

**WAYS IN WHICH CHILD AND YOUTH CARE WORKERS SUPPORT
CHILD-HEADED HOUSEHOLDS IN COMMUNITIES**

Zenuella Sugantha Thumbadoo

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SUPERVISOR: DR TF GARFAT

CO-SUPERVISOR: DR J LOMBARD

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DECLARATION

I declare that **WAYS IN WHICH CHILD AND YOUTH CARE WORKERS SUPPORT CHILD-HEADED HOUSEHOLDS IN COMMUNITIES** is my own work and that all the sources that I have used or quoted have been indicated and acknowledged by means of complete references.

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Zenuella Sugantha Thumbadoo

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ABSTRACT

The qualitative research approach, applying an explorative, descriptive and contextual strategy of enquiry was used to address the research question formulated, - How do child and youth care workers support child-headed households in the community? In this process the needs, relationships, interactions and encounters which occur between child and youth care workers and young people in child-headed households are described. The research was conducted with children from two child-headed households (12 children in all) and three community child and youth care workers from the Isibindi project in the province of Kwa-Zulu Natal. The findings confirm that the integration of child and youth care work characteristics in the daily life events of the children, contributed to services to children that are therapeutically caring, reclaiming and reflective of the African spirit of Ubuntu – demonstrating a relevant and unique South African expression of child and youth care practice.

Key Terms

Child-headed households; child and youth care work; caring; Ubuntu; reclaiming, community child and youth care work; The Isibindi Model; HIV/AIDS; characteristics of a child and youth care approach and The Children's Act (Children's Act No 38) of 2005.

CHAPTER 1

INTRODUCTION AND BACKGROUND

1.1 INTRODUCTION

This study comprised an enquiry into the ways in which child and youth care workers support child-headed households in communities in the context of HIV/AIDS and poverty in South Africa.

The circumstances of children living in rural areas and in the context of poverty and HIV/AIDS are devastating. The impact of the HIV/AIDS in communities and families was articulated as follows:

“The HIV/AIDS epidemic is shattering children's lives & shifting the burden of child & family care upwards to the elderly, outward to relatives, friends, neighbours or even strangers & downwards to children themselves” (U.S. Department of State, 2005).

It was also noted that when adults get sick and are not able to work, undertake household chores and care for their children, not only do the children lose the care of their parents but also lose their income and livelihood security and prospects to remain in school and in their own homes (Martin, 2010:1).

The reality of children bearing the burden of care in child-headed households has been verified by Meintjes, Hall, Marera and Boulle (2009) who have identified that the 122 000 children in South Africa who live in child-headed households are not only isolated from adult support, but struggle in conditions of poverty that is much worse than in homes with adults present. In addition, in rural areas there is poor access and poor quality of services which further disadvantage child-headed households.

This category of child, the child heading a household, has been recognized in South African policy and legislation regarding children. Child-headed households have been given legal status in South Africa in the Children’s Act (Children’s Act No 38) of 2005 (2006a; 2006b: section 137). The regulations made under the Children’s Act identifies protective measures for children in child-headed households by identifying 17 specific tasks/roles of the supervising adult attached to children in child-headed households

(General regulations regarding children 2010a; 2010b: regulation 50(a-q)). The Children's Act (Act No 38) of 2005 (2006a; 2006b: section 1(1)) further defines child and youth care workers as one of the categories of social service professionals identified to implement the Act. Child and youth care workers are direct practitioners who work in the life-space of children. The Children's Act recognizes the role of this child focused profession in the implementation of the Children's Act (2006a; 2006b). The Isibindi Model of the National Association of Child Care Workers (NACCW, 2009; Thumbadoo, 2012) demonstrates the role of child and youth care workers from communities responding to the requirement of the Children Act 92006a; 2006b). Child and youth care workers fulfil the role of supervising adults, supporting child-headed households in alignment with the mandate in the Children's Act (Children's Act (Act No 38) of 2005) (2010a; 2010b: section 137).

The researcher has explored the work undertaken by child and youth care workers in communities through the Isibindi Model, responding directly to the realities of children living in child-headed households in the contexts of HIV/AIDS and poverty. This has more specifically been done by the researcher exploring the array of tasks and functions (Small & Dodge, 1988:7) undertaken by the community based child and youth care workers and the integration of the characteristics of a child and youth care approach into these tasks (Garfat & McElwee, 2004:15). This research therefore explores the role of community based child and youth care workers in the Isibindi Model and the support they provide to children in child-headed households and vulnerable families.

1.2 PROBLEM STATEMENT

The HIV/AIDS orphan crisis in South Africa provides a significant context for this role of the community child and youth care workers to be explored and exposed. The new children's legislation in South Africa referred to above, articulates both the recognition of child-headed households in the context of the HIV/AIDS pandemic and the recognition of the child and youth care workers as one of the social service professionals. South Africa is regarded as one of the hardest hit countries in sub-Saharan Africa, with approximately 18% of adults aged 15-49 years estimated to be HIV positive (UNAIDS, 2010). Thurman, Yu and Taylor (2009:2) cite Proudlock, Dutschke, Jamieson, Monson, and Smith noting that at least four million South African children are HIV positive, have a parent who is positive

or, have lost a parent to HIV/AIDS. These orphans and vulnerable children (OVC) are at disproportionate risk for illness, food insecurity, psychological distress, stigmatization, abuse, and neglect (Thurman et al. 2009: 2). The pandemic is, in the words of Kofi Annan, former United Nations Secretary-General “leaving too many children to grow up alone, grow up too fast, or not growing up at all. Simply put, AIDS is wreaking havoc on children” (UNICEF, 2005).

Philips (2011:174) proposes a universal definition for child-headed households, according to which a child-headed household refers to “a household, consisting of one or more members, in which the role of the principal caregiver has by necessity been taken over by a child under the age of 18 years.”

According to Meintjes, et al. (2009), approximately 122,000 children (out of the 18.2 million children in South Africa) live in child-headed households (where all children in the households are under the age of 18 years). They note that while this is a small proportion of the children in South Africa, this number is not insignificant. Child-headed households are at risk of having to cope not only without adults taking the responsibility for the household but also with poorer living conditions than other households. The reason being that, child-headed households lack regular income from earnings or social grants, and are disproportionately located in non-urban areas where service delivery is poor (Meintjes et al. 2009). Philips (2011:177) supports this by noting that child-headed households “mostly live in poverty, under harmful living conditions, with household income generated by children themselves, frequently exposing them to (sexual) exploitation and abuse”. This author further raises the impact of lack of easy access to education and poor school attendance, difficulties in securing identity documents and the related deprivation of health care – both mental and psychological (Philips, 2011:177).

The Children’s Act (Act No 38) of 2005 (2006a; 2006b: section 137), acknowledges the status of child-headed households in South Africa and provides protective measures for these children. The Isibindi Model referred to in the previous section, is a non-profit social franchise model, conceptualized by NACCW, working in partnership with local community organisations to train and deploy child and youth care workers in direct work with children in families in their communities (NACCW, 2009; NACCW. 2011; Thumbadoo, 2012). The model is designed to provide services to children in child-headed

households and vulnerable families. The Children's Act indicates that a supervising adult must be appointed to a child-headed household (Children's Act (Act No 38) of 2005 (2006a; 2006b: section 137(2)). Regulation 50 of the regulations made under the Children's Act stipulates the nature of the tasks to be undertaken with child-headed households by the supervising adult (General regulations regarding children, 2010a; 2010b: regulation 50(a-q)). The child and youth care workers have been trained to implement the stipulated tasks prescribed by regulation under the Children's Act referred to above, in respect of this unique category of children – with a child and youth care approach.

Traditionally, child and youth care workers in South Africa have practised in residential care facilities. The role of child and youth care workers in family and community settings demonstrates a new setting for child and youth care workers that require understanding and exposure. Therefore, this research was undertaken to investigate the research problem in terms of which the need to examine the ways in which child and youth care workers support communities and young people in child-headed households was identified.

1.3 THE RESEARCH QUESTION

Formulating the research question is one of the first important steps in a research study (Fouché & Delpont. 2005:80). The research question must be phrased clearly and accurately defined, reflecting what the researcher wants to know, find out or understand (Creswell, 2009:129-132). In this study the research question is concerned about the situation of child-headed households in South African communities. It is interested in the role of the child and youth care worker in supporting children in child-headed households. Therefore, the research question for this study is formulated as follows:

- How do child and youth care workers support child-headed households in the community?

1.4 RESEARCH GOAL AND OBJECTIVES

In order to find answers to the research question underlying the research, the research goal and objectives of the study needed to be formulated. Researchers have to decide consciously what their research goals and objectives are going to be. There is however “some confusion about the exact meaning of the concepts ‘purpose’, ‘goal’ and ‘objective’ and, therefore regarding their use” Fouché and De Vos (2005:104). In clarifying these terms, the concepts ‘research goal’ and ‘research objectives’ and their use in this study respectively entail the following:

1.4.1 Research goal

According to Fouché and De Vos (2005:104), the terms ‘goal’, ‘purpose’ and ‘aim’ are often used interchangeably as synonyms for one another, and their meaning refers to “the broader, more abstract conception of ‘the end towards which effort or ambition is directed’”. They further note that when undertaking research, the aim, goal or purpose is regarded as being the “dream” that one wants to attain with the research. The research goal or “dream” that the researcher wanted to realise in undertaking this study is the following:

- To develop an in-depth understanding of how child and youth care workers support child-headed households in the community.

1.4.2 Research objectives

The term ‘research objective’ “denotes the more concrete, measurable and more speedily attainable conception of such an ‘end towards which effort or ambition is directed’ (Fouché and De Vos, 2005:104)). The research objectives are the steps to take in order to achieve the goal. The research objectives of this study are the following:

- To explore the way in which child and youth care workers support child-headed households in the community.
- To describe the way in which child and youth care workers support child-headed households in the community.

In order to achieve the research objectives, the following task objectives were set:

- To obtain a sample of child and youth care workers rendering services to child-headed families and children from child-headed households.
- To conduct in-depth semi-structured interviews with them to explore how and in which way child and youth care workers support child-headed households in the community.
- To sift, sort and analyse the data obtained according to a structured procedure.
- To subsequently describe how and in which way child and youth care workers support child-headed households in the community.
- To interpret and analyze the data and conduct a literature control in order to verify the data.
- To draw conclusions and make recommendations about how and in which way child and youth care workers support and can support child-headed households in the community.

1.5 RESEARCH APPROACH

Comparing the quantitative and qualitative research approaches, allows for an understanding of why the qualitative approach was selected for this research study. Quantitative research according to Fossey, Harvey, McDermott and Davidson, (2002:717), is aimed at “accurate and objective measurement, and the generalization of the findings to a population beyond the study context”. The strategies of inquiry include surveys and experiments with methods of closed ended questions, predetermined approaches and numeric data. Quantitative data tests are used, theories verified, variables are identified and related to the questions or hypothesis. In addition, information is observed and measured numerically, and statistical procedures are employed. Unbiased approaches are used and standards of reliability and validity are applied (Creswell, 2009:17).

In comparison, the qualitative approach according to Fossey et al. (2002:717), “aims to give privilege to the perspectives of the research participants and to illuminate the subjective meaning, actions and context of those being researched.” Qualitative data collection consists of three common models, namely interviewing individual participants, focus group interviews and participant observation (Fossey et al., 2002:726). In a

qualitative approach the researcher positions her/himself, collects participant's meanings, focuses on a single phenomenon, brings personal value to the study, studies the context of participants, validates the accuracy of the findings, makes interpretations of the data and creates an agenda for change and reform and collaborates with the participants (Creswell, 2009:17).

Ritchie and Lewis (2005:32-33) add to the description of the qualitative approach, indicating that this is an appropriate approach to utilize when the phenomenon being investigated portrays the following features:

- The phenomenon being studied is ill defined or not well understood: Qualitative research provides a depth to the understanding of an issue, situation or problem. The qualitative approach is generative allowing issues to be explored without a prescript of their design or meaning.
- The phenomenon is deeply rooted: This refers to a phenomenon that is deeply embedded within the participants' lived experience, personal worldview or reflection of themselves. These include, traditional values or beliefs that impact on and influence behaviours, responses to emotional events that are deeply distressing or joyous.
- The phenomenon is of a complex nature: This complexity can be the subject matter itself, or to the different levels of complexity in the phenomenon that unfolds in the process before one is able to formulate a position, view or belief.
- The phenomenon is sourced from local "experts": This perspective recognises that people are experts of their own reality and experiences. Their positions on the phenomenon will require exploratory and responsive questioning.
- The phenomenon is delicate or intangible and of a sensitive nature: Fragile, delicate and nuanced phenomena manifest in ways that are difficult to capture. This may be linked to the elusive nature of feelings, thoughts, relationships and encounters between people contextualised in the moment -to- moment unfolding of time in any event or situation.

As the phenomenon studied portrays all the above features, the qualitative research approach was selected as the appropriate approach to utilize in this study. The characteristics of qualitative research were assessed by the researcher, found to fit in with

the research to be undertaken, and therefore to be appropriate to the realization of the goal of the research. The characteristics inherent in qualitative research and the application thereof entail the following:

- **Natural setting:** Data is collected in the context or setting where participants experience the issue or problem under study. This more intimate information is gathered by talking directly to the participants and observing their behaviour in their own world (Creswell, 2009:174).
- **Researcher as key instrument:** According to Creswell (2009:174), the tool for gathering data in qualitative research is the researcher her/himself. Although an instrument may be used to gather data, the researcher her/himself observes behaviour and interviews participants. In such a study the capacity, awareness and sensitivity of the researcher in creating a safe context were critical to the data gathering process. This offers more than just the opportunity to gather data. It offers the opportunity to encounter the participant children in a very close, intimate, human and real way (Garfat, 1998:155). In this, the researcher, in a parallel process, was able to demonstrate her understanding of the very child and youth care characteristics she was researching.
- **Multiple sources of data:** Documents, observations and interviews are examples of the varied sources of data that are reviewed, synthesised and then organized into categories or themes across all data sources (Creswell, 2009:175). In this study, information was sourced directly from adults and children and reviewed against child and youth care literature. This characteristic of qualitative research allowed the researcher to organize the information gathered from a specific South African context of child-headed households, and to compare it with international child and youth care literature on characteristics of a child and youth care approach. The researcher was able to then organise the different sources of data into relevant, coherent child and youth care themes.
- **Inductive data analysis:** The patterns, categories or themes that emerge in analysing the data, during qualitative research, are reviewed from the bottom up by organizing the data into abstract units of information. This process of induction involves repeated consideration and evaluation of the themes in relation to the data gathered until sound comprehensive themes are developed. Ongoing collaboration

with participants shapes the themes that emerge from this process (Creswell, 2009:175). In this research this process of induction was critical to the research undertaken as the analysis and consideration of the data that emerged resulted in key themes of child and youth care practice reflected in international literature.

- **Participants' meaning:** According to Creswell, (2009:175), the research process focuses on the meaning of the experience or problem for the participant rather than the experience for the researcher or the perspectives from literature. Padgett (1998:8) talks about the “capturing the ‘lived experiences’ from the perspectives of those who live it and create meaning from it. In this study, the researcher focussed on the experiences of the participants. The encounters between children and child and youth care workers in a unique context, was explored and described from their own perspectives, in their own words. The voices of children and child and youth care workers from South Africa were accessed and the experiences of the participants compared to characteristics of a child and youth care approach in international literature, to demonstrate an emergent and unique approach to child and youth care practice from South Africa and in the context of child-headed households.
- **Emergent design:** In qualitative research, the initial plan for the research may change as the researcher enters the field and collects the data. Although there is a plan for the research, it is possible for the questions to change, the forms for the data gathering may change and the individuals studied and sites visited may be modified (Creswell, 2009:175/6). The understanding of emergent design in this research was significant to the researcher during the process of the research at the point of the analysis of the data gathered. Restructuring at this point allowed the researcher to expose the data more effectively.
- **Theoretical lens:** Often qualitative researchers view their studies from a particular theoretical lens (Creswell, 2009:176). The phenomenological interpretation strongly influenced the researcher's understanding of the qualitative approach. This allowed the characteristics of a phenomenological orientation to filter through the research, as referenced in the research text.
- **Interpretative:** Creswell (2009:176) notes that qualitative research is also described as interpretative inquiry where what researchers see, hear and understand is interpreted. There is recognition that this cannot be separated from their own

perspectives (backgrounds, history, contexts, and prior understandings). Participants and readers also make their interpretation of the research findings exposing multiple views on the experience or problem (Creswell, 2009:176). In this study, the researcher attempted to understand the experiences of the participants in relation to child and youth care theory. The unique context of the participants researched - South Africa, HIV/Aids, child-headed households and culture - added to the richness of the interpretation.

- **Holistic account:** The development of a complex picture of the experience under review involves multiple perspectives, assessing different factors in order to develop a larger context for the experience (Creswell, 2009:176). Critical in this research was the comparison of the international child and youth care literature and description of child and youth care characteristics in relation to the experience of children and child and youth care workers in South Africa. This picture draws attention to the fact that in a vastly different context and design of child and youth care intervention there is a holistic account of child and youth care characteristics being applied.

The qualitative research offers the opportunity to humanise the experience of child and youth care practice and to be better positioned to understand and appreciate their individual stories (Peterson, White & Epston quoted in Garfat, 1998:55). Considering the aforementioned characteristics the researcher concluded that the qualitative approach would be effective to realizing the goal of this study.

1.6 RESEARCH DESIGN

Fouché (2005:268-269) notes that there are various research designs used by qualitative researchers. However this author emphasizes that a qualitative research design does not usually provide the researcher with a step-by-step plan or a fixed recipe to follow. Qualitative researchers will create the research strategy best suited to their research during the research process, or even design their whole research project around the strategy selected (Fouché, 2005: 269).

According to Creswell (2009:3), research designs are plans and the procedures for research that span the decisions from broad assumptions, to detailed methods of data collection and

analysis. The selection of a research design is based on the nature of the research problem or issues being addressed, including the researcher's personal experiences and the target audiences for the study. The world view assumptions of the researcher should inform this decision of procedures of inquiry (or strategies) and the specific methods of data collection, analysis and interpretation.

However, Ritchie and Lewis (2005:74) are more specific and indicate that a good research design is "clearly defined, with coherence between research questions and methods." Nevertheless, they do note that in qualitative research, the relationship between study design, theory and data collection is iterative. Each should inform, and be informed by the others. This perspective fits with the emerging theory characteristic of qualitative research.

The research design applied in this study is explorative, descriptive and contextual in nature and entails the following:

1.6.1 Exploratory research

An exploratory research design is:

- appropriate when there is a need to examine an issue or phenomenon that is little understood in order to develop initial ideas about it (Neuman, 2011:38);
- important when there is a need to gather information about the phenomena and the variables that influence them (Palys,1992:86); and
- used to achieve new insights, and formulate research questions (Palys,1992:86).

The researcher established that the literature and previous studies on child and youth work place very little emphasis on the experiences of and work with children in child-headed households. This research study therefore explores the experiences of these children in the context of HIV/AIDS and poverty. Their experience of the support and care from their community child and youth care workers was also explored. It is expected that this explorative research study will result in a better understanding of the role and task of community child and youth care workers in their support of children in vulnerable families like child-headed households. It is envisaged that the research will contribute to improved

practice of community child and youth care workers in response to children's needs in this specific context.

1.6.2 Descriptive research

A descriptive research design or strategy of inquiry allows the researcher to –

- adequately describe a person or situation or group (Palys,1992:86) and answers key questions such as – who? when? where? and how? (Palys,1992:85);
- provide a detailed 'highly accurate' picture in words or numbers of the phenomenon studied (Neuman, 2011:38); and
- create a set of categories, outline a series of steps and document a causal process (Neuman, 2011:38).

The researcher endeavoured to obtain answers to the research question by describing the experiences of children in the child-headed households concerned and by describing the experiences and characteristics of community child and youth care workers. The connection between child and youth care practice and the circumstances and the needs of children in child-headed households were exposed.

1.6.3 Contextual research

Contextual research seeks to -

- explores social phenomena where it's meaning depends greatly on the context in which it occurs (Neuman, 2011:175); and
- understand the social contexts – when something occurs, where something occurs, the feelings about how something occurs and the cultural context in which something occurs (Neuman, 2011:175).

This research focussed on the unique situation of children living in child-headed households in rural Kwa/Zulu Natal in South Africa. This context was also one of bleak poverty and the painful impact of HIV/AIDS. The ways that community child and youth care workers supported children required an in-depth understanding of the meaning of the experiences of the children in this context. As contextual research focuses on

understanding the social contexts and everyday life experiences close to the words, stories and experiences of people, the contextual research approach was used to explore the research question identified.

The implementation of the above explorative, descriptive and contextual strategy of inquiry provided the framework for the specific research methodology applied in this study as discussed in the next section.

1.7 RESEARCH METHOD

According to Strydom (2005c: 252), the research methodology applied in a research report, is described comprehensively in order to enable the reader to develop confidence in the methods used. The concept “research methods” refers to forms of data collection, analysis, and interpretation that researchers employed in the study (Creswell, 2009:15). Included in this discussion of the research method applied in this study, are the aspects of population and sampling, verifying the trustworthiness of the data collected in the research and the application of the ethical considerations. Therefore under this heading, the research population and sampling, the method of data collection, the method of data analysis, the trustworthiness of the research and the ethical considerations utilised in this research study are introduced and described. A more detailed description of how the research method was applied in this research endeavour is presented in Chapter 2 of the research report.

1.7.1 Research population and sampling

The concept “population” refers to the group of people from which a sample is selected for the purposes of the study, and the pool of people to which study results are applied (Neuman, 2011:241). In this research study “population” refers to two specific groups - the community child and youth care workers working within the Isibindi project, as well as children from child-headed households who have been affected by HIV/AIDS in South Africa and have received services through the Isibindi project.

The concept ‘sample’ refers to a limited set of people, cases or units which, in the context of research, are selected for study purposes and generalized to the larger population (Neuman, 2011:240). Samples are used in the research due to time and financial

constraints. As the population of this research study refers to two specific groups, two samples were drawn from the two interest groups concerned, namely a sample comprising of child and youth care workers, and a sample consisting of children from child-headed families who were affected by HIV/AIDS.

In this research study a purposive sampling technique was utilised to obtain the participants of the samples. Singleton et al. cited in Strydom (2005b: 202) state that purposeful sampling is based on the judgment of the researcher, and that the sample chosen represents the characteristics and or typical attributes of the population. With purposive sampling one seeks and includes individuals who have first-hand knowledge and experience about the topic to be investigated in the sample.

As explained, use was made of two samples, one each from the two interest groups in this research, namely a sample comprising of child and youth care workers and a sample consisting of children from child-headed families who were affected by HIV/AIDS. The two samples were respectively constituted as follows:

- The child and youth care workers selected to form part of the sample to participate in this inquiry, were selected because they all had had more than three years experience in community-based child and youth care work. All the workers were deployed in the first Isibindi project piloted in Umbumbulu which came into being in 2001 and had worked together in a team. They had a similar training background in child and youth care work, namely the BQCC (Basic Qualification in Child Care) and later the QCCCW (Qualification in Community Child Care Work). In addition, they were trained in the range of non-accredited short courses, including Family Preservation Work, Restorative Conferencing, Developmental Assessment, and Grief work. All of these training programs were provided by the NACCW and other selected service providers. In addition, all the participants were easily accessible to the researcher.
- The children selected were also known and accessible to the researcher. More importantly, they had all received services from the child and youth care workers working within the Isibindi model at approximately the same time, in the same community in Umbumbulu.

In qualitative research, sample size is not specifically determined at the outset of the study. It is rather left to the principle of “saturation of data”. This refers to the collection of data from different participants until the data obtained becomes repetitive (Greeff 2005:294; Fossey et al., 2002:726). However, often in qualitative research, participants are selected on the basis of their capacity to provide the relevant information required in the research. Shaw (2009:44) notes the perspective of Van Manen, that selecting a few participants who are knowledgeable about the experience explored will be most relevant in any study. As the focus of this research, is on depth of information, “a small sample was chosen to allow for deep, full and rich information” (Garfat, 1998:49).

1.7.2 Method of data collection

According to Cresswell (2009:178) the data collection steps include boundary setting for the research study, information collection through interviews; unstructured and semi-structured observations; documents and visual material as well as setting protocols for recording information. Data collection is effectively the process by which information is obtained. The researcher needs to describe in detail of how data were gathered – including where, by whom and from whom (Henning, Gravett & van Rensburg, 2005:110). According to Greeff (2005:287), in qualitative research, interviewing is predominant means to collect data or information.

The researcher obtained permission and consent to undertake this research, from the Durban Child and Youth Care Centre who manages the Isibindi programme in Umbumbulu. Telephonic discussions with the Director of the Centre were followed with an introductory letter and consent form (Appendix One). Through personal discussions with all participants, both child and youth care workers and children, the researcher introduced the research to them and prepared them for their participation in the research process. All research participants, child and youth care workers and children who participated in the research completed consent forms (Appendix Two and Appendix Three). In interactive discussions the relevant and pertinent details of the research were discussed and questions answered, to create a conducive context for the process of data collection. In addition, the practical details of time, place and setting for the interviews

were also determined (Greeff, 2005: 294). Attention to the conduciveness of the settings for children's participation was given particular attention by the researcher.

In order to collect data, semi-structured or guided interviews were conducted. The researcher conducted face to face interviews with participants, consisting of open-ended questions which were included in an interview guide. These interviews were conducted with the child and youth care workers and the young people from two child-headed households. The researcher prepared and used an interview guide containing the questions discussed with participants. The interview guide, its questions and application are discussed in Chapter 2. This procedure of collecting data in qualitative research has been described in research literature (Greeff, 2005:292).

1.7.3 Method of data analysis

In a qualitative research process a large amount of interview information is generated – all of which has to be analysed (Tolich & Davidson, 1999:140). According to Patton (cited in De Vos, 2005:333), qualitative data analysis transforms data into findings and involves “reducing the volume of raw information, sifting significance from trivia, identifying significant patterns and constructing a framework for communicating the essence of what the data reveal”. Furthermore, “Data analysis is also the process of bringing order, structure and meaning to the mass of collected data” (De Vos, 2005:333). The qualitative research process does not allow the collected data to be analysed, to be neatly categorized, offering many ways of organising information (Tolich & Davidson, 1999:164). Hence there is a need to identify key themes and issues, identify the relationships between the different themes (Lester, 2004) and list the data according to the identified themes.

Creswell (2009:186) noted the following eight steps for useful analysis of the coding process of data, provided by Tesch:

- Get a sense of the whole: This required that the researcher review all the information on the transcripts of the semi-structured interviews.
- Pick out one document to focus on: In this regard the researcher separated the interviews with children from the interviews with the child and youth care workers, and then reviewed the first interview with the child followed by the first interview

with the child and youth care worker who had worked with the child. Track change notes were made directly on the transcripts on computer on the topics that emerged.

- List the topics that emerge: The researcher completed the preceding task for all interviews and then made a list of all the topics that emerged and reviewed them, clustering them with attention to the repeated or “powerful” topics that emerged.
- Take the list back to the data and compile a preliminary organising scheme: The researcher abbreviated the topics as codes and wrote the codes next to the relevant part of the text. The researcher reviewed the lists of emerging topics with the interviews, to see if new topics and codes emerge.
- Turn topics into themes or categories: At this point the researcher grouped similar topics together, found the most descriptive words for the topics and turned the topics into themes.
- Make final decisions on abbreviations: The researcher made final decisions on the abbreviations for each theme or category and alphabetised the codes.
- Assemble all categories of data and analyse: This was undertaken by the researcher repeatedly to ensure that the themes were well justified.
- If necessary recode existing data: The researcher checked whether it was necessary to recode the data and made adjustments where necessary.

The researcher analyzed the information gathered according to Tesch’s coding process (Creswell 2009:186) into themes and characteristics of a child and youth care approach in the encounters described by the participants. These were then compared to existing themes in child and youth care literature by identifying the differences and similarities. In qualitative research this process is called *literature control*. According to Fouché and Delport (2005:84) this is the process where the results are verified against the literature. This then embeds them in the larger theoretical perspectives or paradigm. Tolich and Davidson (1999:140) refer to the coding of themes as a process of categorising and sorting data, contributing to the effective analysis of data gathered. It was in the process of coding, that the themes and sub-themes were clearly identified and the characteristics of a child and youth care approach were defined.

The literature control should not be confused with the literature review (Fouché & Delport, 2005:84). A literature review is described as “a review of the existing scholarship or available body of knowledge, it helps the researcher to see how other scholars have

investigated the research problem that he is interested in” (Delpont & Fouché, 2005a:263). In the literature review the researcher explored the concept of the emergent format which assisted her to understand the importance of re-evaluating the research aims, the research question and the data gathered in the process of the research. As expressed by Schostak (2008):

“The emergent format for carrying out the research involves suspending judgment as to the core set of aims, the key research questions and the nature of the data to be collected. In short, through a process of critical reflection during the process of engaging in the research the design emerges, shaped by researcher's engagement with the broad scene of research under study.”

The understanding of emergent theories allowed for the review of the research design in the process of structuring the analysis of the data. Schostak, (2008) adds that it is an appropriate approach for research undertaken by those who engage in critical reflective practice – in order to understand better and make wiser decisions.

1.7.4 Trustworthiness of the research

According to Shenton (2004:63), researchers should attempt to satisfy four key criteria to ensure trustworthiness in qualitative research – credibility, transferability, dependability and confirmability. He refers to Guba’s model for trustworthiness in research (in Kefiting, 1991:214). In order to ensure trustworthiness, Guba (in Kefiting, 1991:214-216) has constructed a model to be applied in qualitative studies, which involves four key constructs, namely truth value, applicability, consistency and neutrality which are described below.

- **Truth value** “establishes to how confident the researcher is with the truth of the findings based on that research design informants and context” (Krefting, 1991: 215).
- **Applicability** refers to the extent to which the findings of the research study are applicable in other contexts (Krefting, 1991: 215).
- **Consistency** refers to the consistency of the findings if the research were to be repeated with similar participants and contexts (Krefting, 1991:216).
- **Neutrality** refers to the elimination of the research bias (Krefting, 1991:216).

These four criteria used to ensure trustworthiness in the research study can be supplemented by using selected strategies to ensure the integrity of the research findings. Shenton (2004:63) further explores the four criteria further in terms of the following strategies:

- **Credibility**, according to Shenton (2004:63/64) refers to demonstrating that a true picture is being presented. Credibility refers to an internal validity to ensure the research strategy actually measures what is intended. Triangulation is one of the provisions that can be used by researchers to promote internal validity as multiple and different sources of information converge to represent themes or categories in a research study (Creswell & Miller in Golfshani, 2003:126). The adoption of appropriate well-recognised research methods is core to promoting credibility (Shenton, 2004:73).
- **Transferability**, refers to external validity and providing sufficient detail of the context, so findings can be justifiably applied to another setting or situation. Transferability, further allows comparisons to be made (Shenton, 2004:63/69/73).
- **Dependability**, refers to ensuring that another researcher could repeat the study using the same methods, in the same context, with the same participants and that similar result would be obtained. This consistency of finding promotes the concept of reliability (Shenton, 2004:63/71).
- **Confirmability**, refers to steps undertaken by the researcher demonstrating that the findings emerged from the data and not from researchers bias. The findings must be the result of the experiences and ideas of the informants rather than the characteristics and preferences of the research. Triangulation can play a key role in promoting confirmability and reducing the effect of researcher bias (Shenton, 2004:63/72).

The researcher has applied Guba's four criteria (in Krefting, 1991:214) to ensure trustworthiness in the research study, by using the selected strategies that have been discussed above to ensure the integrity of the research findings. These are discussed further in Chapter 2.

1.7.5 Ethical considerations

The concept “ethics” as applied in research, is described as “a set of moral principles suggested by an individual or group, is subsequently widely accepted, and which offers rules and behavioural expectations about the most correct conduct towards experimental subjects and respondents, employers, sponsors, other researchers, assistants and students” Strydom (2005a:57).

Ethical principles should be internalized and part of one’s personality and lifestyle Strydom (2005a:57). All professions have ethical codes of conduct that guide their unique practices (Knorth, Van den Bergh, & Verheij, 2002:4). The researcher is of the opinion that child and youth care workers as researchers, are expected to bear in mind this parallel process and ensure that the ethics of their daily practice are expanded and applied in their role of researcher.

According to Tolich and Davidson (1999:70), the principles that guide ethical conduct in research include the following: voluntary participation, informed consent, avoiding deceit and confidentiality and anonymity. Oka and Shaw (2000:16) elaborate on two more principles, namely emotional safety and reciprocity. The researcher added the management of information to this list. These principles are briefly elaborated on below with the details of how they were applied described more fully in Chapter 2.

- **Voluntary participation**

According to Marshall and Rossman cited by Shaw (2009:46), the implied power relationships from previous or current personal or professional interactions may impact on participant engagement and sharing. In this research, the two interest groups selected as the research participants were known to the researcher who managed the overall implementation of the Isibindi project. In this context, the issue of ‘power’ was given careful attention in the ethical considerations to ensure participants’ voluntary participation, and is described more fully in Chapter 2.

- **Informed Consent**

Strydom (2005:59) note that the “advantages, disadvantages and dangers” need to be considered by the research participants when giving consent to participate in a research

study. This allows the participants to understand the implication of the research for themselves and others, ensuring that they take an informed decision whether to participate or not in the research. Neuman (2011:144) notes that this ‘power’ that is held by the research participants in this decision making, allows for the consent to be ‘informed’. These ethical considerations, particularly as one group of the research participants were children, were carefully considered in this research and is described more fully in Chapter 2.

- **Confidentiality/anonymity**

The sensitivity to confidentiality was critical in this research, as the children who participated in the research were dealing with emotional issues relating to death, dying and grief. Tolich and Davidson (1999:70) note that few research participants will willingly share private information and true feelings in public documents that reveal their identifying details. Anonymity, according to Neuman, (2011:152) refers to the ethical protection of participants when they are nameless, when their identity is protected from disclosure and remains unknown. The anonymity of the child and adult participants was therefore ensured, and their disclosures therefore remain confidential. All participants were referred to by use of pseudonyms. The application of confidentiality/anonymity in this research is discussed in Chapter 2.

- **Emotional safety**

Oka and Shaw (2000:16) note that qualitative research allows emotionally sensitive topics to be explored with the research participants. Topics like death, abuse or stigma, as is typical in this research study, could result in sensitive feelings and emotions. They further note the importance of self-awareness in the research interviews, to ensure both the emotional safety of the research participant and the neutrality of the researcher to be carefully assessed. The application of this ethical consideration is described in Chapter 2.

- **Reciprocity**

The potential impact of the research findings for other children and the child and youth care field was considered when exploring the ethic of reciprocity. According to Oka and Shaw (2000:16) there is a relationship between the methodology of qualitative research and professional practice. They note that there are responsibilities and obligations of research towards advocacy and learning. The researcher made effort to ensure that the

research participants, particularly the children understood the ethic of reciprocity. The researcher ensured that the informed consent statement obtained written permission for information sharing. The application of this ethic is clarified further in Chapter 2.

- **Avoiding deceit**

Voluntary informed consent, as discussed above, is a statement – often written – that explains aspects of the study and asks for the research participants’ voluntary agreement to participate in the study (Neuman, 2011:149). This allows for the protection of the research participants against coercion in the research process and protects their rights. Judd, cited by Strydom (2005a:61) offers reasons for deception taking place in research. These include the need to disguise the real reason for the research; to hide the real function of the actions of the research participants; or to hide the experiences the subjects. In this research every effort was made to ensure that the research question was explored with integrity. The research participants were aware that the research findings would be shared and published. The ethic of reciprocity was discussed to ensure that research participants understood the implications of this ethic. The informed consent statement was signed by research participants to reinforce this. There was no intentional misleading of the research participants through, written or verbal communication, actions of others or in any aspect of the setting for the research (Newman 2011:149). The application of this ethical consideration is examined in more detail in Chapter 2.

- **Management of information**

Management of information as an ethical consideration is closely related to the ethical consideration of confidentiality/anonymity, and it refers to the way in which information provided by participants should be handled to ensure its confidentiality and to ascertain that participants’ particulars and contributions remain anonymous. In this regard Holloway and Wheeler (1998:45/46) provided certain practical guidelines, the application of which in this research, is discussed in Chapter 2.

1.8 LITERATURE STUDY AND KEY CONCEPTS

The first part of this section comprises a literature study focused on child and youth care practice, and the second part on describing certain key concepts used in the research is

introduced in this Chapter, briefly to contextualize the research in child and youth care practice. The profession of child and youth care work promotes a child focused workforce in the welfare sector. Under the above heading, an understanding of child and youth care work in a South African context is introduced by means of a literature study on child and youth care work with the emphasis of the philosophy underlying child and youth care work. This understanding is further developed by clarifying certain key concepts used in the study and in child and youth care work.

1.8.1 Literature study

According to the International Child and Youth Care Education Consortium (Mattingly, 2006):

“Professional child and youth care practice focuses on the infant, child, and adolescent, both normal and with special needs, within the context of the family, the community and the life span. The developmental-ecological perspective emphasizes the interaction between persons and the physical and social environments, including cultural and political settings. Child and youth care practice includes skills in assessing client and program needs, designing and implementing programs and planned environments, integrating developmental, preventative and therapeutic requirements into the life-space, contributing to the development of knowledge and practice, and participating in systems intervention through direct care, supervision, administration, teaching, research, consultation and advocacy.

In considering this definition, the researcher attempted to understand what child and youth care workers in communities did in the context of HIV/AIDS and poverty in which they worked. The context of child and youth care services in communities in South Africa is vastly different to that in other Western countries, and the application of child and youth care work characteristics and skills in a South African context is vital to both understand and to expose.

Small and Dodge (1988:7) categorized the specific skills and job tasks of child and youth care workers into six distinct categories. The researcher explored the linkages of her research findings to the functions of the child and youth care worker as a parent

substitute/primary caretaker (category one), and child and youth care work as therapeutic intervention (category two). The tasks connected to being a parent substitute are significant in the context of the HIV/AIDS pandemic in child-headed households and vulnerable families in South Africa. The researcher explored the experiences of the research participants in respect of the function of 'care' – including the depth and breadth of the caring experience.

The researcher explored the African understanding of caring as described in Archbishop Desmond Tutu's definition of Ubuntu, demonstrating the connectedness between those who care, and those who are cared for, and the inextricable link between them (Tutu, 2000).

This perspective of Ubuntu is paralleled in Native American philosophy where it is said that 'we are all related', as follows:

“All things are interrelated. Everything in the universe is part of the single whole. Everything is in some way connected to everything else. It is therefore possible to understand something only if we have understood how it is connected to everything else” (Bopp, Bopp, Brown, & Lane. 1985:26).

In South Africa, the spirit of Ubuntu contributes to nation building. Ubuntu raises the understanding of “I am because you are” (Panse, 2006). This understanding of Ubuntu describes the interconnectedness between the carer and those cared for in this study.

In addition, the concept of reclaiming (Brendtro, Brokenleg & Van Bockern, 1992: 3) was explored as the data demonstrated that reclaiming was a conscious practice of the child and youth care workers in their work with children in child-headed households. Reclaiming the worlds of the children, their sense of community belonging (Brendtro et al. 1992:47), their hopes, dreams and spirit (Hobbs, 1994:285) are common themes of reclaiming.

There is a need for sensitivity to cultural nuances in child and youth care work when delivering child and youth care services. Fulcher (2003) explains it as follows:

“Cultural safety involves the state of being in which a child or young person experiences that his/her personal well-being, as well as their social and cultural frames of reference is acknowledged – even when not fully understood by workers

assigned the tasks of helping them. Cultural safety requires that each child or young person will be provided with the reasons for feeling hopeful that his/her needs would be attended to, in terms that he/she will understand. Cultural safety also means that family members and kin are accorded dignity and respect and are actively encouraged to participate in decision-making with service providers about the futures of their children.”

In work in communities there is a vital need to develop cultural competence. Mattingly (2006), in articulating the core competencies for professional child and youth care personnel, identified cultural and human diversity as one of the key competencies. Cultural knowledge should be, “integrated in developing respectful effective relationships, and communication and developmental practice methods” (Mattingly, 2006). During this research, the researcher attempted to be sensitive to the evidence of cultural integration in the service delivery of the community child and youth care workers.

The view that the role of the child and youth care worker is changing from “care-taker to care-giver to systemic interventionist” (Garfat, 2007) has been explored in the context of family work in communities. It became clear that family work is a critical area of competency for community-based child and youth care workers. The researcher explored the experiences of the young people and child and youth care workers in the context of family. Issues such as the management of the diminishing roles of parents in the process of dying; the exchange in the roles of the ‘cared for’ and the ‘care giver’ in the relationship of dying parent and child; the new role in the family of the child heading the household; the burden of care placed on children heading households; the inclusion of extended family in the context of HIV/AIDS; and the impact of stigma have been explored.

Garfat and McElwee (2004:15) identified characteristics of a child and youth care approach to working with youth and families and these became an invaluable framework in guiding the research. These characteristics have showcased themselves in a uniquely South African expression in the research. The use of daily life events as focus for intervention; being with people as they live their lives; pro-activity in interventions; intentionality of action; developmentally appropriate interventions; hanging out with people; hanging in – good times and bad; doing with (not to or for); engagement and connection as a foundation; needs-based focus in planning and intervention; attention to meaning-making;

attention to and use of rhythmicity (or the “shared experiences of engaging in a synchronized, dynamic connection with another or others” (Kruger & Maier, cited in Garfat & Fulcher, (2012:14)); self-awareness and the use of self (it’s all about us), are many of the characteristics that are explored more fully in the next chapters of the research. Fewster cited in Garfat (2003:84) notes that the “primary concern of the practitioner is with the subjective experience of the young person”. This study, in focusing on the experiences of young people in child-headed households and their experiences of the interactions and encounters with child and youth care workers, has been able to demonstrate how many of these child and youth care characteristics have been experienced by children.

A point noted in child and youth care literature and borne out by Fewster as cited in Garfat (2008b:10), is that child and youth care workers are regarded as being the most important asset in child and youth care work, when it is stated that – “our own sense of self is our primary professional resource”. This study provided evidence of this development and growth in the lives of the participating child and youth care workers. The child and youth care worker engaged in family work, assists the family and the individual children in the family to draw on their own internal resources. The essential role of the child and youth care workers interviewed in this study, was to create an environment where the experience of the child was one of being valued, with the child and youth care worker contributing to the well-being of the family. In this regard Fewster, cited in Garfat (2003:89/90), notes the following:

“[C]reating a climate of respect and safety through the articulation of boundaries is always the first step and in this the child and youth care worker must establish her place in the scheme of things.”

Theoretically, the child and youth care worker serves as a competent and concerned external presence while families generate and assimilate new information through sharing their thoughts, feelings and experiences with each other (Garfat, 2003:90). These perspectives of family and family work were critical in the context of this research, as the families concerned are child-headed households and are vulnerable in the context of widespread death and dying.

The nature of child and youth care work and the way in which it occurs, are described as follows:

“[C]hild and youth care practice does not occur within a vacuum isolated from the rest of the world or people’s lives. It occurs within relationships that develop between the practitioner and the client(s). It occurs in the light of multiple relationships that the practitioner and the client have with the rest of the world. The process of practice involves the practitioner, the client(s), their families, the official ministries that are involved, the community, and the organisations of all parties *ad infinitum*. It is this web of relationships that creates and adds to the complexity of practice processes and as child and youth care practitioners we are in the middle of it” (Ricks, 2001).

This quote aptly describes the experience of community child and youth care workers working with child-headed households in South African communities, as they work and interact with a range of different role players in the lives of the children and families and in the community. They too, network, refer, advocate, negotiate, and relate to the various other officials and organizations significant in children’s services in the community.

From this literature study it is quite clear that child and youth care work has significant relevance in the South African context. The fit of the child and youth care worker in the reality of South African children in communities requires exploration understanding and exposure.

1.8.2 Definition of key concepts

The following key concepts central to the research topic need to be clarified:

1.8.2.1 Child and Youth Care work

Anglin (2001) simplifies the international definition referred to above in the following description of child and youth care work:

“Child and youth care is work with children and youth, as whole persons, in order to promote their social competence and healthy development, by participating in and using their day-to-day environments and life experiences, and through the development of therapeutic relationships, most importantly the relationship with the particular child or youth who is the focus of attention. (The word ‘therapeutic’ is

taken to mean ‘having healing or curative powers; gradually or methodically ameliorative’).

Child and youth care work, in the context of this research, denotes the therapeutic use of ordinary daily life events and experiences of the young people in child-headed households to contribute to their healing and capacity to cope in their unique situation. The unique relationship developed between the children and the child and youth care worker, a critical adult figure in their lives, provides the caring context for child and youth care practice.

1.8.2.2 Child-headed households

Philips (2011:174) proposes a universal definition of child-headed households, namely “a household, consisting of one or more members, in which the role of the principal caregiver has by necessity been taken over by a child under the age of 18 years”. The term *child-headed households*, refers to families where only children under the age of eighteen years are members of the family (Meintjes, et al. 2009).

In terms of the Children’s Act (Act No 38) of 2005 (2006: section 137(1), “a provincial head of social development may recognize a household as child-headed if:

“(a) the parent, guardian, care-giver of the household is terminally ill, has died or has abandoned the children in the household;

“(b) no adult family member is available to provide care for the children in the household;

“(c) a child over the age of 16 years has assumed the role of caregiver in respect of the children in the household.

“(d) it is in the best interest of the children in the household.”

According to the Children’s Act, child-headed households are to be supervised by a designated adult (Children’s Act (Act No 38) of 2005 (2006: section 137(1)).

The NACCW Isibindi Model acknowledges the above recognition of the child-headed status of households, but broadens the preceding definition. The registration forms of the

Isibindi Model define child-headed households to include services to families where young people -

- between 18-21 years require support in order to care for their siblings;
- between the 18-21 years still attend school;
- under the age of 18 years care for dying parent/s or siblings; and
- live with an aged grandparent as caregiver who him/herself requires caring. (NACCW, 2009).

For the purpose of this study a child-headed household is regarded as a family where the eldest sibling takes on the responsibilities for the family in the context of parents who have died or are terminally ill. Even though they may be over the age of 18 years they may still be in school and/or require care and support from an adult to care for their siblings and sick parent/s.

1.8.2.3 Care and caring

Austin and Halpin as cited in Thumbadoo (2005) described the role of a caring person as follows:

“[A] caring person values the other, views the other as a subject not object, sees the other as needing care, has the energy to care, respects the authenticity of other, sees the caring act as an end in itself, is non-judgmental, assumes that the other can be helped, is available to the other, is not fearful of caring, and is prepared to adapt to the needs of the person being cared for when that is necessary”.

The term *care* refers to acts which bring about a sense of being cared for, and include physical tasks and activities associated with daily life, such as meal preparation, homework supervision and household routines. Maier (1987c:86) adds to this understanding, as follows:

“The quality of care is not so much a singular question of how the workers feel about the children as it is how they translate their care into actions”.

Maier (1987a:62) further asserts that care is a personalised experience. It is a fundamental human desire for intense personal involvement and it is in personalised care that this desire is realised.

“Support” is defined as the “action of contributing to the success of or maintaining the value of something” (Oxford, 2007: s.v. “support”). In many ways child and youth care workers support children by contributing to their resilience and competence and reclaiming their sense of value of self. However the act of caring has the potential of transforming the concept of ‘support’ into a deeper and more meaningful experience for the children.

For example the process of cooking a meal for children is providing support. It is also “holistically” seen, a caring activity. The feelings and desires of children are considered, the participation and conversations with children about food would influence its preparation, and the values of respect and of dignity would be acted out in the preparation and presentation of food. This “sense of being cared for” is experienced not just in the physical eating of the food but in the “gestalt” of the experience of being cared for. This then explains the researcher’s understanding of care and caring in the child care context – it is the infusion of care into the minutiae of daily tasks (Maier, 1987b:131).

1.8.2.4 Ubuntu

The following descriptive definition of the African concept of *Ubuntu*, was accepted as a working definition for the purpose of this study:

“Africans have this thing called Ubuntu. It is about the essence of being human, it is part of the gift that Africa will give the world. It embraces hospitality, caring about others, being able to go the extra mile for the sake of others. We believe that a person is a person through another person, that my humanity is caught up, bound up, inextricably, with yours. When I dehumanise you, I inexorably dehumanise myself. The solitary human being is a contradiction in terms and therefore you seek to work for the common good because your humanity comes into its own in belonging” (Tutu, 2000).

1.8.2.5 Reclaiming

In a child and youth care context the term *reclaim* refers to a process where an aspect of the life and experience of a person is recovered and redeemed in order to assist the person to function more holistically, more fully in themselves. To reclaim means to restore value to something that has been devalued (Brendtro et al. 1992:3).

1.9 PROBLEMS AND CHALLENGES ENCOUNTERED DURING THE RESEARCH

The researcher was challenged in the process of this research with respect to the process of structuring the data. However, this problem was overcome by studying and reviewing the literature on emerging theories (Schostak (2008), Creswell, 2009:175/6). The emerging theories assisted the researcher with this challenge, and as a result the review of the structure of the data analysed ensured that the depth of the data was not lost.

1.10 OVERVIEW OF THE PRESENTATION OF THE RESEARCH REPORT

In addition to this introductory chapter the research report consists of a further three chapters.

The second chapter about the research methodology and its application in the study explains and justifies the researcher's choice of research methodology. It explores the qualitative approach in depth through a literature study and makes connections to the research design, demonstrating the fit of the methodology and the design of the research.

The data analysis and the findings from both the children and child and youth care workers are presented in the third chapter under the themes of Care, Ubuntu and Reclaiming. The characteristics of a child and youth care approach (engagement and connection, being with and doing with, pro-activity and intentionality of interventions, meaning making and others) were also explored in relation to the themes and the data gathered. Verbatim quotes were used, exposing the personal experiences of both the children and child and youth care workers in these encounters. The quotes reflect both *what* the different experiences were and *how* they were experienced.

In the fourth chapter the literature, is synthesised in respect of the themes (Care, Ubuntu and Reclaiming) and the characteristics of a child and youth care approach with the data findings. The chapter contains the necessary conclusion and recommendations based on the researcher's reflections and interpretations of the significance of the findings.

CHAPTER 2

APPLICATION OF THE QUALITATIVE RESEARCH PROCESS

2.1 INTRODUCTION

In Chapter 1, the research question for this study, *How do child and youth care workers support child-headed households in the community?* was outlined and the research plan to explore this question was described. As presented in paragraph 1.4.1 of Chapter 1, the research goal was to develop an in-depth understanding of how child and youth care workers support child-headed households in the community. The research objectives set to achieve these goals included the exploration and description of the way in which child and youth care workers support child-headed households in the community. Task objectives were identified to expand on these objectives.

In this chapter the researcher describes how the qualitative research approach and methodology were employed to assist in understanding how child and youth care workers support child-headed households in South African communities affected by poverty and HIV/AIDS. Chapter 2 describes the application of the qualitative research approach, research design, population and sampling, data collection and fieldwork strategies, method of data analysis, data verification and ethical considerations as implemented during the investigation of the research topic under discussion.

2.2. THE NATURE OF QUALITATIVE RESEARCH

The qualitative approach has been used in this research to explore the research question identified. The approach synergizes with the research question as it subscribes to the notion that meaning and understanding can emerge from life experiences (Cresswell, 2009: 8). The research explores child and youth care workers servicing children in communities. These children are heading their families in the unique context of HIV/AIDS and poverty. It is expected that the experiences of the child and youth care workers will illuminate the lived experiences of children. The qualitative approach allows the researcher to explore the research question in depth – allowing for deep experiences and perceptions to emerge. In the child and youth care field, the most crucial knowledge about an encounter between

child and youth care worker and a young person will come from an exploration of the experience of both child and worker in that situation. The “opportunity to encounter others in a way that is intimate, close, human, real” (Garfat, 1998:155), is one of the important characteristics of qualitative research methodology. In this research it was predicted that strong, painful memories and feelings would emerge, as the lived experiences of the children would be related to death and grieving. Children who had had such experiences were specifically selected, as the research focused on the experiences of children whose parents had died who were living in child-headed households. The characteristics of the qualitative approach as described in paragraph 1.5, allowed the researcher to create a context that was safe and intimate so that real, human experiences could be shared. The qualitative research methodology helped the researcher to understand more fully and deeply the experiences of the children and those of the community-based child and youth care workers in this unique context.

The qualitative approach also aims to expose the voices of the research participants (children and child and youth care workers) on the context of their reality, and actions taken to make meaning of this reality (Fossey et al., 2002:717). Africa is grounded in an oral tradition (Rukuni, 2007:154) and stories and storytelling are common traditional methods of sharing experiences (Rukuni, 2007:156). Stories are a medium for the communication of deep, personal experiences. It was, therefore, culturally appropriate in this research to hear the stories directly from the children and the child and youth care workers.

This approach assisted the researcher to understand the interpretation of child and youth care practice in the unique context of South African community-based child and youth care work. In the contexts of poverty, HIV/AIDS and child-headed households, the characteristics of a child and youth care approach extracted from international child and youth care literature were used to structure the data. This has exposed a child and youth care practice that is unique in its African orientation.

Fossey et al. (2002:726) note that qualitative data collection consists of three common models, namely interviewing individual participants, focus group interviews and participant observation. In this study the researcher was able to focus on the role of child and youth care workers in the lives of children in child-headed households in communities

and collect information on their own understanding and meaning of their worlds. This information was validated for its integrity in the research process. The findings and interpretations of the data provide indications for further research in respect of the research question of “How do child and youth care workers support child-headed households in the community?”

As described in Chapter 1 (paragraph 1.5), the characteristics of qualitative research were assessed by the researcher, found to fit in with the research undertaken, and therefore to be appropriate to the realization of the goal of the research. These characteristics (Cresswell, 2009:175-176) included: collecting data in the natural setting of the participants; the researcher being the key instrument collecting the data; the accessing of multiple sources of data; the application of inductive data analysis including collaboration with participants; focusing on participants’ meaning regarding the matter being investigated; changing of the emergent design; viewing the matter being investigated from a particular theoretical lens; an interpretative characteristic that refers to multiple views of participants; readers and researcher of the experience or problem being exposed; and the holistic interpretation of child and youth care characteristics.

The aforementioned characteristics, offer the opportunity to humanise the experience of child and youth care practice, providing for a better understanding and appreciation of the individual stories of child and youth care workers and children (Peterson, White & Epston quoted in Garfat, 1998:55). The researcher concluded that the qualitative approach would be effective in realizing the goal of this study.

2.3 RESEARCH DESIGN

The research approach determines the plan, strategy or design deployed by the researcher to conduct research (Neuman 2011:130). Ploeg (1999:36) notes that qualitative research design should explore, describe and explain the research problem being studied. Fouché (2005:268-269) emphasizes that a qualitative research design does not usually provide the researcher with a step-by-step plan or a fixed recipe to follow. However, a research design does provide a framework and structure for the implementation of the research.

The research design used in this study is an explorative, descriptive and contextual one. An exploratory research design is useful when there is a need to examine an issue or phenomenon that is little understood in order to develop initial ideas about it (Neuman, 2011:38) and to achieve new insights and formulate research questions (Palys, 1992:86). The research undertaken has focussed on many problems that require further understanding and information. Children living in child-headed households (as a result of the HIV/AIDS pandemic) are a new phenomenon in South Africa. The roles of child and youth care workers who work in community settings are also new in South Africa. The exploration of the ways in which child and youth care workers support child-headed households in communities may provide useful information to support children in these difficult circumstances.

A descriptive research design or strategy of inquiry allows the researcher to describe a person or situation or group (Palys, 1992:86), providing detailed and 'highly accurate' pictures that are painted in words (Neuman, 2011:38). It further reports on the background of a situation documenting a causal process (Neuman, 2011:38). In this study the research question was answered by children in child-headed households and community child and youth care workers describing their experiences and encounters with each other. The actual responses (words) from the research participants paint a descriptive picture of their individual and joint experiences.

Neuman (2011:175) notes that the meaning of a social action, event or statement depends greatly on the context in which it occurs, as social contexts provide meaning and social significance to these events. He further states that social contexts include time contexts, spatial contexts, emotional contexts and socio-cultural contexts. These are relevant to this research since it is not just when and where experiences have occurred that is important, but also the feelings of the research participants regarding how something occurs, as well as the meaning of the social and cultural context that is significant. In the research undertaken, the context of the research participants, that of both children and child and youth care workers, was critical to understanding their experiences. The reality of HIV/AIDS and the associated death and grief, the world of poverty in a community setting in South Africa was the stark context for this research.

A good research design is “clearly defined, with coherence between research questions and methods” Ritchie and Lewis (2005:74). The relationship between study design, theory and data collection is iterative as each should inform, and be informed by the others. This perspective fits with the emerging theory characteristic of qualitative research, of which Schostak (2008) said the following:

“The emergent format for carrying out the research involves suspending judgment as to the core set of aims, the key research questions and the nature of the data to be collected. In short, through a process of critical reflection during the process of engaging in the research the design emerges, shaped by researcher's engagement with the broad scene of research under study. The writing up of the research process thus reflects this process of emergence”.

Schostak (2008) adds that the emergent format allows for critical reflection within the process of the research, allowing for review of the research design. Emergent formats are appropriate for research approaches that connect and engage with the direct lived experiences of the subjects as in a phenomenological approach (Schostak, 2008). The understanding of emergent theories allowed the researcher to review the research design during the process of structuring the analysis of data. Instead of structuring the data analysis around the tasks undertaken in the daily life events, as initially intended, the data was structured around the themes and characteristics of a child and youth care approach that emerged. The researcher integrated the tasks that had emerged within the themes and characteristics of a child and youth care approach. This restructuring allowed for the exposure of the data more richly and effectively by means of a research design which was explorative, descriptive and contextual in nature.

2.4 THE RESEARCH METHOD

The concept *research methods* refer to forms of data collection, analysis, and interpretation that researchers employed in the study (Creswell, 2009:15). Included in this concept are also the aspects of population, sampling and sampling techniques. These aspects are presented in the discussion as they were utilised.

2.4.1 Population, sampling and sampling techniques

Strydom (2005b:203) describes “sampling” as “taking a proportion of a population or universe and considering it representative of the population and or universe”. The author notes that, “*population* refers to the individuals in the universe who possess specific characteristics” (Strydom, 2005b:204). The population for this research constituted of two interest groups comprising child and youth care workers and children of child-headed families involved in the Isibindi Model of community based child and youth care work.

In this research, the sample comprised three child and youth care workers, and two families were selected as research participants. The family interviews resulted in four children responding in one family, and one child responding from the other family. All the participants interviewed were part of the Isibindi Project in Umbumbulu in the province of Kwa/Zulu Natal – managed as a community outreach program by Durban Children’s Home.

The child and youth care workers interviewed had been previously unemployed in the Umbumbulu community, and had been trained as community child and youth care workers. They had received a basic foundation training course designed especially for community-based child and youth care workers, as well as an array of short, specialized courses. One child and youth care worker was in her third year of study in the degree in child and youth care work offered by a distance education university. The other two were completing an accredited training course in child and youth care work. Two of the participants were, at the time of conducting the research, employed as Isibindi mentors at the NACCW (National Association of Child Care Workers). The other is employed at a residential child and youth care centre. All three of these child and youth care workers initiated work with their respective families approximately eight years ago. The child and youth care workers were all female, and aged thirty-six years, thirty-seven years and forty-four years old at the time of the research.

The children of Family One consisted of six siblings aged sixteen, fourteen, ten (twins) and seven (twins). Only the older child, aged sixteen years of age at the time of the interview, participated. Family Two consisted of three children and one sibling foster parent aged ten, thirteen, eighteen, twenty years respectively. All three children participated in the first interview and the sibling foster parent participated in the second interview with his other

siblings. The children had been much younger when the child and youth care services being researched had been delivered than when they participated in the research.

The child and youth care workers and the children selected come from an isiZulu cultural background. Their rituals, traditions and language are from the isiZulu culture. The researcher required the support of a translator as she did not speak isiZulu. All research participants understood English, but many preferred to speak in their mother tongue. Wherever the questions were difficult to understand they were translated by the translators. The translators were the child and youth care worker in one family and the older child in the other.

2.4.2 Method of data collection

Permission was sought from Durban Children's Home (which manages the Isibindi Umbumbulu Project) to undertake this research. Due to the long delays in the research, permission to continue with the research was re-negotiated at a later stage, to ensure that there was still commitment to the initial permission obtained and the continued research. An updated consent form was signed. Permission was sought from a relative in Family One where the child interviewed was sixteen years of age. The child and youth care worker assisted by informing her closest relative about the research, and asked her on behalf of the researcher for permission to interview the family. This was done verbally and then followed up with written consent. Informed consent from all research participants was secured, and the details are reflected paragraph 2.6.2. In addition, an oath of confidentiality form was signed by the child and youth care worker who assisted with providing support and translation (Appendix Three).

The two child and youth care workers interviewed who now work for the NACCW as Isibindi Mentors, required little extensive engagement, as there already existed a trusting relationship with the researcher and an understanding of the research. The other child and youth care worker presently employed at a residential child and youth care centre was visited and prepared for her participation in the research interviews. This visit gave the researcher the opportunity to engage with her, and understand the changes in her circumstances since a previous meeting with her. The researcher also sought the assistance of the two child and youth care workers in the initial preparation of the families. The

careful engagement with the participants before and during the research created a safe context for the interviews, and facilitated the securing of information of meaning and depth.

Data were collected through semi-structured or guided interviews with the child and youth care workers and the young people from the two child-headed households, as is appropriate in qualitative research Greeff (2005:292). The following two lists of open ended questions were compiled as interview guides for child and youth care workers and for the children interviewed:

Questions for the Young People

Question Heading: What is your experience of the child and youth care work intervention?

- What did the CYCW do when she met you? What did she say? What did she do?
- What did the CYCW do when she first came into your home?
- How did you feel about what the CYCW did?
- What are the different things that the CYCW did with you?
- Are there things you have learned from working with the C&YCW?
- What are the things you have learned that are most important for you?
- Are there other things that the CYCW has done that seem very important for you in your life?
- How do you feel about the CYCW coming into your life?
- What are other things you think I should know about the way the CYCW has worked with you and your family?

Questions for the Child and Youth Care Worker

Question Heading: What is your experience of the child and youth care work intervention?

- Tell me about your first meeting with the child/family?
- What did you do when you first started to work with this young person /family?
- How did you decide what tasks to do first?
- What are the other tasks you did with the child/family?
- How did you feel about your work with the child/family?

- When did you experience them responding to you?
- How did they respond? What/how did they say? Do? Respond?
- How do you feel about your work with the young person? Family?
- Do you think that you made a difference? When? Why? How?
- How do you feel about entering the life of this young person? Family?
- Finally, in general, what has been your experience?

In all cases, face-to-face interviews were held. Later, at the point of finalizing the research findings, further telephonic interviews were held with the child and youth care workers to verify information.

The practical details of time, place and setting for the interviews were also determined (Greeff, 2005:294). Attention to the conduciveness of the settings for children's participation was given particular attention. The interviews with the two Isibindi mentors were held at the NACCW offices in Durban, where there were no disturbances. The other child and youth care worker was interviewed in her cottage in the children's home where she works. The first interviews with children were held in their respective homes, in the afternoon after school. In one family, the interviews were held in the lounge and in the other family in the bedroom as the siblings and friends were watching television in the lounge.

The second interviews were held separately with both families at the Durban Botanical Gardens. The children were consulted and allowed to participate in selecting this setting for the interviews. The reason for this choice of this venue was that it was a beautiful and child friendly environment, allowing the children family time in together in different venue, whilst the interviews took place. In this second interview, the researcher took a picnic basket, a box of toys and a male child and youth care worker to engage and play with the siblings, three of whom were male, during the interview. The second family had requested to eat out at a restaurant. The researcher was able to accommodate this request at the Durban Botanical Gardens' tea garden, whilst finding private space for the interview with the participants. This choice of venue exposed the children to a new environment, met a need for the children to experience a different stimulating environment, and provided an accessible, cost effective outing for both the children and child and youth care workers. All

interviews were taped, and in addition written notes were made. The interviews were transcribed, read and reviewed many time before they were coded.

The researcher's method of data collection followed the general principle of minimum structuring and maximum depth – keeping focus on the research question but avoiding undue influence by the researcher. The researcher interviewed the families selected carefully, attending to basic child and youth care engagement techniques. The fact that the families were known to the researcher, and that all the children and child and youth care workers interviewed, had a historic relationship with the researcher, assisted in the interviews.

2.5 DATA ANALYSIS

According to Tolich and Davidson (1999:140), qualitative research results in large amounts of information that results from interviews. All this information has to be analysed. The qualitative research process does not allow the collected data to be easily analysed or neatly categorized, which provides the opportunity for many different ways of organising information (Tolich & Davidson, 1999:164). Hence there is a need to identify key themes and issues, and identify the relationships between the different themes (Lester, 2004).

In the researcher's attempt to make meaning of the research information obtained from the participants and identify the themes and sub-themes, the following steps (based on Tesch's 8 steps in the coding process presented in Creswell, 2009:186), were followed:

- The researcher reviewed the transcripts of all the semi-structured interviews, gaining a big picture from all the information available.
- The researcher proceeded systematically to separate the interviews with children from the interviews with the child and youth care workers. The researcher reviewed the first interview with the child, and then the first interview with the child and youth care worker who had had encounters with each other. Track changed notes were made directly on the transcripts on computer on the themes that emerged.

- The researcher completed the above tasks for every interview and then made a list of all the topics that emerged. These topics were reviewed and clustered – with attention to the repetitive or “powerful” topics that emerged.
- The researcher compiled a preliminary organising scheme by abbreviating the topics as codes and writing the codes next to the appropriate text segments.
- The researcher then found the most descriptive wording for the topics and turned the topics into themes or categories. The list of topics was reduced by grouping related topics together into themes with sub-themes.
- The researcher next made a final decision on the abbreviation for each theme and sub-theme, and alphabetised these codes.
- The researcher grouped the data pertaining to each theme together and performed a preliminary analysis.
- The researcher recoded data as necessary.

The data analysis process revealed that specific themes with sub-themes emerged. The themes of ‘Care’, ‘Ubuntu’ and ‘Reclaiming’ emerged repeatedly from both children and child and youth care workers. The emergence of the theme of Ubuntu at an early stage exposed the possibility of a South African or African interpretation of child and youth care work.

2.6 TRUSTWORTHINESS OF DATA

The researcher reviewed Guba’s model of ensuring trustworthiness of qualitative data (in Krefting, 1991:214-222), and applied it to the data in this research. Guba (in Krefting, 1991:214-222), notes four characteristics of trustworthiness namely, truth-value, applicability, consistency and neutrality, each entailing the following:

- **Truth value**, according to Krefting (1991:215), refers to the confidence of the researcher in the fact that the research design, informants and context of the study are a true reflection of the experiences of the research participants – as a result of the application of specific criteria of interviewing techniques, triangulation, peer examination and authority of the researcher. In this research there was a parallel process of applying child and youth care characteristics and skills in the interaction

with both children and child and youth care workers. Child and youth care characteristics like noticing, presence, caring, “being with” and meaning making were consciously and intentionally applied in creating the caring context for the research. As the research focused on the lived experiences of children in child-headed households, the researcher was sensitive to the experiences of grief and poverty that would be exposed during interviews. The careful preparation for the interviews and use of child friendly contexts for conducting the interviews, as described, also allowed for the notion of child participation to be demonstrated through in the research. The capacity to work in the moment, being proactive in preparation for the interviews and the skill demonstrated in the interviews, were reflective of the child and youth care background of the researcher. The fact that the supervisor for this research is a respected child and youth care academic and practitioner, contributed to peer examination during this period of analysis of the research data. The opportunity at this point for questioning and making suggestions was important. This contributed to a more rigorous understanding and application of child and youth care theory and practice.

- According to Krefting (1991:214-222), **applicability** means the degree to which the findings can be applied to other contexts and settings or to other groups. The research has demonstrated the relationship between a uniquely South African child and youth care model and international child and youth care characteristics reflected in theory.
- **Consistency** of data refers to “whether **the findings** would be consistent if the enquiry were replicated with the same subjects or in a similar context” (Guba in Krefting, 1991:216). Whilst the cultural context may bring in interesting variations to consistency in replication internationally, consistency in a South African and even in the broader African context is indicated. In addition, the consistency of the innovative Isibindi Model with the characteristics of a child and youth care approach as reflected in international literature is indicative in the research.
- **Neutrality** refers to the extent to which the study findings are free from bias. Guba (in Krefting, 1991:216-217) proposes that neutrality in qualitative research should consider the neutrality of the data rather than that of the researcher. Triangulation as a criterion can be used to confirm that the research strategy did indeed achieve neutrality. Krefting (1991:219) describes triangulation as the comparison of

multiple perspectives by using different methods of data collection. In the process of data analysis, triangulation was demonstrated by the interviews with both the child and youth care workers and the children, providing the opportunity to compare their different perspectives of their experiences with each other. The examination of the data in relation to international child and youth care literature is also an example triangulation. Here the themes and characteristics of a child and youth care approach in international child and youth care literature were compared with the practice of child and youth care work in South African communities. Reference to recent research undertaken on the Isibindi Model, further contributed to the triangulation process, strengthening this fourth criterion of neutrality.

In applying the above mentioned four criteria and supplementing them with the strategies of credibility, transferability, dependability, and conformability as discussed in paragraph 1.7.4, the integrity of the research findings was ensured.

2.7 ETHICAL CONSIDERATIONS

As indicated in paragraph 1.7.5, the ethical considerations applied as follows in this research project comprised of voluntary participation, informed consent, confidentiality and anonymity, emotional safety, avoiding deceit and management of information.

2.7.1 Voluntary Participation

All the research participants were made aware that the researcher's role was different to that of the position held in the NACCW, and in relation to the Isibindi Model. They were assured that they did not have to participate in the research simply because they were invited to. According to Marshall and Rossman cited by Shaw (2009:46), the implied power relationships from previous or current personal or professional interactions may impact on participant engagement and sharing. The researcher engaged in this manner consciously and carefully to eliminate any sense of power that her position could bring into the decision of individuals to participate in the research. During the course of the study the researcher again engaged with the three child and youth care workers, reaffirming this point. All were happy to be part of the research. As an example of the assertion that the

position held by the researcher did not influence participation in the research, one Isibindi mentor employed at the NACCW selected as a research participant felt free to decline to participate as the time frames were inconvenient for her. She did not compromise her plans to suit the researcher. The children appeared happy to participate in the research.

2.7.2 Informed Consent

Consent forms were signed by all who participated in the research – both children and child and youth care workers (see Appendices Two and Three). In Family One where the child interviewed was sixteen years of age, the child and youth care worker assisted by informing her closest relative about the research, and asked her on behalf of the researcher for permission to interview the family. This was done verbally and followed up with written consent. All the young people interviewed signed the consent form after the researcher explained it carefully, allowing aspects to be translated by the child and youth care worker in developmentally appropriate language. The child and youth care worker who assisted with translations had also signed an oath of confidentiality.

In Family Two which was headed by the elder sibling who is the official foster parent of the children, permission was also sought from him – through the child and youth care worker – for the researcher to visit the family and interview his siblings for the research. He was not present at the first interview, as he was working, but was participated in the second interview. He signed a consent form. Consent forms were also signed by all the child participants, in keeping with a child rights culture inherent in child and youth care practice in the Isibindi Model.

The content of the forms were explained to the child and youth care workers interviewed, and they were given an opportunity to read them and ask questions before they signed them. During the process of the research, the researcher went back to all the participants to verify information gathered and described in the research. At this point, the researcher further assessed their continued willingness to participate in the research. The researcher met the two families for a second time. She also spoke telephonically to the child and youth care workers. Due to the long delays in the research, the initial permission sought from Durban Children's Home (which manages the Isibindi Umbumbulu Project) was re-

negotiated to ensure their commitment to the continuing the research. An updated consent form was signed at this point (see Appendix One).

2.7.3 Confidentiality/anonymity

The credibility of research is indelibly connected with confidentiality. Few research participants are likely to willingly share private information and true feelings in public documents that reveal their identifying details (Tolich & Davidson, 1999:70). According to Streubert Speziale and Carpenter (2007:66) confidentiality and anonymity in qualitative studies can pose some challenges as rich in-depth descriptions, focus group discussions, face-to-face interviews and the natural setting in itself make the identification of participants inevitable. It is also important to maintain the confidentiality of the research participants and change identifying information where necessary – as long as these changes do not distort the authenticity of the research report (Oka & Shaw, 2000:15). Issues of confidentiality and anonymity were addressed by using pseudonyms. In the writing up of the research all participants are referred to by their initials. An oath of confidentiality was signed by the child and youth care worker who was the translator (see Appendix Four). There was no need to change the information provided by the participants to ensure confidentiality, as no identifying information was provided in the interviews.

2.7.4 Emotional safety

Qualitative research creates opportunities to engage research participants emotionally about sensitive topics such as death, abuse or stigma. A researcher with good listening skills may provide research participants with opportunities to express feelings and emotions – demonstrating a resemblance between the research interview and therapeutic interviewing (Oka & Shaw, 2000). This raises the need for self-awareness and the ethical dilemma to be carefully assessed (Oka & Shaw, 2000). As the children interviewed are orphaned, the researcher was extremely careful about ensuring their emotional safety during the interview. The presence of both of their child and youth care workers at the first interview helped manage their memories of a painful history. The child and youth care worker presently working with the children, was also available to assist them after the interview, and later observe and support them if the interviews triggered painful memories

that surfaced later. The support of two familiar child and youth care workers contributed to a secure environment to explore sensitive and painful issues. The present child and youth care worker had an opportunity, through the interviewing process, to learn more about the family history and the children's feelings, and this was an additional benefit to all.

The researcher was very careful to assure all interviewed, that they did not need to share any information at any point in the interview process if they did not want to do so. They also were informed that they could stop the interview at any point, and that there would be no consequence or penalty for doing so. In the second interview with the sixteen year old, she began to cry when she remembered her mother being sick. The researcher immediately stopped the interview and comforted her. Her child and youth care worker who was present and assisting with translations was also supportive. Practical tasks like setting up the food for the picnic at the Botanical Gardens were thereafter engaged in, and she appeared settled and ate well. The rest of the time was spent leisurely at the park until they left to go home. In saying goodbye she hugged the researcher and said 'I love you'. This was interpreted by the researcher to mean that she appreciated the researcher's sensitivity, understanding, caring and the emotional safety created.

The translators used were the present child and youth care worker and the older child, M. Both translators were found satisfactory, especially as they were connected to the children and engaged in the process of the interview. This fitted in with the intimacy of the interviewing process and the sharing of deep and painful information.

2.7.5 Reciprocity

Reciprocity refers to the relationship between the methodology of qualitative research and professional practice. Research involves obligations and responsibilities. Ethical considerations in qualitative research should not be used as an excuse to prevent researchers from publishing research and providing social advocacy and learning if necessary (Oka & Shaw, 2000:16).

Included in the informed consent was the permission for the information from the research study to be available for study and social justice advocacy purposes. There was a general sense of understanding from the children and the child and youth care workers that the research information should be used to promote the interests of children in child-headed

households, the role of child and youth care workers in communities, and the Isibindi Model. In this the African spirit of Ubuntu was demonstrated.

2.7.6 Avoiding deceit

Neuman (2011:149) notes that a fundamental ethical principle is never to coerce anyone into participating in research, and that participation must be voluntary. This issue of voluntary informed consent as described previously in Chapter 1, is critical in protecting research participants from being deceived into participating in research. Neuman (2011:149) cautions that the misleading of research participants can occur through written or verbal communication, the actions of others, or in any aspect of the setting for the research. Taking heed of this caution, the research participants were made aware that the research findings would be shared and published. The informed consent statement signed by research participants reinforced this.

2.7.7 Management of information

According to Holloway and Wheeler (1998: 45-46), the following points are important in the management of information gathered in the research study:

- The tapes, notes and transcripts of recordings should be kept securely locked. The researcher should be the only person who has access to this information.
- Pseudonyms or numbers should be used to ensure anonymity of research participants and no reflection of their real names should be on tapes, notes and transcripts.
- There should be limited access of other people to information of or from participants and their identities should be disguised. If identities are to be made public, participants' permission must be obtained.
- All information gathered in the research process including tape recordings and transcripts of the recordings should be destroyed at the end of the research.

The researcher preserved confidentiality by ensuring that all the tapes were kept in an unidentified container in a private drawer, to which no other persons have access in her personal home. The tapes are identified by pseudonyms. Pseudonyms were also used to protect the identity of the participants in the transcripts and in the report. Upon the

completion of this research study the tapes will be preserved confidentiality until they are destroyed, as will all copies of the transcripts. All research participants were aware that at any point during the study the participants had the right to change their mind and to withdraw consent and discontinue participation.

2.8 CONCLUSION OF THE CHAPTER

In this chapter the researcher's application of the qualitative research process is presented, demonstrating the fit of the methodology and design for the research.

In the next chapter, Chapter 3, the results of the data analysis and the findings from both the children and child and youth care workers, supported by a literature control is presented. The research findings are compared to international literature and the characteristics of a child and youth care approach and themes that emerged are also presented.

CHAPTER 3

RESEARCH FINDINGS AND LITERATURE CONTROL

3.1 INTRODUCTION

In Chapter 1 of this study, the research question, *How do child and youth care workers support child-headed households in the community?* was outlined and the research plan to explore this question was described. The research goal formulated was to develop an in-depth understanding of how child and youth care workers support child-headed households in the community. The research objectives, including task objectives to achieve this goal, included the exploration and the description of the way in which child and youth care workers support child-headed households in the community.

In Chapter 2, the researcher described how the qualitative research approach and methodology was employed to assist in understanding how child and youth care workers support child-headed households in communities affected by poverty and HIV/AIDS in South Africa. The application of the qualitative research approach, including the research design, population and sampling, data collection and fieldwork strategies, method of data analysis, trustworthiness of data and ethical considerations – as implemented during the investigation of the research topic – was discussed.

In this chapter the research findings are presented by providing a biographical profile of the participants and presenting the themes that emerged from the process of data analysis. These themes and quotations from the transcribed interviews are subjected to a literature control.

3.2 BIOGRAPHICAL PROFILE OF PARTICIPANTS

In this research, use was made of two samples from the two interest groups, namely a sample comprising of child and youth care workers and a sample consisting of children from child-headed families who were affected by HIV/AIDS. The researcher selected three child and youth care workers and two families as research participants. Their particulars were as follows:

- Three child and youth care workers were selected to participate in this research. Shaw (2009:44) notes the perspective of Van Manen, that selecting a few participants who are knowledgeable about the experience explored will be more relevant in any study than the selection of many participants who may not have any background information, knowledge, or exposure to the experience explored. The child and youth care workers selected to form part of the sample to participate in this inquiry, were selected because they all had had more than three years experience in community-based child and youth care work. All the workers were deployed in the first Isibindi project piloted in Umbumbulu which came into being in 2000 and had worked together in a team. They had a similar training background in child and youth care work, namely the BQCC (Basic Qualification in Child and Youth Care Work) and later the Qualification in Community Child and Youth Care Work presented by the National Association of Child and Youth Care Work (NACCW). All three child and youth care workers that participated in the research, were females and respectively aged thirty six, thirty seven and forty four years. All of them have children of their own. In addition, all the participants were easily accessible to the researcher.
- The children selected were known to the researcher. More importantly, they had all received services from the child and youth care workers at approximately the same time, in the same community at Umbumbulu. They were also accessible to the researcher. The family interviews resulted in five children altogether participating. Family One consisted of six siblings aged sixteen (female), fourteen (male), ten (male) and seven (female) years old. This included two sets of twins of ten (male) and seven (female) years of age. Only the eldest child (sixteen years old and a female) participated in the study. Family Two, consisted of three children aged ten (female), thirteen (female) and eighteen (male) and one sibling foster parent of twenty (male) years of age. All children in this family participated in the study. All the participants interviewed were part of the Isibindi Project in Umbumbulu in the province of KwaZulu Natal, managed as a community outreach program by Durban Children's Home, a Child and Youth Care Centre.

3.3 THEMES AND LITERATURE CONTROL

In analysing the data collected through semi-structured or guided face-to-face interviews with the child and youth care workers and the young people from the two child-headed households concerned, many of the characteristics of child and youth care approach as described by Garfat and McElwee (2004:15) have shown up as common characteristics in the daily practice of child and youth care work. These general characteristics of a child and youth care approach, although intertwined with them, are to be distinguished from the specific themes and sub-themes identified by means of the participants' story lines as presented during the interviews discussed below. Before focusing on the themes and sub-themes these characteristics are briefly explained as a background to the further discussions. The characteristics underlying child and youth care work include meaning making, engagement and connection, "being with" and "doing with", intentionality and pro-activity in intervention and use of daily life events, respectively entailing the following:

- *Meaning making* in child and youth care work, refers to the value attached to the encounters and connections made within experiences. According to Garfat (as cited in Garfat, 2002):

“[B]oth the child and youth care worker and the youth bring to the interventive interaction, their own way of making sense of that moment and the context within which that moment occurs.”

Peterson (cited in Garfat, 1998:23) refers to this as the “co-created contextual reality within which the intervention occurs”. Meaning making is synergistic in that eventually, the meaning or experience is more than the sum of its discrete parts. It is also synchronistic in that one experience links to another, moment by moment, in the flow of everyday life. Noticing what is happening, being awake to the moments, and present in these moments position one to respond ‘meaningfully’. In addition, meaning making refers to how each of us structures and makes sense of our experiences, so that based on that interpretation, we are influenced to act in a certain manner. We attend to how both we, and others, make meaning so that we might eventually come to a common understanding of

what things mean, aware in the process not only that we are connected, but *how* we are connected (Garfat, 2008b:23).

- Child and youth care work is relational practice (Garfat, 2008b:32) and *engagement and connection*, the foundation for the development of helping and caring relationships, refer not only to doing things with children, but also to letting each other into one another's world with openness and acceptance.
- *Being with*, refers to one's presence and awareness when in the lives of others. One's personal self is, in the moment, alert and awake to the other, impacting profoundly on the other and in the process co-creating a shared relationship (Garfat 2008b:32).
- *Doing with* (Garfat & Fulcher, 2012:12), is an empowering process where one works with others as partners in the process of helping and caring. It is not 'doing to' which indicates an element of power over, or 'doing for' which includes an element of dependence on the part of the child. It is 'doing with', engaging other in the process of doing.
- *Intentionality in intervention* (Garfat & Fulcher, 2012:11), refers to purposeful, focused actions that have been thought through in advance of the intervention and are implemented meaningfully through volition.
- *Proactivity in intervention* (Garfat & McElwee, 2004:15), involves responding before something happens. It includes predicting that something could or would happen in a particular context. In simple terms, it involves intervening before a situation 'demands' intervention, as in the case of a crisis response.
- *Development occurs within the context of daily life events*. It is the minutia of daily events, moment by moment, that provide opportunities for care and connection (Maier, 1987b:131). This is where the essence of child and youth care work and caring emerges.

The above characteristics emerged clearly in the *analysis of the* data obtained in this research. Naming and describing them helped the researcher expose the experiences of the participants and further assisted to find a structure for the data analysis. This structure consisted of the topics identified in the data presented by the participants – having been sorted into themes or categories that emerged from the process of data analysis (cf. Tesch cited in Creswell, 2009:186) that were subjected to a literature control.

A research report can be structured or organized according to meaningful themes that have emerged from the data (Delpont & Fouché, 2005b:354). In qualitative research the text or qualitative information is taken apart, and categories, themes or dimensions of information are identified (Creswell cited by De Vos, 2005:338). In this section the focus is on the themes and sub-themes identified during the data analysis. In human science research, themes are used to mean -

“[S]omething akin to the content, or topic, or statement, of fact, in a piece of data; expressed more simply, what the data segment is about ... a major dimension, major aspect, or constituent of the data studied; expressed more simply, a partial description of the phenomena” (Tesch, quoted in Garfat, 1998:64).

In analyzing the data obtained from the participants, the researcher followed Tesch’s step-by-step guideline (cited in Creswell, 2009:186) by thoroughly reading through all the transcripts and listing the emerging topics or themes. Similar topics were divided into sub-themes and categorized under the relevant themes. In deriving the themes and sub-themes, corresponding data were placed under each category to highlight the themes and sub-themes. In this section the three themes identified and their sub-themes are described by means of verbatim quotations from the participants substantiated with a literature control.

Three themes, namely Care, Ubuntu and Reclaiming, together with sub-themes emerged from the data gathered from participants during the data collection process conducted in this study. These themes with their sub-themes are presented in the following table.

Table 3.1 Themes and sub-themes

Theme	Sub-themes
<i>Care</i>	Demonstrating care in routine chores Demonstrating care in homework supervision Demonstrating care in money management/budgeting Demonstrating care in securing food and cooking Demonstrating care in other daily life events Demonstrating love in care
<i>Ubuntu</i>	Ubuntu is caring about others Ubuntu is going an extra mile for the sake of others Ubuntu implies that “my humanity is bound up in yours” In Ubuntu the solitary human being is a contradiction in terms Ubuntu seeks to work for the common good Ubuntu embraces hospitality and caring A person is a person because of another person
<i>Reclaiming</i>	Reclaiming hopes and dreams Reclaiming a way of life Reclaiming memories Reclaiming the extended family Reclaiming an adult figure Reclaiming a child rights culture

The discussion of the themes that follows focuses on the themes with their accompanying sub-themes identified during the analysis of the data obtained during the semi-structured or guided face-to-face interviews with the child and youth care workers and the young people from the two child-headed households concerned. The information is presented in the form of direct quotations from the interviews with the participants, substantiated and or contrasted and contextualised within the body of knowledge available (i.e. a literature control is conducted).

3.3.1 Theme 1: CARE

The theme of *care* was an important and powerful theme for the children interviewed in the research. In its deconstructed form it is represented in the various characteristics fundamental to a child and youth care approach as articulated by Garfat and McElwee (2004:15) referred to above, such as 'intentionality in action', 'meaning-making' and 'being with people'. But ultimately, as Ricks (1992:49) said, caring is action. Caring involves 'doing', for without the doing, the caring is not manifest. Caring needed to be present, to be manifested, to hold meaning for the children interviewed. Maier (1987c: 86) adds to this understanding, as follows:

“The quality of care is not so much a singular question of how the workers feel about the children as it is how they translate their care into actions.”

This author further asserts that care is a personalized experience. It is a fundamental human desire for intense personal involvement and it is in personalized care that this desire is realized (Maier, 1987a:62).

Austin and Halpin cited in Thumbadoo (2005), explained that a caring person values the other; views the other as a subject not an object; sees the other as needing care; has the energy to care; respects the authenticity of other; sees the caring act as an end in itself; is non-judgmental; assumes that the other can be helped; is available to the other; is not fearful of caring; and is prepared to adapt to the needs of the person being cared for.

In the analysis of the data, the theme *care* appeared as the core experience of the children interviewed. The children simply felt cared for. The child and youth care workers understood the importance of caring for the children in ways that mattered to them individually and as a family. They showed their caring in ways that were thoughtful and meaningful to the children. They infused care into the minutiae of daily tasks (Maier, 1987b:131), into the planned and purposeful tasks, as well as in the “in the moment” tasks. Remarks about care and caring emerged consistently, for example:

Z (a child and youth care worker): *“The basic needs was the food for the children and to teach them the hygiene, cutting of hair and nails and make sure that they go to school with the whole school requirements. I also advocated for them to get school books. And if the child is sick, I have to take them to the clinic, to the doctor*

and make sure they take all the medication. I have to teach the older ones to supervise the medication....”

Z above demonstrates the basic caretaking tasks in a brief summary of her immediate work with the children with focus on the “minutiae” of tasks such as nail cutting. In addition there was the conscious inclusion of teaching and advocacy in the caring. These tasks made the life of the children easier and introduced ‘normality’ in their lives.

In the quotation below S (a child and youth care worker) demonstrates the attention to meaning making that is evident in the thoughtfulness in the selection of bed linen and laundry. In addition she shows how the concrete task of washing duvets became a meaningful activity during the weekend home visit, where the activity was done together with the boys, creating an opportunity for connection and conversation and important information sharing.

S: “When the grant was out and we were doing shopping they choose to have duvet covers instead of the blankets. I thought it was going to be easier for them to take care of their bed linen because the duvet is not heavy like the blanket. So we bought the duvet covers for them and when I am visiting them on the weekend, those are some of the things we used to do together, like doing the blanket and linen washing togetherwe were able to connect about the things and I was able to pick up other issues that were coming up in the family”.

S, the same child and youth care worker, in the quotation below, expresses her thoughtfulness in the planned process, thus empowering the boys with greater independence. Having created an intimacy with them at the beginning of her work with them as reflected in the quote above, she later at the point of disengaging from the family shows how she consciously planned for her disengagement in a step by step, meaningful plan as reflected in the quote below. As Maier (1986a:70) notes, “dependency begets independence”. Ultimately in this quotation S, the child and youth care worker, demonstrates her caring as follows:

S: “Then.... I started to hold myself back a little..... to allow for that independence ... so that they will be able to do things on their own.... After that I used to visit them sometimes not ... everyday I used to visit them on the weekendsto spend more time with them when they were not going to school”.

In the quote below, a young person expresses himself in relation to another child and youth care worker.

M (17years): *“She gave us love. She treat us like his [her] own child. Every day came to visit us. She used bring something [food], even when they have a meeting something that is left she bring it to us. Then we share it as a family.”*

Here M expressed the experience of engagement and connection, one of the practice themes referred to in the child and youth care literature as identified by Garfat (1998). Z, the child and youth care worker, recognized their basic need for food and responded with purposeful, meaningful action (intentionality of action) and this promoted her connection with children. Sharing of food is an act of caring and thoughtfulness. It is made more meaningful when the worker is elsewhere and remembers the children and their need. Maier (1981) notes that children (like human beings everywhere) need to experience that someone thinks about them even when they are not with them. Food at this early stage was used as a point of connection. It must be noted that these children had had experience of extreme poverty and food insecurity, so that food is likely to have a powerful meaning for them.

The sub-themes presented under the theme *care* consist of demonstrating care in routine chores, in homework supervision, in money management/budgeting, in securing food and cooking, in other daily life events, and demonstrating love in care. They demonstrate how the child and youth care workers expressed caring using everyday daily life events.

3.3.1.1 Sub-theme 1.1: Demonstrating care in routine chores

According to Vanderwoerd (1991), “Using the daily routine as the place for treatment has become known as milieu therapy. In this model all parts of daily experience – the physical characteristics of the setting, the furniture, the routines, the people, the food, and so on – become tools for therapy”. Maier (1987b:46) adds to this understanding by referring to rituals and rhythms that carry a “sense of permanency and a promise of predictability....resulting in an experience of mutual unity and interdependence”. The feedback from participants in this research shows that demonstrating care in basic routine tasks did indeed contribute to experiences of mutual unity and interdependency.

MX, a young person, reflected as follows on her experience of the child and youth care support received in the routine chores and the sharing of the burden of care:

R (researcher): “... when Auntie L helped Ma, and when Aunty L helped to look after the small ones, did that help you out?”

MX (young person, age 16): “It helped me because I had time to play.”

In essence, for MX, who was eleven years old at that time, this allowed her the time to ‘be a child’.

L (a child and youth care worker) expressed herself in this regard as follows:

L: “I need to take care of the children but I can’t take care of the children while the mother is ... in the room sick. I need to play with the children but I need them to feel happy about their mother. If they go into the room they found their mother happy.”

MX (the young person) found her mother happy and cared for, and the responsibility of care was lifted from her young shoulders and she could play. She experienced respite because L, the child and youth care worker, understood the importance of family work and made meaning of the reality of this child’s life, as she engaged in planned and purposeful interventions to create developmentally appropriate opportunities for MX. She played with the children, emphasizing her understanding and commitment to this children’s right – ‘the right to play’. According to Article 13 in the United Nations Charter on the Rights of the Child (UN General Assembly: 1989) and Article 12 of the African Charter on the Rights and Welfare of the Child (OAU: 1990), children have a right to play, recreation, leisure, art and cultural activities. In a small but significant way L contributed to upholding this right.

3.3.1.2 Sub-theme 1.2: Demonstrating care in homework supervision

According to Section 137 (2) of the Children’s Act, “supervising adults” such as child and youth care workers are critical role players in the lives of child-headed households (Children’s Act No 38) of 2005 (2006: section 137). The Regulations for this section of the Children’s Act are specific in that the duties of a supervising adult in relation to child-headed households include assisting with the supervision of homework of members of that

household (General Regulations Regarding Children: regulation 50 (c)). Small and Dodge (1988:7) also refer to caretaking tasks including educational support.

The child and youth care workers in this research study were able to individualize the care experience of the children, making these specifically meaningful to them whilst responding to a primary caretaking task, homework supervision. Below, in talking about another daily task, that of execution of homework, S (a child and youth care worker) demonstrated her caring as follows:

S: “I found out that T was in boarding school for slow learners kids when he was still young. Then it was when I started to focus more on his school work, checking how he was doing at school and I found out that he was doing well but he needed someone who is very closer to him and giving him support and reminding him of his school work and homework all the time. Then I was doing that and with the help of the older boy I was encouraging him all the time to check if he got the homework, does [has] he done the homework.”

According to Pikes, Burrell, and Holliday (1998) academic studies are enriched if opportunities are provided that allow learners to feel successful, valued, needed, empowered, and hopeful. The simple homework supervision offered by the child and youth care workers in a caring, personalized context did create the opportunity for a “slow learner” to achieve personal power and confidence.

3.3.1.3 Sub-theme 1.3: Demonstrating care in money management/budgeting

Small and Dodge (1988:7) refer to money management or (budgeting) as a primary caretaking task of child and youth care workers. So the task, budgeting, is a common and deeply important concern when social security grants arrive in the home of children heading households. According to Regulation 50 of the General Regulations Regarding Children made under the Children’s Act 2005 , “supervising adults” such as child and youth care workers should, “(j) ensure proper provision of resources due to that household, if any, in terms of section 137(5)(a) of that Act for that household’s basic need; and (k), ensure, subject to paragraph (j), proper utilization of available resources and adherence to a financial budget” (General Regulations Regarding Children: regulation 50(j)(k)). This

practical, caretaking task was also used by child and youth care worker Z in a manner which reflected emotional presence in caring as follows.

Z: "I was there doing the budget with them. We did the budget with them, we even have a book that we write things to buy, to be bought. We start with the basic needs, something like food, clothing, and we did also buy the things that was not basic to make them happy."

M, the young person (adding): *"There was also a cake, yeh. We bought a Shoprite cake and drinks and a packet of chips. We had it together with Auntie Z."*

In this statement Z, the child and youth care worker, showed that she was 'doing with' (Garfat & Fulcher, 2012:12) the children. She was empowering them through teaching and role modelling. Skills were developed as she helped them to start their budgeting for what were the basic needs. This was a planned, purposeful intervention in which she was sensitive in bringing happiness and joy, even somewhat frivolously, into the important occasion by buying things that were not basic to "make them happy".

Another child and youth care worker, S in the quotation below demonstrates her caring in the budgeting and shopping experience. She shows pro-activity in intervention in that, that preparation was completed before the grant money arrived. Her commitment to child participation and children's rights is reflected throughout this quote below, where she allows the boys to invite her to join them in the shopping. She does not impose herself on them on this special occasion but responds positively when invited. She guides and advises the older boy to allow the younger to participate in decisions about his purchase of clothes. She participated in their moment of celebration as they recalled memories of eating out, and celebrated this occasion of having an income after a long time. She was with them as they 'enjoyed' themselves:

S: "Then when the grant came everything was in place, the budget was done, so all of us were aware of what needs to be done. Then I was expecting them to do their shopping on their own because there was their older brother, hoping they will take the money and go and enjoy themselves but they said they want me to be there when they are going for shopping. Then we went together.....the older one wanted to make choices for the younger one and I was saying no..... let's give him a chance to choose what he wants. Then they went to KFC, sit down at the table and

that was their first experience after their mother past away. And they were choosing what they wanted to eat, then they sat together, they enjoyed themselves”.

3.3.1.4 Sub-theme 1.4: Demonstrating care in securing food and cooking

In terms of Maslow’s (1954) classic hierarchy of human needs (cited in Ainsworth, 1985:62-70), food is a key baseline need to be satisfied for developmental progress or change to begin. In addition, King (2005:73) refers to food being a powerful therapeutic tool that child and youth care workers have at their disposal. Core to services offered to children by child and youth care workers are the activities of securing food and cooking. The caring expressed by the child and youth care workers and experienced by the children is demonstrated below. when participant M, a young person, said the following regarding securing food and cooking:

M: *“They organized some food parcels ... so we get food so that we can eat. The situation started changing because we were able to get food.”*

Z (a child and youth care worker) demonstrated an emphasis on meeting basic needs in a planned and focused practical intervention of accessing food parcels for the family. In the context of this practical caretaking task, Z did much more. She attended to the individuals, made them important, and valued them.

S (another child and youth care worker) also used food to get to know the children and their food preferences, creating some sense of hope about food security. In this, she demonstrated engagement and connection in her caring as follows:

S : *“When they had food, then we sit down and try to get understand each other better now and we started to discuss the menu, how are you cooking, what you love, what you like, what you don’t like ... S was responsible for cooking and he told me that [they] don’t like onions. Then whenever we are doing their meals ... we are not including onions.”*

Cooking is a basic caretaking task but also a caring and nurturing activity. The discussion below demonstrates the transformation of this basic task into a developmental and therapeutic experience for the children.

Z (the child and youth care worker): *“I cook food with them.”*

R: *“You say **with** them?”*

Z: “Yes.”

R: “Explain that. Why do you say **with** them?”

Z: “I, because I have other families that I work with, I wouldn’t be there with [them] all the time. I have to empower them to do things for themselves ... when I was not there. We cook with them.”

Z was “doing-with” the children, treating them as partners and empowering them. Whilst working in the present, she considered the future in a planned intervention, demonstrating intentionality of intervention and pro-activity at the same time. These developmentally appropriate interventions responded to the capacity and need of the boys to learn how cook. Z, the child and youth care worker, demonstrated care in planned interventions by stating the following:

Z): “We used to talk, we used to talk to them, and they were free to talk to me. After that our relationship was built. The kind of foods that [they] were used to eat when the mother was there and I always make that. I cook the food that were cook[ed] by their mother ... when she was alive. And they were happy for that. And they were happy.”

Z showed engagement and connection and demonstrated careful relationship-building and listening skills. Z brought significant meaning to the ordinary child and youth care caretaking task of cooking. She showed meaning making in reclaiming memories, creating comfort food – familiar food, food that the children’s mother had cooked. She brought happiness through cooking.

Reflecting on tips to make a young person feel safe and secure, Garfat and Fulcher (2008) note that it is important to “work out what are the young person’s favourite foods and invite them to help you make that food or prepare other dishes for you or the family so that cooking and being together around the kitchen is ok.”

3.3.1.5 Sub-theme 1.5: Demonstrating care in other daily life events

Phelan cited by Garfat and Fulcher (2012:15) notes that child and youth care workers should arrange experiences for children that promote the possibilities of new beliefs and new experiences. He argues, for example, that someone who has never experienced being cared for may experience this through a learning opportunity and planned experience

arranged by a child and youth care workers. The child and youth care workers quoted below expose this planned caring. It is in these very ordinary encounters with children, that the child and youth care workers, quoted below used the opportunities to build relationships and demonstrate care.

S, the child and youth care worker, demonstrated her care in a planned intervention as follows:

S: "Then on Saturday or Friday afternoon I used to visit the family to check if everything is prepared for church ... their clothes are clean and everything is fine. Then on Monday the first thing I used to discuss with them was how was church and they tell me the story ..."

S talks of basic caretaking tasks in her caring – church clothes to be washed and cleaned. The family needs to be visited on Friday or Saturday, in a planned intervention to assist them to prepare for Sunday. She visited them on Monday to hear their stories and process the experience of church-going with them. Much conscious, planned effort (intentionality of action, doing with) and presence (being with) was put into making the whole experience meaningful to them. S demonstrated many child and youth care characteristics being integrated in this theme of care.

Child and youth care worker L also demonstrated her planned, caring interventions in her therapeutic helping role as is evidenced below:

L: "If you are a child and youth care worker you need to have a plan, you need to have to draw a plan about the family. You need to know where to start, where to end, especially for this family. I know every day in the morning I need to make sure that these children are going to school, clean and look nice and after that I need to cook porridge for the mother in order for her to take her treatment because she cannot take her treatment without having anything she eat on that day. And there is also these young children, these babies who also need food, porridge to take it every day in the morning."

In her initial work with the family, L was committed to bringing in routine and rhythms, in a planned, developmentally appropriate intervention – while being with and doing with the family. The child, MX, in a number of quotes below reflects on how she experienced L's interventions:

MX: *“It is a big difference after Auntie L came because we were able to go back to school so there was lots of change.”*

MX (translated by PM): *“She helped us to go back to school and at the time we were at school, she used to stay here long days looking after my mother and she even prepared something to eat for us, like cooking [for us].”*

MX (translated by PM): *“Auntie Lungi used to talk to us ... checking if we are okay, if we are doing well at school and other things that we need to discuss with her. She tell us that there is no need for us to worry. Things will be okay.”*

MX noted not only the practical support, but the comfort and nurturing offered by L, the child and youth care worker. Not just basic caretaking but therapeutic care (Small & Dodge 1988:7) was demonstrated through engagement and being with the family. Care must be *experienced* by children not just expressed by child and youth care workers (Maier, 1987a:65). All the various characteristics demonstrated by child and youth care worker L were not just understood by MX, but experienced in the helping process. The following quote in the context of MX’s life and reality demonstrated the impact of the child and youth care intervention:

MX: *“I feel okay because she was able to help us and then in the end we were helped.”*

An interesting perspective of Garfat (2012:9), relevant to this section and some of the direct quotations from child and youth care workers and children, is that in the evolution of child and youth care practice a possible rephrasing of the expression of “the use of daily life events”, could be “the entering into, and caring use of, daily life events, as they are occurring, for the therapeutic benefit of the child, youth and family”.

3.3.1.6 Sub-theme 1.6: Demonstrating love in Care

Menninger quoted in Brendtro et al. (1992:48) notes that “Living and loving another human being who returns that love is the most strengthening and salubrious emotional experience in the world”. Smith cited in Garfat and Fulcher (2012:17) claims that “child and youth care work is irredeemably a practical, moral and relational endeavour. As such,

it is fertile ground for the growth of ‘love’”. Care and love intermingles in the expressions of child and youth care encounters described by the research participants.

In the words of the child and youth care worker participant below, the care experienced by the children reflected a fullness and richness in quality – to the extent that it may be called love:

Z: “[I]t is important to take the young ones and take them out, to make them happy, to bring back happiness.”

Z: “I love those children. I love those children, especially [as] that is where I applied my professional child care work.”

These quotations show a focus on happiness – creating joy, bringing happiness into the lives of children – through emotional support, building trust, listening and love. The characteristics of a child and youth care approach were shown in the intentionality of action. Outings were created to reclaim happiness, understanding the need for joy and happiness in the context of the grief and struggle the children had survived. In Z’s (the child and youth care worker) understanding of her caring role, she expressed her love through professional child and youth care work.

The young people participating in the interviews experienced themselves, in the ordinary daily tasks undertaken by the child and youth care workers, as truly “being” cared for. The tasks were integrated skilfully with the characteristics of a child and youth care approach – transforming basic caring tasks into a big experience of care.

They responded with the experience of feeling loved and cared for, as evidenced by the young people below:

M: “She gave the love to the young ones.”

M: “She give us love.”

B: (child age 13) “I learn respect and love that we share with her.”

M: “The child and youth care worker is a very helpful person. I think Auntie Z is a person who loves you the most. She was taking care of us. Ya, she gave us love.”

Thumbadoo (2012:197) notes that there is a co-existence between love and professional child and youth care work. She explains that South African community child and youth care workers get close to the lived experiences of children and share these experiences with them. It is in this context of caring for them that love can be experienced between child and youth care workers and children.

3.3.2 Theme 2: UBUNTU

According to the well known Bishop Desmond Tutu (2000) “Africans have this thing called Ubuntu. It is about the essence of being human, it is part of the gift that Africa will give the world. It embraces hospitality, caring about others, being able to go the extra mile for the sake of others. We believe that a person is a person through another person, that my humanity is caught up, bound up, inextricably, with yours. When I dehumanise you, I inexorably dehumanise myself. The solitary human being is a contradiction in terms and therefore you seek to work for the common good because your humanity comes into its own in belonging.

Ubuntu is about caring. It speaks to caring for others in order to promote interconnectedness and a spirit of belonging. It speaks to walking the extra distance for the sake of others.

According to Panse (2006) “Ubuntu is a traditional African philosophy that offers us an understanding of ourselves in relation with the world. According to Ubuntu, there exists a common bond between us all and it is through this bond, through our interaction with our fellow human beings, that we discover our own human qualities”. This is expressed in isiZulu as ‘Umuntu Ngumuntu Ngabantu’, which means that a person is a person through other persons (Panse, 2006). Words like humanity, hospitality, generosity, caring, common good, belonging and interconnectedness are commonly used to describe Ubuntu. The data obtained during this research has shown the spirit of Ubuntu in the work of the child and youth care workers and reflected in the experiences of the children. Therefore the philosophy or spirit of Ubuntu was identified as a theme consisting of various sub-themes.

In the following direct quotes from L the child and youth care worker, the different components of Ubuntu are shared and described.

- L shares how much consideration and thought she put into her planned interventions with the family, demonstrating the deep connections and commitment in the true spirit of Ubuntu, the walking of the extra mile, in this following quotation:

L: *“I’m always thinking of this family. What could I do? What could I do? That was a question on my mind every day and even in the night... I have found them in step one and now they are in step two and tomorrow I want to make sure that they are going to reach step three”.*

- L is aware of how her work with the family creates the opportunity for them to be “seen” within their own community, opening opportunities for possible networking of community support for the family. When you treat a family with respect and dignity, others, who may not have done the same, are awakened to greater hospitality and caring. In the spirit of belonging and interconnectedness typical of Ubuntu, the following quotation reflects this positive result of her work:

L: *“When I’m working with them, the community the people were starting to see the family now and even the children”*

- L further explains her significance to MX (the young person) in the family. Her caring encourages the sharing of joy and successes for MX, as seen in the following quote:

L *“...at school, if she got a good report the first person she is going to show is me, if she coming home she run to me and say here you are Auntie....”*

- In the following quotation L shows the attempts from MX [the child] to create a sense of belonging for the child and youth care worker within the family.

L: *“ If I was visiting the family and the mother forgot to tell me that on Saturday or Sunday they are going somewhere else and she (MX, the child) says Ma don’t forget to tell Aunty that we are going... she was also trying to make me part of the family”*

The sub-themes presented under the theme *Ubuntu*, refer to Ubuntu as caring about others, going an extra mile for the sake of others, “my humanity is bound up in yours”, the solitary human in Ubuntu being a contradiction in terms, seeking to work for the common good, embracing hospitality and caring, and a person being a person because of another person.

3.3.2.1 Sub-theme 2.1: Ubuntu is caring about others

Inherent to the Ubuntu philosophy is the principle of caring about others (Tutu, 2000). In the quotation below, Z, the child and youth care worker, demonstrates how in caring about others, a sense of connectedness and belonging was created:

Z: “The way when I come to see them, they run and hug me. And they were so happy and it was clear for me to me they need an adult support. Someone who will be taking good care for them.”

Z expressed an energy and vibrancy of engagement and connection in this quotation, as she reflected on the need that the children had for adult support and connection. She understood that the children did not just need love, care and support – they needed a *connection* to an adult, the care of an adult to support them and complete their circle of belonging. That is what she offered to them in the context of their new world without parents, in a child-headed household.

According to Kehoe (2007) the ‘caring’ in Ubuntu refers to extending oneself to others so that there is a symbiotic relationship between your needs, joys and sorrows and those of others. In this understanding of caring, the problems, interests and circumstances of others are given a higher level of attention.

3.3.2.2 Sub-theme 2.2: Ubuntu is going an extra mile for the sake of others

Underlying the Ubuntu philosophy is the principle of going an extra mile for the sake of others (Tutu, 2000). In the words below, Z, the child and youth care worker, explained how, she invested fully in her child and youth care practice. She clearly demonstrated her commitment to walk the extra mile for the children as this is her understanding of the nature of child and youth care work.

Z: “... child and youth care worker is not about any money. It’s a calling. You must be there [with] all of yourself. You must ... tell yourself I am going to be with those children and their needs.”

Integral to one of the child and youth care work characteristic of “being with”, is presence (Fulcher & Garfat, 2008:8). Being present with all of your self is what Z expressed in the above quotation. Kruger (2008) elaborates on this perspective of being present as follows:

“I see relational work mainly as a way of being with youth in the lived experience. We bring ourselves to the moment and relate with youth, family members and other workers. Our goal together is to create as many moments of connection, discovery and empowerment for ourselves with each other”.

3.3.2.3 Sub-theme 2.3: Ubuntu implies that “my humanity is bound up in yours”

Inherent to the Ubuntu philosophy is the principle implying that “my humanity is bound up in yours” (Tutu, 2000). This interconnectedness with another and its impact on one’s personal being is described by S, the child and youth care worker, as follows:

S: “... child care work is building you up, it change you totally, you become a different somebody, you become a different person and you start to feel something to other people and you start to want to see other people going somewhere.”

S reflected on a personal encounter with the child and youth care work characteristic of engagement and connection. She found the experience of helping changing her. This resonates with the Ubuntu theme ‘I am because you are!’ She noted that she changed into a new person as she integrated child and youth care practice deeply within her. She felt different.

L, a child and youth care worker, described below how she first met MX, the young person, demonstrating the spirit of Ubuntu:

L: “... on my way I found a group of young children playing on the road and I go to them and I ask them why are you not going to school during the midday, and a girl in the age of eleven or ten years said that they can’t go school because she is taking care of the her mother who was sick and sleeping in the house, and I ask her that how do you feel if we can go and see your mother in the house? And she said we can go but my mother is very sick.”

L noticed children who were not in school, engaged and connected with them responding to the situation with caring.

S, another child and youth care worker in her personal reflection, supports L above, by indicating that a child on the street who was not going to school actually mattered to her, as S expressed that she understood that the destiny of that child was connected to her. She had

the opportunity in noticing the child to respond in some way. She could turn aside and ignore the situation or do something about it. In caring enough to stop and intervene she demonstrated her commitment to caring for another and the link between her and another.

In a foreword by Archbishop Desmond Tutu to the book *Dignity: In Honor of the Rights of Indigenous People*, he notes that “we are set in a delicate network of interdependence with our fellow human beings and the rest of creation. In Africa the recognition of our interdependence is called Ubuntu. It is the essence of being human. I am human because I belong to the whole, to the community to the tribe, to the nation to the earth. Ubuntu is about wholeness, about compassion for life” Gluckstein (2010).

3.3.2.4 Sub-theme 2.4: In Ubuntu the solitary human being is a contradiction in terms

Inherent in the spirit of Ubuntu is the principle that the solitary human being is a contradiction in terms (Tutu, 2000). Therefore, a supportive network of friends, neighbours and relatives is required:

S (child and youth care worker): *“There was a neighbour who lived across there who was a good friend of the mother who used to give them something to cook. The class teacher was already supporting them, buying some groceries for them and I tried to strengthen that relationship and try to explain to the class teacher on ... the situation ... at home.”*

Here S demonstrated intentionality of action (Garfat & Fulcher, 2012:11) as she consciously strengthened a supportive community member’s connectedness with this family and ensured that they continued to provide for a basic family need. S was actively involved in broadening the understanding of the teacher on the circumstances of the children, interpreting the real situation of these children. In addition, she demonstrated the child and youth care characteristic of engagement and connection with the social network of the children, using these characteristics to integrate the community members into the lives of the children.

Garfat and Fulcher (2012) have described memory boxes as a designated container or place where personal mementos, treasures and trivia can be saved. Without a memory box, it is

easy for these special photos, trinkets and objects of importance to become lost. Memory boxes are made with children affected by HIV/AIDS in the Isibindi model and these boxes hold different items of meaning to children such as recipe books that belonged to their mothers, bank cards, mother's old spectacles, and family photographs (Direko, cited in describing the Isibindi Model (NACCW:2011a).

S, a child and youth care worker explained as follows how, in looking through the photos in the memory box with the children she was able to understand their history better and used it in a networking activity:

S: "I was trying to encourage them to talk to me more about their family and ... I saw the picture where they were all going to church with their mother and their mother was wearing a church uniform and then I asked about the church, if they were still going to church. They said they are not going to church because the church moved from the community ... so that was not easy for them because there was no income. Then I went to the nearest church, the same church and I introduced the family. Fortunately the church members and the pastor's wife knew the family before then. They welcomed the family and organized a food parcel for the family."

In an effort to connect and engage with the family better through looking at photographs with them, S followed the thread of meaning making with the boys – mother in church uniform; strong Christian background; children went to church – and discussed the reasons for them then not attending church. Through looking at photographs, S reunited another important social network with this family. Again, S demonstrated intentionality of action as she purposefully engaged and connected with a social network in order to reintegrate the family into the community – to claim a way of being with the community again. S also showed support for a needs-based intervention as a food parcel for the family was obtained.

Some other important elements of this process from S, the child and youth care worker can be seen in the following comment:

S: "... I started by checking their feelings. How did they feel when they used to go to church with their mother ... mother was cook for the whole family before they go to church, then they come back home and then they have their lunch after church. So

it was a good experience. They were saying that it was a good experience for them ... they go to Sunday school in the morning. They were learning a lot ... then I check with them if they want to go back and experience that again ... that their mother would be happy to hear that they were still going to church.”

S assessed the children’s willingness to go back to church, engaging in a process of child participation in age appropriate decision making. S followed this through with connecting a new social network to the family. There was, in this, a reclaiming of the social structure around the family – the spirit of Ubuntu was encouraged

3.3.2.5 Sub-theme 2.5: Ubuntu seeks to work for the common good

Built into the Ubuntu philosophy is the principle of seeking to work for the common good (Tutu, 2000). In terms of this principle, neighbours, school teachers, the church and traditional leaders were all important in the fabric of the children’s social and community life. Z, the child and youth care worker, summarized this perspective as follows:

Z: “It is very important when you are a child and youth care worker, a community child and youth care worker, to introduce yourself to the stakeholders, the councillor, the induna or inkosi, and you must go to the school and introduce yourself to the school principal because most the families we work with, there is no income, the school principals must be aware of them, that they are were unable to pay school fees. Sometimes children [are] shy to tell the teachers their stories, that they suffering, struggling at home. It is important to talk to all the people around them.”

Z, the child and youth care worker, was purposeful and intentional in engaging and connecting with community stakeholders to create a fertile context for advocacy and working for the common good. Z transferred her child and youth care skills to the community network, creating a web of awareness around the suffering of children in child-headed households.

Hailey (2008) explains that Ubuntu assists us value our own identity through a relationship with the community. Our “fullness of being” is developed through our relatedness and relationship with others. He refers to a web of reciprocal relationships in which subject and

object become indistinguishable, and in which the Western aphorism “I think, therefore I am” is substituted for “I participate, therefore I am” (Shutte cited in Hailey, 2008).

3.3.2.6 Sub-theme 2.6: Ubuntu embraces hospitality and caring

Fundamental to the Ubuntu philosophy is the principle of embracing hospitality and caring (Tutu, 2000). Neighbours are important support systems for child-headed households. They often apply this principle in ensuring that they share food and give other support to children, despite their own personal difficulties. Z, the child and youth care worker, understood this effort and helped the children to recognize the spirit of Ubuntu in this. She personally responded to the neighbours, affirming their caring and teaching the children how to respond appropriately to this hospitality and caring. In this careful intervention, Z ensured ongoing support from the neighbours, and entrenched an understanding of hospitality, caring and going an extra mile – so that they too would demonstrate this to others in the course of their own lives. This work is an example of keeping the spirit of Ubuntu alive in children. Z expressed it as follows:

Z: “After they told me that there was neighbours who were helping them during the crisis, I went to thank those neighbours, I went to thank them.”

This is supported by M, a young person, who said the following:

M: “Auntie Z said we must thank those who were helping us before the grant came and we did. Auntie Z took us to the family who was helping us ... we go there and sit down with them and we thank them for what they a did to us.”

M: “She said that we must never forget that family, their input.”

Z demonstrated the child and youth care work characteristic of “doing with” in this purposeful intervention. Z also demonstrated pro-activity in an intervention as the relationship between these neighbours and the family was strengthened. The neighbours would always be available to assist the family in any new crisis.

It was equally important to understand the reality of the child destined to head a household in the context of the concept of Ubuntu. It was expected by K’s mother that K (a young person) would care for the family when she died, although he was still young. K, the head of the household, reflected on life before Z, the child and youth care worker, came into his

life. Here the responsibility of the burden of care was painfully expressed. Z assisted him to cope with this burden. K expressed himself as follows in this regard:

K (youth, aged 20): *“I was trying to trying to raise my siblings. My mother told me I must give them love if she die because by that time she knows that one of the days she can die. I am the only one she was trust by the time. It gave me a big responsibility”.*

“. . . It was hard, very hard because I was young (17 years at that time). I know nothing about how to raise my siblings. I was too much young. But now I have a clue how to raise my siblings because Auntie Z told me how to get rid of the problems. When there was the problem of no food at home, I go to my room and cry. I cry and cry. I know nothing about housework and [how to] go to find work.”

Accepting a mother’s dying wish is a big responsibility to a child who becomes a parent to his siblings – taking on the burden of care without the parenting skills to keep the family together. Auntie Z, the child and youth care worker, helped him by responding practically with caretaking tasks and in developing family routines:

Z: *“The basic need was ... food ... hygiene ... school requirements ... to take them to the clinic ... make sure they take medication ... teach the older ones to supervise the medication ...”*

Z: *“I talk with them ... and helping them with homework and the, the house chores ... we did the routines.”*

R: *“Tell me more about routines?”*

Z: *“It is the wake up time ... and the time for breakfast and ... time for them to go to school.”*

R: *“Tell me more about routines, why do you think it was important for this family?”*

Z: *“It was important because there was no older person with the children. Even K the head was still young. He was also need to be wake up in the morning.”*

The above quotations showed Z, the child and youth care worker dealing with the basic needs of the family to make life manageable for all, including K, the child heading the

household. She explained that she organized food parcels, attended to school expectations, hygiene and health needs, and assisted with household chores. She then created a predictable pattern, a routine which brought a rhythm to their worlds again. In it all there was again purposeful intervention.

Hailey (2008) quotes Beuster and Schwar on the importance of Ubuntu in providing cultural-congruent care in the South African context. Relevant to the quotations above, they refer particularly to the elements of Ubuntu that encourage greater sensitivity to the needs and wants of others. According to Richter (2006), empathetic care requires one to see the child as a fellow human being, with the same needs for security, love, approval, and respect as we all have. This is when a deeper and more sustainable basis for care is possible.

3.3.2.7 Sub-theme 2.7: A person is a person because of another person

Intrinsic to the Ubuntu philosophy is the principle of a person being a person because of another person (Tutu, 2000). The recognition of belonging, interdependence and a shared humanity was understood by M, the young person. He recognized the impact of Z, the child and youth care worker, on who they *are*, not just in relation to what she did for them, as follows:

M: *“And other thing she used to share with us ... we must respect everyone then we will grow. She treats us with respect.”*

In the child and youth care work characteristics demonstrated, Z was “being with” the children with respect. Not only did she teach them to respect others, she helped them understand that they would grow by respecting others. But she went further, and ensured that she role modelled respect when being with them. She, the child and youth care worker respected them. M, the young person, and the family experienced that they are now who they are because of Z, as expressed by M

M: *“I think we are because of him [her].”*

Rukuni (2007:72) notes that each one of us is the product of the people who shaped our lives. To be human we need these relationships with other human beings. Community child

and youth care workers are demonstrating that they are shaping the lives of children by their presence in children's lives as reflected in the quotes above.

3.3.3 Theme 3: RECLAIMING

According to Brendtro et al., (1992:3) a reclaiming environment is one that creates change that meets the needs of both the young person and society. They add that to reclaim, is to recover and redeem, to restore value to something that has been devalued and includes features such as belonging, mastery, independence, and generosity. Therefore, for the purpose of this research, reclaiming refers to creating contexts and opportunities that contribute to the 'making whole' of the shattered and diminished parts of children's lives. Reclaiming refers to the restoration of what has been lost but also to reconstructing that that has been lost for a changed reality.

In practical terms, the effects of devaluation, and the need for reclaiming play an important role in the lives of the children assisted by child and youth care workers and the assistance rendered to them. Devaluing, in the context of HIV/AIDS links to the stigma attached to HIV/AIDS experienced by children in child-headed households. Orphans in these circumstances also often struggle to access social grants, and are less likely to live in formal dwellings or have access to adequate sanitation and water (Meintjies et al., 2009). This further devalues their status. The child and youth care workers were actively assisting in reclaiming a world for the children – physically, emotionally, intellectually, socially, and spiritually.

In South African communities often neighbours take on the responsibility of supporting children without parents (Save the Children's Fund.2003:15). This is oftentimes a challenge as they themselves are frequently struggling in their own contexts of poverty. They feel the burden of supporting destitute children from child-headed households. S, the child and youth care worker, in the following quotation, shows how she reclaimed the dignity of the children and reconstructed their relationship with neighbours, strengthened their dignity in school, as it used to be in the past when they were an upstanding family in the community:

S: "Yes, they are coping very well with the neighbours, especially with the neighbours because they were well known in the community.....now having a

grant, going to school, looking like all other children, attending the outings and excursion of school they can go together with other children, it is very good, it is feeling very good for me. They are like any other children and even the community are not looking at them like [and] saying what do they want now? but have accepted them now as all other children in the community and as children [that] can manage and take care of themselves”.

With the same family, S demonstrated how in the process of connecting with the children through looking at family photographs, she was able to construct a memory box with them and in the process identify the family history of churchgoing. She was thereafter able to reconnect the children to the church that their mother used to attend as a Mother’s Union member. There is ‘reclaiming’ in this example of memories:

S (child and youth care worker): *“So I used to watch [look at] the pictures with them, to do the memory box with them and we used to have the memory box, we used to look at their album and I can say that the family was [a] very well organised family before... because as I said before there was the furniture and there were the family albums where they were keeping the family pictures.... when we were watching[looking at] the pictures, I was trying to encourage them to talk to me more about the family and one of the days I saw the picture where they were all going to church with their mother and their mother was wearing a church uniform.”*

And there is reclaiming of community as described below:

S: *“Then I went to the same church, then I introduce the family. Fortunately the church members and the pastor’s wife knew the family before and they welcomed the family and organised a food parcel for the family.”*

The sub-themes presented under the theme reclaiming refer to reclaiming hopes and dreams, a way of life, memories, the extended family, a consistent adult figure, and a child rights culture.

3.3.3.1 Sub-theme 3.1: Reclaiming hopes and dreams

Hobbs (1994:285) talks about healing being connected with happiness and joy. He notes that happiness and joy are therapeutic for children. Intrinsic to happiness and joy are emotions of hope and dreaming. The quotations from participants below reflect that emotional connections with others revive personal visions and goals – even in the context of basic survival being compromised.

Participants indirectly expressed their need for reclaiming their hopes and dreams. What was an ordinary childhood changed completely when M's parents died. M, the young person, identified the role that Z, the child and youth care worker, played in reclaiming a childhood that held again the promise of hope and dreams:

M: *“When Auntie Z came things changed. I started dreaming my dreams again because she said this is not the end of the world. There are so many children around us and she quoted some examples then I could see that I – my situation – is maybe better than others. Then I think I feel very good when Auntie came. Ya, I started dreaming my dreams.”*

Z, the child care worker, in developmentally appropriate interventions, built hope, ambition, self-esteem and positive self attitudes by providing guidance and engaging in discussion with the children about their thoughts and feelings about the future. Through intentional action, Z created a sense of future and M and B (another young person) shared their understanding of this as follows:

Z: *“Yes, we most of the time we talk about the future plans, we talking about the future plan and that is where it come out what they want to do.”*

M: *“... she motivates us with our ambitions and we started growing again when auntie came. Ya.”*

M: *“I think the most important thing is respect ... live dreaming out dreams.”*

B: *“The important thing that [she] taught us is to choose our careers ...”*

M (translating for B): *“... we see that we have lot things, we have big things waiting for us.”*

M: “... *I can face any situation and I will overcome in life now.*”

These quotations show the reclaiming of hope and meaning experienced by the children when Z engaged and connected with them about the future, about personal ambitions and about careers. Z, the child care worker helped them reclaim their sense of hope and a sense of future. Z was ‘being with’ them as she focused her interventions on the present, recognizing that the older children particularly needed to have a sense of personal future. She worked purposefully with them, engaging with them on the reality on their situation, which was similar to many others in the community and brought some sense of normality to their situation. She created the context for them to explore their hopes and dreams with her and the rest of the family. These quotations also show that Z built resilience through reclaiming dreams. Allsopp and Thumbadoo (2002:20) note that the child and youth care workers in communities embrace children and youth in the African spirit of Ubuntu, and inspire hope.

3.3.3.2 Sub-theme 3.2: Reclaiming a way of life

Often the way of life experienced before parents died is lost as children wander around aimlessly in the neighbourhood searching for food and comfort from others (*Impact on children....* s.a.). This was the situation of one of the child headed-households. Z, the child care worker and M, the young person demonstrated their understanding of this situation as follows:

Z: “*They were not begging to other families by the time the father was there. He was a very supportive [materially providing] man.*”

M: “*When our parents were with us we were very warm, big family. It was very nice. When my father got paid we used to go with my mother for shopping and food there was always there. We were nothing short, we don’t have, nothing short. She [mother] used to cook for us and for my father and bring food with a tray.*”

Restoring value to family rituals and traditions reclaims family dignity and a renewed sense of belonging. This family lived with dignity, with food provided by a father and cooked by a mother. This was their way of life. Z, the child and youth care worker, recognized that this family history presented serious conflict in relation to their present

situation of begging and borrowing. Z's focus on food security not only attended to meet a basic need, but also helped to reclaim their way of being as a family. According to Rukuni (2007:13) "we must go back and reclaim our past so that we can move forward; so that we understand why and how we came to be who we are today". Z wove her response as follows to the practical physical need of food into the psychological and social need of restoring family dignity:

Z: "... it was not easy because they have nothing, there was no income in the family ... the project give me the food parcels. Because the children ... most of the time they were not in their homes, they went to visit their friends so that they can get something to eat. Eh, when I was there I tried my whole best to change that ... because the food was there in the family."

Here Z, the child and youth care worker, showed that the planned intervention of ensuring food security would result in a proactive management of the children. Food at home would keep the children at home with no need to go to neighbours. This unsupervised habit of visiting neighbours by the young girls was risky and not in keeping with the previous lifestyle of this family. Thus, this intervention not only reclaimed a sense of family respect, but also enhanced the safety of the children

3.3.3.3 Sub-theme 3.3: Reclaiming memories

The basic caretaking task of cooking food for children was one of the powerful opportunities used by the child and youth care workers to reclaim a sense of belonging, teach skills, create independence and promote sharing. The child and youth care workers interviewed also demonstrated how cooking and food were used to reclaim memories. S, the child and youth care worker, in the following quote shared her perspective on this:

S: "They used to talk about the food their mother used to cook ... everything was there. There were big pots and they used to tell me that their mother was cooking the steam bread for them. Because there was the electric stove in the house so there were baking pans and big pots that their mother used to use when she was cooking the steam bread for them and samp. They like samp because their mother used to cook samp when they are at school and when they came back there is food prepared at home. Then we [I] started to teach them and the older one told me that I

don't think I will be able to do it, to do that. Then we were doing it together and also teaching them how to save food ...”

S noticed that the mother's utensils showed her capacity to cook specific meals like samp and steamed bread. So S taught the children how to cook meals that were previously prepared by their mother, demonstrating intentionality of action (teaching cooking skills, reclaiming memories) and pro-activity of intervention (creating independence), whilst “doing with” them.

Z, another child and youth care worker, reclaimed memories while teaching skills and building her relationship with the children in the process. M, the young person, described Z's intervention in this regard as follows:

M: *“Aunty Z used to cook dumplings and steam bread and also beans and she showed us how to cook beans, especially [also] cake. It was great because we want to learn how to cook food, so that there are no foods we are not cooking. [We] cook all the food like our mother was cooking.”*

R: *“Tell me what are foods that you cook now that Auntie Z is not there that she taught you that is connected to your Ma.”*

M: *“Dumplings and beans and also vetkoek. “*

Z: *“And who makes it now, who is the cook of vetkoek in the house?”*

M: *“K, yes K (young person heading the household) is making vetkoek now.”*

With intention, Z engaged the children in discussions about their mother's cooking – then taught them to cook the foods mentioned – thus indelibly linking the present and future experience of cooking with the sense and memory of their mother.

Morgan (2004) used the term *memory work* and defined it as “the deliberate setting up of a safe space in which to contain the telling of a life story. This space might be a room, the shade under a tree, a drawing or a map, or a memory box, basket or book”. In the quotations above the safe space created by the child and youth care workers is in the kitchen and the joint cooking experience that allows for conversations of memories of food, eating and cooking. In therapeutic contexts Morgan (2004) notes that memory work straddles the past, present and future. Again, in the example of cooking, the child and

youth care workers are able to recall memories and experiences of food and mealtimes in the past and create similar experiences in the present and also develop the opportunities for transitioning of these reclaimed memories into the future, through, for example developing recipe books. Morgan (2004) makes an apt statement in this regard by stating that - “memory work is like a rear-view mirror in a car that is going forward”. Reclaiming memories allows for the intermingling of past, present and future. Memories of the past are present in the activities of the moment unblocking and creating a way forward in the future.

3.3.3.4 Sub-theme 3.4: Reclaiming the extended family

Extended family members are not always available to support and care for the children whose parents are sick or have died. The child and youth care worker, in holding family conferences with the extended family members, purposefully worked towards reclaiming the extended family for the children in these child-headed households. In the following quotation, MX, a young person, noted the lack of extended family support when her mother was sick and the role of L, the child and youth care worker:

MX (translated by PM): *“She was taking my mum to the clinic and she was also the one who was doing all the things that my mum used to do because ... all the relatives didn’t give us support when my mum was sick.”*

MX referred to the support offered by L to her mother and the different caretaking tasks. L provided a caring adult who assisted M with the caretaking responsibilities. L knew that she had to care for mother and the children to relieve MX of responsibilities.

MX in the following quotation reflected on the difficult times when she was alone and lonely. She did not know exactly what happened, but saw the change and the presence of the extended family in their lives as a result of something that L, the child and youth care worker had done:

MX (translated by PM): *“She’s feeling sad because she is thinking about the hard time she go through ... and she is thinking about the family members who is left them and she doesn’t know what is the reason that the family left them and not be attached with them.”*

MX: *“There is something that she did although I can't remember what she did, because of her our family is now together.”*

L, the child and youth care worker, described some of the things she did to bring the extended family closer to the family as follows:

L: *“I do a family conference and try [to] bring the family together because they have their extended family members and they were there but they did not helping them they did not come close ... and I try to talk her [the mother] to choose another family ...”*

L organized a family conference involving the different members of the extended family with the children’s mother before she died – to discuss their commitment to the children after the mother’s death. In this, L demonstrated a conscious inclusion of the extended family members in the preparation for the future of the family. She started the process of reintegrating the extended family members into the family. L demonstrated pro-activity in her interventions as the children’s mother was very sick, making succession planning critical. M does not know what L did, but it was “because of her” that the family reunited.

Historically, according to Rukuni (2007:152) the African society was built around family, extended family, neighbours, friends and the village community at local level. He points out that colonization and Westernization have shifted these responsibilities and accountability from family and community to the state, local government and non-government institutions. Reclaiming family is important. According to Rukuni (2007:72) the family creates the individual and the individual creates the family. This co-creation process is central to the African tradition of Ubuntu. Relationships with others and in the family context, can impact on one as one grows into young adulthood. The individual has the opportunity to shape families and their fortunes. L, the child and youth care worker, in the quotation above was able to respond to this African philosophy and re-establish family connections, reclaim family histories for the children and support the traditional understanding of co-creation between children and families.

3.3.3.5 Sub-theme 3.5: Reclaiming an adult figure

Although child-headed households as a form of family care are recognized in South Africa, the Act stipulates that each household must function under the supervision of an adult that has been designated to the family (Children's Act (Act No 38) of 2005 (2010: 137(2)).

According to Allsopp and Thumbadoo (2002) "...community child and youth care workers take basic child care services to the homes of such families and often provide the only adult support in child-headed households. They are also responsible for networking basic resources and service to families like health care, access to documents, funeral arrangements, spiritual support and grief work, income generating projects, admission and attendance at schools, housing and food security, advocacy and legal support".

MX, the young person, in the quotations below describes her life before the child and youth care worker L came to assist them in their home:

MX (translated by PM): *"Before auntie L came we were staying with our mother. The [at that] time we were not schooling and Aunty L... she was one took us to school."*

MX (translated by PM): *"Actually it was very bad because you [we] were not schooling then we have to look after the children while our mother was sick."*

MX (translated by PM): *"We were doing cooking and cleaning... watching the baby... watching the mother. [we were] doing everything, all the housework."*

MX (translated by PM): *"We didn't go to school because we wanted to take good care of our mother because we thought if we go to school [who] will take care of our mother?"*

MX (translated by PM): *"...if Aunty L not aroundwouldn't stay in this house, and [no] schooling..., lots of things wouldn't be there. nobody to support and take care of them and it's important to have child and youth care workers because it would[not] be easy to do it but because of them you get support and be able to do it."*

L describes some of the tasks that she undertakes as a child and youth care worker in this family to assist them in the context of being the only adult in their home, their mother,

being very sick with diminished capacity to fulfil her parental responsibilities as described above by MX:

L: “I visit them, I visit the family early in the morning to help these children who are going to school and to cook porridge for the younger ones and the mother and to make sure that the mother is taking her TB treatment... in some days the mother does not take her treatment because it was no food to eat. We get food parcels that we give to this family so that they would be enough of them, for the mother to eat and to children.... I need to visit the family in the morning and in the afternoon when these children are coming back to school. I need to give them to support on this [home]work because they had a period of about two weeks did not go to school. I need to help them with their schoolwork so that they might by the end of ...could pass and helping them on washing this uniforms, sometimes we need to have sew their school uniforms.... we advocate... and we get some donations... school trousers and books for these children...”.

Allsopp and Thumbadoo (2002:20) note that “Child and youth care workers are able almost effortlessly to take on and give expression to the responsibility for the other within the context of a professional relationship”. They further add that in the community child and youth care workers children “have adults in their life-space whose lives and behaviour embodies tenacity in the face of hardship and distress” (Allsopp and Thumbadoo, 2002:20).

3.3.3.6 Sub-theme 3.6: Reclaiming a child rights culture

In promoting and upholding a child rights culture, child and youth care workers are significant adults in the lives of children. They have a critical role to play in restoring and reconstructing contexts for the understanding and advocating of children’s rights.

An example of reclaiming and entrenching a child rights culture is the following:

Z (child and youth care worker): “He acts like the father to the family, I say that because the other day, I caught him hitting the child. I asked him why he hit the child. He said I must hit her so that she can learn. I try to teach her she must not go up and down to the other families because now we have food and everything we need ... there is no need for them to go out.”

Z: "... I had the discussions with them about the children's rights. No more abuse in that family."

The above quotations relate to the child heading the family, K, (the young person) inappropriately trying to contain the new habit developed by his siblings of wandering to neighbour's homes. He wanted to reclaim a pattern that existed in the home when his father was alive. Z, the child and youth care worker, noticed his inappropriate behaviour management skills, understood the good intentions behind his behaviour and assisted him to cope with his role in managing behaviour. In this she demonstrated interventions focused on the present, responded to all the children involved, focused on the context of the situation and provided a meaningful intervention within a child rights perspective. Anglin (1992), stresses the need for 'personal' or 'individual' advocacy from all child and youth care workers. He purports that every interaction child and youth care workers have with a child, is an opportunity for advocacy – in this instance demonstrated by Z, the child and youth care worker.

K expressed his understanding of Z's support and advice from a child rights perspective which reinforced his developing behaviour management skills, as follows:

K (young person): "By this time I used to discipline them when they are lying around and coming late at home and Auntie Z came to me and told me that we must not hit them because there is now a new government, we have the right go anywhere and come in. We must talk to each other so that we can understand each other."

The following quotation demonstrates how Z, the child and youth care worker, taught a participatory approach to decision making, transcending age and gender. A fundamental understanding of a child rights approach was demonstrated.

Z: "... and when they [the older boys] do the budget they involve them [the younger girls]. I teach them that... they must always they all sit together when they are doing the budget, they mustn't left the young ones. The must ... because sometimes they won't know what they [the young ones] want. That's why I told them it is important when they do the list of the things that they want, they must involve the young ones. It's important."

Here Z, in an ordinary daily task of money management and budgeting, promoted a child rights framework around a daily living experience of this child-headed family. Z reinforced the right for all to participate in family decision making with no discrimination in relation to age and sex. Anglin (1992) stresses the fact the children and youth need to find their voices to become true and effective voices for themselves. Z, the child and youth care worker recognised the power dynamics in decision-making about money and the potential gender discrimination pervasive in South African society. The protection of the voice of the younger children was important to Z. She taught the boys to respect and protect the rights of women and children in such interventions with clear intentionality of action. The girls learned that they do have rights, and Z protected them and created the structure (the family meeting) for them to experience their right to participation. This pro-activity in intervention taught them not just what to do, but how to do it, responding to the notion that “children have a right to participate as full members of the life world-the situation-that they are in at that moment. They are not adults in training but people who are able to form and express opinions, to participate in decisions making processes and to influence processes” (*Including Children ...*, 2009:11).

There were far-reaching effects from this lesson, as verified by M, a young person, in the following quotation:

M: *“Auntie Z told us it is very important to involve the girls when we are doing family discussions because we are family, we must work as one. So when we are discussing family matters we do involve them and ask their opinions. What they are thinking and we take a decision together”*.

The development of children in this regard is described as follows: “Children grow in the ability to be responsible when they have opportunities to participate and to learn responsibility by practicing it. They grow more responsive, able, caring, alert, trustworthy and capacitated” (*Including Children ...*, 2009:11). Z’s purposeful interventions ensured that the family was committed to taking decisions together. Her pro-active interventions contributed to the creation of a child rights context within which this family could operate.

3.4 CONCLUSION OF THE CHAPTER

In the analysis of the data obtained from the participants, three major themes of practice emerged, namely Care, Ubuntu and reclaiming. The characteristics of a child and youth care approach as identified by Garfat and McElwee (2004:15) and Garfat and Fulcher (2012:8-19) were reflected in these themes of practice. The key characteristics noted include meaning making, use of daily life events to facilitate change, 'being with' and 'doing with', caring and love, pro-activity in intervention, purposeful use of activities, being emotionally present, intentionality, connection and engagement. The literature control has demonstrated that the child and youth care practice as reflected by the research participants indicate important connections, not only to international child and youth care literature, but to international indigenous practices (reclaiming/restorative practices) and the uniquely African indigenous philosophy (Ubuntu). The emerging theme of children's rights was also evident in the analysis of the data.

The evidence and literature from this chapter will be developed further in the next chapter, Chapter 4, with in-depth discussions resulting in the research conclusions and recommendations.

CHAPTER 4

SUMMARY, CONCLUSION AND RECOMMENDATIONS

4.1 INTRODUCTION

The introductory chapter of this research report describes the research problem, namely the need to obtain preliminary information about the ways in which child and youth care workers support child-headed households in communities. The chapter further outlines, the theoretical approach to the study and the research methodology selected for the study. The following chapter portrays the application of the research methodology in the study. Chapter 3 constituted a presentation of the data analysis and the findings from the data obtained from both the children and child and youth care workers participating in the study, under the themes of *Care, Ubuntu and Reclaiming*.

This final chapter of the research report firstly contains the summary and conclusions that the researcher arrived at during the research process, which are based on the qualitative research process, the research findings resulting from the research endeavour, and general aspects of South African child and youth care work identified in the research. The meaning of the research findings is synthesized with a study of child and youth care literature. The summary and conclusions are followed up by appropriate recommendations. The chapter is structured to include an introduction, the summary and conclusions, the recommendations made and a conclusion of the chapter.

4.2 SUMMARY AND CONCLUSIONS

In this section of the chapter, the research process, the research findings and general aspects of South African child and youth care work are presented in summarised form, together with the conclusions that were made regarding the research process.

4.2.1 The qualitative research process

The qualitative research process as conducted in this research study is briefly reviewed in terms of addressing the research problem, the design of the study, the research method,

ethical considerations, and the limitations of the qualitative research process. The conclusions made in this regard are integrated in this presentation.

4.2.1.1 Addressing the research problem

In addressing the research problem, clarity was reached regarding the research question, research goal and research objectives.

Research question:

The research question formulated for this study was: How do child and youth care workers support child-headed households in the community? The question focuses on the experiences of the children in South African child-headed households in the context of HIV/AIDs and poverty. The exploration of the interactions between children and child and youth care workers within a specific model of intervention (Isibindi) provided the opportunity for the experiences of the children to be explored in relation to the experiences of the child and youth care worker. The research question provided the necessary focus and boundary to the research process while allowing for feedback of depth from participants. The researcher has reached the conclusion that the research question formulated at the beginning of the process was clear, and that it provided direction in terms of participant selection and the focus of interviews.

Research goal:

This research aimed to develop an in-depth understanding of how child and youth care workers support children in child-headed households in communities. It is concluded that the research goal has been achieved. The research evidence obtained from the participants, categorized in the themes and sub-themes, has provided unique information as to “how” the children were supported by the child and youth care workers. This has resulted in a greater understanding of the nature of the support from the child and youth care workers and its meaning to the children. Not only has the research goal been met, but, importantly, the findings of the study have opened the possibility for further research to more fully

appreciate the support provided by child and youth care workers to children living in difficult circumstances in communities.

Research objectives:

The research objectives identified the steps taken by the researcher to achieve the research goal. The limited sample allowed for in-depth exploration in the interviewing process. The richness of information obtained from the participants, posed challenges for the structuring of the analysis of the data. This provided long moments of critical self-reflection on the part of the researcher and redesign. The appropriate understanding and application of emerging theories (see Schostak, 2008) allowed for the restructuring of analysis of data, resulting in a clear description of the results. The researcher therefore concludes that the research objectives were successfully applied to achieve the research goal.

4.2.1.2 Design of the study

The researcher concluded that the framework developed for the implementation of the research undertaken was applicable since the design of the study was explorative, descriptive and contextual in nature. This was appropriate in that the research question focussed on exploration of a topic about which little information and knowledge existed. The study did indeed result in relevant and important information about the support rendered to children in child-headed households by child and youth care workers being recorded. The voices of the research participants, children and adults have been heard and used to describe their individual and joint experiences with interesting accuracy as is typical of a descriptive strategy of inquiry. The contextual reality of the research participants was key in the research undertaken. The application of contextual research allowed for an understanding of the experiences that emerged in the realities of dealing with clients in HIV/AIDS, poverty and child-headed household situations in South Africa. Therefore, the research design applied was fit for the research undertaken.

4.2.1.3 The research method

The conclusion is drawn that the aspects of the research method entailing the population and sampling, data collection, data analysis, and data verification, were applicable to this study and were successfully utilised.

Population and sampling:

The researcher is satisfied that the purposeful sampling technique resulted in rich, deep information having been obtained from the carefully selected participants. In this regard, although an appropriate sampling technique was applied, a slightly larger sample would have strengthened the validation of the data and possibly allowed for even more valuable and nuanced information to emerge.

Data collection:

The attention to the creation of a safe context for the collection of the data by the researcher included preparation of the research participants beforehand, and the selecting of the settings for the interviews thoughtfully – with the children's participation. The use of semi-structured interview guides provided focus to the interviews and rendered the necessary direction and boundaries in the process of data collection. This approach of data collection was not only in synergy with child and youth care practice, it also met the objectives of the research process.

Data analysis:

The researcher is satisfied that the purpose of data analysis – to identify key themes and issues and describe the relationship between them – has been successfully achieved. Tesch's coding process (Cresswell, 2009:186) was followed by the researcher, and provided direction. This was particularly the case in the fifth step of data analysis when the topics that had emerged needed to be turned into themes or categories. At this point, critical self-reflection and redesign of the structure for analysing the data was required. The understanding of emergent design, allowed for the restructuring of the analysis of data.

Trustworthiness of data:

The researcher is satisfied that the process of data verification has resulted in trustworthy research data being collected. Careful attention was given to the characteristics of trustworthiness as discussed in Guba's model (in Krefting, 1991: 214). The application of the parallel process of child and youth care practice supported the truth value of the verification process. The applicability of the findings from this study undertaken in a very specific South African context and culture was validated by a literature control. This literature control revealed consistency between the characteristics of child and youth care practice as described in international literature, and the child and youth care practice documented in the study. Triangulation is a criterion that promotes neutrality, as noted by Guba (in Krefting, 1991:216-217), and indeed in applying this criterion, the interviews with both children and child and youth care workers as well as the rigorous literature control, contributed to the confidence of the researcher on the verification of the data. Recent research (Visser, Zungu & Ndala-Mogoro: 2012) on the work of community child and youth care workers in the Isibindi model in different communities and provinces in South Africa, has been referred to in this chapter to verify the data presented from this research study.

4.2.1.4 Ethical considerations

The researcher anticipated ethical issues that could have arisen during the research and dealt with them in a pro-active way (Creswell, 2009:73). As a result of this, no problems were experienced in this regard. The researcher was mindful of ethical practice as a child and youth care worker during the course of the interviewing process and paid attention to the upholding of human and children's rights with respect to considerations of voluntary participation, informed consent, avoidance of deceit, and confidentiality and anonymity. The ethics of emotional safety and reciprocity were included in the research. The management of information gathered in the research was also given careful attention.

4.2.1.5 Limitations of the qualitative research process

The qualitative research process has inherent limitations. The accurate, objective measurements allowing for generalizations (Cresswell 2009:4) is typical of quantitative research. In this qualitative research study, the size and unique cultural and contextual characteristics may challenge generalization from the findings. However, as noted above, recent research undertaken with community child and youth care workers in relation to the Isibindi Model in diverse South African communities, is referred to, demonstrating that generalizations may be possible. It is also foreseen that as a larger body of scientific knowledge, in the form of literature regarding child and youth care work, becomes available by means of more qualitative research projects being undertaken, a firmer basis will be established for the undertaking of more quantitative research.

4.2.2 The research findings

The research data revealed deep experiences and perceptions from both the children and the child and youth care workers. The researcher experienced the value of the phenomenological orientation in qualitative research described as an “opportunity to encounter others in a way that is intimate, close, human, real” (Garfat 1998: 155). In understanding the array of daily life events in relation to the characteristics of a child and youth care approach, the researcher came to understand more clearly how basic child and youth care tasks included “an expanded world of therapeutic opportunity” (Polster, as cited by Garfat 1998: 28).

The information that emerged from the research was categorized into themes, identified as *care*, *Ubuntu* and *reclaiming*, each with a number of sub-themes. In presenting the story lines of the themes and sub-themes, the child and youth care services rendered were analyzed in terms of the characteristics of child and youth care approach as described by Garfat and McElwee (2004:15). The key characteristics of a child and youth care approach that “showed-up” in the child and youth care work practice researched, were that of *meaning making*, *working in the moment*, *engagement and connection*; *intentionality and pro-activity of intervention*; *being with*; *doing with*; and *use of daily life events*, *noticing*, *developmentally appropriate responses* and, *need-based responses*.

The unique context of the child participants required responses from child and youth care workers that were integrated with the practical reality of meeting the children's basic needs – for food, clothing, school uniforms, school stationary, access to education, basic caretaking, respite from household chores, access to documentation and social security, adult attention, legal support and child protection.

The researcher explored the range of daily tasks undertaken by the child and youth care workers. These were varied but predominately featured in the two categories of primary care and therapeutic helping as identified by Small and Dodge (1988:7). The former category included physical care and caretaking tasks, and the therapeutic helping category included social and emotional nurturance, counselling, therapeutic engagement, and family work (Small & Dodge 1988:7). The tasks undertaken were grounded in the characteristics of a child and youth care approach as articulated by Garfat and McElwee (2004:15).

This section comprises an overview of the research findings relating to the themes identified during the research in Chapter 3 the deductions and conclusions drawn in this regard.

4.2.2.1 Theme 1 CARE

Care was one of the themes that emerged in the data analysis. The theme of care is described in this section as the researcher experienced it predominately presenting itself – as developmental care, as intentional care, as care that includes the child and youth care characteristic of meaning making – and most importantly, as a demonstration of love in care.

- **Developmental care**

The data demonstrated that child and youth care workers responded developmentally to the need for basic physical care. Efforts made by the workers to assist with these basic needs were important experiences in relationship building for the children. According to Ainsworth (1985:62-70):

“[D]evelopment takes place around everyday life events. Everyday life events are the simple things that we can very easily ignore or forget about or not place enough emphasis on (e.g., bedtimes, mealtimes). They are the

ordinary, everyday routines that should not be seen as routine because they are of immense importance. In Maslow's (1954) hierarchy of human needs, the baseline of that hierarchy is written in terms of food, warmth, clothing and, until all of these things have been satisfied, developmental progression or change is unlikely to begin ...”

As the child and youth care workers responded to the immediate, basic needs of the children, the children were able to trust the workers and share their burden of care. The depth and richness of the basic care and caretaking, provided by the child and youth care workers was valued by the children because these tasks were undertaken employing a child and youth care approach. Something ordinary like cooking and eating food became a real experience of care, and a powerful demonstration of meaning making, one of the characteristics of a child and youth care approach. The example of “Auntie cooking” demonstrates the point made as follows:

“[C]hild and youth care work involves the use of daily life events for therapeutic purposes, and food is a powerful therapeutic tool that child and youth care workers have at their disposal (King, 2005:73).”

When “auntie” (the child and youth care worker) cooked, she demonstrated engagement and connection with the children. This opportunity was used to find out what food they liked to eat, and in this process she got to know the children better. Flexibility and individuality of approach were demonstrated as the food cooked was specific to each family – the worker would not necessarily cook the same food with other families as it would not hold the same meaning to them. The workers demonstrated their commitment to realizing children’s rights as they created the space for them to decide what they would like to eat, and allowed them to participate in that small but important decision. For hungry children, in the context of poverty, food is very important and decisions about food are big decisions. “Auntie” understood this. The meal cooked, not only demonstrated food preference and flexibility, but focus and intentionality of action. In many cases the food cooked was food that had previously been cooked by the children’s mothers when they were alive. The children missed eating favourite family foods that were difficult for them to prepare independently. The child and youth care workers, in

the process of “doing with” them, taught them a skill in the moment, when they were ready to learn, and in the process, reclaimed memories.

The worker, in “being with” the children was responsive to feelings, to “being with” memories and reclaiming childhood tastes that had until then been a memory linked to happy times when there was food in the household and a mother who cooked it. Here “being with” was very important. It was important to be responsive “in the moment” as any one of the cooking activities could trigger sad, painful memories. However, this intervention focused on the present, transformed the past and created the future. In that moment the child and youth care worker, by cooking that particular meal, with presence, was able to reclaim happy memories of the past, reminding the children that the past was not made up solely of bad memories – and in this process created the future, a way forward. This was a practical way to reinforce happy memories. “Doing with” was demonstrated in teaching skills and empowerment of the young people. The child and youth care worker would not always be present when the family felt the need to eat that specific meal – so she taught them how to do it independently. When children felt sad and missed their mothers, they had a skill that could bring her presence into their lives, independently. This was a developmentally appropriate, needs-based intervention for children from child-headed households, for whom cooking would be an ongoing responsibility. Maier, cited in Ainsworth (1985), explains child and youth care theory, on developmental care as follows:

“It is through the provision of these very important items that direct care practitioners actually provide children with nurturing experience. What converts a piece of *physical* care ... into *nurturing* care is the involvement of another person in that act. These physical care duties should never be seen as simply routine events. They are the very essence of what has to be done in work with children. These tasks provide practitioners with powerful ways of actually conveying care and concern to children. Children need to experience this care and concern because that is what will actually help them to grow, and to get over some of the difficulties that they may have encountered.”

"Auntie cooked" is an example of how caring *showed up*. In the cooking was love, commitment, caring, meaning making, intentionality, being with, meeting them,

connecting, engaging, and being. The way in which this activity was carried out, the context in which it took place and the experience of it, led to the interpretation that cooking was a caring thing to do. In many ways the children experienced “being” in care. In experiencing the quality of care from the workers, they experienced 'being valued' which is perhaps the ultimate manifestation of “being with”. “Being with” can only really occur in the context of caring. Without caring there can be no real “being with”, as the two are so intricately linked. “Being with” and being valued, are really ways of caring. As Ricks (1992) said, caring involves doing. It cannot happen if one has not 'individualized' the experience. It cannot happen if one has not engaged and connected. It cannot happen in the absence of meaning making or any of the other characteristics in child and youth care work. As described further “child and youth care workers use ordinary human interaction *as a context and a means* for transcending basic care to meet the emotional needs of children – especially in child-headed and parentless families” (NACCW, 2011b). Visser et al., (2012) in their research on young people in the Isibindi Model, note that “while the program helped to meet their basic needs by helping them to access food parcels and social grants, the most important needs that the program met were psychosocial and emotional needs”.

- **Meaning making in care**

It was clear that meaning making was a core characteristic exposed by the child and youth care workers in their encounters with the children. According to Garfat (1998:21) “meaning making may well permeate all aspects of the care-giving relationship.”

Maier (1987a:65) emphasized that in care-giving, *experiencing* caring is vital, and notes that “because care has not only to be delivered but to be experienced as caring; it is not simply enough to ‘deliver’ the elements of caring without the ‘message’ being received”. Polster cited in Garfat (1998:28) notes that attending to meaning making throughout the process of intervening with young people allows the child and youth care worker to create therapeutic opportunities out of ordinary every day experiences and tasks allowing for what he calls an ‘expanded world of therapeutic opportunity’. Garfat (1998:28) further says that there is possibly

nothing more important than this process of meaning making in child and youth care work.

Meaning making permeated the child and youth care practice of the workers. Child and youth care workers used ordinary care and caretaking tasks to undertake therapeutic work with the children. Responsive practice considers the individual child, recognizes the developmental stage of the child and responds to the needs expressed (Fulcher & Garfat, 2008:7). Flexibility and individuality of approach, being responsive in the moment, being with people as they live their lives, hanging out and meeting them where they are, were all integrated into a child and youth care moment that was purposeful, needs-based, planned, proactive and developmentally appropriate.

- **Intentional practice**

Another significant characteristic of child and youth care practice which emerged was intentionality of intervention or purposeful action that was reflected in the actions of all the child and youth care workers. They were thoughtful and proactive in their intentions. Care is demonstrated through reflective practice, where the child and youth care workers think carefully about what to do in the family, also thinking of each individual child and what is in the best interests of that child. In this way, working in the moment (another characteristic of practice) is meaningful. Making meaning in moments requires intentional action. Ricks (1992) expresses this intentional intervention of caring as follows:

“The intentional involvement in intervention requires that the worker be thoughtful and have clarity of purpose in determining ‘what to do before doing it.’ The worker does not randomly try out techniques in some mindless way hoping that something will work! The professional care giver uses knowledge and skills to deploy a specific intervention designed to address the child/youth/family’s need(s). This professional involvement is about doing with intention’. The intentional involvement in intervention is what brings professionalism to the caring relationship. It presumes a body of knowledge, skills, and standards of practice recognized by workers and their professional colleagues.”

Participation is one of the fundamental pillars of a child rights approach and the children and families in this research were involved in the interventions, demonstrating their commitment to participate and engage with the interventions that were planned or introduced by the worker.

- **Care and love**

Caring and love intermingled in the encounters between the child and youth care workers and children. Pringle (1975) commented in the following timeless words on the importance of a mother's love, a very important consideration in the context of child-headed families grieving for lost mothers:

“Such love is extremely difficult to replace and hence it makes the child vulnerable when it is lost to him, temporarily or permanently.”

She goes on to quote Newton as follows (Pringle, 1975):

“The best that community care can offer is impartiality — to be fair to every child in its care. But a developing personality needs more than that: it needs to know that to someone it matters more than other children; that someone will go unreasonable lengths ... for its sake ...”

The research data raises an important challenge to the point made above that optimal community care is limited to impartiality and fairness for each child. The application of child and youth care practice at community-based level, as represented in this research, has transcended “fair and impartial care” to embody connection and love. As reflected by a young person:

M: *“I think Auntie Z ... is a person who loves you the most. She was taking care of us. Ya, she gave us love.”*

Z, the child and youth care worker, responded too:

Z: *“I love those children. I love those children, especially [as] that is where I applied my professional child youth care work.”*

So, love and professional child and youth care work were seen to co-exist – in the context of community based child and youth work. The research data indicated that child and youth care workers in communities go to extraordinary lengths for children. According to Menninger, quoted by Brendtro et al. (1992:48):

“Living and loving another human being who returns that love is the most strengthening and salubrious emotional experience in the world.”

The data demonstrated that child and youth care practice is embracing enough to allow love to seep into its expression. Child and youth care workers get as close to the lived experience of the children as is possible, and share these experiences with them. In this process of caring, love finds a comfortable place to express itself. In this research, evidence of love is articulated boldly and proudly as care transforms into love and into a child and youth care practice that is uniquely South African in context, content and style. This finding is echoed in recent research undertaken by Visser et al., (2012:85) on the Isibindi Model which indicates that the child and youth care workers “helped orphaned children and youth to maintain self-respect and feel appreciated by giving them loving support and encouragement”. They further note that “children who are part of the program are reported to be very confident due to love, support and exposure to different activities in the program”.

4.2.2.2 Theme 2 UBUNTU

The African expression of care, Ubuntu, was naturally expressed by the child and youth care workers and experienced as such by the children. South African children’s legislation promotes the principle of Ubuntu in work with children as referred to below. The data exposed the compassion expressed by child and youth care workers – one of the aspects of Ubuntu. The data further exposed the networking and interconnectedness aspect of Ubuntu. South African child and youth care workers have expressed their child and youth care work in the spirit of Ubuntu, revealing a uniquely African quality to care. This finding is supported by Visser et al. (2012:146) who note that “In the spirit of Ubuntu there should be no orphans in Africa, as parentless children should be cared for by their extended families. This spirit has been lost lately and the value of the next generation is discounted. The Isibindi programme is reviving Ubuntu in taking care of and promoting the well-being and rights of young vulnerable children”. This point is reinforced by a research participant in the study by Visser et al., (2012:101) thus: “Ubuntu is lacking in our communities and also there’s social fabric are broken in terms of family structure and communities taking care of each other. So when there is a program [Isibindi] of this nature it assists to make

sure that it revives our communities and make sure that our communities take care of each other. So I think it [Isibindi] is the good thing for community development” (Visser et al., 2012:101).

Hailey, (2008:3) notes the concept of Ubuntu, as explained in the White Paper for Social Welfare, as follows:

“The principle of caring for each other’s well-being will be promoted, and a spirit of mutual support fostered. Each individual’s humanity is ideally expressed through his or her relationship with others and theirs in turn through recognition of the individual’s humanity. Ubuntu means that people are people through other people. It also acknowledges both the rights and the responsibilities of every citizen in promoting individual and societal well-being.”

This philosophy of Ubuntu is integrated into South African children’s legislation and Panse (2006) notes that the South African National Assembly passed the White Paper for Social Welfare on 19 February 1997, when the then Minister for Welfare and Population Development, Geraldine Fraser-Moleketi , announced:

“The passage of the White Paper for Social Welfare through the National Assembly signals the start of a new era in welfare delivery in South Africa. For the first time in our country’s history, delivery in the welfare field will be driven by key principles such as democracy, partnership, Ubuntu, equity, and inter-sectoral collaboration, among others.”

Visser et al. (2012:81) note that Isibindi was seen as an advocate bridging the divide between community and government services.

In the research undertaken, the child and youth care workers and the children interviewed, demonstrated that their child and youth care experiences were grounded in the national children’s legislative framework and in the spirit of Ubuntu, promoting a uniquely South African response to child and youth care work. In promoting a uniquely South African response to child and youth care work, the spirit of Ubuntu manifested itself as summarised below and led to the accompanying conclusions.

- **Ubuntu and compassion**

The legislation and policies referred to above hold no meaning for South African children, unless they are experienced as a reality. This study demonstrated that the

child and youth care workers, by integrating the characteristics of a child and youth care approach into their work, were able to give effect to the spirit of Ubuntu. Garfat (1998:27) articulates the need to attend to *how* meaning is construed in order to understand children as follows:

“In a sense, child and youth care, like all helping professions, involves the encounter of cultures, each with its own way of assigning meaning to particular events. The culture of the young person and family, the culture of the dominant society, the culture of the program in the organization, and the culture of the worker all impinge on the intervention process. It is only when the worker attends to how meaning is construed in all of these that she can begin to understand the young person and his or her behaviour.”

It was clear that in attending to making meaning of a practical daily task like ensuring food security, that Ubuntu had meaning in the lives of children. Hunger, vulnerability and fear were the feelings and experiences of the children; compassion, care, sensitivity and awareness were some of the responses of the child and youth care workers. In attending to practical food security needs, the child and youth care workers also attended to the meaning of care and compassion. In so doing they transformed the experience for both child and worker. It was in ‘being-with’ the children that the child and youth care workers were able to implement the child care tasks in a manner such as that expressed by Steckley (2007) in the following words:

“Truly *being with* someone in compassion, however, means ... somehow connecting beyond these roles while still fulfilling them.”

A child and youth care worker participant echoed this understanding by Steckley’s (2007) thus:

Z: “[C]hild care work is not about any money. It’s a calling. You must be there all of yourself. You must ... tell yourself I am going to be with those children and their needs.”

A youth from one of the Isibindi projects is cited as follows by Visser et al., (2012: 84): “I cried a lot after I lost my parents, but the after the CYCW intervened I had someone that I can talk to. We would sit down and chat which made me feel a lot

better". A child participant in this research responded as follows in words that could have come directly from the formal definition of Ubuntu thus:

M: *"I think we are because of him [her]."*

- **Ubuntu and interconnectedness**

The issues of engagement, connection and interconnectedness flowed seamlessly together in the practice of the child and youth care workers interviewed. This revealed the synergy between the concept of Ubuntu and child and youth care child issues of practice. In this regard, Garfat (2008a) says that -

"Engagement refers to being involved, doing something, playing, talking, engaging. Connection, on the other hand, involves ... a willingness to 'let the other in'."

Tutu (cited in Hailey, 2008) explored the understanding of Ubuntu further, emphasizing the concept of interconnectedness. The child and youth care workers interviewed blended a tapestry of engagement, connection and interconnectedness in their practice as demonstrated in the data analysis. They demonstrated in this research a conscious effort to connect the children in child-headed families to community structures. They created a social network around the children. One child and youth care workers explains this process below:

S: "I was trying to encourage them to talk to me more about their family and ... I saw the picture where they were all going to church ... They said they are not going to church ... because there was no income. Then I went to the nearest church, the same church and I introduced the family ... They welcomed the family and organized a food parcel for the family".

Garfat (2008a) affirms that -

"[I]t is only then, when we and the children we are trying to help, reach the point of connection that we might become 'an adult I can trust' and therefore create the possibility, as Fritz Redl might have said, to become a 'friend of influence'."

The child and youth care workers moved from engagement, to connection, to interconnection and became to the children's 'friends of influence', as demonstrated by S in the quote above.

- **Child and youth care work and Ubuntu**

The following description of Ubuntu is shared by Panse (2006):

“A person is a person through other persons. Umuntu ngumuntu ngabantu.”

The child and youth care workers who participated in this study, were transformed at a deep personal level, through their work with children. Child and youth care literature refers to this too as the “inter-personal in-between”, Garfat (2008b:26) notes the following in his regard:

“...[w]e also have the opportunity to notice the evolution of our own self in the context of the in-between. As we co-create this experience between us, we come to know who we are. For ...only through the process of co-creating relationship can we come to know our Selves.”

The quotation below reviewed with the one above, made the researcher consider the symbiotic relationship between child and youth care practice and the concept of Ubuntu. As S the child and youth care worker, claims:

“Child care work is building you up, it change[s] you totally, you become a different somebody, you become a different person ...”

In the words of participant Z, the child and youth care worker -

“Child and youth care work is a light to the children who are suffering.”

Visser et al., (2012:98) quotes a child and youth care worker who reinforces this relationship between child and youth care work and Ubuntu, as follows: “Isibindi is a program that empowered us as child and youth care workers from nothing to something”as, according to Visser et al. (2012:97), “it equipped the CYCWs to deal with very difficult situations and to grow personally”.

4.2.2.3 Theme 3: RECLAIMING

The integrated, complex unfolding of the theme ‘reclaiming’ in the data, is described with an attempt to expose the range and depth of the experiences. For the children, their unique worlds were knitted together with care, their confidence in belonging to their communities was nurtured, and the re-kindling of hope and dreams took place. Essentially, it is concluded that the children reclaimed their sense of ‘self’ as did the child and youth care workers.

- **Reclaiming their worlds**

The situation of children in South Africa who are living in child-headed households in communities of poverty and who are victims of HIV/AIDS is devastating. The research data showed that through a process of reclaiming, the child and youth care workers were able to recover and restore value to the shattered and diminished parts of children’s lives. The researcher concluded that assisting the children concerned in reclaiming their worlds constituted an important part of the child and youth care work services rendered to the children. In the process of reclaiming, the worlds of the children were reclaimed. In addition, workers reclaimed parts of themselves – parts that could start personal journeys of healing. According to Brendtro et al. (1992:3):

“The reclaiming environment is one that creates change that meets the needs of both the young person and society. To reclaim is to recover and redeem, to restore value to something that has been devalued.”

The data gathered exposed the different areas in which the children’s worlds were reclaimed. The daily life events (cooking, homework, laundry, household chores, supervision of homework, budgeting), were integrated with the characteristics of a child and youth care approach (pro-activity and intentionality of intervention, meaning-making, doing with and being with, engagement and connection) and in this process, the worlds of the children were reclaimed holistically (physically, emotionally, intellectually, socially and spiritually).

Korczak cited in Brendtro et al. (1992: 69), said that -

“[A] child’s primary and irrefutable right is the right to voice his thoughts, to actively participate in our verdicts concerning him.”

The child and youth care workers reclaimed the children’s worlds *with* the children, encouraging, through a commitment to a child rights framework, the participation of the children in the minute decisions about their life. The research data is rich with the voices of children on the concrete issues of daily living like food security, cooking and budgeting, as well as with the more abstract issues like family, future plans, hopes and dreams. The activities of the child and youth care workers demonstrated the nature of child and youth care practice as they engaged and connected with the children and spent time “being with” them, “doing with” them. The following quotation explores the importance of engagement and connection in the context of disruption and ruptures in relationships:

“A critical factor in socializing children is to replace disruption with engagement. Adults who engage youth foster trust, build self-worth, and offer positive models ... it is essential to build positive bonds with youth and to repair ruptures in relationships” (Brendtro, Ness & Mitchell, 2001).

These authors speak of the importance of proactive interventions that prevent risky behaviour from children and youth (Brendtro et al., 2001). The children from child-headed households were desperate. Their basic needs (food) were not met; they had lost the stable adults in their lives, their relationships with each others as siblings were “ruptured” and changing as siblings become the heads of families. Their worlds were disrupted. The data indicated that the child and youth care workers did indeed engage with children, and build trust, self-worth and bonds. They helped them re-establish a sense of family, a new valued identity as a child-headed family and reclaimed their sense of belonging in their community.

- **Reclaiming community belonging**

Similarly to the above, the researcher concluded that the role of child and youth care workers in assisting the children in reclaiming their community belonging constituted an important part of child and youth care work. They did this through weaving a protective network of community neighbours, extended family and community structures around the children. Recent research referring to the community child and youth care workers in the

Isibindi model notes that “in many cases children found a sense of belonging that inspired them and made them feel that they are more privileged than children who have parents to be part of this program” (Visser et al., 2012:135). Attention to this community belonging is referred to in child and youth care literature. In this regard Brendtro et al., (1992:48) say:

“In the concept of belonging attention is given to social support networks of friends, neighborhood and relatives that can provide enduring patterns of nurturance.”

Demonstrating an understanding of belonging, the child and youth care workers encouraged community belonging, belonging to extended family, belonging amongst the siblings in child-headed households and a personal sense of belonging in reclaiming self. The community-based child and youth care workers indeed created circles of care around children.

Maier (1987a:64) noted that regarding child and youth care workers’ caring role:

“The child and youth care worker provides the essential experience of being cared for, of learning how to response and how to interact and finally to develop the capacity for extending caring to others.”

MX, a young person, demonstrated her capacity for extending care, her generosity, her spirit of Ubuntu in the following words, as role modelled by L, her child and youth care worker :

L: “... *I was not there but she go to the garden and take some mealies and take it to my house. I just received a call from my children telling that MX is here, she said that she is bringing this mealies to you. I have my connection with them.*”

- **Reclaiming joy and spirit, hopes and dreams**

Reclaiming the spirit of oneself, being contented, at peace, and happy despite the harsh histories and realities is difficult. Therefore, reclaiming spirit is also a conscious responsibility of the child and youth care worker. Opportunities were created for moments of joy and happiness to embrace the lives of the children again. Z, the child and youth care

worker, in a series of short quotes demonstrated how she helped in different ways a family reclaim happiness:

Z: *“I always ... cook the food that were[was] cook[d] by their mother. And they were happy for that. And they were happy.”*

Z: *“... when I come to see them, they run and hug me. And they were so happy...”*

Z: *“Even the boys. Ay they were happy when I came to see them ...”*

Z: *“... we start with the basic needs something like food, clothing and Ja we did also buy the thing that ... was not basics so make them happy.”*

Z: *“... now they got everything that they need, they have enough clothing, enough food and they are paid the school fees, they have the basic needs. And the other [young person heading the household] know now it is important to take the young ones and take them out, to make them happy, to bring back happiness”.*

Experiences of happiness and joy are immensely important in that they are immediately therapeutic for young people. To know some joy in each day and look forward with eagerness to at least some joyous event planned for tomorrow is healing and therapeutic (Hobbs,1994:285).

The following two quotations from research undertaken on community child and youth care workers in the Isibindi model, provide support to this perspective of community child and youth care workers reclaiming of joy, spirit, hopes, dreams.

“The Isibindi programme had given children hope and motivation to succeed in life” (Visser et al., 2012:135).

“Where it is not always easy to provide young people with options and with money, Isibindi CYCWs encourage young people to stay hopeful and to pursue their dreams.” (Visser et al., 2012:111).

It was observed that child and youth care workers have an important role to play in giving children hope and motivation in living their lives.

- **Reclaiming self**

The philosopher Ralph Waldo Emerson (1802-1882) poetically noted that "It is one of the most beautiful compensations of this life that no man can sincerely try to help another without helping himself." (Biography for Ralph Waldo Emerson: s.a.). The personal benefits derived from helping others were apparent in the study. Child and youth care workers reclaimed family, neighbours and social networks in relation to the children, they reclaimed traditional family ways of being together that were unique to the different families. They reclaimed memories. They reclaimed hopes and dreams. They reclaimed the past and the future as they focused on the present. However, it appeared that in this process of reclaiming, the child and youth care workers were themselves transformed. The child and youth care workers appeared to have reclaimed aspects of their personal selves and a deeper fuller sense of self.

Axline (1964:194) in her classic book, *Dibs: In search of Self*, makes an interesting point in this regard. She notes that "perhaps when we experience confidence and faith and hope that we see materialize before our very eyes, this builds up within us feelings of inner strength, courage and security" (Axline, 1964:194). The child and youth care workers acknowledged their personal and professional growth and transformation through the opportunity created in the work. The growth and development of workers, according to Garfat (2001), referring to Mezirow, Ainsworth and Maier respectively -

"[M]ight be considered to come about because of transformative experiences in the relationship between themselves, the young person and their joint context. Thus experiences which create the context for transformative learning ... to occur... have an important place in the development of child and youth care workers."

4.2.3 General aspects of South African child and youth care work

The research has provided evidence that child and youth care practice in South Africa does indeed reflect child and youth care work practice as espoused in international child and youth care literature. Evidence however, indicates that there exists a unique expression of

love in care in South African child and youth care practice. Transformation of both the children and the child and youth care workers has been demonstrated in this research indicating the complexity of the impact of child and youth care work. The expression of the African spirit of Ubuntu in the research contributes to the conclusion that there is a unique approach to child and youth care work that is emerging in South Africa.

- **Community child and youth care practice**

The practice of child and youth care work by the community child and youth care workers demonstrated the characteristics of a child and youth care approach as articulated by Garfat and McElwee (2004:15). Local child and youth care workers expressed in practice the different characteristics of a child and youth care approach in ways that were particular to a South African context of HIV/AIDS and poverty. The characteristics of a child and youth care approach, such as engagement and connection, meaning making, pro-activity and intentionality of action, ‘being with’ and ‘doing with’ showed up in the use of daily life events, transforming simple physical acts of care into nurturing experiences of caring as described by Maier (1987a:64).

- **Love and child and youth care practice**

The study explored the question as to whether young people and families were receiving relevant therapeutic and developmental services in their life space. The research data has demonstrated that developmental care was experienced by the children, answering this question in the affirmative. However, caring involves both love and labour, and it is precisely this combination that underlines its conceptual complexity (Finch & Groves, quoted in Ricks, 1992). It is concluded that the child and youth care workers demonstrated not only the provision of developmental and therapeutic care, but went further to express love towards children – whose parents had died and who were without a mother’s love. A caring adult, as a result, held a very special meaning to the children. The child and youth care workers integrated love in the execution of tasks, transforming their caring to love and compassion. The children experienced this love and loved them in return. And in this expression of mutual love, experiences of joy, hope, dreams, happiness and spirit were rekindled.

- **Transformation by the child and youth care work**

The conclusion is drawn that children, families and workers are transformed by the child and youth care work. The numerous examples of powerful and positive change demonstrated in the study indicate the impact that the child and youth care services had in the lives of children in very difficult circumstances. Their memories of their histories, their understanding of their present realities and their visions for their futures were transformed. Child and youth care workers created the context where children were able to integrate the past, present and future.

Self-transformation in the process of child and you care work, was also demonstrated by the child and youth care workers working in a small community in South Africa. They had grown up in an apartheid South Africa, experiencing exploitation and oppression. In a post-apartheid South Africa, their present reality is one of poverty and HIV/AIDS. They come from the very communities in which they work. The work context is their personal world too. The study demonstrated that the experience of child and youth care practice also offered them healing, empowerment and personal transformation. Fewster (cited in Garfat, 2008b:10) notes that “only in the process of co-creating relationships can we become to know our Selves.” He further points out that “our own sense of Self is our primary professional resource” (Fewster, cited in Garfat, 2008b:10). Transforming Self is naturally embedded in child and youth care practice and this study demonstrated this transformative process in a community-based child and youth care setting.

- **A unique South African child and youth care approach**

The natural integration of the African philosophy and spirit of Ubuntu into the child and youth care work practice of participants, demonstrated a unique quality in the South African expression of child and youth care work. There is indication of a synergy between articulated child and youth care practice in international literature and the concept of Ubuntu. Child and youth care workers expressed a very natural understanding of the spirit of child and youth care work, and an easy integration of Ubuntu into child and youth care practice. Child and youth care characteristics of child and youth care approach like ‘engagement’ and ‘connection’ naturally expanded to community interconnectedness. The study demonstrated child and

youth care workers manifesting the philosophy underlying the statement, “I am because you are”.

In addition, the strong child rights culture integrated into the child and youth care practice was uniquely South African. The study demonstrated that the child and youth care workers consciously strove towards the progressive realization of children’s rights, creating a child rights culture in the context of their work. Child and youth care workers are contributing to nation building in this and examples are richly expressed in this research, demonstrating the reclaiming of a child rights culture in South Africa.

The national children’s legislative framework in South Africa is grounded in the international child rights documents including the United Nations Convention on the Rights of the Child (UCRC) (UN, 1989) and the African Charter on the Rights and Welfare of the Child (ACRWC) (OAU,1990) as well as the philosophy of Ubuntu. The study found that this paradigm, when harmonised with child and youth care practice, has resulted in a unique expression of child and youth care practice in South Africa.

4.3 RECOMMENDATIONS

The researcher presents the following recommendations based on the conclusions of the research. The recommendations are specific to the qualitative research process and the research findings linked to the key themes of Care, Ubuntu and Reclaiming. In addition, general recommendations are included relating to the ongoing research in the child and youth care field.

4.3.1 Recommendations pertaining to the qualitative research process

The researcher recommends the application of the qualitative research process as relevant to research conducted in child and youth care work for the following reasons:

- Literature and research on South African child and youth care practice is limited. Studies in child and youth care work as practised in South Africa therefore require

an exploratory research focus. The explorative nature of qualitative research will create opportunity for the unique and varied aspects of child and youth care work and its impact on children in South Africa to be exposed.

- The descriptive strategy of inquiry, typical of qualitative research, allows for research questions to be used in understanding a situation or phenomena with greater accuracy. Research in child and youth care work in South Africa should be committed to opportunities that allow the voices of all participants – child and youth care workers and children – to be heard directly in research endeavours. Sharing stories in typical African oral tradition is critical to accessing relevant information in the child and youth care field in South Africa. In addition, this approach is in harmony with a human and particularly children's rights culture that promotes the active participation of people and particularly children in describing their own experiences, realities and stories.
- The contextual orientation to qualitative research will allow for research to be undertaken, that is relevant to a South African and an African reality, providing for information in child and youth care work that is connected to the cultural and other realities relevant to an African frame of reference, to come to the fore.

It is further recommended that once more information regarding child and youth care work as practised in the South African context, has been documented and described through explorative research, the qualitative research approach towards child and youth care work, could be supplemented with more quantitative research being undertaken.

4.3.2 Recommendations pertaining to the research findings

Pertaining to the research findings relating to child and youth care work practice made in this study, certain core recommendations are made, followed by recommendations in relation to the three themes identified in the research, namely Care, Ubuntu and Reclaiming. (It should be noted that in attending to these recommendations, apart from the practicalities thereof, most of the recommendations pertaining to the research findings could also be related to the need for further and future formal research as discussed in paragraph 4.3.3).

4.3.2.1 Core recommendations

The specific recommendations below broadly encapsulate the three core recommendations relevant to the development of child and youth care practice in South Africa. These core recommendations are:

- further research focused on South African child and youth care **practice** should be undertaken;
- the development of further **training** of child and youth care workers for the unique South African and African contexts, and the provision and control of training courses for them, must be attended to; and
- child and youth care workers should be actively encouraged to accept the responsibility for developing the **knowledge and theory** of child and youth care work in South Africa.

4.3.2.2 Theme 1: CARE

- As the matter of food security is so important for children facing ongoing hunger, the manner in which this need can be met – in the context of meeting children’s deeper and holistic needs through the use of sound child and youth care practices, should be explored and studied further – especially in the context of food distribution programmes.

4.3.2.3 Theme 2: UBUNTU

- As the concept of Ubuntu synergises with child and youth care practice in South Africa, this concept and its connection with and application in the field of child and youth care work should be further explored and developed by practitioners and policy-makers as well as academics.

4.3.2.4 Theme 3: RECLAIMING

- As the reclaiming and upholding of children’s rights in child and youth care practice has been demonstrated in the research, further research and documentation

on children's rights in the context of child and youth care practice should be undertaken.

- The reclaiming of self in the process of child and youth care practice has emerged in the research. Therefore this perspective needs to be further researched and documented. The reclaiming of the “wounded” healer is especially relevant to our unique South Africa history and the present context of HIV/AIDS.

4.3.3 Recommendations on further and future research

It is recommended that further and future research focused be undertaken about the following two general aspects of child and youth care work:

- As community-based child and youth care workers are centrally engaged with daily life events in the life space of children, the training of child and youth care workers should focus on how to integrate further child and youth care practice in such activities.
- As a South African manifestation of child and youth care work appears to be developing, a local definition of child and youth care work should be explored and articulated.

Flowing from the above recommendations pertaining to the research findings (paragraph 4.3.2) it is recommended that further formal and future research focused on the following aspects of child and youth care work, be undertaken:

- South African child and youth care **practice**;
- the development of **training** of child and youth care workers for the unique South African and African contexts, and the provision and control of training courses for them;
- the **knowledge and theory** basis of child and youth care work in South Africa;
- how the need for food security of children facing ongoing hunger can be met, should be explored and studied further in the context of meeting children's deeper and holistic needs through the use of sound child and youth care practices;
- the concept of Ubuntu and its connection with and application in the field of child and youth care work should be further explored and developed;

- further research and documentation on children's rights in the context of child and youth care practice should be undertaken; and
- the reclaiming of self needs to be further researched and documented (the reclaiming of the "wounded" healer is especially relevant to our unique South Africa history and the present context of HIV/AIDS).

4.4 CONCLUSION OF THE CHAPTER

In this last chapter of the research, the researcher has presented concluding discussions on the research process undertaken and the research findings. The relevance and value of the qualitative research was described by a short evaluation of the different components in the research process. The researcher has concluded with confidence that the qualitative research process fits the research undertaken. The qualitative research approach is relevant to the child and youth care field and various applications of qualitative research designs are applicable.

The research findings concluded with the themes of Care, Ubuntu and Reclaiming being examined with reference to evidence from child and youth care literature and direct feedback from research participants. The conclusions reached include the important findings that aspects of the nature of child and youth care work as articulated in international literature were reflected in South African child and youth care practice; that love and care can co-exist in child care practice; that the transformation of the Self was experienced by child and youth care workers in the process of working with the children and that there is a unique expression of child and youth care work in South Africa.

The recommendations are aligned with the perspective that South African child and youth care practitioners must take greater responsibility for the knowledge and therefore the clinical practice employed in South Africa (Gaughan & Gharabaghi 1998). Knowledge generated from practice in South Africa will contribute to the richness and diversity of existing child care literature. Gaughan and Gharabaghi (1998) note, that we must take responsibility for the basis of our practice. A coherent professional identity, according to Kruger (2008) is demonstrated by "self in action". The informal theories of child and youth care worker in practice are grounded on the understanding of what they think and feel

about their practice. There is a need to strengthen the mutual dependence of theory and practice. There is a need to create new knowledge, contextualized and embedded in South African child and youth care practices. Hence the recommendations in this concluding chapter note the need for documentation and research of South African child and youth care practice, the development of unique South African child and youth care knowledge and the development of child and youth care theories and training that are contextualized in a South African reality.

The researcher trusts that this research and the recommendations will contribute to the improved training and development of community child and youth care workers, strengthening both the practice of community child and youth care work and the understanding of what child and youth care workers actually do in communities with children. The methodology of life-space work, captured and exposed in the therapeutic use of daily life events in the research through the story lines of child and youth care worker and children, shows the easy integration of the unique cultural and personal expressions in life-space work. The researcher foresees this research creating a better understanding of the relevance and importance of this methodology of service delivery in an African context as reflected in the research findings.

REFERENCES

- Ainsworth, F. 1985. *Direct care practitioners as promoters of child development*. [Online]. From: <http://www.cyc-net.org/quote2/quote-855.html>. (Accessed: 1 Nov. 2009).
- Allsopp, M. & Thumbadoo, Z. 2002. *Child and youth care in post-apartheid South Africa*. [online] CYC-Net. From: <http://www.cyc-net.org/opening.html> (Accessed: 28 Dec. 2012).
- Anglin, J. 1992. *The magic beanstalk: Youth empowerment and the United Nations Convention on the Rights of the Child*. April. [Online]. From: <http://www.cyc-net.org/cyc-online/cyconline-apr2009-anglin.html>. (Accessed: 11 Nov. 2012).
- Anglin, J. 2001. Child and Youth Care Work: A Unique Profession. *CYC-Online*, Iss.35. Dec. [Online]. From: <http://www.cyc-net.org/cyc-online/cycol-1201-anglin.html>. (Accessed: 11 Nov. 2012).
- Axline, V. 1964. *Dibs in Search of Self: Personality Development in Play Therapy*. Auckland: Penguin Books.
- Biography for Ralph Waldo Emerson*. s.a. [Online]. From: <http://www.imdb.com/name/nm0256248/bio>. (Accessed: 19 January 2009).
- Bopp, J., Bopp, M., Brown, L. & Lane, P. 1985. *The Sacred Tree*. Alberta, Canada: Four Worlds Developmental Press.
- Brendtro, L.K., Brokenleg, M., & Van Bockern, S. 1992. *Reclaiming Youth at Risk, Our Hope for the Future*. Indiana: National Education Service.
- Brendtro, L., Ness, A. & Mitchell, M. 2001. *No disposable kids*. [Online]. From: <http://www.cyc-net.org/quote2/quote-558.html>. (Accessed: 10 Nov. 2009).
- Children's Act (Act No 38) of 2005, see South Africa, 2006a and 2006b.
- Creswell, J.W. 2009. *Research design: qualitative, quantitative and mixed method approaches*. (3rd ed.). Thousand Oaks Calif.: SAGE Publications Inc.
- Delport, C.S.L. & Fouché, C.B. 2005a. The place of theory and the literature review in the qualitative approach to research. In De Vos, A.S., Strydom, H., Fouché, C.B. & Delport,

C.S.L. *Research at Grass Roots for the Social Sciences and Human Services Professions* (3rd ed.). Pretoria: Van Schaik. 261-266.

Delport, C.S.L. & Fouché, C.B. 2005b. The qualitative research report. In De Vos, A.S., Strydom, H., Fouché, C.B. & Delport, C.S.L. *Research at Grass Roots for the Social Sciences and Human Services Professions* (3rd ed.). Pretoria: Van Schaik. 350-356.

De Vos, A.S. 2005. Qualitative data analysis and interpretation. In De Vos, A.S., Strydom, H., Fouché, C.B. & Delport, C.S.L. *Research at Grass Roots for the Social Sciences and Human Services Professions* (3rd ed.). Pretoria: Van Schaik. 333-349.

Fossey, E., Harvey, C., McDermott, F. & Davidson, L. 2002. Understanding and evaluating qualitative research. *Australian and New Zealand Journal of Psychiatry*. 36:717-732.

Fouché, C.B. 2005. Qualitative research designs. In De Vos, A.S., Strydom, H., Fouché, C.B. & Delport, C.S.L. *Research at Grass Roots for the Social Sciences and Human Services Professions*. (3rd ed.). Pretoria: Van Schaik. 267-273.

Fouché, C.B. & Delport, C.S.L. 2005. Introduction to the research process. In De Vos, A.S., Strydom, H., Fouché, C.B. and Delport, C.S.L. *Research at Grass Roots for the Social Sciences and Human Services Professions*. (3rd ed.). Pretoria: Van Schaik. 71-85.

Fouché, C.B. & De Vos, A.S. 2005. Problem formulation. In De Vos, A.S., Strydom, H., Fouché, C.B. & Delport, C.S.L. *Research at Grass Roots for the Social Sciences and Human Services Professions*. (3rd ed.). Pretoria: Van Schaik. 100-110.

Fulcher, L.C. 2003. *Rituals of encounter that guarantee cultural safety*. [Online]. From: <http://www.cyc-net.org/CYR101C/culturalsafety.htm>. (Accessed: 1 Aug. 2005).

Fulcher, L.C., & Garfat, T. 2008. *Quality Care in a Family Setting: A Practical Guide for Foster Carers*. [Online]. From: <http://www.cyc-net.org/quote4/quote-1828.html>. (Accessed: 11 Nov. 2012).

Garfat, T. 1998. The effective child and youth care intervention: A phenomenological inquiry. In Fewster, G. & Garfat, T. *Journal of Child and Youth Care*. 12 (1-181).

Garfat, T. 2001. *Developmental stages of child and youth care workers: An interactional perspective*. [Online]. From: <http://www.cyc-net.org/cyc-online/cycol-0101-garfat.html>. (Accessed: 31 Oct. 2009).

Garfat, T. 2002. *The use of everyday events in child and youth care work*. [Online]. From: <http://www.cyc-net.org/cyc-online/cycol-0402-garfat.html>. (Accessed: 5 Oct. 2009).

Garfat, T. 2003. *A Child and Youth Care Approach to Working with Children*. New York: The Haworth Press.

Garfat, T. 2007. *Who are we working with ? A short history of Child and Youth Care involvement with families*. [Online]. From <http://www.cyc-net.org/cyc-online/cycol-0708-garfat.html>. (Accessed 19 Jan 2013).

Garfat, T. 2008a. *Joining Jan*. [Online]. From: <http://www.cyc-net.org/cyc-online/cyconline-oct2008-editorial.html>. (Accessed: 5 Oct. 2009).

Garfat, T. 2008b. The Inter-Personal In-Between: An exploration of relational child and youth care practice. In Bellefeuille, G. & Ricks, F. (eds.) 2008. *Standing on the precipice: Inquiry into the creative potential of child and youth care practice*. Alberta: McEwen Press.

Garfat, T. 2012. The use of everyday events in child and youth care work: A little history. In Garfat, T., Fulcher, L.C. & Digney, J. (eds.) 2012. *The Therapeutic Use of Daily Life Events*. Cape Town: Pretext.

Garfat, T., & Fulcher, L.C. 2008. *Tips for Helping a Child or Young Person Feel Safe and Secure*. [Online]. <http://www.cyc-net.org/quote4/quote-1828.html>. (Accessed: 19 Jan 2013).

Garfat, T., & Fulcher, L.C. 2012. *Child and Youth Care in Practice*. Cape Town: Pretext.

Garfat, T. & Mc Elwee, N. 2004. *Developing effective interventions with families, an Eircan perspective*. Cape Town: Pretext.

Gaughan, P. & Gharabaghi, K. 1998. The Prospects and Dilemmas of Child and Youth Work as a Professional Discipline. *Journal of Child and Youth Care*, 13(1):1-18. [Online]. From: <http://www.cyc-net.org/Journals/jcyc/jcyc13-1.html#2>. (Accessed: 11 Nov. 2012).

Gluckstein, D. 2010. *DIGNITY: In Honour of the Rights of Indigenous People*. [Online]. From: <http://blog.amnestyusa.org/africa/archbishop-desmond-tutu-on-dignity/>. (Accessed: 11 Nov. 2012).

Golfshani, P. 2003. *Understanding reliability and validity in qualitative research*. [Online]. From: <http://www.nova.edu/ssss/QR/QR8-4/golafshani.pdf>. (Accessed: 1 Nov. 2009).

Greeff, M. 2005. Information collection: interviewing. In De Vos, A.S., Strydom, H., Fouché, C.B. & Delpont, C.S.L. *Research at Grass Roots for the Social Sciences and Human Services Professions*. (3rd ed.). Pretoria: Van Schaik. 286-313.

Hailey, J. 2008. *Ubuntu: A Literature Review*. [Online]. From: http://www.tutufoundationuk.org/documents/UbuntuLiteratureReview_JH_Dec08.pdf. (Accessed: 11 Nov. 2012).

Henning, E., Gravett, S. & van Rensburg, W. 2005. *Finding your way in academic writing* (2nd ed.). Pretoria: van Schaik.

Hobbs, N. 1994. *The troubled and troubling child*. Ohio: American Re-Education Association.

Holloway, I. & Wheeler, S. 1998. *Qualitative research for nurses*. Oxford: Blackwell.

Hubbard, G. 1990. *An introduction to qualitative research*. [Online] From: <http://www.research.stir.ac.uk/documents/SeminarNotes-QualitativeR.pdf>. (Accessed: 22 Nov. 2009).

Including children - Guidelines on ethical practice in fulfilling children's rights to participation. 2009. Durban: Children's Rights Centre (CRC).

Impact on children: care and support for orphans and vulnerable children. s.a. UNICEF South Africa. [Online]. From http://www.unicef.org/southafrica/reallives_4265.html. (Accessed: 6 Jan. 2005).

Kehoe, J. 2007. *UBUNTU, African Wisdom on How To Be a Human Being, Part 2*. [Online]. From: <http://www.learnmindpower.com/articles/ubuntu-african-wisdom-how-be-human-being-part2>. (Accessed: 11 Nov. 2012).

King, K. 2005. *Food for thought*. [Online]. From: <http://www.cyc-net.org/Journals/rcycp18-2.html>. (Accessed: 1 Nov. 2009).

Knorth, E.J., Van den Bergh, P.M., & Verheij, F. 2002. Professionalization and participation in child and youth care: two sides of one coin? In Knorth, E.J., Van den Bergh P.M. & Verheij, F. (eds.) *Professionalization and participation in child and youth care*. England: Ashgate. 1-23.

Krefting, L. 1991. Rigor in qualitative research: the assessment of trustworthiness. *The American Journal of Occupational Therapy*. 45(03):214-222.

Kruger, M. 2008. *Of, with, in, act. Do, move and be: Defining relational work*. [Online]. From: <http://www.cyc-net.org/cyc-online/cycol-0408-krueger.html>. (Accessed: 11 Nov. 2012).

Lester, S. 2004. *An introduction to phenomenological research*. [Online]. From : <http://www.sld.demon.co.uk/resmethy.pdf>. (Accessed: 9 Nov. 2009).

Maier, H. 1981. *Essential Components in Care and Treatment Environments for Children*. [Online]. From: <http://www.cyc-net.org/CYR101C/pdf/maier-components.pdf>. (Accessed: 11 Nov. 2012).

Maier, H.W. 1987a. *Children and youth grow and develop in group care. Readings in Child and Youth Care Work for South African Students: 1. National Association for Child Care Workers*. Cape Town: Pretext.

Maier, H.W. 1987b. *Developmental group care of children and youth: Concepts and practice*. London: Haworth Press.

Maier, H.W. 1987c. *Essential Components in Care and Treatment Environments for Children. Readings in child and youth care work for South African students: 1. National Association for Child Care Workers*. Cape Town: Pretext.

Martin, P. 2010. *Government-funded programmes and services for vulnerable children in South Africa*. Cape Town: HSRC.

Mattingly, M.A. 2006. *Ethics of child and youth care professionals*. [Online]. From: <http://www.pitt.edu/~mattgly/CYCethics.html>. (Accessed: 1 Nov. 2009).

Meintjes, H., Hall, K., Marera, D. & Boulle, A. 2009. *Child-headed households in South Africa: A statistical brief*. Cape Town: Children's Institute, University of Cape Town.

Morgan, J. 2004. *Memory/ Life Story Work Manual*. [Online]. From: <http://web.uct.ac.za/depts/cgc/Jonathan/Life%20Story%20Manual.htm>. (Accessed: 11 Nov. 2012).

NACCW (National Association of Child Care Workers). 2009. *Isibindi Model Description*. [Online]. From: <http://www.naccw.org.za/isibindi/index.html>. (Accessed: 16 Dec. 2012).

NACCW (National Association of Child Care Workers). 2011a. *Isibindi*. [Online]. From: <http://www.naccw.org.za/isibindi/>. (Accessed: 1Feb. 2013).

NACCW. (National Association of Child Care Workers). 2011b. The Isibindi model won the Larissa Award. [Online]. From: www.naccw.org.za/homepage.html. (Accessed: 15 Dec. 2012).

Neuman, W. L. 2011. *Social Research Methods – Qualitative and Quantitative Approaches* (7th ed.). Boston: Allyn and Bacon.

OUA (Organisation of African Unity). 1990. *African Charter on the Rights and Welfare of the Child*. OAU, Addis Ababa. [Online]. From: http://www.africa-union.org/Official_documents/Treaties_%20Conventions_%20Protocols/A.%20C.%20ON%20THE%20RIGHT%20AND%20WELF%20OF%20CHILD.pdf. (Accessed: 11 Nov. and 28 Dec. 2012).

Oka, T. & Shaw, I. 2000. *Qualitative research in social work*. [online]. From: <http://pweb.sophia.ac.jp/oka/papers/2000/qrsq/qrsq.html>. (Accessed 9 Nov. 2009).

Oxford, 2007, see Shorter Oxford English Dictionary on historical principles, 2007.

Padgett, D.K. 1998. *Qualitative methods in social work research*. California: Sage.

Palys, T. 1992. *Research Decisions: Quantitative and Qualitative Perspectives*. Canada: Harcourt Brace.

Panse, S. 2006. *Ubuntu – African Philosophy*. July. [Online]. From: <http://www.buzzle.com/editorials/7-22-2006-103206.asp>. (Accessed: 11 Nov. 2012).

Philips, C. 2011. *Child-Headed households: a feasible way forward, or an infringement of children's rights to alternative care?* Amsterdam: Universiteit Leiden.

Pikes, T., Burrell, B. & Holliday, C. 1998. Using Academic Strategies to Build Resilience. *Reaching Today's Youth*, 2(3):44-47. [Online]. From: <http://www.cyc-net.org/cyc-online/cycol-0205-resilience.html>. (Accessed: 11 Nov. 2012).

Ploeg, J. 1999. Identifying the best research design to fit the question. Part 2: qualitative designs. *Evidence-based Nursing*. 2:36-37. [Online]. From: <http://ebn.bmj.com/content/2/2/36.long>. (Accessed: 11 Nov. 2012).

Pringle, K.M. 1975. *The needs of children and how they are met*. [Online]. From: <http://www.cyc-net.org/quote2/quote-333.html>. (Accessed: 5 Oct. 2009).

Regulation 50(a-q), see South Africa. 2010a and 2010b.

Richter, L. 2006. Psychosocial support: empathic care at the heart of psychosocial support. *Child and Youth Care Work*. 24(9):10-11. [Online]. From: http://www.hsrc.ac.za/Research_Publication-20012.phtml. (Accessed. 28 Oct. 2012).

Ricks, F. 1992. *A feminist view of caring*. [Online]. From: <http://www.cyc-net.org/features/ft-ricks-fem.html>. (Accessed: 30 Oct. 2009).

Ricks, F. 2001. *The challenges be damn or changed? Complexity in the practice process*. [Online]. From: <http://www.cyc-net.org/cyc-online/cycol-0301-ricks.html>. (Accessed: 9 Nov. 2009).

Ritchie, J & Lewis, J. 2005. *Qualitative research practice: a guide for social science students and researchers*. California: Sage.

Rukuni, M. 2007. *Being African: Rediscovering the traditional Unu-Ubuntu-Botho Pathways of being Human*. Arcadia: Mandala Itea Investments (Pty) Ltd.

Save the Children's Fund. 2003. *Children Affected by HIV/AIDS in South Africa a Rapid Appraisal of Priorities, Policies and Practices*. [Online]. From: http://www.unicef.org/southafrica/SAF_resources_safethechildren.pdf. (Accessed: 6 Jan. 2007).

- Schostak, J. 2008. *Qualitative Research Assignment/Dissertation/Thesis Check-list*. [Online]. From: <http://www.enquirylearning.net/ELU/Issues/Research/dissertationcheck.html>. (Accessed: 8 Nov. 2009).
- Shaw, I. & Gould, N. 2001. *Qualitative Research in Social Work*. [Online]. From: http://books.google.co.za/books?id=yEFwVNYepGYC&pg=PA32&source=gbs_toc_r&cad=4#v=onepage&q&f=false. (Accessed: 11 Nov. 2012).
- Shaw, K. 2009. *Barefoot in their home: A phenomenological inquiry into child and youth care workers' experiences of self in family homes*. MA (CYCW) dissertation, Mount Saint Vincent University, Canada.
- Shenton, A.K., 2004. Strategies for ensuring trustworthiness in qualitative research projects. *Education for Information*. 22:63-75.
- The Shorter Oxford English Dictionary on historical principles. 2007. Oxford: Oxford University Press.
- Small, R.W. & Dodge, L.M. 1988. Roles, skills, and job tasks in professional child care: A review of the literature. *Child and Youth Care Quarterly*, 17(1):1.
- South Africa. 2006a. Children's Act (Act No 38) of 2005. *Government Gazette*, 492(28944), 19 June: 1-217.
- South Africa. 2006b. Children's Act (Act No 38) of 2005. *Government Gazette*, 492(28944), 19 June: 1-217.). [Online]. From: <http://www.info.gov.za/view/DownloadFileAction?id=67892>. (Accessed 29 Jan. 2013).
- South Africa. 2007. National Assembly, Second Reading of the Report of Portfolio Committee on Social Development on Children's Amendment Bill, [Online]. From: http://www.parliament.gov.za/live/commonrepository/.../53374_1.doc. 6 Nov. 2007. (Accessed 10 Nov. 2007).
- South Africa. 2010a. General regulations regarding child care, made under the the Children's Act (Act 38 of 2005) as amended. (Government Notice R261 of 2010). *Government Gazette*, 33076, 1 April 2010.

South Africa. 2010b. *Regulations relating to the duties of supervising adult in relation to child-headed-households made under the Children's Act (Act 38 of 2005) as amended.*

(Government Notice R261 of 2010). [Online]. From:

<http://www.polity.org.za/article/childrens-act-382005-general-regulations-regarding-children-gazette-no-33076-regulation-261-2010-04-15>. (Accessed: 1 Jan. 2013).

Steckley, L. 2007. *We're getting there.* [Online]. From: <http://www.cyc-net.org/cyc-online/cycol-0507-laura.html>

South Africa. 2006. Children's Act (Act No 38) of 2005. *Government Gazette*, 492(28944), June 19:1-217. (Accessed: 5 Oct. 2009).

Streubert Speziale, H.J. & Carpenter, D.R. 2007. *Qualitative research in nursing: advancing the humanistic imperative.* (4th ed.). Philadelphia: Lipincott Williams & Wilkens.

Strydom, H. 2005a. Ethical aspects of research in the social sciences and human service professions. In De Vos, A.S., Strydom, H., Fouché, C.B. & Delpport, C.S.L. *Research at Grass Roots for the Social Sciences and Human Services Professions.* (3rd ed.). Pretoria: Van Schaik. 56-70.

Strydom, H. 2005b. Sampling and sampling methods. In De Vos, A.S., Strydom, H., Fouché, C.B. & Delpport, C.S.L. *Research at Grass Roots for the Social Sciences and Human Services Professions.* (3rd ed.). Pretoria: Van Schaik. 192-204.

Strydom, H. 2005c. Writing the research report. In De Vos, A.S., Strydom, H., Fouché, C.B. & Delpport, C.S.L. *Research at Grass Roots for the Social Sciences and Human Services Professions* (3rd ed.). Pretoria: Van Schaik. 246-258.

Thumbadoo, Z.S. 2005. Exploring the role of community child and youth care workers in South Africa: Where to in developing competencies? *CYC-Online*. 116, Oct. [Online].

From: <http://www.cyc-net.org/cyc-online/cyconline-oct2008-zeni.html>. (Accessed: 11 Nov. 2012).

Thumbadoo, Z. 2012. Isibindi: Love in Caring with a Child and Youth Care Approach. In Garfat, T. & Fulcher, L.C. 2012. *Child and Youth Care in Practice.* Cape Town: Pretext. 190-199.

- Thurman, T., Yu, S. & Taylor, T.M. 2009. *A case study. Care for caregivers: A psychosocial support model for child and youth care workers serving orphans and vulnerable children in South Africa. A program implemented by the National Association of Child Care Workers*. New Orleans: Tulane University.
- Tolich, M. & Davidson, C. 1999. *Starting fieldwork: An introduction to qualitative research in New Zealand*. Melbourne: Oxford University Press.
- Tutu, D. 2000. *Ubuntu*. March. [Online]. From: <http://www.cycnet.org/today2000/today000328.html>. (Accessed: 11 Nov. 2012).
- UNAIDS. 2010. *Report on the global AIDS epidemic*. Geneva: UNAIDS. [Online]. From: http://www.unaids.org/globalreport/global_report.htm. (Accessed: 11 Nov. 2012).
- UN General Assembly, Convention on the Rights of the Child, 1989, United Nations, *Treaty Series*, 20 Nov. Vol. 1577. [Online]. From: <http://www.unhcr.org/refworld/docid/3ae6b38f0.html>. (Accessed: 1 Nov. 2012).
- UNICEF 2005. *Children: The missing face of AIDS*. Press release. [Online]. From : http://www.unicef.org/media/media_29392.html. (Accessed: 28 Dec. 2012).
- UNICEF 2010. *Children and Truth Commissions*. Innocenti Research Centre. [Online]. From: http://www.unicef-irc.org/publications/pdf/truth_commissions_eng.pdf. (Accessed: 11 Nov. 2012).
- U.S. Department of State. 2005. *Engendering Bold Leadership: First Annual Report to Congress on PEPFAR*. Washington: US Department of State.
- Vanderwoerd, J. 1991. Divisions between behaviour management and therapy: Towards new directions of authority in child and youth care. *Journal of Child and Youth Care*. 5(1) (March):33-41. [Online]. From: <http://www.cyc-net.org/quote3/quote-1408.html>. (Accessed: 11 Nov. 2012).
- Visser, M., Zungu, N. & Ndala-Mogoro, N. 2012. *Evaluating the impact of the Isibindi Programme on Vulnerable Youth*. Business Enterprises. Pretoria, South Africa: University of Pretoria (unpublished).

APPENDIX ONE

APPLICATION TO CONDUCT RESEARCH

The Director
Durban Children's Home
222 Manning Road
Glenwood
4001

26 July 2009

Dear Ms. Goble

MASTERS RESEARCH

Further to our initial conversation I write to ask your permission to conduct research with selected participants from the Umbumbulu Isibindi Project.

My research goal is to explore the characteristics and meaning of selected encounters between community child and youth care workers and young people where daily life events are used therapeutically and/or developmentally in the life spaces of young people in child headed households. The objective is to explore the daily life events used by child and youth care workers in encounters with young people in child headed households and to highlight themes that promote and support therapeutic and developmental encounters between child and youth care workers and young people in child headed households.

If you agree to the research I will need access to two community child & youth care workers and two child headed families that they work with. I may need to draw on a translator (who will be bound by an oath of confidentiality) and ensure that the children have access to a safe adult in the research process. I would adhere to a code of ethics in the process of the research which includes the following:

The protocols for consent will include the following:

- Consent to participate from each child involved in the research
- Consent to participate for each child and youth care worker involved in the research
- Consent from family elders or other significant family elders if necessary
- Permission to use information gathered from the interviews
- Re-negotiation of consent within the research process

The following considerations will ensure emotional safety for the young people:

- Presence of a selected secure adult for support if necessary.
- Permission will be given to refuse to share any information and refuse to answer any question.
- Participation in the choice of venue for the interviews/discussions
- Preparation for the provision of emotional care of participants after the interviews/discussion if necessary
- Respect for the traditions, customs, and culture of the participants.
- Use of translations and securing of acceptable and trustworthy translators if necessary.

The following ethical principles and protocols will ensure confidentiality:

- Maintenance of confidentiality – changing of name, address and identifying details
- Ensuring oaths of confidentiality signed by translators
- Changing facts where necessary (as long as these changes do not distort the authenticity of the research report)

I will need to interview the children and child and youth care workers in depth over two/three interviews each. I will negotiate suitable days and times with them. I expect to prepare the research subjects in July and conduct the interviews in August and September. The research is undertaken through UNISA and my supervisor is Dr Thom Garfat. If required, I will ensure that a copy of my final research is made available to you.

If you agree to grant consent for the conducting of the research please complete and sign the attached consent statement and forward it to me. Attached please find consent forms prepared for the research subjects for your information.

I am available to discuss any concerns or questions you have about the research telephonically or in a face to face meeting with you. Your cooperation is appreciated.

Yours Faithfully

Zeni Thumbadoo

CONSENT STATEMENT

I, M. Goble, Director of Durban Children's Home consent to allowing selected child and youth care workers and children from child headed households from the Umbumbulu Isibindi Project to participate in the research project: "*Ways in which child and youth care workers support child-headed households in communities*" to be conducted by Zeni Thumbadoo.

I accept the assurances indicated in the correspondence and give permission for any information gained to be used for publication purposes.

Signed : _____

Date : 26 July 2009

APPENDIX TWO**INFORMED CONSENT SHEET FOR CHILD & YOUTH CARE WORKERS****1. Nature of research project**

This project seeks to explore the characteristics and meaning of selected encounters between community child and youth care workers and young people where daily life events are used therapeutically and/or developmentally in the life spaces of young people in child-headed households. The objective is to explore the daily life events used by child and youth care workers in encounters with young people in child-headed households and to highlight themes that promote and support therapeutic and developmental encounters between child and youth care workers and young people in child-headed households.

2. Requirements of subjects

- You will need to be available for approximately two/three interviews (2-3 hours each) in July/August 2009.
- You will need to give consent for the information gathered from the interviews to be used in the research project.

3. Rights of subjects

- The interviews will be conducted at a specific date and time and venue convenient to you.
- Confidentiality will be ensured by changing your name, address and identifying details so that the views and information provided will not be traced back to you.
- Certain facts can be changed where necessary (as long as these changes do not distort the authenticity of the research report)
- You will have access to documents resulting from the research.
- You are allowed to change your mind about participating in the research in the process if the research despite the consent given.

- You have permission to refuse to share any information and refuse to answer any question.
- Your traditions, customs culture will be respected in the research process.

4. Consent Statement

I....., the Child and Youth Care Worker from the
Isibindi Project agrees to participate in the research project: *Ways in which child and youth care workers support child-headed households in communities*, to be conducted by Zeni Thumbadoo. I accept the assurances noted and give permission for any information gained to be used for publication purposes.

Signed:

Date:

APPENDIX THREE**INFORMED CONSENT SHEET FOR YOUNG PEOPLE****1. Nature of research project**

This project seeks to explore the characteristics and meaning of selected encounters between community child and youth care workers and young people where daily life events are used therapeutically and/or developmentally in the life spaces of young people in child-headed households. The objective is to explore the daily life events used by child and youth care workers in encounters with young people in child-headed households and to highlight themes that promote and support therapeutic and developmental encounters between child and youth care workers and young people in child-headed households.

2. Requirements of subjects

- You will need to be available for approximately two/three interviews (2-3 hours each) in July/August 2009.
- You will need to give consent for the information gathered from the interviews to be used in the research project.

3. Rights of subjects

- The interviews will be conducted at a specific date and time and venue convenient to you.
- Confidentiality will be ensured by changing your name, address and identifying details so that the views and information provided will not be traced back to you.
- Certain facts can be changed where necessary (as long as these changes do not distort the authenticity of the research report)
- You will have access to documents resulting from the research.
- You are allowed to change your mind about participating in the research in the process if the research despite the consent given.
- You are allowed the presence of a selected secure adult for support

- You have permission to refuse to share any information and refuse to answer any question.
- Your traditions, customs culture will be respected in the research process.
- You can ask for the support of a translator.
- Consent can be sought from any family elder or other significant family elders if requested.

4. Consent Statement

I....., serviced by the Umbumbulu Isibindi Project give permission for her to participate in the research project *Ways in which child and youth care workers support child-headed households in communities* to be conducted by Zeni Thumbadoo. I accept the assurances noted and give permission for any information gained to be used for publication purposes.

Signed:

Date:

APPENDIX FOUR

OATH OF CONFIDENTIALITY

I,

as a Child and Youth Care Worker in my capacity of translator in the research *Ways in which child and youth care workers support child-headed households in communities* undertaken by Z.S Thumbadoo agree not to divulge any information about the families interviewed by researcher Z.S Thumbadoo.

Signed:

Date: