid reasons for being concerned about teenage pregnancy as the consequences may be life changing. An important finding in this regard was that both grandmothers and the adolescents were interested in programs focusing on teenage pregnancy. A study conducted by Patrick *et al.* (2010) on adolescents and sexual behavior also highlights the importance of programs that focus on risky sexual behavior that may result in pregnancies.

The findings discussed above clearly reflect gender stereotyping and the generation gap that exists between grandmothers and adolescents in discussing teenage sexuality and relationship issues. Similarly a study conducted by Nyasani *et al.* (2009) highlights the generation gap as grandparents felt ill-equipped to talk to their adolescent grandchildren about relationships and sexuality issues. While grandmothers may not be comfortable to talk about sexuality issues, these may be a source of stress for the adolescents and they need to be supported during this stage of adolescent development.

ii) Talking about parents

Most of the adolescents identified their grandmother as a source of support and comfort when they wanted to talk about their parents. According to the adolescents, their grandmothers talked about their parents, answered their questions and tried to minimize the impact of losing their parents by telling them that they would take care of them. Some responses from the adolescents included:

"I go to grandma; I say to her that I want to remember mum and dad." (AP 10)

"I speak to my granny when I want to talk about my parents. I ask about them. She answers my questions" (AP 1).

A finding from the interviews with the adolescents was the reluctance of three paternal grandmothers who were not keen to talk to the adolescents about their natural mothers. One adolescent does not even speak to his grandmother when he wants to remember his parents, he speaks to his siblings. Another adolescent living with his paternal grandmother reported that he lived with her since birth and he has no memories of his mother. When he talks to his grandmother about his parents, she only shares memories about his father and not his mother. This saddens him as he would like to know about his mother. Yet another adolescent clearly recalled:

"I don't know if I am allowed to talk about my parents. There was a time not so long ago when she told me that my mother was a drunkard. I felt sad and bad. I stopped asking about mum. I did not want to hear her say that about mum." (AP 6)

The grandmother's response was:

"I always give her love, and she knows that I love her so much, she is my child. I always tell her how her mother was, she was an alcoholic. If her mother was still alive she may not be where she is today, because everybody at their home was drinking at her maternal home and they even sold alcohol. She is safe with me and she is happy with me." (G 6)

From the above response, it did not seem that the grandmother was not willing to talk about her grandchild's natural mother rather that she wanted to show her the benefits of growing up with her instead of with her mother who was an alcoholic. However, she did not consider that by conveying these negative feelings to the adolescent about her mother, she was not being sensitive to her grandchild's needs. This resulted in the adolescent subsequently not talking about her mother, even though she wanted to. What did not emerge in this interview was whether the child had contact with her maternal family.

4.4.4 Decision making

Linked to effective communication in a healthy family is the ability of family members to negotiate and come to a solution that is mutually acceptable to all members (Zastrow and Kirst-Ashman, 2007). In this study, a common response from the adolescent participants was that their grandmother was the decision maker in the family. This was even if they lived with both their grandparents.

A contentious issue which emerged was that if there was a school trip, grandmothers did not have a problem sending the adolescent. However, if there was a party, grandmothers felt strongly that their grandchildren, especially the girls, should not attend. Only two of the grandmothers responded that they will allow their grandchildren (girls or boys) to go to parties, provided that they returned on time. The reason for this was the possibility of alcohol and drugs being available at these parties. Grandmothers were also not willing to allow their granddaughters to go to the library and shopping centers. Yet they allowed their grandsons to go out to play soccer. Contrary to these findings, Mdletshe (2008) found that grandmothers in that study were amenable to their grandchildren engaging in recreational activities, provided that these activities were supervised.

Adolescents felt that they could not negotiate with their grandmothers. Rather if she made a decision, they accepted it, even if they did not agree with her or felt hurt. The adolescents reported that they did not even argue with their grandmothers. Other adolescents expressed anger at their grandmother's decision, although they did not show their anger. One adolescent wanted a cell phone from her grandmother and was angry that she did not get it. Another adolescent wanted a play station from his grandmother and she refused to buy it for him. Some of the adolescents responded as follows:

"I will accept it. If she says no, I will be down and sad. I will stay in my room." (AP 6)

"I will not go. I won't go because granny said I can't go." (AP 3)

Some of the adolescents attributed their response to their culture as a reason for not challenging their grandmothers. They reported that within the African culture, respect for your elders is inculcated in children and you cannot question your elders, even if you disagree as is evident from the responses below:

“In the African culture, you don’t disagree with an adult.” (AP 5)

“I do whatever she tells me to show respect.” (AP 1)

A response from one of the grandmothers *“He agrees to everything that I tell him” (G 7)* confirms that the children do accept their grandparents decisions. It appears from this response that this grandmother expected her grandchild to agree with her. It was interesting to note that the grandmothers were not able to relate any examples of disagreement with their grandchildren. In comparison the adolescents obviously did not agree with their grandmothers all the time, they just did not question their decisions. However, potential sources of conflict may emerge and may be related to not being able to go out with friends and wanting material items such as cell phones and play stations.

These findings indicate that grandmothers make all the decisions in the home and that the adolescents accepted the decisions. However, at this stage of development, adolescents start to develop the ability to reason and make decisions. This should start in the home, to allow the adolescent the opportunity to make decisions outside the home. According to Berk (2010), when making decisions, adolescents’ should identify the pros and cons of each alternative; assess the likelihood of various outcomes; evaluate their choice in terms of whether their goals were met, and learn from their mistakes so as to make better decisions in the future. However, if adolescents are not given the opportunity to develop this skill in the home, this would clearly impact on their ability to make informed decisions about issues that they are faced with outside their home. Grandmothers need to be capacitated to deal with these issues and once again social workers need to facilitate this process.

Grandmothers in the focus group of this study responded that they also made the decisions when they were parenting their own children. The feeling was that since they (grandmothers) did not go to parties, and they did not send their own children to parties; their grandchildren should not attend parties. It appears that a similar parenting pattern is emerging. This is based on when grandparents were children, when they were parents to their own children and now, as they parent their grandchildren

4.4.5 Disciplining

In the focus group grandmothers reported that they have no disagreements with their grandchildren. The analysis of the case files confirmed that none of the grandmothers had reported disagreements with their grandchildren. This response was similar to a study conducted by Mdletshe (2008) where grandparents reported that they also have well-behaved children. However, in the individual interviews, the adolescents reported that their grandmothers were responsible for disciplining in the home. It appears that even when it comes to disciplining their grandchildren, grandfathers do not play a role. While the grandmothers reported that they did not physically punish their grandchildren; some of the adolescents reported that their grandmothers meted out corporal punishment. Grandmothers reported that they talked to their grandchildren as a form of discipline. One grandmother reported that she cried when she spoke to her grandchild, to show him the seriousness of the situation. Grandmothers reported that when they disciplined their own children, they used corporal punishment. They reported that they no longer use corporal punishment because now children are aware of their rights and threaten to report them to the police if they physically assault them. Similarly a study conducted by Nyasani *et al.* (2009) shows the disharmonized intergenerational relationships linked to disciplining because grandmothers are of the old school of thought where corporal punishment was common. The following were some of the responses of the grandmothers in this study:

“Now we can’t hit the children, there is this law; they will tell the police we abuse them.” (G 1)

“They tell they will report us.” (G7)

“They tell us we are abusing them.” (G 2)

Most of adolescents reported that they did get upset and angry when they were disciplined. They accepted their punishment, mostly because grandmothers were older and they respected them. However, grandmothers in studies conducted by Alpaslan and Mabutho (2005) and Gerrand and Ross (2009) reported that the children in their care did not accept their authority and they found disciplining their grandchildren a challenge.

According to Gordon (2003) and Cox (2003, 2007), grandparents find it hard to start over in caring for their grandchildren. When you consider that grandmothers often have little choice when it comes to caring for their grandchildren; it is obvious they are going to feel overwhelmed and need to be supported in this regard. This suggests that grandmothers need to be equipped with different methods of disciplining.

4.4.6 Adolescents’ roles and responsibilities at home

All the adolescents reported that they had household chores at home that ranged from cleaning, washing and cooking. One adolescent responded that he had the responsibility of ensuring that his grandparents took their medication; or else they forgot. This is clearly a huge responsibility for a child to bear.

A study conducted by Louw and Joubert (2007) illustrates the increased chores of orphaned adolescents’ who take on the responsibility for their siblings and other younger children in the home. Two of the adolescents in this study also indicated that they have the responsibility of caring for the younger children in the home. This means that children are forced to assume adult roles while still being children themselves.

4.4.7 Relationships between grandmothers and their adolescent foster children

All the adolescents responded that their relationship with their grandmothers is a loving and close one. Many of the adolescents indicated that their grandmothers took care of them and bought them things as is evident from the responses below:

“I adore my relationship with my granny because when I need something she will buy it for me or tell me at the end of the month.” (AP 4)

“Good relationship, she gives me advice, tells me when I am wrong, she is caring for me.” (AP 1)

The adolescents in this study identified being in the care of their grandmothers as a positive experience. This may be attributed to the sense of belonging and family that the adolescent participants identified with, despite the loss of their parents. Related to living with their grandmothers, were the material things that the adolescents were able to enjoy, such as celebrations, clothes and outings.

A study conducted by Roux *et al.* (2010) similarly revealed that the children in that study generally described the relationship with their grandmothers as good. In their study, Geenen and Powers (2007) found that if foster children, particularly youth, have a positive relationship with their foster parents, their transition to adulthood is enhanced. Children in a study conducted by Alpaslan and Mabutho (2005) also cited their grandparents meeting their basic needs of food and schooling as positive experiences.

Likewise grandmothers in this study commonly describe their relationship with their grandchildren as close, loving and respectful and view this as a positive experience in caring for their grandchildren. A study conducted by Abebe and Aase (2007) in Ethiopia similarly revealed that grandparents expressed emotional satisfaction in caring for their grandchildren, despite the challenges they face.

These findings clearly illustrate the closeness between adolescents and their grandmothers, despite the disagreements they may have about going to parties and engaging in other recreational activities. This is important for the adolescent and will contribute to their positive development. A significant finding is that those adolescents living with their grandfathers do not share a particularly close relationship with them. This was made obvious by one participant's non-verbal response that indicated that she was not close to her grandfather. So even if he is in the home, the grandfather does not appear to play a significant role in the adolescents' lives.

4.4.8 Financial Challenges of Grandmothers

The grandmothers in this study identified a lack of finances as a negative experience in caring for their grandchildren. From the profile provided of the participants, the only sources of income in the majority of homes are the foster care grant which is R 740 and the old age pension which is R 1120. This income is jointly utilized to meet the expenses of the entire household. While the foster care grant is considerably more than a child support grant, it is evidently not enough to adequately meet the needs of everyone. Grandmothers were concerned that they were not able to buy clothes and other items for their grandchildren, which their parents may have been able to, if they were alive. The concern is that the foster care grant is intended to assist the foster parents to meet the needs of the foster child, and not the entire family. However, in many homes there are no other sources of income and there are also other children in these homes who are not in receipt of grants. Therefore the foster care grant is utilized to meet the needs of everyone. Some responses included:

"No money sometimes." (G 1)

"Not enough money for clothes, they want expensive things." (G 5)

These findings are consistent with studies conducted by Alpaslan and Mabutho (2005) and Gerrand and Ross (2009) where grandmothers identified a lack of money and not meeting the basic needs of children as challenging.

4.4.9 Grandmothers planning for the long term care for their grandchildren

In light of the fact that most of the parents of the adolescents are deceased, the implication is that the placement in foster care would be long term and there would be no reunification services rendered. In view of their age, a discussion was held with the grandmothers on the future care of their grandchildren in the event that they cannot care for them. A common response was that the grandmothers had identified other family members to care for the children. Only two of the grandmothers had not identified anyone as they reported that they had no family. What was not clear was whether the grandmothers had discussed this with their foster children. Once again the need to hear the voices of children regarding their care becomes evident. But more importantly, when planning for the long term care of children, authors like Foster (2004): and Alpaslan and Mabutho argue that the extended family is placed under pressure to care for orphans. This is cause for concern when looking at the long term care of children.

The psycho-emotional needs of the adolescents will be discussed below.

4.5 PSYCHO-EMOTIONAL NEEDS OF ADOLESCENTS

The themes that emerged are feelings of loneliness and stigma, which are discussed below.

4.5.1 Feelings of loneliness

Adolescents expressed a persistent feeling of loss when talking about their parents. For some it was the fact that they did not get to know their parents, their preferences and the type of people that they were and that the opportunity to do so had passed. Some of the female participants cried openly when talking about their parents. Most of them expressed that they were not coping with the loss of their parents. One adolescent recalled that for her it was worse when other children talked about their parents in her presence and she did not know what to say. She usually responded by walking away. Some of the common responses included:

"I don't cope very well" (AP 6)

"I feel bad about loss of parents. I cry. I cry on my own." (AP 2)

"I miss my mum a lot. I cry. I cry on my own." (AP 2)

"At school, sometimes some social workers come and they call those who are orphans, and talk to us, tell us we should be fine with our parents not around, and they teach to take something that our mum liked when she was still alive and put it in a box, and whenever you miss your mum, you take that and look at it. I don't have a box, because I don't know exactly what she liked."(AP 4)

"Have photo of mum (crying). I don't know, I just feel sad, when I talk about them. I try to distract myself by thinking about other things." (AP 9)

The findings above depict the intense loneliness that the adolescents are still feeling because of losing their parents. The depth of their grief was evident in the interviews and for AP 4; the fact that she had nothing to place in a memory box was clearly difficult for her. Social workers therefore need to be sensitive to the fact that due to their circumstances some children will not have anything to put in a memory box and should not encourage this. Likewise in studies conducted by Louw and Joubert (2007) and Pretorius and Ross (2010), the adolescents expressed feelings of loneliness in relation to the loss of their parents.

From section 4.4.3, most of the adolescents identify their grandmothers as a source of support in helping them deal with the loss of their parents. In the focus group discussion, some of the grandmothers responded that they helped their grandchildren deal with the loss of their parents by offering them comfort, showing them love and talking to them about their parents. Other grandmothers responded that they helped their grandchildren deal with the loss of their parents by teaching them to be respectful, instilling values in them and encouraging them to perform well at school. While this is important, the grandmothers did not mention sitting down and creating the opportunity to talk with the adolescents about their parents. This implies then that grandmothers are reactive and not proactive in helping their grandchildren deal with the loss of the parents. This may be attributed to the fact

that grandmothers themselves have not dealt with the loss of their children and do not feel equipped to assist their grandchildren in this regard. It appears that adolescents have not had the opportunity to mourn the loss of their parents.

Pretorius and Ross (2010); Louw and Joubert (2007) and Olivier and Strydom (2010) also reported the immense feelings of grief that children feel in relation to losing their parents. These studies also reflected the lack of social work services to children in dealing with their loss. Likewise the findings in this study found a lack of social work services to adolescents in dealing with the loss of their parents, as none of them made reference to talking to their social worker about the loss of their parents. Only one adolescent recalled that the social worker had visited her school and talked to her about dealing with the loss of her parents. However, this was not the social worker supervising her foster placement. While it is important to provide adolescents with the opportunity to deal with their loss, this is not being done. As indicated in Chapter Two, at the Child and Family Welfare Society of Pietermaritzburg social workers are inundated with foster care applications on one hand and on the other hand dealing with crises that result in little or no time for therapeutic intervention.

Pretorius and Ross (2010) and Richter and Muller (2005) make reference to the importance of adolescents dealing with the loss of their parents and note that if they do not, it may impact on their development. Children need the opportunity to grieve for the loss of their parents. As primary caregivers, their grandmothers need to assist in this regard. Grandmothers however, are also dealing with the loss of their children and need to be assisted. Social workers should therefore be playing a pivotal role in supporting both the foster children and their grandmothers' to deal with their loss as they have the skill and training to do so.

4.5.2 Stigma

A significant finding in this study was the issue of stigma. While stigma was not overt, it appears to exist. The grandmothers related stigma to not being able to

adequately meet the financial needs of their foster children in comparison to other children. In addition, the adolescents questioned their grandmothers as to why they had to visit the social worker so often. Some of the responses from the grandmothers were:

“My grandchild is 15 and I cannot dress him like the other children who have both parents so the child feels less than other.” (G 3)

“Sometimes she feels hurt, but she always tell me granny I love you. If she sees other children with better things than her, I always tell her, don’t be jealous because if I do have money I will give it to you.” (G 6)

These responses from the grandmothers also reflected their helplessness in not being able to provide adequately for their grandchildren so that they do not feel different from the other children. The responses above also reflect that grandmothers try to reassure their grandchildren so that they do not feel different to other children.

Likewise the adolescents also feel the impact of stigma. This includes being called an orphan at school, as the response below reflects:

“At school, sometimes some social workers come and they call those who are orphans, and talk to us, tell us we should be fine with our parents not around.”(AP 4)

Social workers themselves may also contribute to children feeling stigmatized when they go to schools and single out orphans. Social workers therefore need to be aware of this and approach children at school more sensitively. Research conducted by Geenen and Powers (2007) similarly found that the youth in foster care resented the social workers role in their lives as this made them different to other children.

Some of the adolescents in this study obviously felt different because of their orphan status and the fact that they may dress differently to other children who are

not foster children. Likewise in Louw and Joubert's study (2007) peers and the community stigmatized adolescents based on their difference in dress and treated them differently in the community. In comparison, a study conducted by Messing (2006) found that children in care did not feel stigmatized because many of their friends also lived with caregivers. Clearly the issue of stigma is still prevalent in the community and is being felt by adolescents and their grandmothers.

4.6 PSYCHO-EMOTIONAL NEEDS OF GRANDMOTHERS

A significant finding was that the grandmothers were not able to identify their psycho-emotional needs in caring for their grandchildren. However, if you consider their age, health related problems and lack of finances; surely these grandmothers should have some psycho-social needs. It may be that they do not consider these needs a priority. However, in a study conducted by Smithgall *et al.* (2009), caregivers were able to identify their mental health needs. In the same study, the connection between grandparents' mental health and that of the children in their care was highlighted. Clearly this shows the importance of assisting grandmothers to identify their psycho – social needs so that these may be met.

Although grandmothers in this study had health related problems and were on medication, they did not see this as a significant deterrent in taking care of their grandchildren. Even though they were advised by health personnel to rest, they did not have the time to rest. Once again the resilience of grandparents was displayed. What becomes very apparent is that although grandparents indicated that the situation was hard for them, they did not display resentment for the situation they were in.

Grandmothers themselves have also lost their children and need to deal with this. All the grandmothers responded that they miss their children tremendously. Linked to this loss was their concern about whether they were bringing up their grandchildren in the proper manner and adequately meeting their financial needs.

Grandmothers felt that if their children were alive, their grandchildren would not want for anything. One grandmother reported that that in her culture, rituals are performed when people pass away. She has not been able to perform these rituals as she did not have money to do so. Grandmothers reported that they coped with the loss of their children by going to church and praying.

In the next section the experiences of adolescents in relation to friends and schooling are discussed.

4.7 THE EXPERIENCES OF ADOLESCENTS IN RELATION TO FRIENDS AND SCHOOLING

The systems that the adolescents interact with at this mezzo level are friends and the school. The themes that emerged are friends and schooling.

4.7.1 Friends

All the adolescent participants reported that they had positive and close relationships with their friends. Their friends were both from school and the community and were clearly a support to them. Some of the adolescents responded that they engage in recreational activities such as swimming, playing soccer and going to the library. Their responses included:

"I enjoy being with my friends. If I ask them to go to the library, they agree. If I ask them to go to church they agree." (AP 4)

"We talk about things. That's all. We get on well, we can talk. We don't fight." (AP 10)

Berk (2010) identifies several advantages of close friendships. Firstly, close friendships provide a foundation for future intimate relationships. Secondly, close friendships help young people deal with the stresses of adolescence. Thirdly, close friendships can improve attitude and performance at school. Clearly it is important for children to create and maintain lasting friendships. It is evident that

the adolescents in this study place high value on their friendships. A study conducted by Bester (2007) confirmed the role of friends and peers in an adolescent's life and suggests that parents need to become familiar with their children's friends in view of the influence that friends have on their lives.

The adolescents in this study reported that they discussed relationships and sexuality issues with their friends who appeared to give them advice as is evident from some of the responses below:

"I will ask my friends, the boys for advice on taking relationship to next level." (AP 8)

"I ask my school teacher about issues regarding boys and girls. What is the right time to have a girlfriend? She talks to me and tells me when I am older." (AP 5)

While many of the adolescents in this study indicated that they were not in relationships, the reality is that they are maturing, and some may not be able to cope with the changes. This is concerning in light of the adolescents inability to talk to their grandparents about these issues. They need to be assisted so that they make informed choices in this regard and it appears that friends are available to listen to adolescents. Berk (2010) points out that talking with teenage friends about sexuality and relationships may assist adolescents in making decisions about intimate relationships.

However, according to Zastrow and Kirst-Ashman (2007) while friends are a primary source of information about sex they may not know enough about sex and the information they give may be vague and inaccurate. So friends may actually not be a good source of information about sexuality and adolescents may make important decisions based on incorrect information.

According to Zastrow and Kirst-Ashman (2007), adolescents have a strong desire to be accepted by their peers. Peers are an important influence on adolescents, and that influence may be positive or negative. Berk (2010) adds that peer groups

generally set the standard for dress, behavior, leaders and followers and as adolescents spend less time with their families, the role of the peers in their lives become more important. Therefore it is important for them to understand the meaning of peer pressure as peer relationships can either be negative or positive.

In this study most of the adolescents were able to provide an accurate understanding of peer pressure. They responded that peer pressure was when your friend forced you to do something that you did not want to. Some of the responses were:

“Peer pressure is when your friends force you to do things that you don’t want to.”
(AP 6)

“Peer pressure is when your friends force you to do something.” (AP 5)

All of the adolescents reported that they are able to say no to their friends if they are forced to do something like truanting, smoking, and abusing alcohol and drugs. They responded that they will report to their teachers or their grandparents if they are pressurized into doing something that they are not comfortable with. The adolescents also reported that they would be willing to forego their friendships if this happened. Some of their responses included:

“I will say no if friends forced me to do something.” (AP 8)

“Yes, I can say no to friends.” (AP 1)

These findings show that although the adolescents have close relationships with their friends, they are able to withstand negative peer pressure and make the correct choices when they are faced with challenges. While adolescents reported that they are able to withstand peer pressure, this needs to be constantly reinforced by their social workers and their grandmothers. Grandmothers themselves shared their concerns about their grandchildren being exposed to alcohol and drugs at parties. They attributed the prevalence of both substances at parties as reasons for not sending their grandchildren to them. In a study conducted by Patrick, Palen, Caldwell, Gleeson, Smit and Wegner, (2010)

adolescents reported using substances to fit in with their peers. Grandparents in studies conducted by Cox (2003) and Nyasani *et al.* (2009) shared similar concerns about their grandchildren being exposed to substances in the community. Zastrow and Kirst-Ashman (2007) and Berk (2010) refer to the influence that peers have in relation to alcohol and drug abuse. The authors also make reference to the role that parents play in identifying alcohol and drug abuse and the treatment for it. In this instance the responsibility will fall on the grandmothers who are older and experiencing age and health related problems. Significant in this study was that both the grandmothers and the adolescents indicated that they would be interested in programs conducted by the social worker that focused on substance abuse.

4.7.2 Schooling

Most of the adolescents responded that they were coping with school. This is important as very often adolescence coincides with entry into secondary school. Some of the adolescents however, reported that they did not enjoy studying and some of the subjects were difficult. Two of the adolescents identified schooling as a negative experience. Children need the support of their family and peers to adjust to a school environment (Berk, 2010). In this study the responses from the adolescents indicate that they are receiving the support of their grandmothers which makes it easier to cope.

Most of the adolescents responded that they required assistance with their homework. Assistance was obtained from friends, siblings and other relatives as is noted from some of the responses below:

"I am able to manage with my homework I don't have difficulties, but sometimes my sister helps me." (AP 7)

"My friends and my sister help with homework." (AP 2)

Generally, the grandmothers indicated that they were not able to help the adolescents with their homework. They reported that they arranged for relatives

and friends to help them complete their homework. Once again the value of friends is noted within the academic environment. Some of their responses included:

“The other children at home help.” (G 8)

“We cannot help, the other children help.” (G2)

These findings depict that the adolescents are resourceful when it comes to assistance with their homework. Likewise, grandmothers recognize their limitations in assisting their grandchildren and make an effort to ensure that the adolescents receive the assistance they need from other people.

Most of the adolescents reported that their grandmothers attended school meetings and had discussions with the teachers regarding their progress. This finding was confirmed in the focus group where grandmothers indicated that they attended meetings. If grandchildren attended English medium schools, then aunts and uncles attended school meetings as language would have been a problem for the grandmothers.

Some of the children’s responses were as follows:

“My granny and my aunty attend school meetings and speak to the teachers.” (AP3)

“My grandma attends meetings.” (AP 9)

Some of the grandmothers’ responses were:

“I send my children to go and check.” (G 2)

“I take my child with me to school, I also want to be there and see for myself.” (G 5)

According to Berk (2010), it is important for parents to have a relationship with their child’s school to ensure that they benefit optimally from the school environment. The findings of this study show that despite their age and financial challenges, grandmothers make an effort to play a role in the education of their grandchildren. These findings are similar to research conducted by Lawrence-Webb *et al.* (2003) and Smithgall *et al.* (2009) that show that despite the challenges that grandmothers face, they recognize the value of education and will assist their foster children to

perform well at school. Grandmothers in this study also shared their pride and joy when their grandchildren perform well at school.

A significant finding was that most of the adolescents had given some thought to their future and aspired to be professionals. They also recognized that they needed to work hard in school to attain their dreams. Most of the adolescents had discussed their plans for their future with their grandmothers. Grandmothers also reported that they wanted their children to work and be financially independent. Unfortunately not many of the grandmothers have been able to save for their children to go to tertiary institutions as there is not enough money. Some grandmothers though, reported that they had saved towards tertiary education or had educational plans. This shows that these grandmothers have long term plans to help their grandchildren achieve financial independence.

Some of the adolescents' responses were:

"Be a doctor. I have to study hard to be a doctor." (AP 1)

"I want to be a nurse. I have to study hard in school." (AP 2)

Some of the grandmothers' responses were:

"Work and become independent." (G 2)

"I have an educational plan." (G 6)

"I will like to save, but the money is not enough. I can't afford, I have to do everything in the house." (G 1)

The adolescents shared their commitment to performing well at school and they are supported by their grandmothers in this regard. A common response from the adolescents and their grandmothers was that the adolescents must be financially independent. Studies conducted by Gordon *et al.* (2003); Lawrence-Webb *et al.* (2003) and Geenen and Powers (2007) confirmed that grandparents are deeply concerned about the future of the children in their care. They encouraged independence, self-sufficiency and a sense of responsibility. In addition, the studies mentioned above showed that grandparents' placed high value on

education, and highlighted the role of foster parents in helping youth plan for their future.

The support systems for the adolescents and their foster grandmothers will be discussed below.

4.8 SUPPORT SYSTEMS

Two themes emerged in this category and included grandmothers' support systems and adolescents' support systems.

4.8.1 Grandmothers' support systems

The sub-themes that emerged were God, then family and lastly the social worker as sources of support.

i) God as a source of support

A first source of support identified by the grandmothers was God. However, despite them attending church meetings and services, they do not share their difficulties with friends from church as they do not feel comfortable to do so, in case they did not keep the information confidential. Some responses included:

"I talk to God and this helps my stresses go away." (G3)

"I always ask God to give me strength." (G4)

According to Berk (2010), older adults attach great value to religious beliefs. The findings of this study confirm this as the grandparents have turned to God for guidance and assistance. These findings are consistent with studies conducted by Nyasani *et al.* (2009) and Mokone (2005) where grandparents also turned to the spirituality for assistance in caring for their teenage grandchildren.

ii) Family

A second source of support for grandmothers was their family. However, grandmothers reported that while families are supportive emotionally, they are not

supportive financially due to their own financial difficulties. The grandmothers reported that rather than the emotional support, they would have preferred the financial support as is clear from the responses below:

"I have a sister. When I am struggling, I tell her all my problems. But she does not do anything, she will just say, shame my poor sister." (G 3)

"The relatives don't help us, they come and look at the situation, and they go back to their homes, they do nothing." (G7)

"I have a sister, but all her children have died. There are no other relatives, just me and my sister, but she cannot help, her grant money is just enough for her. If there is no sugar in the house I can't ask anybody." (G4)

iii) Social Worker

A third source of support identified by all the grandparents was the social worker, especially in the event of them experiencing difficulties with their adolescents. Similar results were reflected in a study conducted by Cox (2007) where social workers are seen as the link between the grandparents and the school, and an advocate for grandparents. Likewise, the World Federation for Mental Health (2009) identifies the social worker as a support for caregivers. However, as discussed throughout this analysis the shortage of social workers clearly compromises the services rendered to grandmothers.

4.8.2 Adolescents' support systems

The sub-themes that emerged are grandmothers and siblings as sources of support and social workers as not providing support to the adolescents. Each will be discussed below.

i) Grandmothers

Most of the adolescents identified their grandmothers as a source of support. Some of the responses were:

"My granny with emotional support." (AP 5)

"My granny and granny's sister." (AP 6)

Clearly adolescents in care need to be supported and their foster parents' play an important role in promoting their resilience in the face of what has gone wrong in their lives (Gilligan, 2000). This study reflects that the grandmothers are providing support to the adolescents that will contribute to their positive development.

ii) Siblings

A few of the adolescents identified their siblings as sources of support and someone they could talk to. Some of them were also able to talk to their siblings about their feelings regarding the loss of their parents and obtain assistance from them with school and homework. Some responses included:

"I can talk to my sister." (AP7)

I can talk to my brother, but he does not stay with us." (AP 1)

These findings clearly highlight the importance of sibling relationships and are consistent with research conducted by Pretorius and Ross (2010) that confirmed that siblings that are placed together have a sense of family, unity and togetherness. Richter (2004) also notes that positive sibling relationships play a vital role on individual development. Siblings play with each other, they learn to problem solve and negotiate with each other, older siblings become attachment figures for younger siblings and they give each other a sense of family and belonging. Similarly studies conducted by Groza *et al.* (2003) and Hegar and Rosenthal (2003) confirm the benefits of placing siblings together and highlight that children and youth who are placed with one or more siblings feel more emotionally supported.

iii) Social Worker

In comparison to the grandmothers, only one adolescent identified the social worker as a source of support. This is of concern as the social worker is considered to be someone that the child can rely on for support and advice. Similarly in a study conducted by Roux *et al.* (2010), only one child identified the social worker a source of support. In view of the studies conducted in the UK, USA and South Africa citing the important role that social workers play in supporting

foster children (Toutbatla, 2009; Kgomo, 2009; Roux *et al.*, 2010; Perumal and Kasiram, 2009; Petty, 2002; Gordon *et al.*, 2003; Falconnier *et al.*, 2010); it becomes obvious that the shortage of social workers needs to be addressed urgently.

In the next section the role of the social worker and the supervising agency is discussed in further detail.

4.9 THE ROLE OF THE SOCIAL WORKER AND THE SUPERVISING AGENCY

The social worker and the supervising agency play a pivotal role in supporting foster families. They can also be the link between the different systems that impact on the lives of the adolescents and their grandmothers. The social worker also plays a central role in advocating for changes in policies and legislation at a macro level that impact on kinship care placements.

The themes that emerged are contact and relationship with the social worker and programs conducted by the social worker

4.9.1 Contact and relationship with the social worker

All the grandmothers have had contact with their social worker ranging from once a year to sometimes more often. They indicated that they were satisfied with this arrangement. This may be attributed to the foster placements being stable. However, grandparents in a study conducted by Gerrand and Ross (2009) expressed dissatisfaction at the lack of social work services they received, mostly because they did not have contact with the social worker.

In comparison, the adolescents reported limited contact with the social worker. One adolescent shared that the social worker had promised to visit him at school and he was still waiting for her. These findings clearly show the lack of social work

services to foster children. Children in a study conducted by Roux *et al.* (2010) also indicated that they wanted to have more contact with the social worker. With regards to long term foster care, the Children's Act stipulates that the social worker must monitor the placement at least once in two years (Section 186 of the Act). However, the discussions in the previous sections suggest that a social worker should be having more contact with foster children. Contact once every two years will not benefit the child in light of the social worker's role in promoting resilience in foster children (Gilligan, 2000).

All the grandmothers reported that they shared good relationships with their social workers. On the other hand, only some of the adolescents reported that they shared a relationship with their social workers. Most adolescents reported that they had no relationship with their social worker. These findings depict that social workers have more of a relationship with the grandmothers and support them more than they support the adolescents. While it is important to support foster parents, particularly grandmothers who are considered to have unique needs, social workers have to look at creative ways to engage children, despite their heavy workloads. In comparison, a study conducted by Barber and Delfabbro (2005), found that most of the children reported satisfaction with their social workers as they were supportive.

4.9.2 Programs conducted by the social worker

Both the adolescents and the grandmothers were very keen to attend programs conducted by the social worker. The adolescents indicated that programs should focus on issues teenagers face. A significant finding was that most of the adolescents reported that they enjoyed the interaction with other foster children. The grandmothers indicated that they would attend programs focusing on HIV and caring for children. Similar to the adolescents, the grandparents reported that they enjoyed talking to each other. Another significant finding was that grandparents wanted joint programs with their foster children. Joint programs organized by social workers with foster parents and foster children could be considered an ideal

way to target many people at once. In addition, it provides an opportunity for listening to the voices of adolescents and their foster grandparents and opens the channels of communication on issues such as teenage sexuality, loss of parents and discipline. Roux *et al.* (2010) also advocate for conducting group work programs with foster children and their foster parents as a measure to target many people at once. De Jager (2011) supports this view that social workers should not rely only on individual counseling with foster families. Rather the author proposes that social workers should undertake group work with foster families.

4.10 CONCLUSION

In this chapter the research findings were presented, beginning with a profile of the participants. This was followed by a discussions on the experiences of adolescents and their grandmothers prior to the formalization of the foster care placement, the experiences of adolescents in care and their foster grandmothers, the psycho-emotional needs of adolescents and their grandmothers, the experiences of adolescents in relation to friends and schooling, the support networks of adolescents and their grandmothers; and lastly the role of the social worker and the supervising agency.

In the next chapter conclusions will be drawn based on the literature review presented and the findings discussed above. This will be followed by recommendations that will be made at practice and policy level.

CHAPTER FIVE

CONCLUSIONS AND RECOMMENDATIONS

5.1 INTRODUCTION

The aim of this study was to explore the experiences and support networks of grandparents and their adolescent foster grandchildren. The objectives of the study included ascertaining the current support networks of grandparents and their adolescent foster children and what further assistance grandparents and their adolescent foster children need to enhance their functioning.

The key questions that the study addressed included:

- What are the experiences that elderly grandparents have in caring for adolescent foster children?
- What are the experiences of adolescent foster children living with grandparents?
- What are the current support networks of grandparents and adolescent foster children?
- What additional support do grandparents and adolescent foster children identify as needed to enhance their functioning?

This study was based on three assumptions. The first assumption was that grandparents are struggling to cope with the challenges presented by their adolescent foster grandchildren. The second assumption was that adolescent foster grandchildren have unique needs that their grandparents are unable to meet. The last assumption was that limited support systems exist for grandparents and their adolescent foster children.

This study was conducted with 10 adolescent participants who were interviewed individually and 8 grandmothers who participated in a focus group discussion. The individual interviews and the focus group discussion were guided by semi-structured interview guides. The study was qualitative in nature and the data was analyzed and discussed using content and thematic analysis. The ecological

perspective provided the theoretical framework for this study. The ethical considerations and the limitations of this study have been discussed in Chapter Three. The purpose of this chapter is to reach conclusions and make recommendations based on the literature review and the findings of the study.

This chapter is organized as follows; conclusions are presented firstly on the profile of the participants, secondly on the experiences of adolescents and their grandmothers prior to the formalization of the foster care placement and thirdly on the assumptions of the study that were discussed above.

5.2 CONCLUSIONS

5.2.1 Profile of the participants

The participants in this study consisted of seven maternal grandmothers and three paternal grandmothers and their adolescent foster children. It can therefore be concluded that mostly maternal grandmothers assume responsibility for the care of their grandchildren.

Of the three children placed with their paternal grandmothers, two were males. Although five of the grandmothers were married only one child was placed in the care of both her grandparents. The conclusion reached is that grandfathers do not play a significant role in the care of their grandchildren. These findings also suggest that social workers made assumptions about the role of grandfathers and did not include them in the future care of their grandchildren. Social workers, therefore, inadvertently excluded grandfathers and by doing this, made it the responsibility of grandmothers to care for their grandchildren.

Only one of the grandmothers was in employment, the rest of grandmothers are in receipt of old age pensions. Nine of the families are totally dependent on the state for their income. Seven grandmothers support an extended family with the foster

care grant and the old age pension. The conclusion drawn is that without social security, many families will struggle to survive.

The adolescents were all aged between 13-15 years and included six males and four females. All the adolescent participants have been in foster care for more than two years. The biological mothers of all the adolescents are deceased and the biological fathers of seven of the adolescents are deceased. The identities and whereabouts of the rest of the biological fathers are unknown. Therefore all the adolescents are in long term foster care. None of the biological parents had been employed and consequently did not leave estates for their children. Thus when grandparents assumed responsibility for their grandchildren, they had to bear the financial cost of caring for them.

5.2.2 Experiences of adolescents and their grandmothers prior to the formalization of the foster care placement

5.2.2.1 Foster care applications

Grandmothers, even if they were married, assumed primary responsibility for the care of their grandchildren. Grandmothers took the initiative and approached the organization to apply for the foster care grant. They struggled to obtain the relevant documents to apply for the foster care grant as they needed to pay for the unabridged birth document at the Department of Home Affairs. They did not have the financial means to do this. Once the grandmothers had obtained the necessary documents, the organization did not have the human resources to process their applications without delay. This resulted in all the grandmothers experiencing delays from between five months to two years for their foster care applications to be processed and increased the financial burden on grandmothers.

The organization conducted monthly workshops to cope with the increased number of applications for the foster care grant. Only grandmothers were invited to the workshop, even if they were married. Children were excluded from the workshops.

The workshops only focused on the procedures involved in accessing the foster care grant. They did not include care of children, grief and bereavement and coping with the change in circumstances for both the grandmothers and the adolescents. The conclusion reached is that social workers focused primarily on assisting the grandmothers to obtain the foster care grant so that their financial burden is reduced. In doing so, social workers did not render therapeutic counseling services to adolescents and their grandparents at the initial point of contact.

5.2.2.2 Consultation regarding placement

Most of the adolescents understood that they were staying with their grandmothers because their parents were deceased. However, they did not understand the procedures in foster care and that they were placed in foster care with their grandmothers by an order of the court. It can be concluded that services to children prior to their placement in foster care was lacking.

Only some of the adolescents were consulted by their family members about where they preferred to stay. The majority of the adolescents were not consulted at all by the social workers. Many adolescents were therefore not consulted by either their family or their social worker. Although adolescents were not consulted about where they wanted to stay, they did not question this; they accepted that they would be cared for by their grandmothers.

Grandmothers assumed the responsibility of caring for their grandchildren as there was no one else to take care of them. It can be concluded that there are few extended family members available to take on this responsibility. This results in the grandparents assuming responsibility of caring for their grandchildren, even if they are experiencing difficulties.

5.2.3 Experiences of grandmothers in caring for their adolescent foster grandchildren

The first assumption of the study was that grandparents are struggling to cope with the challenges presented by their adolescent foster children. The conclusions in this section are presented in two sub-sections: infrastructural challenges and experiences related to relationships and interaction.

5.2.3.1 Infrastructural challenges

i) Inadequate housing

Most of the grandmothers experienced a problem with inadequate housing and lack of proper accommodation that impacted on the household in terms of privacy and space. These grandmothers did not have the financial means to extend their homes. The impact was felt mostly if they cared for adolescent grandsons who shared the same sleeping space. Although housing was definitely a challenge for the grandmothers, the family adapted to this maladaptive environment

ii) Financial challenges

The adolescents and their grandmothers identified limited income as a negative experience. All the grandmothers receive a foster care grant of R 740 to help them meet the needs of the foster child. However, the money is utilized to meet the needs of the entire family, not only the foster child. It can be concluded that the foster care grant has become a source of income for the whole family, and is therefore seen as inadequate to meet all their needs.

5.2.3.2 Experiences in respect of relationships and interactions

i) Initial Adjustment

All of the adolescents adjusted positively in the care of their grandmothers. This was attributed to the fact that there was already an existing relationship between them and that their grandmothers met their basic needs. It can be concluded that the familiarity assisted the children when they went to live with their grandmothers.

All the grandmothers described the situation as hard, stressful and that they had no control over what was happening when their grandchildren came to live with them. However, they saw caring for their grandchildren as their responsibility in the absence of their children and wanted to provide a stable home for them. It can be concluded that grandmothers are committed to the long term well-being of their grandchildren.

ii) Communication

The grandmothers and their grandchildren did not experience communication difficulties. Many of the children were able to share their feelings about the loss of their parents with their grandmothers. However, three adolescents that are placed in the care of their paternal grandmothers shared that their grandmothers were reluctant to talk about the biological mothers of these adolescents. It can therefore be concluded that the three adolescents did not have the opportunity to talk about their mothers.

The adolescents were not comfortable talking to their grandmothers about teenage sexuality and relationship issues and were fearful to talk to their grandmothers about this. This could be attributed to the fact that grandmothers did not discuss such issues with their own parents; but spoke to elders in the community. A significant finding was that grandmothers would permit their grandsons to have girlfriends but not their granddaughters to have boyfriends. It can be concluded that grandmothers raise their male and female grandchildren differently. A further conclusion that can be reached is that grandparents may have felt inadequate to talk to their grandchildren about sexuality and relationships.

iii) Decision making

A major finding was that grandmothers are the decision makers in the home, even in homes where grandfathers are present. Grandmothers made decisions about whether children went to parties, school trips and outings. Grandmothers were more willing to send their grandchildren on school excursions, than to parties or

other recreational activities. The adolescents accepted the decisions made by their grandparents even if they disagreed with them.

iv) Disciplining

Grandmothers are the disciplinarians in the home. A significant finding was that the grandmothers indicated that they did not use physical punishment as the children were familiar with the law and would call it child abuse. This was different to when they were parenting their own children, where grandmothers used physical punishment. However, the adolescents reported that grandparents did physically punish them. An important finding when it came to both decision-making and disciplining was that the adolescents accepted it, because in their culture, it was expected that they would not question their elders.

v) Planning for the future of their grandchildren

All of the grandmothers had planned for who will care for their grandchildren in the event that they are unable to. Most of the grandmothers had identified family to care for their grandchildren. Only two did not have any family to care for the adolescents. The conclusion reached is that grandparents have thought about the long-term care of their grandchildren and planned accordingly.

vi) Role of grandfathers

Although five of the adolescents have grandfathers, they do not identify them as playing a significant role in their lives. Grandfathers did not talk to them about their parents, or teenage issues, make the decisions in the home or discipline them. Grandfathers were also not identified as a source of support. The conclusion reached is that grandfathers need to be encouraged to play a more active role in the care of their grandchildren as this will relieve the pressure on grandmothers.

5.2.4 Experiences of adolescent foster children in the care of their grandmothers

The second assumption of the study was that adolescent foster grandchildren have unique needs that their grandparents are unable to meet.

5.2.4.1 Psycho-emotional needs of adolescents and their foster grandmothers

Although the adolescents were not able to identify psycho-emotional needs, the findings showed that the adolescents have not dealt with the loss of their parents. This has resulted in some of them experiencing intense loneliness. Many of them still missed their parents and shared a preference for living with them. The conclusion reached is that none of the adolescents received grief and bereavement counseling.

Similarly the grandmothers had also not dealt with the loss of their children. Related to the loss of their children, grandmothers identified feelings of inadequacy about caring for their grandchildren. The grandmothers were very concerned about whether they were bringing up their grandchildren the way their parents would have if they were alive. Like the adolescents, it can be concluded that the grandmothers also did not receive grief and bereavement counseling.

The grandmothers were not able to identify their psycho-emotional needs. The implication is that their primary need is monetary. The conclusion reached is that grandmothers are overwhelmed with meeting basic needs of the family and do not see that their psycho-emotional needs are a priority.

The issue of stigma appeared to exist. This was evident when both the grandmothers and the adolescents made reference to the dress of other adolescents. Grandmothers were very concerned about not being able to provide materially for their grandchildren. They did not want their children to look at other

children and feel like they do not have enough. A further finding was that social workers needed to be cautious when going to schools and singling out orphans. This would immediately set them apart from the other children at school. It can be concluded that when rendering counseling services to foster children and their grandparents, social workers need to be cognizant that stigma does exist and respond accordingly.

5.2.4.2 The experiences of adolescents in relation to schooling and friends

Grandmothers are committed to their grandchildren performing well at school and despite their age and financial challenges, ensure that their grandchildren are supported. Siblings and the extended family also support the adolescents by assisting with homework and attending school meetings. Adolescents are also committed to achieving academic success and reported to be working hard at school. Adolescents see this as helping them to become financially independent in the future. The conclusion reached is that both the adolescents and their grandmothers see academic success as the pathway to financial independence.

Adolescents have many friends in the community and at school. Friends are a tremendous source of support to adolescents when it comes to teenage sexuality issues and relationships. It appears that friends give advice and guidance particularly about relationships.

Most of the adolescents understood the concept of peer pressure and reported that they will be able to withstand negative peer pressure. However, grandmothers were concerned about the prevalence of alcohol and drugs in the community and their grandchildren being influenced to abuse these substances. Grandmothers were also concerned about their granddaughters falling pregnant and the consequences of this. Grandmothers felt that they were protecting their grandchildren from these social problems if they did not send them to parties. It

can be concluded that even if adolescents are able to withstand negative peer pressure, this needs to be constantly reinforced with them.

The study confirmed that adolescent foster children do have unique needs that both their grandmothers and social workers need to respond to.

5.2.5 Support systems for grandmothers and their adolescent foster grandchildren

Grandmothers identified God and the social workers as sources of support for them. Grandmothers also identified their family as support systems. However, the family only offered emotional support, not financial support, and financial support was what they needed. It can be concluded that grandmothers do have support systems.

The adolescents identified their grandmothers as a support to them. A significant finding was the role of siblings as a source of support. Siblings offer support in coping with the loss of their parents and completing their homework. The social worker as a source of support to the adolescent was conspicuously absent. Nevertheless, it can be concluded that adolescents do have support systems.

Social workers had significantly more contact with the grandmothers and a good relationship with them. Social workers did not have as much contact with the adolescents and as a result, many of them did not have a relationship with the social workers. Some of the adolescents had not seen their social worker at all. It can be concluded that the social workers have more contact with the grandmothers, and limited contact with the adolescents.

The adolescents and their grandmothers were interested in attending programs held by the social workers. Adolescents wanted programs on teenage issues. Grandmothers wanted programs on HIV and AIDS, parenting and joint programs with their foster children. Grandmothers also reported that they enjoyed talking to

the other grandmothers. The conclusion reached is that adolescents and their grandmothers see the benefits of workshops and programs and social workers need to respond to this appropriately.

The third assumption of the study was that limited support systems exist for grandparents and their adolescent foster child. The study did confirm that limited support systems do exist for the grandmothers and their adolescent foster children.

Based on the conclusions reached in this study, the recommendations will be discussed in the next section.

5.3. RECOMMENDATIONS

The recommendations will be discussed in two parts. Firstly, recommendations will be made at practice level. Secondly, recommendations will be made at a policy level.

5.3.1 Recommendations at practice level

5.3.1.1 In view of the adolescents not understanding the nature of foster care and the processes involved, it is recommended that social workers include children in the initial workshop that is held with grandparents to explain the requirements and processes of foster care. This will ensure that they fully understand the legal implications of being in foster care. In addition, this will ensure that children can start participating in decisions that affect their care and will be able to provide informed input in this regard. Social workers also need to ensure that the child understands the contents of the report compiled for court fully and the court proceedings that will follow.

5.3.1.2 Social workers need to encourage more involvement from the grandfathers by including them in the workshops held with

grandmothers, recommending placement of the children in their care and including them in interviews and case conferences.

- 5.3.1.3 In view of the grandmothers' requesting more money, social workers need to adopt a more developmental approach to social services and not encourage dependency on material relief. This would mean capacitating grandmothers in income generation and skills development could improve their financial circumstances.
- 5.3.1.4 In addition to assisting families to access the foster care grant, social workers need to render grief and bereavement counseling to the grandmothers and their foster grandchildren, as the inability of some children to deal with the loss of their parents could result in behavior problems.
- 5.3.1.5 Social workers working with children should collaborate with social workers working with the aged so that they can respond to the unique needs of grandparents in a holistic manner. The emphasis has always been the rights of children. The rights of grandparents need to be recognized and realized as well.
- 5.3.1.6 Social workers should engage adolescents and grandparents in joint programs to address common issues such as alcohol and drug abuse, teenage pregnancy, communication difficulties, disciplining and decision-making in the home. Having these workshops is an ideal way to target many people at the same time and will assist the social worker who is carrying a high caseload.
- 5.3.1.7 Social workers should conduct support groups with grandmothers because they could benefit from and support each other as they share similar circumstances.

- 5.3.1.8 Social workers should plan for the long term care of the adolescents with both the grandmothers and the adolescents, in the event that the grandmother passes away. This will reduce disruption in the placement. It also ensures that children are consulted on issues relating to their care.
- 5.3.1.9 Social workers need to have direct contact with adolescents to support them more appropriately and not focus on services to the foster parent only.
- 5.3.1.10 NGOs must investigate the value of utilizing the services of social services professionals to assist social workers in meeting the needs of children and families.
- 5.3.1.11 Social workers need to ensure that they have updated skills and knowledge to able to render a more effective service delivery.
- 5.3.1.12 Service providers need to ensure that social workers are supported and debriefed to cope with the stresses of their jobs and to prevent burnout.

5.3.2 Recommendations at policy level

- 5.3.2.1 There should be interdepartmental collaboration between the Departments of Social Development, Justice and Home Affairs to facilitate the process of applying for the foster care grant. This must include consistency in the requirements to apply for the grant between the departments so that the clients are given the correct information.

- 5.3.2.2 The Department of Social Development should urgently ensure that the National Child Protection Registers are functioning so that service delivery is not affected.
- 5.3.2.3 The Department of Social Development has created policies that are intended to facilitate services to children. They need to ensure that service providers are trained on implementing these policies and that funding is available to implement them. The Department of Social Development must commit to providing the necessary training to everyone responsible for implementing the Children's Act.
- 5.3.2.4 The Department of Social Development needs to fully recognize the role of NGOs in delivering services to children and their families and create an equal partnership with them. This would translate into paying NGOs fully for their services and not subsidizing social work posts as is the present arrangement. The Department also needs to make funding available to NGOs to employ social auxiliary workers.
- 5.3.2.5 The Department of Social Development needs to extend its recruitment and retention strategy for social workers to the NGO sector so that the NGO's do not lose staff to the state.
- 5.3.2.6 The Department of Social Development needs to collaborate with NGOs to address the backlog of foster care applications that NGOs have.
- 5.3.2.7 The Departments of Social Development and Justice and the NGO sector needs to collaborate on evaluating the implementation of the Children's Act so that barriers are identified and addressed at a local level first.

5.3.2.8 SASSA and the Departments of Social Development and Justice need to collaborate to make processing kinship care applications a responsibility of SASSA, rather than a responsibility of Children's Court.

5.3.3 Recommendations for further research

Research needs to be undertaken with social workers, adolescents and their foster grandparents on kinship care placements to obtain a more holistic perspective that would inform policy makers on these types of placements.

This sample was limited to the Child and Family Welfare of Society of Pietermaritzburg. Further research needs to be undertaken elsewhere to confirm these findings.

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ANNEXURE 1(a) – INFORMED CONSENT OF CHILDREN

P. O. Box 748

PIETERMARITZBURG

3200

Dear Sir/Madam

I am a master's student at the University of KwaZulu-Natal. As part of the requirements for the degree I am conducting research with grandparents and their adolescent foster grandchildren on their experiences of living together.

Purpose:

The purpose of the research is to understand the experiences of grandparents and adolescent foster children. It is also envisioned that the research will lay the foundation for further studies as well as inform child welfare agencies on strategies to support grandparents and their adolescent foster children.

Participation:

Your participation in this research is essential and will be highly appreciated. You will be part of an individual interview. No identifying details will be required of you. All responses will be kept highly confidential. The researcher will not at any point in the research or the report identify any participant. The interviews will be audio taped and once the data is analyzed all information will be destroyed. The research will be conducted under the supervision of the School of Social Work and Community Development at the University of KwaZulu-Natal - Howard College. All ethical issues in working with children will be considered. Your participation in the research is voluntary and no payment will be made for your participation. You may withdraw from the research at any point with no penalty. Should you require any additional information, kindly contact me or the supervisor.

Yours faithfully

Jothie Perumal

033 – 3428971

Prof. C. R. Matthias

Supervisor

031 – 260 7922

INFORMED CONSENT:

I am willing/not willing to participate in the research outlined above.

(Delete whichever is not applicable)

I, _____ the undersigned understand the contents and conditions of the research and consent to participate in the research.

SIGNATURE OF PARTICIPANT

DATE:

ANNEXURE 1 (b) – INFORMED CONSENT OF GRANDPARENTS

P. O. Box 748

PIETERMARITZBURG

3200

Dear Sir/Madam

I am a master's student at the University of KwaZulu-Natal. As part of the requirements for the degree, I am conducting research with grandparents and their adolescent foster grandchildren on their experiences of living together.

Purpose:

The purpose of the research is to understand the experiences of grandparents and adolescent foster children. It is also envisioned that the research will lay the foundation for further studies as well as inform child welfare agencies on strategies to support grandparents and their adolescent foster children.

Participation:

Your child's participation as well as your participation in this research are essential and will be highly appreciated. You will be part of a focus group discussion and your child an individual interview. No identifying details will be required of you or your child. All responses will be kept highly confidential. The researcher will not at any point in the research or the report identify any participant. The interviews will be audio taped and once the data is analyzed all information will be destroyed. The research will be conducted under the supervision of the School of Social Work and Community Development at the University of KwaZulu-Natal - Howard College. All ethical issues in working with children will be considered. Your participation in the research is voluntary and no payment will be made for your participation. You may withdraw from the research at any point with no penalty. Should you require any additional information, kindly contact me or the supervisor.

Yours faithfully

Jothie Perumal
033 – 3428971

Prof. C. R. Matthias
Supervisor
031 – 260 7922

INFORMED CONSENT:

I am willing/not willing to participate in the research outlined above.

I am willing/not willing to allow my grandchild to participate in the research outlined above.

(Delete whichever is not applicable)

I, _____ the undersigned understand the contents and conditions of the research and consent to me and my grandchild participating in the research.

SIGNATURE OF PARTICIPANT

DATE:

ANNEXURE 2 - INTERVIEW THEMES

INTERVIEW THEMES WITH THE CHILDREN

- Understanding the reasons for the placement
- Consultation with regards to placement
- Adjustment to placement
- What do they identify are some of their needs
- Their comments on how they are coping with the following:
 - Loss of their parents
 - Relationship and teenage sexuality issues
 - Friends and peer pressure
 - Schooling
 - Relationship with their grandparents
 - Decision making and conflict resolution
 - Communicating with their grandparents
 - Discipline by grandparents
 - Planning for their future
 - Your views on how these have influenced your life
 - Your roles and responsibilities at home
- Sources of support
- Relationship with the social worker
- Identify any additional assistance you may need to deal with difficulties
- Recommendations on how the social worker and the agency could support you

FOCUS GROUP THEMES (Focus group discussion with grandparents)

- Understanding the reasons for the placement
- Positive experiences of caring for a foster child
- What do they identify as some of their needs in caring for their grandchildren
- Their comments on how they cope with the following:
 - Helping children cope with the loss of their parents
 - Relationship and teenage sexuality issues
 - Meeting the educational needs of children
 - Decision making and conflict resolution
 - Discipline of their grandchildren
 - Relationship with their grandchildren (including communication)
 - Planning for the future of their grandchildren
- How have you dealt with some of the challenges in caring for your grandchildren:
 - What has worked?
 - What has not worked?
- Sources of support
- Relationship with the social worker
- Identify any other additional assistance you may need to deal with difficult times
- Recommendations