The experiences and perceptions of social workers on the provision of family preservation services in the Ekurhuleni Metropolitan, Gauteng Province

by

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Supervisor: Professor M.D.M Makofane

September 2014
I declare that: *The experiences and perceptions of social workers on the provision of family preservation services in the Ekurhuleni Metropolitan, Gauteng Province*, 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.

_________________  ________________
SIGNATURE          DATE
(Mrs. Felistas Nhedzi)
DEDICATION

I dedicate this dissertation to the love of God poured into the hearts of people who helped me in completing my studies.
ACKNOWLEDGEMENTS

Above all, I would like to thank God for granting me strength, wisdom and comfort throughout my studies.

I am indebted to many people for their support and affording me the time to focus on my studies. This has been an unforgettable experience.

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ABSTRACT

Many South African families are beset by social, psychological and economic challenges placing children at risk. Family preservation services, capitalising on families’ strengths to resolve their problems, are crucial to avoid the removal of children from their homes.

Using a qualitative approach, this study reveals the experiences and perceptions of twelve social workers providing family preservation services in the Ekurhuleni Metropolitan of Gauteng Province. These social workers articulate their understanding of and experiences with the Children’s Act (Act No. 38) of 2005. They are generally optimistic that family preservation services can offer a helping process with the potential to improve family functioning.

Nevertheless, there are stumbling blocks to effective service delivery, such as the kinds of social problems experienced by families, lack of funding, high caseloads, lack of resources and little co-operation from other disciplines and agencies. Based on these findings, recommendations are made for practice, policy and further research.

KEY TERMS
Child welfare; family preservation services; prevention services; early intervention services; statutory intervention services; aftercare services; social workers’ experiences.
### LIST OF ACRONYMS

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>BSW</td>
<td>Bachelor of Social Work</td>
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<tr>
<td>CPD</td>
<td>Continuing Professional Development</td>
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<td>DSD</td>
<td>Department of Social Development</td>
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<td>FAMSA</td>
<td>Families South Africa</td>
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<td>NGOs</td>
<td>Non-Governmental Organisations</td>
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<tr>
<td>SACSSP</td>
<td>South African Council for Social Service Professions</td>
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<td>SANCA</td>
<td>South African National Council on Alcoholism and Drug Dependence</td>
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<td>SAQA</td>
<td>South African Qualifications Authority</td>
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<td>UNISA</td>
<td>University of South Africa</td>
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CHAPTER ONE

GENERAL ORIENTATION TO THE STUDY

1.1 Introduction

This chapter details a general overview of the study which informed the research process of gathering information on the experiences and perceptions of social workers regarding the provision of family preservation services in the Ekurhuleni Metropolitan, Gauteng Province. The background, problem statement and motivation for the study are provided followed by a brief outline of the research methodology, data analysis and chapter outline.

1.2 Background to the study

It was envisaged that after the South African government had instituted the family preservation approach into law, child welfare social workers would prioritise family preservation instead of removing and placing children into foster care or child and youth care centres. However, social workers who are supposed to render family preservation services face various challenges which involve lack of resources within organisations, families and communities (Strydom, 2010:200; Earle, 2008a:32; Sewpaul & Hölscher, 2007:198; Bak, 2004:90). Notably, organisations have inadequate physical, human and financial resources for social workers to run family preservation programmes (Davids, 2012:6; Strydom, 2010:200). Poverty is the predominant threat to the new family preservation care system, thus making the children involved vulnerable. These challenges often result in social workers being faced with the dilemma of either allowing vulnerable children to remain in their unsuitable family environments or to find them alternative placement (Bywater, 2008:45). Therefore, this study was an endeavour to understand the experiences and perceptions of child welfare social workers providing family preservation services, in the Ekurhuleni Metropolitan, Gauteng Province.

Provision of family preservation services is a strategy to empower families in order to enhance the optimal development of needy children and to prevent their statutory removal from families to alternative care (Strydom, 2010:192). These services are intensive and rehabilitative, focusing on strengthening families, keeping family members together and
encouraging parents to take responsibility for raising their children (Swart, 2012:24; Green Paper on Families, 2011:74; Crosson-Tower, 2009:244). Based on a strengths perspective and an ecological approach, the provision of family preservation services represents a move to embrace social work practice values and principles in service delivery (Cash, 2008:483). As such, social workers provide family preservation services from a strengths perspective to help families discover their own strengths for them to be self-sustainable (Walton, 2001:628). On the other hand, the ecological approach provides social workers with a comprehensive way of helping families as it recognises the interdependence between families and the environment (Cash, 2008:476). The families’ environment promises both risk and opportunity, hence social workers advocate for families to access resources from their communal environment (Collins, Jordan & Coleman, 2007:15; Walton, 2001:628).

Within the South African context, the strengths perspective is being applied in an effort to preserve families (White Paper on Families in South Africa, 2012:3; Green Paper on Families, 2011:74; Manual on Family Preservation Services, 2010:44). Importantly, renewed and enhanced efforts to strengthen and preserve families have been instituted through the national policy dialogue, development and implementation (Gray & Lombard, 2008:134). The White Paper for Social Welfare (1997:64) requires social workers to first concentrate on prevention to enhance families’ capacity and their role and responsibilities; secondly, on early intervention or protection to preserve families; and lastly on statutory intervention. As a result, the Children’s Act (Act No. 38) of 2005, also aims to promote family preservation through the provision of services that prevent the removal of children from their homes and early intervention services. Thus, the court is mandated to issue orders to families in need of family preservation services (Children’s Act No. 38 of 2005, 2006:section 46). For example, the court may order a family member to attend a programme such as, drug rehabilitation, parenting skills training or anger management.

The family preservation approach seeks to transform the expensive American and European approach to social welfare to a more localised approach that is in harmony with indigenous African tradition which promotes caring for one another called ubuntu (De Vos, Schulze & Patel, 2011:22; Foster, 2004:88; White Paper for Social Welfare, 1997:12). Ubuntu is from the idea of umuntu ngumuntu ngabantu which means ‘a person is a person through other persons’. Some authors view ubuntu as a philosophy that upholds the good of society and a crucial element of human growth; or as an ideology that promotes the common good of society; an ethic that developed in a context of interdependence (Shore, 2009:135; Motsei, 2007:10; Venter, 2004:149; Du Toit, 2004:33).
The above explications show the attempts made by the South African government since 1994 to ensure service delivery among its people, particularly in rewriting the social welfare policy to ensure that families are preserved (Gray & Lombard, 2008:134). Therefore, the removal of children from their families is the last option to consider after all efforts for the retention of vulnerable children to remain within the family have been exhausted. For this reason, social workers rendering family preservation services within the South African context are expected to focus on stabilising the crisis situation that could cause children in need of care and protection to be removed from their families (Strydom, 2010:194). Family preservation services being provided include therapeutic or rehabilitation services and community work projects or programmes (Swart, 2012:24; Strydom, 2010:197). In providing these services, social workers conduct home visits, assessments, family meetings and counselling sessions and refer children or family members to specialised services. They also trace missing family members and liaise with the police for the removal of child abuse perpetrators (Swart, 2012:24). Therefore, the provision of family preservation services in South Africa relates to early intervention or protection services provided by social workers to keep children at risk within their families, thus minimizing statutory removals. In cases where children are statutorily removed from home, social workers are expected to render reunification services to ensure that children are reintegrated back into their families (Manual on Family Preservation Services, 2010:47).

The rationale to undertake this study was prompted by the understanding that social workers are authorised implementers, playing key roles in the provision of family preservation services (Green Paper on Families, 2011:67; Mashigo, 2007:90). Despite the challenges faced, such as the lack of resources within organisations, families and communities, some of the social workers continue to commit prioritising family preservation (Gray & Lombard, 2008:137-139). For example, they avoid placing vulnerable children in care institutions such as Kids Haven Child and Youth Care Centre for a prolonged period of time, in the quest to provide family preservation services such as rehabilitation or therapeutic services whilst the affected children remain in the care of their families. However, after three to six months, follow-up audits by social workers at care centres reveal that the situations of the children placed back home have deteriorated, often the solution being to repatriate them back to alternative care centres.

On the other hand, the researcher’s interest in the study was also prompted by complaints by the representatives of Child and Youth Care Centres levelled at social workers during the Ekurhuleni Welfare, Social Services and Development Forum, which took place on 26 March
2012 in Benoni. It emerged that these representatives were not impressed by social workers who remove children from families without making attempts to render family preservation services. It was further claimed that children are merely ‘dumped’ at the child and youth care centres, resulting in social workers having to be followed up to attend meetings to participate in the establishment of the children’s future intervention plans with the care centres (Ekurhuleni Welfare, Social Services and Development Forum, 2012a).

Various organisational problems have been identified as a cause of social workers’ confusion and ineffectiveness, namely lack of training and role clarity, inadequate leadership, unrealistic expectations by the Department of Social Development (DSD), lack of resources or funding and low salaries (Matthias & Zaal, 2009:295; Gray & Lombard, 2008:135; Mashigo, 2007:90; Landman & Lombard, 2006:2; Bak, 2004:83). It is often argued that there are misconceptions and misunderstanding amongst social workers with regard to legislative changes (Mashigo, 2007:90). For instance, there is a lack of communication and direction on how social workers should respond to the demand to attend to statutory, family preservation and community development services at the same time, in an effective manner (Mashigo, 2007:95; Landman & Lombard, 2006:2). Consequently, they become frustrated, insecure, sceptical, anxious and disillusioned instead of being the major role players in addressing the needs of the South African society (Cock, 2008:114; Mashigo, 2007:14).

In particular, organisations have insufficient funds for social workers to run and maintain family preservation programme initiatives (Strydom, 2010:200). Lack of funding in Non-Governmental Organisations (NGOs) has been a topical issue within the South African media (Davids, 2012:6; E-tv, 2012). It was publicised in The Times newspaper of 14 May 2012 that organisations across South Africa are struggling to continue providing crucial services to children and their families, yet government disclosed a lack of knowledge about the severity of funding shortages overwhelming the NGOs (Davids, 2012:6). Subsequently, the DSD described the lack of funding situation as a ‘crisis’ that had disempowered many organisations leaving others on the edge of collapse (Minister probes NGOs’ funding crisis, 2012:22). Another example worth noting is the E-tv television programme of 19 April 2012, in which it was reported that in Boksburg, Ekurhuleni Metropolitan the child welfare unit had one social worker handling 250 cases per month, while many social workers are unemployed because of lack of funding (E-tv, 2012).

The severity of the lack of funding for NGOs in the Ekurhuleni Metropolitan became evident during the Ekurhuleni Welfare, Social Services and Development Forum conducted in
Benoni on 6 May 2012. Here, social workers registered their concern, that, unless these organisations receive sufficient funds, the requirements of the Children’s Act (Act No. 38) of 2005 cannot be met (Ekurhuleni Welfare, Social Services and Development Forum, 2012b). As a result, the few available social workers are increasingly overloaded with legislative responsibilities such as too many foster care cases to investigate and the compilation of reports, leading to an emphasis on paperwork and meeting court case deadlines (Krane, Davis, Calton & Mulcahy, 2010:158-159; Matthias & Zaal, 2009:296; Mashigo, 2007:91). This compromises family preservation services which require building intensive relationships with families.

Notwithstanding the challenges that prevail, building good working relations and partnerships with families is essential for service delivery. However, high caseloads, staff shortages and multiple responsibilities make it difficult for the formation of effective worker-client relationships which remains an important aspect of family preservation. Numerous scholars have also expressed concern regarding the difficulties that social workers experience in connecting with families and the impact of this on family preservation services (Strydom, 2010:200; Grockel, Russell & Harris, 2008:92).

In addition to organisational problems, the shortage of resources in families and communities continues to overwhelm social workers who are expected to ensure that children stay with their families despite the prevalence of poverty (Sewpaul & Hölscher, 2007:198; Bak, 2004:90). The researcher has observed that most vulnerable and at risk children are from families and communities affected by poverty. Notably, in 2011, almost two thirds of more than seven million children in South Africa lived below the poverty line with a monthly household income of less than R604.00 (Hall, 2013:90-91). This means, two thirds of the children population in the Ekurhuleni Metropolitan could be at risk and thus vulnerable.

In such instances, social welfare organisations have to take a decision: either to promote a child’s permanency and well-being in an endangered family environment or to remove the child to an alternative placement, which is unfavourable to the family preservation approach (Rycus & Hughes, 2008:201). Likewise, social workers within the child protection arena are faced with the same challenge when providing family preservation services to children and families living in a risky environment (Bywater, 2008:45). Even though social workers try to address some of the problems such as child abuse and neglect in preserving families, the actual prevailing problem which is poverty, continues to render their efforts ineffective and futile. Therefore, working in underserviced poverty-stricken communities with inaccessible
resources becomes a major problem for social workers (Strydom, 2010:199; Matthias & Zaal, 2009:29; Ravestijn, 2001:6) because in most cases, poverty makes it difficult for families to stay together (White Paper on Families in South Africa, 2012:27).

Hence, effective family preservation work involves identifying both 'hard' and 'soft' resources within the family and the community (Collins et al., 2007:15; Dawson & Berry, 2001:7-8). In accessing 'hard' resources social workers need to help families improve their impoverished physical environment and home circumstances (Dawson & Berry, 2001:8). According to Mathias and Zaal (2009:294-295), the court issues orders to ensure that identified family members receive family preservation services such as drug rehabilitation, parenting skills training, anger management and counselling (soft resources) and therefore, prevention grants (hard resources) should also be ordered to prevent poverty-based removals of children. Notably, families who improve their communication skills, parenting skills and increase the self-esteem of their members will continue to be stressed by their physical environment if they cannot provide for the basic needs of the children such as housing, food and medical care (Dawson & Berry, 2001:7).

Despite the African tradition of *ubuntu*, social, political and economic conditions such as poverty, westernisation and individualisation continue to change individuals’ perspectives and responses to family interaction and relations (Green Paper on Families, 2011:6; Amoateng, Richter, Makiwane & Rama, 2004:11-12). Amoateng et al. (2004:71) assert that, the gap between idealisation of the family and the reality makes it difficult for individuals to implement the African tradition of *ubuntu*. Thus, all families undergo dramatic changes and new family arrangements emerge, which contradict the traditional view on the family (Green Paper on Families, 2011:7; Amoateng et al., 2004:72). Notably, individual family members no longer think about caring for each other.

In the *Mail and Guardian* newspaper of 28 June 2012, Swart (2012:24) highlights from practical experience the dilemma faced by social workers in trying to preserve families within the South African context. The author describes the challenges faced by social workers such as returning a child who lived on the streets to the care of a parent who is addicted to alcohol and always beat the child violently (Swart, 2012:24). The lack of communal and organisational resources is highlighted as a problem as well (Swart, 2012:24). Considering that there are many perpetrators such as the one described, recommending imprisonment of the parent is not feasible as the parent would be released on the basis that there are too few prisons (Swart, 2012:24). At the same time, it is difficult to teach (counsel) a violent drunkard
to stop beating a child. The social workers designated to remove children to alternative care are overloaded and will always face the controversy of either keeping the child in the family or removing the child to alternative care. Hence, Swart (2012:24) concludes that the family preservation approach based on theories from developed countries hardly ever works within the South African context. As such, Sewpaul (2001:574-575) indicates that commitment to improving services for children implies the provision of adequate human, physical and financial resources.

1.2.1 Problem statement

According to Kumar (2011:44), identification of the research problem is the initial and most important step in the research process. It is like constructing the foundation of a building or identifying a destination before undertaking a journey as it provides the basis for the study and determines all the subsequent steps to be followed in the research study (Kumar, 2011:44-45).

In this study, the problem statement is expressed as follows: there is a lack of information on the experiences and perceptions of social workers regarding the provision of family preservation services in the Ekurhuleni Metropolitan, Gauteng Province. Studies on the experiences of social workers in South Africa have generally focused on the impact of the shift from a welfare approach to that of a developmental approach on social work service delivery (De Vos et al., 2011; Strydom, 2010; Matthias & Zaal, 2009; Bywater, 2008; Cock, 2008; Earle, 2008a; Gray & Lombard, 2008; Mashigo, 2007; Ravestijn, 2001). These studies indicate that the competencies and the capacity of social workers as key role players are often challenged due to lack of necessary resources. Although social workers continue to willingly commit to government policies and service delivery, available empirical research reveals that they are overwhelmed by the demand for social work services (Matthias & Zaal, 2009:295; Gray & Lombard, 2008:137-139).

1.2.2 Motivation for the study

The researcher provides family preservation services at Kids Haven Child and Youth Care Centre which is situated in the Ekurhuleni Metropolitan. At this centre, family preservation services target children who have been living and working on the streets and are scheduled to be reunified with their families or integrated back into the community. The process
involves conducting individual and family counselling sessions, home circumstance investigations, multi-disciplinary meetings and referring children and families for specialised services to address presenting problems such as poverty, unemployment, drug abuse, child abuse and neglect, psychological problems and serious behavioural problems. This is then followed by reunifying the children with their families and integrating them back into the community.

From observation and five years of experience, the researcher has noted that social workers are unable to provide effective family preservation services due to the lack of required community resources such as income-generating projects, correctional services, drug rehabilitation centres, trauma and grief counselling centres and psychiatric services. Thus, the retention of children from poor families in the centre is always challenging as the families’ impoverished situation and lack of communal resources place the children at risk of committing petty crimes such as stealing from others. As a result, children from poverty-stricken families remain at the centre despite the improvement in the relationships among family members. In most cases, children exit the centre by absconding and never return.

In light of the researcher’s observations and available literature, it appears that social workers are facing challenges with the provision of family preservation services which requires adequate human and physical resources. It was therefore important to conduct a study to establish social workers’ experiences and perceptions regarding the provision of family preservation services in order to make suggestions on practical and effective strategies that can help social workers in preserving families.

1.3 Research question, primary goal and objectives of the study

The following section focuses on the research question, primary goal and objectives of the study.

1.3.1 Research question

Research is a process of asking and attempting to answer questions about the world using different methods (Dane, 2011:3). Research questions stem from the research problems and researchers believe that the process of answering the research question or the answers to
the research question helps to alleviate the research problem (Royse, 2008:19; Yegidis & Weinbach, 2002:56). Creswell (2009:129) defines a research question as a broad and overall question that asks for an exploration of the central phenomenon. In qualitative studies, the research question focuses on exploring the processes behind behaviour and gaining insight into perceptions, opinions, beliefs and feelings (Hennink, Hutter & Bailey, 2011:35). The research question provides the starting point of the research process as it helps the researcher in determining the research goals and objectives (Royse, 2008:21; Yegidis & Weinbach, 2002:56).

To explore the experiences and perceptions of social workers who provide family preservation services in the Ekurhuleni Metropolitan, Gauteng Province, the researcher posed the following research question: What are the experiences and perceptions of social workers on the provision of family preservation services in the Ekurhuleni Metropolitan, Gauteng Province?

1.3.2 Goal and objectives

Guided by the research question, a goal and objectives of the study are formulated to assist with the process of generating answers to the research question. A goal refers to a ‘dream’ or future valued outcomes (Locke & Latham, 2006:265; Fouché & De Vos, 2005:104). It also indicates what the researcher wants to achieve through the research process (Hennink et al., 2011:34). Thus, the goal of this study was to develop an in-depth understanding of the experiences and perceptions of social workers on the provision of family preservation service in the Ekurhuleni Metropolitan, Gauteng Province.

Objectives denote the steps to be realistically taken at grassroots level within a certain time frame in order to attain the dream or the future desired outcomes (Locke & Latham, 2006:265; Fouché & De Vos, 2005:104). Formulating objectives for the study is similar to drawing up the research plan (Creswell, 2009:112).

In order to attain the above stated goal, the overall research objective of the study was formulated as to explore and describe the experiences and perceptions of social workers who provide family preservation services in the Ekurhuleni Metropolitan.
The overall research objective was divided into the following task objectives:

- To obtain a sample of social workers who provide family preservation services in the Ekurhuleni Metropolitan.
- To conduct semi-structured interviews facilitated by open-ended questions included in an interview guide.
- To explore the experiences and perceptions of social workers on the provision of family preservation services in the Ekurhuleni Metropolitan.
- To sift, sort and analyse the qualitative data gathered using Tesch’s eight steps (cited in Creswell, 2009:186) and by means of the Atlas Ti software package.
- To describe the experiences and perceptions of social workers who provide family preservation services in the Ekurhuleni Metropolitan.
- To interpret the data and conduct a literature control in order to verify the findings.
- To draw conclusions and make recommendations based on the perceptions and experiences of social workers who provide family preservation services, for the improvement of service delivery.

1.4 Research methodology

The study is based on a qualitative research methodology which is a multi-perspective approach that attempts to understand participants in their natural setting by interpreting a social phenomenon in terms of the meanings participants attach to it (Denzin & Lincoln, 2011:4, 24). Here the focus is on participants’ lived experiences and obtaining a deeper understanding of their thoughts and feelings (Royse, 2008:27).

The qualitative approach relies on inductive instead of deductive logic (Yegidis & Weinbach, 2002:17). In using inductive logic, the researcher collaborates interactively with the participants in building up patterns, categories and themes from the data collected (Creswell, 2009:175). The approach allows the researcher to identify factors involved in the problem under study, to develop a complex picture of the problem and to report on multiple perspectives (Creswell, 2009:176).

The initial plan for the research process is flexible; therefore, it can be modified during the research process in order to gather information about the problem from the participants’ perspectives (Creswell, 2009:175-176). As such, an extensive review of literature may not occur prior to data collection instead, an in-depth demonstration of literature control may be
undertaken to confirm or question the initial findings of the research (Yegidis & Weinbach, 2002:17).

The researcher is the primary instrument of data collection and analysis which requires constant contact with the participants in their natural settings (Royse, 2008:271; Yegidis & Weinbach, 2002:17). There is inter-subjectivity in using this approach in that the researcher can access the participants’ thoughts, perceptions and experiences through language (Remler & Van Ryzin, 2011:57).

Qualitative data are mostly written or spoken words or observations that do not have a direct numerical interpretation (Engel & Schutt, 2009:23). Data analysis is interpretive as it involves interpreting the meaning of words and observations (Remler & Van Ryzin, 2011:57). The interpretive aspect means that the researcher seeks to understand the participants’ lived experiences from their perspective (Hennink et al., 2011:14).

Due to a lack of in-depth information on the experiences and perceptions of social workers who provide family preservation services in the Ekurhuleni Metropolitan a qualitative approach was considered suitable to gain a deeper understanding of this phenomenon. In using the qualitative approach, the researcher sought to explore and describe the meaning that social workers attach to their experiences and perceptions concerning the provision of family preservation services in the Ekurhuleni Metropolitan. Accordingly, the research study was exploratory, descriptive and contextual in nature.

The researcher interacted with the participants in their natural setting, interpreted their words and observations and derived themes from the collected data. This enabled the researcher to produce a picture of the phenomenon being studied and to report on the participants’ multiple perspectives.

A more comprehensive presentation on the application of the research methodology namely; the qualitative approach, research designs, method of data collection, analysis and verification of data is provided in Chapter Three.
1.5 Clarification of key concepts

According to Monette, Sullivan and DeJong (2011:30), a concept is a mental construct or image developed to symbolise ideas, things or events. Below are definitions of the key concepts that are used in this study.

1.5.1 Child

According to Berns (2007:15), a child is someone who is cared for, taught and protected due to lack of maturity to carry out these responsibilities on his or her own. In terms of the Children’s Act (Act No. 38) of 2005 (2006:section 1), a child means a person under the age of 18 years. In this context, the term child refers to any person whose age is between 0 and 18 years and is in need of care, guidance and protection.

1.5.2 Family

According to the Green Paper on Families (2011:73), “a family is a group of persons united by the ties of marriage, blood, adoption or cohabitation, characterised by a common residence (household) or not, interacting and communicating with one another in their respective family roles, maintaining a common culture and governed by family rules”. A family has close emotional attachments that endure over time and go beyond a particular physical residence (Amoateng et al., 2004:3). It is the primary socialiser of the child and has the most significant impact on the child’s development (Berns, 2007:21). In this context, a family refers to a group of persons who are related by blood, adoption or cohabitation to a child who is in need of care, guidance and protection.

1.5.3 Family preservation services

Family preservation services are intensive or rehabilitative services provided to prevent placement of children at risk in alternative care or when children are scheduled to be reunified with their families (Crosson-Tower, 2009:244). According to the Green Paper on Families (2011:74), family preservation services focus on family strengths in order to strengthen families and to keep families together as far as possible. Strydom (2010:192) defines family preservation as “a strategy to empower families to enhance optimal
development of children and to prevent the statutory removal of children from their families”. In this research, family preservation services refer to services provided by social workers to children and families to avoid removal of children from their families and to reunify children who have been statutorily removed from their homes.

1.5.4 Social work

According to the International Association of Schools of Social Work and International Federation of Social Workers (2001:1), “The social work profession promotes change, problem solving in human relationships and the empowerment and liberation of people to enhance well-being. Utilizing theories of human behaviour and social systems, social work intervenes at the points where people interact with their environments. Principles of human rights and social justice are fundamental to social work”. Social work as a profession enhances individuals’ capacity to resolve problems, cope and function effectively, links individuals with needed resources, improves social service delivery and promotes social justice through the development of social policies (DuBois & Miley, 2011:3). It encompasses comprehensive methodologies that stretch from clinical interventions with individuals, families and small groups to community-based interventions, policy practice and social development (Hare, 2004:417). The focus is on enabling people within their environments to develop full potential, enrich lives and prevent dysfunction (Seabury, Seabury & Garvin 2011:9). In this context, social work refers to a profession that seeks to help children and their families to solve problems and enhance their well-being through family preservation services and that enable social workers to intervene on time to prevent the statutory removal of children from their families and to reunite those who have already left home, with their families.

1.5.5 Social worker

A social worker is a professional person who helps others to resolve problems and obtain resources, provides support during crises and facilitates social responses to needs (DuBois & Miley, 2011:3). As such, a social worker is a change agent in society and in the lives of the individuals, families and the communities he or she serves (International Association of Schools of Social Work and International Federation of Social Workers, 2001:1). As a professional, a social worker has mastered the requisite knowledge base and skills and adheres to values and ethics of the social work profession (DuBois & Miley, 2011:3). In
South Africa, a social worker is a person registered under Section 17 of the Social Service Professions Act (Act No.110) of 1978, as amended. For the purpose of this study, a social worker is defined as a registered professional person who renders family preservation services in an effort to help children and families to resolve problems and access required resources in order to minimise the removal of children from their families to alternative care.

1.5.6 Family in crisis

A crisis is a state in which an individual or a family fails to cope using habitual coping strategies or strengths due to an event or series of events that poses a threat, loss or challenge (Coulshed & Orme, 2012:130). Due to a crisis situation, a family struggles to function adequately in meeting the needs of its children, thus, making the children vulnerable to social problems such as maltreatment and child abuse (Green Paper on Families, 2011:5; Matthias & Zaal, 2009:291; Collins et al., 2007:22). In this study, a family in crisis is defined as a family that is struggling to function on its own due to challenging situations that endanger the well-being of children.

1.5.7 Needy family

A family in crisis utilise various resources and services to address the crisis situation (Coulshed & Orme, 2012:130; Kirst-Ashman, 2010:253). The provision of family preservation services helps families to alleviate social problems for them to attain a better level of social functioning (DuBois & Miley, 2011:3; Strydom, 2010:192; Crosson-Tower, 2009:244). For the purpose of this study a needy family is defined as a family that is in a crisis and is in need of resources or services which can enable it to cope and function at a better level thus, protecting children from further harm.

1.5.8 Experiences

The term ‘experience’ refers to the sensation of change or any process that a person is conscious of and is involved in as it happens (Diller, Shedroff & Rhea, 2006:18). This can refer to two different states, that is a moment-by-moment lived experience and the evaluated experience which is subject to reflection and prescribed meaning (Highmore, 2002:4). In this context, experience refers to social workers’ conscious, lived and evaluated processes or situations they encountered when providing family preservation services.
1.5.9 Perceptions

A perception is an active process of how people select, organise and interpret people, objects, events, situations and activities (Wood, 2009:31). According to Kotler and Keller (2006:185-186), a perception refers to people’s evaluation of information inputs in order to create a meaningful picture of the world. In this context, perceptions refer to social workers’ interpretation or evaluation of the family preservation services offered in the Ekurhuleni Metropolitan, Gauteng Province.

1.6 Ethical considerations

Within the research context, ethical considerations refer to a set of moral principles which provides guidelines for an appropriate relationship between the researcher and the participants (Miles, Huberman & Saldaña, 2014:58; Strydom, 2011a:114). These ethical considerations are based on respect for the participants’ right to privacy, anonymity and voluntary participation; protection of participants from potential harm and justification on the benefits of the study (Marshall & Rossman, 2011:47). This becomes an important aspect of research as people’s experiences and perceptions often impinge on their sensibilities (Walliman, 2011:245). Therefore, the researcher should demonstrate an understanding of anticipated ethical issues. These should be addressed when a research proposal is submitted and throughout the implementation stage (Ogletree & Kawulich, 2012:5, 71; Marshall & Rossman, 2011:48). According to Ogletree and Kawulich (2012:71), a researcher should obtain approval from the University’s Ethics Committee before conducting a research study.

In this study, the researcher compiled a research proposal to demonstrate an understanding of the ethical issues that might arise during the study. The proposal was reviewed and approved by the Research and Ethics Committee of the Department of Social Work at UNISA after ensuring that the researcher successfully discussed the process she is going to follow to observe the participants’ informed consent, anonymity, confidentiality and management of information.
1.6.1 Informed consent

Informed consent relates to participants making a voluntary decision to participate in the study after they have been fully informed about all aspects of the research without deceit, duress or similar unfair manipulation (Ogletree & Kawulich, 2012:64; Monette et al., 2011:54; Berg, 2009:87). The researcher is expected to provide detailed information about the purpose, methods, duration and the possible uses of the study (Ogletree & Kawulich, 2012:64; Rubin & Babbie, 2010:228). The participants should be made aware that the research might have an effect on their emotional welfare and that they can withdraw from the research at any time (Ogletree & Kawulich, 2012:68-69). They should be provided an opportunity to ask questions before commencing and during the study (Strydom, 2011a:118).

An informed consent form is a prerequisite as it ensures that participants are fully informed about the purpose of the study, their voluntary participation, the commitment required in participating in the study, confidentiality, benefits and the risks associated with their participation (Marshall & Rossman, 2010:47-48; Berg, 2009:88). The researcher must attach an informed consent form to the research proposal (Marshall & Rossman, 2010:48).

To meet the ethical consideration of informed consent, the researcher ensured that the social workers were clearly informed about all aspects of the research, namely the research aim, objectives, methods and procedures and their rights and responsibilities as participants. A letter giving information about the research and requesting their participation was written and given to potential participants (cf Addendum C). Follow up individual sessions were conducted with the participants. During the sessions, the researcher attended to participants’ questions and gave clarification on the research. This enabled the participants to make an informed decision on their voluntary participation. Informed consent forms which explained the nature of the study and the benefits and risks involved in participation were dated and signed by both the researcher and the participants (cf Addendum D).

1.6.2 Anonymity and confidentiality

The ethical principles of anonymity and confidentiality exist to safeguard research participants from harm that can result from their identities being associated with the data collected (Yegidis & Weinbach, 2002:40). Confidentiality involves concealing the identifying
particulars of the participants and avoiding any information that might cause potential harm to the participants (Ogletree & Kawulich, 2012:64). Anonymity is when the participant is not known to the researcher and the readers (Monette et al., 2011:58). It requires data to be collected in such a way that it is impossible for anyone to link the data collected with the participants (Monette et al., 2011:58). However, this may be difficult to achieve due to the nature of the study which might require contact with the participants (Monette et al., 2011:58). Therefore, the researcher need maintain confidentiality when reporting the findings to ensure that participants remain anonymous to the readers (Engel & Schutt, 2009:64).

To safeguard the participants from harm which might occur as a result of association of their identities with the data collected, the researcher ensured that the data gathered was kept confidential by not divulging information shared by the participants with other people except the professional independent coder and the study supervisor. To add, the researcher locked away the transcripts and field notes. Alphabet letters were used when recording information from the participants, thus concealing their identities. In this way, the participants remain anonymous to other people. Management of information is discussed in detail below.

1.6.3 Management of information

In managing information, the researcher ensures that the ethical principle of confidentiality and anonymity is maintained when collecting, storing and presenting data (Flick, 2011:220, Monette et al., 2011:58; Engel & Schutt, 2009:64). The researcher can offer participants an opportunity to identify and destroy the data which they wish to remain private after data collection (Monette et al., 2011:58). To minimise the risk of access to data by unauthorised persons, the researcher needs to lock research records or use password protection for data stored electronically (Flick, 2011:220, Engel & Schutt, 2009:64). To add, the researcher should conceal the participants' identities and information that can be linked to the participants' identities (Berg, 2009:90; Engel & Schutt, 2009:64; Yegidis & Weinbach, 2002:40). In this regard, it is essential to change the participants’ real names by creating special identity codes such as pseudonyms or case numbers when reporting (Berg, 2009:90; Engel & Schutt, 2009:64). After data analysis, records need to be disposed of which might entail deleting the audio-recordings and shredding documents (Walliman, 2011:260).

In managing information, the researcher offered social workers the opportunity to point out any information which they wished to remain private. A form (cf. Addendum E) requesting
the participants to indicate ways in which they wanted the recorded information to be used was completed by the participants. The research records were kept locked and password protection was used for data stored electronically to ensure that the data was kept safely from access by unauthorised persons. In addition, the researcher was cautious when reporting results to ensure that participants cannot be identified from the findings. In this regard, the researcher changed the participants’ real names and created alphabet letters when reporting.

1.7 Structure of the research report

An outline of chapters included in the study is as follows:

**Chapter 1: General orientation to the study**
This chapter has provided the general introduction and background to the study, problem formulation and the motivation for the study, the research question, goal and objectives, the research methodology, clarification of key concepts and ethical considerations.

**Chapter 2: Theoretical perspectives on family preservation services**
The chapter focuses on the theoretical perspectives underpinning the provision of family preservation services.

**Chapter 3: Application of the qualitative research method**
This chapter provides a detailed research methodology which includes the application of the qualitative approach, research designs, methods of data collection, analysis and verification of data.

**Chapter 4: Presentation and discussion of the first part of the findings**
This chapter focuses on the presentation of the first part of the research findings, and literature control to verify the findings.

**Chapter 5: Presentation and discussion of the second part of the findings**
This chapter focuses on the presentation of the second part of the research findings, and literature control to verify the findings.
Chapter 6: Summary, conclusions and recommendations

In this chapter a summary of the research report, overall conclusions based on major findings and recommendations are provided.
CHAPTER TWO

THEORETICAL PERSPECTIVES ON FAMILY PRESERVATION SERVICES

2.1 Introduction

The social work profession seeks to help individuals, families, groups and communities to solve their problems and attain a better level of social functioning (DuBois & Miley, 2011:3 Seabury et al., 2011:9; Hare, 2004:417). It recognises the importance of the family in promoting an individual's well-being and development (Berns, 2007:21). As such, the provision of family preservation services strives to enhance family functioning guided by social work practice perspectives such as the strengths perspective, empowerment approach, ecological approach and systems theory (Cash, 2008:483; Walker, 2012:6).

The first section provides a brief history of family preservation services, followed by a discussion on the various meanings attached to the concept family preservation services, in the South African context. The theoretical perspectives underpinning the provision of family preservation services and their critiques are discussed. Lastly, a summary is given on the provision of family preservation services in South Africa.

2.2 History of family preservation services

The roots of family preservation services are traced back to the home-builders model which started in the 1970s in California in the United States of America (USA) (Gandarilla, 2009:21; Cash, 2008:471; Berry, 2005:320). This model was born out of the need to provide home-based services to families and children involved in the child welfare system (Janzen, Harris, Jordan & Franklin, 2006:55), especially families whose children were at risk of placement outside of the home (Zastrow, 2008:202, Janzen et al., 2006:55). The key characteristics of the model include contact with the family within twenty four hours of the crisis; small caseload sizes for workers; service duration of four to six weeks; and intensive service delivery (Cash, 2008:472; Tully, 2008:iii).

Guided by this model, caseworkers in the USA carried a caseload of two cases at a time and they provided both soft and concrete services (Berry, 2005:320) rooted in the cognitive behavioural approach which is discussed in Section 2.4.9. The provision of soft services
targeted the improvement of communication skills, behaviour modification skills and the sense of self-esteem among family members (Berry, 2005:320). Conversely, concrete services were tangible services that were provided in the form of food, employment, housing, medical care, clothing and financial assistance (Mullins, Cheung & Lietz, 2012:271; Dawson & Berry, 2001:7). Provision of concrete resources was based on the ecological approach that is presented in Section 2.4.4.

Within the South African context, renewed and enhanced efforts in strengthening and preserving families have been instituted through the national policy dialogue, development and implementation (Gray & Lombard, 2008:134). Working from a background of apartheid’s oppression and discrimination, the government sought to “enhance the well-being of the poor and the disempowered” families by adopting a developmental approach to social welfare (Patel, Schmid & Hochfeld, 2012:214; Bak, 2004:81; 89). For this reason, government formulated the White Paper for Social Welfare (1997) soon after South Africa’s liberation from the apartheid era. The developmental approach is a strategy that seeks to enhance participation of once excluded citizens in developmental activities promoting economic justice (Patel, 2005:2). It draws from an ecological approach which is discussed in Section 2.4.4. The South African government understands that poor families are struggling to meet the needs of their children and that their situation requires immediate intervention (Green Paper on Families, 2011:5; Matthias & Zaal, 2009:291). As a result, focus has been placed on family preservation services to restore family functioning and enable needy families to carry out their child-rearing roles and responsibilities necessary for South Africa’s progress and national development (Green Paper on Families, 2011:5).

South African legislation provides for the provision of family preservation services at four levels of intervention namely; prevention, early intervention, statutory and aftercare (White Paper on Families in South Africa, 2012:38; White Paper for Social Welfare, 1997:64). Social workers are required to first concentrate on prevention to enhance the capacity and the role and responsibilities of families; then on early intervention to stabilise the crisis experienced by children that could cause their removal from home; and lastly on statutory intervention and aftercare to ensure that children who have been statutorily removed from their homes are reunified with their families (White Paper on Families in South Africa, 2012:38; White Paper for Social Welfare, 1997:64). Notably, the first object of the Children’s Act (Act No. 38) of 2005 (2006:section 2) is to promote the preservation and strengthening of families which means that in all matters affecting children, child welfare social workers are expected to
prioritise family preservation instead of the removal and placement of children into alternative residential care or foster care.

2.3 Meaning of family preservation services

There are various meanings attached to family preservation. In the South African context, family preservation is defined within the levels of intervention namely prevention, early intervention, statutory and aftercare (White Paper on Families in South Africa, 2012:38). The definitions are discussed below.

2.3.1 Family preservation services as prevention services

As prevention services, family preservation services seek to enhance the capacity of families to take care of their children, thus preventing child maltreatment (White Paper on Families in South Africa, 2012:38; Popple & Leighninger, 2008:315; White Paper for Social Welfare, 1997:64). Hence, the long-term goal of the DSD (2013b:7) is to broaden the provision of prevention services which will in turn narrow the provision of early intervention, statutory and aftercare services.

Therefore, family preservation services, provided as prevention services, seek to improve the wide-spread family environment thus supporting the child-rearing capacity of families and the community at large (Popple & Leighninger, 2008:315; Matthias & Zaal, 2009:291). The DSD (2013b:3) distinguishes universal prevention from selective prevention in that universal prevention seeks to address common risk factors for children that are within the general population or the sub-population, whereas selective prevention targets individuals or sub-groups of a population where the incidence of children at risk is high.

However, preventative services are categorised as family support services not as family preservation services (Popple & Leighninger, 2008:315; Berry, 2005:319). The distinction between family support services and family preservation services is that the former services are available to any family which seeks them and not necessarily that they have experienced child maltreatment (Berry, 2005:319). On the other hand, family preservation services are more intensive and are offered to families with children who have experienced maltreatment and are at risk of being removed from their homes (Berry, 2005:319). This distinction
specifies that family preservation services are only provided as early intervention services which is discussed below.

2.3.2 Family preservation services as early intervention services

Family preservation services provided at an early intervention level involve intensive therapeutic or psycho-social services rendered to families with maltreated children who are facing imminent removal from home (DSD, 2013b:3; Berry, 2005:319). The purpose of the services is to strengthen family functioning and self-reliance, thus promoting stability and avoiding the removal of the child from their home to an alternative placement (DSD, 2013b:3; Manual on Family Preservation Services, 2010:46; Strydom, 2010:192). Drawing from crisis intervention theory and the strengths perspective which are discussed below, focus is placed on helping families to develop coping mechanisms to carry out their child care responsibilities during the crisis period (Strydom, 2010:192,194). As such, the statutory removal of children from home by the State and or a designated child protection organisation is depicted as the “last resort” (DSD, 2013b:3), meaning it is the last option to consider after all efforts to retain vulnerable children within their families have been exhausted.

For this reason, social workers rendering family preservation services within the South African context are expected to focus on stabilising the crisis situation that could cause children in need of care and protection to be removed from their families (Strydom, 2010:194; Matthias & Zaal, 2009:191). The family preservation services being provided include therapeutic or rehabilitation services and community work projects or programmes (Swart, 2012:24; Strydom, 2010:197). In providing these services, social workers conduct home visits, assessments, family meetings and counselling sessions and refer children or family members to specialised services such as drug rehabilitation centres. They also trace family members and liaise with the police for the removal of child abuse perpetrators (Swart, 2012:24).

However, the meaning of family preservation services should not be solely narrowed to the prevention of the removal of children, as keeping children in harmful circumstances might be detrimental to the children’s well-being (Swart, 2012:24; Bywater, 2008:45; Rycus & Hughes, 2008:201; Sewpaul & Hölscher, 2007:198; Bak, 2004:90). Therefore, defining family preservation services within the context of statutory services and aftercare services is discussed below in Section 2.3.3 and section 2.3.4.
2.3.3 Family preservation services as statutory intervention services

The Children’s Act (Act No. 38) of 2005 (2006:section 150-151) states the conditions under which children in harmful circumstances are or may be considered to be in need of care and protection and provides for the statutory removal of children to alternative care. Additionally, the Children’s Act (Act No. 38) of 2005 (2006:section 153) provides for perpetrators of child abuse to be removed from home instead of ordering the removal of the child. The family member(s) may be ordered to attend a family preservation programme (Manual on Family Preservation Services, 2010:46; Children’s Act No. 38 of 2005, 2006:section 46).

Family preservation services provided as statutory intervention services are services that are rendered to families waiting for the outcome of court procedures after the statutory removal of their family member (the child or perpetrator) from home (White Paper on Families in South Africa, 2012:38; Manual on Family Preservation Services (2010:46). The services provided include assessing the family’s circumstances in order to identify and meet their needs (Manual on Family Preservation Services, 2010:47). Based on the assessment, the court is mandated by the Children’s Act (Act No. 38) of 2005 (2006:section 46) to issue orders to families in need of family preservation services. For example, the court may order a family member to attend a programme on drug rehabilitation, parenting skills training or anger management while the child remains in the care of his/her parents or is in alternative care. As such, the outcome of the court inquiry determines the provision of aftercare family preservation services.

2.3.4 Aftercare family preservation services

Aftercare family preservation services are provided to the families of the children who have been statutorily removed from home to alternative care (White Paper on Families in South Africa, 2012:38). This is done to address the risk factors that necessitated the removal of a child or family member and to facilitate the development of a stable, self-reliable and well-functioning family (DSD, 2013b:3; White Paper on Families in South Africa, 2012:38-39; Manual on Family Preservation Services, 2010:47). Thus, children who had been separated from their families are reintegrated back into their family and communal life through the provision of services that seek to restore the family functioning such as behavioural modification programmes and family counselling (DSD, 2013b:3; Manual on Family Preservation Services, 2010:47).
The theoretical perspectives underpinning the provision of family preservation services are presented below.

2.4 Theoretical perspectives on family preservation services

Various theoretical perspectives are used to explain family preservation services, namely crisis intervention theory, strengths perspective, empowerment approach, ecological approach, human rights perspective, systems theory, attachment theory, life cycle approach and cognitive behavioural approach. Utilising knowledge from these theoretical perspectives, social workers rendering family preservation services are expected to perform a variety of roles relevant to the needs of people (Black-Hughes & Strunk, 2010:115; Zastrow, 2008:72; Janzen et al., 2006:56). The focus or contribution of each theoretical perspective to family preservation services is discussed below.

2.4.1 Crisis intervention theory

A crisis is a state in which an individual fails to cope using habitual coping strategies or strengths due to an event or series of events that poses a threat, loss or challenge (Coulshed & Orme, 2012:130). A crisis has a beginning, middle and an end. In the beginning stage, tension builds up and the individual utilises habitual coping mechanisms to overcome or cope with the crisis situation. In the middle stage, tension rises further due to frustration and the individual’s inability to cope using the habitual coping mechanisms. As a result, the individual may try new coping mechanisms and the end of the crisis happens when the person involved either solves, redefines or avoids the problem (Coulshed & Orme, 2012:130).

From a crisis intervention perspective, the provision of family preservation services seeks to stabilise the crisis situation that could cause children in need of care and protection to be removed from their families (Strydom, 2010:194). The key assumption is that services are home-based, rendered for a short period of time to ensure that children involved are safe (Berry, Cash & Brook, 2000:191). This assumption is based on the perspective that crises are time limited and they last for not longer than six weeks (Trevithick, 2012:320; Coulshed & Orme, 2012:130). As such, focused objectives are set, directed towards improving the home environment (Kirst-Ashman, 2010:253).
This theory emphasises that individuals and families are able to address problems if they are provided with quality and relevant support services (Trevithick, 2012:320). The availability, reliability and high frequency of contacts between the family preservation services provider and the family during a crisis have proved to contribute to the positive outcomes of family preservation services (Forrester, Copello, Waissbein & Pokhrel, 2008:418). Therefore, small caseloads allow for the provider of family preservation services to be accessible to the families in crisis (Kirst-Ashman, 2010:253).

In addition, Coulshed and Orme (2012:130) note that during a crisis families are less defensive and more receptive to help as they would be looking for new strategies to resolve their problems and restore their level of functioning. Considering the family as the best place for the optimal development of a child, focus is placed on the family’s need to alleviate the crisis situation and on keeping family members together (Kirst-Ashman, 2010:253).

It should be noted that the short-based nature of the crisis intervention approach has been criticised for its failure to eradicate entrenched family problems that require changes in the wider environment (Forrester et al., 2008:420; Cash & Berry, 2003:22). For example, the availability of income generation programmes in the community might lead to a reduction in child maltreatment among poverty stricken families (Cash & Berry, 2003:22). Additionally, families find it difficult to receive professional assistance due to a complex interchange of an array of events. This is evidenced by the resistance faced by social workers when engaging families in family preservation services (Sandoval, 2010:36-37; Strydom 2010:200). Research studies have revealed that the fewer contacts that are common in crisis intervention lead to social workers’ failure to establish a collaborative relationship with families, as children and their families feel frustrated, confused and powerless when they are excluded in service planning and goal setting (Mullins et al., 2012:270; Cash & Berry, 2003:21).

In South Africa, the crisis intervention perspective is considered to be important in the provision of family preservation services at an early intervention level (Manual on Family Preservation Services, 2010:43). The services provided are expected to be intense, placing vulnerable families at the centre of service delivery (Manual on Family Preservation Services, 2010:43, 49). In addition, social workers are expected to conduct a risk assessment to ensure that the children affected are protected from harm (Manual on Family Preservation Services, 2010:49).
The accessibility of a social worker in the event of a crisis is meant to ensure that the children involved are not exposed to further harm (Manual on Family Preservation Services, 2010:49). However, considering that social workers who are expected to provide intensive family preservation services have fewer contacts with families due to high caseloads, exposure of vulnerable family members to further harm is inevitable (Krane et al., 2010:158-159; Matthias & Zaal, 2009:296; Mashigo, 2007:91). Hence, in 2003 the Minister for Public Service and Administration, Ms Geraldine Fraser-Moleketi recognised the shortage of social workers and she declared social work a scare skill but this was not legislated (Earle, 2008b:66; DSD, 2006b:14). To address the shortage of social workers, the DSD (2006b:50) has developed a recruitment and retention strategy through which social work students are given bursaries to pursue their studies. After completion, the beneficiaries of the bursary are placed by the national or provincial DSD that provided the funding. Unfortunately, non-government organisations do not have the resources to provide bursaries and are not assisted by the government in this regard (Strydom, 2010:196,199; Dlangamandla, 2010:90; Mashigo, 2007:91).

2.4.2 Strengths perspective

One of the aims of family preservation services is to strengthen families and encourage parents to take responsibility for raising their children (Swart, 2012:24; Cash, 2008:483). When families are strengthened, their circumstances and problem-solving skills improve and the removal of children from their homes to alternative care will be minimised (Strydom, 2010:192; Popple & Leighninger, 2008:315; Janzen et al., 2006:55).

Based on the strengths perspective, the provision of family preservation services represents a move to embrace social work practice values and principles of self-determination, acceptance and respect (Cash, 2008:483). The strengths perspective discourages the use of a deficit-based approach that assigns disempowering labels to clients and categorises them in terms of pathology (Saleebey, 2013a:4). When providing family preservation services from a strengths perspective, social workers must help families to discover their strengths for them to be self-sustainable (Walton, 2001:628). There is a notion that, through difficult and problematic life experiences, families develop skills, capacities and coping strategies that they can utilise to alleviate the problematic situation (Saleebey, 2013a:15). Kirst-Ashman (2010:54) notes that by focusing on the strengths rather than on the problem, social workers
embark on the problem-solving process which includes engagement, assessment, planning, intervention, evaluation and termination phases.

From a strengths perspective, families are viewed as experts on their own lives and social workers are expected to work in partnership with them (Saleebey, 2013a:19). For this reason, social workers rendering family preservation services should utilise relational skills to successfully engage families throughout the helping process (Birkenmaier, Berg-Weger & Dewees, 2011:8; Higham, 2006:32). Hence, the initial contact between the social worker and the family is considered as fundamental in setting the tone for a collaborative working relationship that enables identification of the family’s strengths and goal attainment (Mullins et al., 2012:271; Rapp & Lane, 2013:154). This explains the assertion expressed by numerous scholars on the significant impact of a collaborative relationship on family preservation (Strydom, 2010:200; Forrester et al., 2008:417; Grockel et al., 2008:92). As such, a social worker providing family preservation services from the strengths perspective should engage the family and motivate the family members to work towards the achievement of their goals (Rapp & Lane, 2013:154).

According to Saleebey (2013b:107), during assessment social workers should ask questions that seek to explore the client’s strengths. Hepworth, Rooney, Rooney, Strom-Gottfried and Larsen (2010:178) are of the view that the inability to recognise the family’s strengths during assessment renders social workers ill-equipped to determine both clients’ potential for growth and growth goals. Therefore, information on the family’s strengths helps social workers to collaborate with families in assessing and evaluating possible solutions (Rapp & Lane, 2013:154; Birkenmaier et al., 2011:8). One of the principles of the strengths perspective states that social workers are expected to take the family’s goals seriously and accept that they (social workers) cannot make a perfect assessment of the family’s situation (Saleebey, 2013a:18). Likewise, the findings of a research conducted by Mullins et al. (2012:270) emphasise the importance of engaging families in goal setting.

During the intervention phase, the family preservation worker is expected to utilise the strengths of family members and to consistently encourage and support their attempts to utilise new skills towards goal attainment (Hurley, Griffith, Ingram, Bolivar, Mason & Trout, 2012:1003). Hence, it is important for social workers to continuously recognise the family’s supportive systems, knowledge, skills, values and strategies (Birkenmaier et al., 2011:8). In addition, the strengths perspective indicates that every social worker needs to tap into available resources when providing services to families (Saleebey, 2013a:20). Therefore,
social workers are required to network with agencies and the greater community (Crosson-Tower, 2009:243).

In South Africa, the DSD compiled a Manual on Family Preservation Services (2010:iv) that guides social workers on the provision of family preservation services from a strengths perspective. The Manual on Family Preservation Services (2010:44) indicates that even if families face various problems and challenges they have strengths and resources which social workers need to identify and utilise to help them alleviate social problems. The provision of family preservation services also focuses on the resilience of families to keep them together as far as possible (White Paper on Families in South Africa, 2012:3; Green Paper on Families, 2011:74).

The strengths perspective realises that parents can consolidate strengths and be able to take care of their own children with the necessary support from the social workers (Saleebey, 2013a:18). However, the shortage of resources in families (such as unemployment and poverty) and communities (such as income-generating projects) continues to overwhelm social workers who are expected to ensure that children stay with their families despite these shortages (Sewpaul & Hölscher, 2007:198; Bak, 2004:90).

Drawing from a crisis intervention perspective, establishing a collaborative relationship in assessing the family's strength and drawing up an intervention plan that seeks to protect a family member who is in a risky situation might be impractical (Higham, 2006:33). Hence, Higham (2006:33) states that a social worker should take responsibility to draw up a reasonable and feasible intervention plan for the family.

### 2.4.3 Empowerment approach

The provision of family preservation services is also based on the empowerment approach which is closely related to the strengths perspective (Cash, 2008:483; Zastrow, 2008:55, 73). The empowerment approach relates to helping individuals to enhance their strengths and influence through the improvement of their circumstances (Zastrow, 2008:55, 73). The foundation is that every community member has capacities as well as challenges that can be addressed through strengthening the community members' capacities and resources (Patel et al., 2012:215). Kirst-Ashman (2010:55) notes that it is the social worker’s task to empower clients particularly those who are oppressed, stereotyped and discriminated against.
In utilising this approach, social workers providing family preservation services are required to employ skills that would assist clients to overcome disabling barriers. Individuals should be helped to build self-confidence, access relevant knowledge and develop thinking and action skills (Zastrow, 2008:55 & 73). Research reveals that social workers rendering family preservation services guided by an empowerment approach help individuals to find solutions to their problems (Maccio, Skiba, Doueck, Randolph, Weston & Anderson, 2003:6).

In South Africa, the empowerment approach to service delivery is guided by the principles of *ubuntu* which emphasise caring and helping each other and the responsibility of individuals in promoting their personal and communal development (Bak, 2004:85; White Paper for Social Welfare, 1997:12). Considering the assumption that individuals and groups have strengths, focus is on shifting power to individuals who did not get an opportunity to exercise power over their own lives (Bak, 2004:87). This brings individuals to participate in service delivery, thereby taking responsibility towards building their own community through identifying and solving their problems (Patel et al., 2012:215; Bak, 2004:92). As such social workers rendering family preservation encourage children and their families to take responsibility of addressing their challenges and improving their personal and communal environment (Patel et al., 2012:215; Bak, 2004:85,92; White Paper for Social Welfare, 1997:12).

However, this approach has been criticised for placing too much reliance on individuals for them to bring change in their lives, without creating an enabling socio-economic environment that facilitates problem solving (Sewpaul & Hölscher, 2007:196). Problems encountered by families are said to be macro-economic, meaning the environment makes individual goals to be unattainable (Sewpaul & Hölscher, 2007:196).

### 2.4.4 Ecological approach

The ecological approach provides a comprehensive way of providing family preservation services as it helps social workers to recognise the interdependence between families and the environment (Cash, 2008:476). It holds on the assumption that families belong to a larger communal environment which is inevitably influenced by educational, economic, political, biological and spiritual systems that contain strengths, resources, potential needs and risks (Gasker & Vafeas, 2010:296; Collins et al., 2007:15). Working from this approach, social workers who provide family preservation services advocate for families to access
communal resources such as employment (Collins et al., 2007:15; Walton, 2001:628). Consequently, social workers are expected to expand their efforts by challenging systems to provide fair and equitable service delivery for desperate and disadvantaged clients (Kirst-Ashman & Hull, 2009:26). Their interest should also focus on challenging organisations that are reluctant to change their policies to meet the needs of clients (Zastrow, 2008:72). This involves lobbying for change in service rules, regulations and policies (Kirst-Ashman & Hull, 2009:26; Zastrow, 2008:72). In addition, Sewpaul and Hölscher (2007:196) argue for child and family welfare policies that seek to create an enabling socio-economic environment that facilitates the development of self-reliant families.

According to Trevithick (2012:326), the ecological approach helps to explore the impact of government policies on the social and cultural well-being of individuals, especially for people living in poverty and problematic situations. Hence, it is important to note that, the South African government formulated policies to redefine social service programmes and emphasise equitable distribution of resources and social justice (Bak, 2004:82; White Paper for Social Welfare, 1997:10). This was to mark the departure from the apartheid’s racially divided social policies and programmes that had left other citizens in impoverished circumstances (Bak, 2004:82; White Paper for Social Welfare, 1997:6).

Working from an ecological approach, the DSD adopted a developmental approach which integrates the provision of social services with economic development and recognises the importance of sustainable development in addressing poverty and unemployment (DSD, 2013a:9; DSD, 2006a:7; Patel, 2005:3). The basic idea is to promote equity and social justice with regard to accessing communal resources (Bak, 2004:82; White Paper for Social Welfare, 1997:5). As such, the White Paper for Social Welfare denounces models that hold individuals responsible for their disadvantaged circumstances and seeks to address societal deficiencies that restrict individuals in developing their potential (Bak, 2004:85). Social workers are expected to challenge inequalities and link families with communal resources, thus, providing adequate support for families to perform their vital role of nurturing children (White Paper on Families in South Africa, 2012:36; Bak, 2004:85). Community work is seen as a method that can address inequalities thus relieving “pressure towards conformity inherent in” social work services that target individuals (Bak, 2004:92).

Despite the efforts made by government to promote equitable distribution of resources, the communal environment continues to adversely affect the well-being of children and families (Manual on Family Preservation Services, 2010:32). This is evidenced by the prevalence of
poverty, unemployment and inequalities in the South African communities. For example, in 2013, the Ekurhuleni Metropolitan situated in Gauteng Province which is the economic hub of South Africa, reported an unemployment rate of 28.8% which is 3.2% above the national unemployment rate (City of Ekurhuleni, 2013:9). This implies that the Ekurhuleni Metropolitan communities are mostly affected by inequalities with a higher number of vulnerable children and families (City of Ekurhuleni, 2013:14; White Paper on Families in South Africa, 2012:27).

Although the ecological approach emphasises placing consideration on environmental factors when rendering family preservation services, it has its own limitations. Notably, the approach has been criticised for creating dependency as individuals look to changes in the environment for their well-being (DSD, 2006a:16-17). Individuals are said to rely on advocacy services from social workers and the government, thus, they fail to recognise and utilise their inner strengths for the improvement of their circumstances (Collins, Jordan & Coleman, 2010:270). Holland (2011:127) indicates that some families cope well in impoverished home circumstances and social workers drawing exclusively from an ecological approach in promoting equitable distribution of resources might find it difficult to identify and utilise the family strengths.

2.4.5 Human rights perspective

The human rights perspective provides a framework for social workers to ensure that commitment to their work is based on meeting basic human rights and ensuring that individuals have access to the services that meet their basic needs such as food, shelter, clothes and education (Birkenmaier et al., 2011:25). Similarly, the White Paper on Families in South Africa (2012:36) provides for services to be rendered to families through the human rights perspective. Consistent with the ecological approach, the human rights perspective seeks to promote equitable access and opportunities to communal resources for South African citizens (White Paper on Families in South Africa, 2012:36). Emphasis is placed on ensuring that disadvantaged citizens “attain a minimum standard of living”, thus calling for a commitment to address their family needs. (White Paper on Families in South Africa, 2010:36).

The human rights which need to be recognised when rendering services to families are provided for in the South African Constitution (1996). For example, the Constitution (1996:
section 27(1) (c)) awards the right of access to social security and appropriate social assistance to individuals who are unable to support themselves and their dependents. Hence, the provision of social grants through the South African Social Security Agency (SASSA) is considered as the cornerstone in promoting equal access to social assistance and to fighting poverty among South African children and their families (DSD, 2013a:18).

The goal of family preservation services is to create a safe and nurturing environment where the rights of children are promoted and their well-being is ensured when parents assume their rights and responsibilities (Popple & Leighninger, 2008:314; DSD, 2006a:21). The Children’s Act (Act No. 38) of 2005 (2006:Chapter 3) provides for parental rights and responsibilities. Notably, a parent is given the right and the responsibility “to care for the child; to maintain contact with the child; to act as a guardian of the child and to contribute to the maintenance of the child” (Children’s Act No. 38 of 2005, 2006:section 18 (2)).

However, the human rights perspective has been criticised for placing emphasis on individual rights rather than community rights (Ife, 2012:99), meaning that, meeting a communal minimum standard of life is not recognised. This perspective has also been criticised for promoting selfishness and self-indulgence at the expense of the well-being of the entire society (Ife, 2012:10, 19-20). Hence, a collective understanding of the human rights perspective is called for.

### 2.4.6 Systems theory

The systems theory holds that a system is composed of orderly and functionally interrelated elements (Kirst-Ashman & Hull, 2009:9). It provides social workers with a conceptual perspective that emphasises interactions and relationships among the different micro, mezzo and macro systems which relate to individuals, groups and organisations respectively (Kirst-Ashman, 2010:20; Kirst-Ashman & Hull, 2009:9). In systems theory, the child is considered as an element or a sub-system of the family and the family is considered as an element of the community (Birkenmaier et al., 2011:209).

An important principle of systems theory is that change in one part of the system is likely to affect other parts of the system (Geldard & Geldard, 2009:6). With regards to family preservation services, social work intervention touches on the interactions between systems.
(individuals, groups and organisations) in order to bring change in the lives of children who are at risk (Kirst-Ashman & Hull, 2009:9).

When providing family preservation services, social workers spend time working with the family system. Since a family system has interrelated parts, Walker (2012:6) purports that one part of the family system cannot be understood in isolation from other parts. Furthermore, family functioning cannot be understood through one part of the system and the family structure and organisation determine the behaviour of each member. This has implications for social work practice in that social workers cannot engage a needy child or his or her family member in isolation from the rest of the family members (Walker, 2012:6). Social workers should consider that the child belongs to the entire family and that the child’s positive or negative behavioural changes influence or are influenced by the family system (Walker, 2012:6).

In South Africa, service providers are expected to be guided by this perspective in assessing family-related issues and the impact of society on the family’s well-being (White Paper on Families in South Africa, 2012:37). However, the theory provides for a way of understanding the family but it does not provide guidelines on how social workers are expected to address the problems encountered by children and their families (Gallant & Thyer, 2005:253). Theories that do not provide directions for practice are deemed to yield insignificant results (Gallant & Thyer, 2005:253).

### 2.4.7 Attachment theory

Attachment theory provides the framework for assessing the experiences, behaviour and attitude of children and their families with regards to relationships (Holland, 2011:105). It is based on the view that human beings have an inborn desire to belong to others (Lac, Crano, Berger & Alvaro, 2013:1579). It stresses the importance of parents’ sensitivity to children’s needs with emphasis on quality care giving during the infant and toddler years (Steele, Murphy & Steele, 2010:61). Caregivers or parents who respond to the emotional needs of the children in a consistent manner provide a comforting and secure environment for their children (Stubenbort, Cohen & Trybalski, 2010:52).

Through the formation of secure bonds with parents, children acquire a healthy internal and relational working model (Lac et al., 2013:1579). As such, social workers providing family
preservation services from this perspective believe that bonding between a child and parent occurs within the first two years of life and it affects the subsequent relationships and attachments (Birkenmaier et al., 2011:101). Based on the belief that children experience safety in healthy relationships, interventions based on the attachment theory seek to create healthy and secure relationships and enhance communication between the parent and the child (Stubenbort et al., 2010:54).

However, Holland (2011:106-107) argues for a holistic approach to relational and behavioural assessment rather than exclusively basing it on the attachment theory, since consideration should also be given to the ability of human beings to change their views and behaviour toward relationships as they develop (Holland, 2011:107).

### 2.4.8 Life cycle approach

The life cycle approach provides an understanding of the ideal progression of a family through life stages (White Paper on Families in South Africa, 2012:36; Hepworth et al., 2010:269; Manual on Family Preservation Services, 2010:70). It includes developmental events that are predictable such as birth, marriage, retirement and unpredictable family life events such as death, birth of a developmentally challenged child, divorce, chronic illness and war (Hepworth et al., 2010:269). The White Paper for Social Welfare (1997:58) and the White Paper on Families in South Africa (2012:36) state that the life cycle approach should form the basis for social service planning and delivery. Programmes should therefore take into consideration the different stages in the family’s life cycle namely, early childhood and childhood development; school going and adolescence; young adulthood, middle age, retirement and old age stages (White Paper for Social Welfare, 1997:58). This allows for a comprehensive analysis of the family circumstances in relation to the age, gender, roles and responsibilities of each family member (White Paper on Families in South Africa, 2012:36), thus facilitating the provision of family preservation services that meet the developmental needs of family members (Manual on Family Preservation Services, 2010:70).

However, this perspective does not take into consideration the variations occurring in the present world’s family life cycle (Hepworth et al., 2010:269). For example, adults are returning to school and some individuals live with their parents even in old age (Hepworth et al., 2010:270). This perspective does not consider the influence of culture in the family life cycle and hence, understanding the experiences of diverse families might require thorough
assessments that take into consideration the meanings attached by a particular family to a particular life stage or event (Hepworth et al., 2010:270). Therefore, collaboration with families as indicated by the strengths perspective is crucial (Saleebey, 2013a:19).

2.4.9 Cognitive-behavioural approach

According to Berry (2005:320), the family preservation model is based on a cognitive-behavioural approach where families learn techniques of reinforcing positive behaviour and addressing negative behaviour using non-punitive techniques. The family preservation worker serves as a model for positive parent-child interaction and problem solving (Berry, 2005:320). As such, parents are taught new skills in a real life setting, such as in the home, car, or at a shopping mall (Hurley et al., 2012:1004). The modelling approach can help parents and their children to make sense of the information provided which fosters a trusting and collaborative relationship between families and family preservation service providers (Hurley et al., 2012:1004).

Within the South African context, the Children’s Act (Act No. 38) of 2005 (2006:Chapter 8) requires social workers to develop appropriate parenting skills programmes to prevent child abuse and neglect and to preserve families at risk of disintegration. Likewise, the first strategic priority on promoting healthy family life in South Africa requires social service providers to encourage responsible parenting by discouraging parents from using corporal punishment and promoting alternative methods of discipline which reinforce the child’s strengths (White Paper on Families in South Africa, 2012:40). Additionally, the White Paper on Families in South Africa (2012:17) describes positive discipline as when the parent discusses any negative effects of the child’s behaviour with the child.

Research indicates the failure of the cognitive-behavioural approach in addressing entrenched family problems which results in children’s misbehaviour and parental incapacity to address those behavioural problems (Cash & Berry, 2003:22). A research study by Dawson and Berry (2001:7) shows that families that improve their parenting skills continue to be stressed if they cannot meet the basic needs of their children. Hence, rendering family preservation services from a cognitive-behavioural approach has been found to achieve short-lived changes (Forrester et al., 2008:420).
2.5 An eclectic perspective

From the available literature it is evident that some authors utilise an eclectic perspective to describe the provision of family preservation services (Cash, 2008:483). This perspective is flexible by using a combination of perspectives that suit the needs of families (Cash, 2008:483; Hepworth et al., 2010:18). Drawing from an eclectic perspective allows social workers to provide an array of family preservation services needed to meet both the immediate and complex needs of families (Manual on Family Preservation Services, 2010:42; Berry et al., 2000:192). Therefore, a single theoretical perspective cannot be used to understand the provision of family preservation services.

From an eclectic perspective, social workers rendering family preservation services can utilise a combination of the abovementioned theoretical perspectives. Hence, in integrating the perspectives, social workers consider the developmental stage of the family when assessing family issues (White Paper on Families in South Africa, 2012:36; Hepworth et al., 2010:269; Manual on Family Preservation Services, 2010:70). Holding on the belief that change in one family member affects the whole family, social workers help the family as an entity (Geldard & Geldard, 2009:6) by developing programmes that enhance parental skills, thus enabling parents to perform their child rearing roles (Hurley et al., 2012:1004; Children's Act (Act No. 38) of 2005, 2006:Chapter 8; Berry, 2005:320). The programmes aim at creating healthy and secure relationships between children and their parents (Stubenbort et al., 2010:54).

Furthermore, social workers focus on stabilising the crisis situation that could cause vulnerable children to be removed from home (Strydom, 2010:194). They utilise family and communal strengths in alleviating family problems (Saleebey, 2013a:15). Priority is given to empowering families for them to take control over their personal and communal development (Bak, 2004:85; White Paper for Social Welfare, 1997:12). However, the impact of the family's environment, particularly social injustice is given considerable attention (Cash, 2008:476; Sewpaul & Hölscher, 2007:196). Therefore, social workers are expected to advocate for disadvantaged families for them to access societal resources (Kirst-Ashman & Hull, 2009:26). Importantly, the right of citizens to basic needs such as food and shelter is upheld (Birkenmaier et al., 2011:25; Popple & Leighninger, 2008:314; DSD, 2006a:21).

However, an eclectic approach demands for social workers to have extensive knowledge of all the theoretical perspectives and skills underpinning the provision of family preservation services.
services which makes it difficult for them to master any one of them (Walsh, 2013:9). Without a clear guideline for social workers rendering family preservation services, the use of this approach may not be guaranteed (Cornell, 2006:54).

2.6 Chapter summary

The chapter focused on reviewing the literature on the theoretical perspectives underpinning the provision of family preservation services. Specific attention is given to the South Africa context. In the first section of this Chapter, a brief history of family preservation services is provided with reference to the available literature. Notably, the provision of family preservation services is believed to have started in the United States of America. In South Africa, the history of family preservation services is marked by fairly recent social welfare policy developments.

The term, family preservation services, is defined as prevention, early intervention, statutory intervention and aftercare services. As prevention services, family preservation services seek to support families in their child rearing duties. When families encounter problems that warrant professional intervention, family preservation services are provided to stabilise the crisis situation that may endanger the child’s safety. In cases where children are found to be in need of care and protection, family preservation services are provided to families whilst awaiting the outcome of the statutory process. When a decision is made for the child to be placed in an institution, aftercare services are provided in preparation for the reintegration of the child back into the family and community.

Considerable attention is given to the theoretical perspectives that inform the provision of family preservation services, namely crisis intervention theory, strengths perspective, empowerment approach, ecological approach, human rights perspective, systems theory, attachment theory, life cycle approach and cognitive behavioural approach. The application of these perspectives within the South African context is discussed followed by a critique of each perspective. An eclectic perspective, commonly used in describing family preservation services, is also presented.

The following chapter focuses on the application of the qualitative research method undertaken during the study.
CHAPTER THREE

APPLICATION OF THE QUALITATIVE RESEARCH METHOD

3.1 Introduction

This chapter focuses on a detailed description of how the qualitative research process was applied to understand the experiences and perceptions of social workers on the provision of family preservation services in the Ekurhuleni Metropolitan, Gauteng Province. Focus is placed on the research approach and design, population and sampling, preparing participants for data collection, data collection, pilot study, data analysis and data verification.

3.2 Research methodology

Research methodology refers to the rational utilised to govern a research study and to determine the procedures to be followed in addressing the research problem (Wisker, 2008:65; 67). This study utilised a qualitative research methodology which is based on the belief that knowledge about human beings is subjective as it socially constructed (Chilisa & Kawulich, 2012:56). The methodology consists of approaches that seek to understand the behaviour and life style as experienced by the individuals involved (Creswell, 2013:45). In addition, Durrheim (2006:47) maintains that “qualitative methods allow the researcher to study selected issues in-depth, openness, and in detail as they identify and attempt to understand the categories of information that emerge from the data”. Hence, a qualitative research methodology was considered appropriate to explore the uniqueness of individual social workers’ experiences and perceptions on the provision of family preservation services in the Ekurhuleni Metropolitan.

3.3 Research approach

Qualitative research is concerned with bringing insight into the processes and context that shape the phenomenon under study (Nieuwenhuis & Smit, 2012:126). Creswell (2013:44) defines a qualitative research approach as a process that utilises an interpretative
framework in a natural setting to address and present the meanings attached by individuals experiencing the social phenomenon. It is considered most suitable when in-depth information or knowledge on a particular research topic is sketchy or there is little theoretical understanding, which makes it impossible to develop precise hypotheses (Monette et al., 2011:92; Royse, 2008:270). The qualitative approach is characterised by the features described in the following paragraphs.

In utilising a qualitative approach, the underlying assumption is that individuals’ lived experiences can be better understood when a researcher focuses on exploring and establishing the meanings that individuals attach to those experiences (Creswell, 2013:47; Marshall & Rossman, 2011:91). As such, a qualititative researcher aims at eliciting and presenting a wide range of participants’ experiences and perspectives (Creswell, 2013: 47; Denzin & Lincoln, 2011:4, 24). In this research study, the researcher focused on exploring and understanding the social workers’ lived experiences and perceptions on the provision of family preservation services. The findings revealed relevant and sufficient information about the meanings that social workers attach to their experiences and perceptions.

Qualitative researchers believe that human behaviour is influenced by the natural setting; therefore, understanding human behaviour requires the researcher to conduct research in those natural settings (Marshall & Rossman, 2011:91). Thus, enabling the researcher to engage in face-to-face interviews with the participants and to observe their behaviour and actions (Marshall & Rossman, 2011:91). In this study, the researcher conducted face-to-face semi-structured interviews with the participants at their respective places of employment.

When collecting data from the natural setting, the qualitative researcher may utilise interviewing as a method of data collection (Glesne, 2011:48; Creswell, 2013:45). Thus, the researcher is able to capture and understand the deeper perspectives of the participants’ thoughts, feelings, beliefs, values and assumptions (Marshall & Rossman, 2011:91). The researcher utilised semi-structured interviews to gain a deeper understanding of experiences and perceptions of social workers on the provision of family preservation services in the Ekurhuleni Metropolitan, Gauteng Province.

In collecting data through face-to-face interviews, the researcher might make use of an instrument such as an interview guide consisting of open-ended questions (Creswell, 2013:45). The data gathered is mostly gathered in the written form or spoken words (Monette et al., 2011:92; Engel & Schutt, 2009:23; Durrheim, 2006:47). The researcher
becomes the instrument of data analysis, interpretation and presentation which is mainly interpretative and subjective (Nieuwenhuis & Smit, 2012:126). This means the researcher seeks to understand the participants' lived experiences from his or her perspective (Hennink et al., 2011:14). The focus is on presenting the findings as experienced and perceived by the research participants in their natural setting (Nieuwenhuis & Smit, 2012:126). The researcher, as the key instrument in data collection, used semi-structured interviews facilitated by open-ended questions included in an interview guide. The data were analysed, interpreted and presented in this research report.

Qualitative research relies heavily on inductive reasoning as compared to deductive reasoning (Yegidis & Weinbach, 2002:17). Based on inductive reasoning, a qualitative researcher constructs meaning and understanding of a phenomenon in a discovery process (Nicholls, 2009:531). The researcher interacts with the participants, builds patterns, categories and themes from the data collected (Creswell, 2013:45). As a result, the researcher identified themes derived from the data and provided a detailed report that brings understanding of the social workers’ experiences and perceptions.

An extensive review of literature does not occur prior to data collection. Instead, an in-depth demonstration of literature control may be done to confirm or question the initial findings of the research (Yegidis & Weinbach, 2002:17). Hence, in this research study, an extensive review of the literature was conducted after data collection and utilised to confirm and contrast the research findings.

The following section discusses the research design that was adopted to realise the goal of this study.

### 3.4 Research design

A research design is like a blueprint which outlines the approach to be used to collect data and generally provides information about who, what, when, where and how of the research project (Royse, 2008:29). It presents a clear, feasible and flexible plan with concrete and specific details to conduct the study (Marshall & Rossman, 2011:89). In developing a research design a researcher is guided by the aim of the study (Durrheim, 2006:44). A qualitative approach tends to be exploratory, descriptive and contextual in nature and results in the formulation rather than the verification of hypotheses (Monette et al., 2011:92). Hence,
the researcher utilised an exploratory, descriptive and contextual research design as the study sought to develop an in-depth understanding of the experiences and perceptions of social workers on the provision of family preservation service in the Ekurhuleni Metropolitan.

3.4.1 Exploratory design

An exploratory design is utilised to make preliminary investigations with the purpose of getting more information on a relatively unknown, new, little-understood or unstudied area of interest (Marshall & Rossman, 2011:69; Rubin & Babbie, 2010:41; Durrheim, 2006:44). In using this design, the researcher aims to yield new insights or provide an in-depth understanding of the perspectives and experiences of the research participants (Hennink et al., 2011:10; Babbie, 2010:93). Therefore, a researcher utilises an open-ended, flexible and an inductive approach in an attempt to generate new insights and questions on the phenomenon (Durrheim, 2006:44). Since little is known about the experiences of social workers on the provision of family preservation services in the Ekurhuleni Metropolitan, an exploratory research design was deemed appropriate. The semi-structured interviews used to gather information helped the researcher to acquire information from the participants and to gain insights into the phenomenon under study.

3.4.2 Descriptive design

A descriptive qualitative research design, is utilised to examine, describe and document an accurate picture of the social phenomenon being studied through complex textual descriptions (Marshall & Rossman, 2011:69; Remler & Van Ryzin, 2011:5; Rubin & Babbie, 2010:42; Durrheim, 2006:44; Mack, Woodsong, MacQueen, Guest & Namey, 2005:1). This allows the researcher to produce qualitative descriptions on a complex phenomenon and provide rich details about the participants’ environment, events, beliefs, attitudes, interactions and interpretation of the phenomenon under study (Marshall & Rossman, 2011:68-69; Rubin & Babbie, 2010:42). Rubin and Babbie (2010:42) state that it is like telling someone about the feelings of walking in someone’s shoes. In this instance, the descriptive research design assisted the researcher to describe the data gathered thus providing rich and relevant information about the participants’ experiences and perceptions on the provision of family preservation services.
3.4.3 Contextual design

A contextual research design is useful in exploring a new area of study or complex issues that embrace the perspectives of the study population and the context in which they live (Hennink et al., 2011:10). Marshall and Rossman (2011:91) state that in qualitative research the social and physical setting or context is of importance as the behaviour of human beings might be influenced by aspects of the environment such as schedules, space, salary, rewards, norms, traditions, roles and values. The focus is on identifying and understanding how the context of the participants’ lives shapes their experiences, perceptions and behaviour (Hennink et al., 2011:9). In this study, the researcher sought to understand the impact of the physical, social, economic and political context of Ekurhuleni Metropolitan on the experiences and perceptions of social workers providing family preservation services.

The following section describes the research population and the sampling methods utilised to procure the most suitable sample.

3.5 Population and sampling

In research, the term population refers to the totality of possible persons or other sampling units with which the researcher is interested in studying to address the research problem (Strydom, 2011b:223; Monette et al., 2011:136; Rubin & Babbie, 2010:135). The population for this study comprised of all the social workers providing family preservation services within the DSD and Child Welfare organisations situated in the Ekurhuleni Metropolitan. Since the researcher could not include the entire population in the study, a sample was procured. A sample is a subset of cases selected from the entire population and sampling refers to the process of selecting a sample (Yegidis & Weinbach, 2002:180; Durrheim, 2006:49).

In a qualitative study, the researcher purposefully looks for a sample that will provide insight and rich information on a particular area of interest (Creswell, 2013:156; Monette et al., 2011:149; Nicholls, 2009:639). Thus, non-probability sampling methods are preferred in qualitative research rather than probability sampling methods. In non-probability sampling, the likelihood for inclusion in the sample cannot be calculated as the characteristics of the sample is more important than the representativeness or generalisation of findings to other settings (Monette et al., 2011:149; Yegidis & Weinbach, 2002:190). Focus is on selecting cases or persons that can provide rich information on the phenomenon under study rather
than giving the target population an equal chance for inclusion in the study (Laher & Botha, 2012:89). It was important for the researcher to select a sample purposefully to inform the understanding of the phenomenon being studied. Hence, the researcher opted for the use of the non-probability purposive and snowball sampling techniques.

### 3.5.1 Purposive sampling

Purposive sampling is employed where, a justifiable sample is drawn, based on the researcher’s experience, ingenuity and knowledge of the characteristics of a population that can provide information which fulfils the purpose of the research study (Miles et al., 2014:32; Laher & Botha, 2012:93; Glesne, 2011:44; Rubin & Babbie, 2010:147 Durrheim, 2006:50). It is also referred to as judgemental sampling as the researcher intentionally select individuals who can give in-depth information and meaningful insights on the phenomenon under study (Creswell, 2013:147; Laher & Botha, 2012:93; Glesne, 2011:44; Monette et al., 2011:153; Babbie, 2010:193; Berg, 2009:50-51; Nicholls, 2009:640). As such, a specific pre-selected criterion that is relevant to a particular research topic is utilised to select the most suitable participants (Laher & Botha, 2012:93; Mack et al., 2005:5).

The researcher selected participants who met the following criteria:

- Social workers who have been involved in the implementation of family preservation services for a minimum period of 12 months in the Ekurhuleni Metropolitan.
- Social workers had to be employed by the DSD or Child Welfare in the specific area of Ekurhuleni Metropolitan.
- Social workers who were willing to participate in the study.

### 3.5.2 Snowball sampling

Snowball sampling, occurs when the researcher is referred to other participants by a participant, creating a chain effect (Laher & Botha, 2012:92; Glesne, 2011:45; Babbie, 2010:208; Rubin & Babbie, 2010:149). It is also known as chain referral sampling and it is usually used when the members of the targeted population are difficult to locate (Laher & Botha, 2012:92; Mack et al., 2005:5). However, the method is not exclusive to this scenario (Laher & Botha, 2012:92. Once the initial participants are identified through purposive sampling, a snowball sampling method can be used to recruit others (Laher & Botha, 2012:92). In this instance, the researcher asks a study participant with whom contact had
already been made to suggest other potential participants who meet the selection criteria or who could potentially contribute to the study (Hennink et al., 2011:100, Mack et al., 2005:5-6). When referrals are made by the participants, the researcher conducts follow ups with the identified potential participants who may also refer the researcher to other potential participants (Laher & Botha, 2012:92). In the same way, the snowball grows bigger as it rolls, the number of participants grows (Laher & Botha, 2012:92).

In this study, the researcher first identified three participants through purposive sampling and interviewed them. After conducting semi-structured interviews with them, each participant was asked to identify other participants who met the criteria for inclusion in the sample. The participants referred the researcher to potential participants. The researcher then contacted these potential participants telephonically to arrange for a meeting in which they were recruited to participate in the study. All the participants were given a written message (cf Addendum F) thanking them for their participation and requesting them to refer other potential participants to the researcher.

3.5.3 Sample size

In qualitative research, the sample size is not predetermined, rather data saturation is used as a guiding principle for data collection (Laher & Botha, 2012:88; Mason, 2010:17). This entails that the researcher focuses on collecting extensive and in-depth information until a point is reached when forthcoming data is no longer adding to the emerging findings (Miles et al., 2014:31; Creswell, 2013:157; Mason, 2010:16). In this study, the researcher did not determine the sample size prior to data collection as she was interested in gathering in-depth and detailed information from the participants based on their experiences and perceptions on the provision of family preservation services. However, after conducting the semi-structured interview with the twelfth participant it became evident that the data was no longer yielding new information and the data collection process was finalised.

The following section provides information on how the participants were prepared for the semi-structured interviews.
3.6 Preparing participants for data collection

The initial step in data collection is to prepare the potential participants for data collection. This requires gaining access to the potential participants and establishing a good working relationship with them (Creswell, 2013:147; Rubin & Babbie, 2010:228). Gaining access is a process of acquiring consent to access, observe and talk to the research participants within the period of time needed to realise the research goal (Glesne, 2011:57). According to Creswell (2013:152), in gaining access to potential participants the researcher might be requested to compile a research proposal that can be reviewed by human subjects review boards to ensure that the participants will be protected from potential harm. As a master’s student, a detailed research proposal was reviewed and approved by the Research and Ethics Committee of the Department of Social Work at the University of South Africa (UNISA).

The researcher should identify and approach the gatekeepers who are responsible for granting permission for the researcher to have access to the potential participants who are in the group, community or organisation (Ogletree & Kawulich, 2012:64; Glesne, 2011:57; Rubin & Babbie, 2010:228; Mack et al., 2005:6). The gatekeepers might request a written plan of the research and the researcher might need to negotiate conditions for accessing the research site from the leaders or gatekeepers (Ogletree & Kawulich, 2012:65; Glesne, 2011:57). This process involves providing information about the research, listening and responding to concerns or demands and clarifying critical issues about the research (Glesne, 2011:58). The processes presented below in Table 3.1, were followed to gain entry to Benoni, Springs and Daveyton DSD and Child Welfare organisations.

### Table 3.1: Process followed to gain entry to DSD and Child Welfare organisations

<table>
<thead>
<tr>
<th>Department of Social Development</th>
<th>Accessing gatekeepers</th>
<th>Response from gatekeepers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benoni Office</td>
<td>The researcher first wrote a letter (cf Addendum A) to the supervisor at the Benoni Office requesting permission to conduct the research</td>
<td>The researcher was requested to complete the DSD application form to undertake the study and to attach a detailed research plan</td>
</tr>
<tr>
<td>Springs Office</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Daveyton Office</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Location</td>
<td>Action</td>
<td>Additional Information</td>
</tr>
<tr>
<td>-------------------</td>
<td>-------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Child Welfare organisations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Greater Benoni</td>
<td>The researcher wrote a letter (cf Addendum A) to the Acting Director requesting permission to conduct the research study.</td>
<td>The Acting Director requested the researcher to attend a general staff meeting to make a presentation on the research study. The researcher attended the meeting and informed the staff about the purpose of the study and the criteria for selecting the participants. The social workers who were willing to participate provided their contact details.</td>
</tr>
<tr>
<td>Actonville</td>
<td>To gain entry to Actonville Child and Family welfare organisation the researcher approached the Director of the organisation and requested permission to conduct the research study. A formal letter (cf Addendum A) was submitted to the Director.</td>
<td>The Director requested one social worker to contact the researcher for more information about the study.</td>
</tr>
</tbody>
</table>
the Director who promised to speak to the social workers at her office about the study.

Geluksdal/Tsakane

To gain access to participants at Tsakane/Geluksdal Child Welfare, the researcher contacted the Director telephonically.

The Director of the organisation identified one participant who was given more information by the researcher on the research study.

Notably, a letter of permission was only received from the Head of DSD Provincial Office (cf Addendum B), whereas the Directors of the Child Welfare organisations granted verbal permission.

Upon granting permission to conduct the study, the gatekeepers referred the researcher to potential participants. However, the researcher should take responsibility to make the participants feel that they are not coerced into participating (Ogletree & Kawulich, 2012:65). If the prospective participants show willingness to participate, the researcher should arrange individual sessions with them (Mack et al., 2005:6). Keeping in mind that the first impression might affect the entire study, the researcher should clarify his or her relationship with the gatekeepers and provide clear details about the study for the participants to make an informed decision about their participation (Ogletree & Kawulich, 2012:65; Babbie, 2010:316; Engel & Schutt, 2009:64).

Informed consent forms should be completed by the researcher and participant (Berg, 2009:88). According to Creswell (2013:153) and Ogletree and Kawulich (2012:68-69) informed consent forms should specify the participant’s right to withdraw from the study without a penalty. The consent form should also include the aim of the study, the research procedures, ethical considerations, potential risks, benefits associated with the study and contact information for further clarification. It should be dated and signed by the participant and the researcher (Creswell, 2013:153; Berg, 2009:88). This enables the researcher to establish an open and trusting relationship with the prospective participants (Babbie, 2010:317).

After gaining access to the participants, the researcher wrote a letter (cf Addendum C) to each of them informing them of the purpose of the study; the commitment required when participating; the possible benefits of participating; the right of voluntary participation and
confidentiality and the responsibilities of the researcher in protecting the participant from harm. For more details on the research study, the contact details of the study supervisor and the Research and Ethics Committee of the Department of Social Work at UNISA were provided.

The researcher arranged individual sessions with the participants where formal introductions were made and an opportunity was provided for the prospective participants to ask questions. Issues that arose, such as the duration of the interviews and the potential benefits, were clarified by the researcher. After participants expressed willingness to participate, informed consent forms were completed and signed by both the researcher and the participants (cf Addendum D). This allowed for the researcher to create an open and trusting relationship with the participants. However, some of the participants were not willing to participate in the study due to time constraints as they had other responsibilities to attend to, whilst others felt that they did not have sufficient information to meaningfully contribute towards the study.

It is advisable to conduct research interviews in a place with few distractions, where participants will feel at ease to talk freely (Hennink et al., 2011:121). Setting a suitable time for the interviews allows for participants to have enough time to sit, relax and talk during the interview (Hennink et al., 2011:121). To add, a suitable time for both the researcher and the participant should be considered. However, the researcher should defer to the preferences of the participants as long as the place is convenient, available, appropriate, quiet, private and physically comfortable (Glesne, 2011:113). Hence, appointments regarding the time and the place to conduct the semi-structured interviews were negotiated and agreed upon with the participants. The researcher encouraged the participants to select a place with few distractions and a time suitable for them and the researcher.

Some of the interviews took place in the offices of the participants. The participants were requested to ensure that their colleagues, office co-workers, telephones and cell phones would not distract them during the interviews. As such, participants were encouraged to place a notice on the door to inform their colleagues about the interview.

The following section discusses the methods and procedures utilised in collecting data from the participants.
3.7 Method of data collection

Data collection occurs when a researcher engages in activities that are aimed at gathering information that will provide answers to the research questions (Creswell, 2013:147). In selecting data collecting methods, the researcher considers methods that can elicit the data required to yield multiple perspectives, bring insight to the area of study and meet the goal of the study considering the time available (Glesne, 2011:48).

In this study, data was collected from participants by means of semi-structured interviews consisting of a list of open-ended questions included in an interview guide. An interview is described as a two-way purposeful conversation or interaction in which the researcher asks questions aimed at collecting information about the participants’ lived experiences and perceptions (Nieuwenhuis & Smit, 2012:133). It is a process of communication between the researcher and the participant that involves asking, listening and talking (Hesse-Biber & Leavy, 2011:109).

A semi-structured interview is less structured, which allows for participants to respond in their own words in a meaningful and socially relevant manner, unanticipated by the researcher yet rich and informative (Remler & Van Ryzin, 2011:64; Mack et al., 2005:4). As such, semi-structured interviews are based on an interview guide, a recognizable plan which contains a set of open-ended questions accompanied by probes (Remler & Van Ryzin, 2011:64; Nicholls, 2009:640; Mack et al., 2005:4). An interview guide outlines topics and issues to be covered during the interview and allows the interviewer to be flexible in exploring emerging topics (Rubin & Babbie, 2010:104). During a semi-structured interview, the researcher uses an interview guide but respects the way participants respond during the interview (Marshall & Rossman, 2011:144; Babbie, 2010:318). As a result, the deep meaning of experiences and perceptions in the participants’ own words are captured (Marshall & Rossman, 2011:93).

With regard to flexibility, the researcher adapts the sequencing and the wording of the questions enlisted in the interview guide to each particular participant (Rubin & Babbie, 2010:104). As such, the researcher should be prepared to remove or change questions included in the interview guide (Glesne, 2011:103). This might require the researcher to return to the previously interviewed participants in order to ask questions that emerged in the study (Glesne, 2011:103). Accordingly, Glesne (2011:103) highlights that the researcher
should inform the participants about the possibility of another interview to clarify emerging insights.

In creating an interview guide, a researcher frames questions that allow him or her to explore the phenomenon under study with the participant (Nicholls, 2009:640). The extent of an interview guide’s detail depends on the extent of the anticipation of the topics and issues to be covered (Rubin & Babbie, 2010:104). It is recommended that the researcher should familiarise the participants with the contents and purpose of the interview guide prior to the interview session (Rubin & Babbie, 2010:105).

Prior to data collection, the researcher designed an interview guide which contained a list of open-ended questions accompanied by probes. The researcher attached the interview guide to the letter that was sent to the participants requesting them to participate in the research study. The researcher emphasised that new topics that emerge during the interview will be explored and they were encouraged to openly share their stories in as much detail as possible.

The following biographical questions were used:

- Name of the organisation
- Gender (observation)
- How would you like me to refer to you during the interview?
- How old are you?
- What is your highest level of education?
- With which University did you obtain your qualification?
- What position do you occupy at work?
- How long have you been working as a social worker?
- How long have you been involved in providing family preservation services?
- In which areas of the Ekurhuleni Metropolitan do you provide family preservation services?

After gaining the biographical information from participants, the following open-ended questions were used to gather information from the participants:

- Tell me about your understanding of the concept: family preservation services?
• What do you understand to be the requirements of the Children’s Act (Act No. 38) of 2005, with regard to family preservation?

• What are your views regarding family preservation as outlined in the Children’s Act (Act No. 38) of 2005? By this question I mean your opinions or perceptions.

• Which family preservation services have you been providing?

• How would you describe your experiences with regard to family preservation?

• What are the challenges often encountered in the implementation of family preservation services?

• What mechanism do you often apply to address such challenges?

• What suggestions or recommendations would you make to improve family preservation services?

To successfully undertake semi-structured interviews, the researcher used the following interviewing skills and techniques to gather information from the participants:

Establishing rapport: At the beginning of the interview the researcher should attempt to establish some rapport with the participants for them to feel valued, free, safe and comfortable to share their experiences, feelings and perspectives (Hennink et al., 2011:113; Hesse-Biber & Leavy, 2011:105). Therefore, simple and non-threatening questions which are related to the study should be asked at the beginning of the interview as the participants may be anxious (Monette et al., 2011:183). The researcher commenced the interview with the biographical questions which enabled the participants to relax and for rapport to be established between the researcher and the participants.

Logical order: Throughout the interview, questions should be asked in a logical order to avoid confusing the participant and to follow the natural flow of topics as initiated by the participants, whilst keeping track of questions covered from the interview guide (Hennink et al., 2011: 109; 116-117). The researcher asked questions in a logical order as they appear in the interview guide punctuated by probes for clarification.

Active listening: The researcher should express active listening through appropriate eye contact and gesturing (Hesse-Biber & Leavy, 2011:105). Throughout the interviews, the researcher demonstrated that she was actively listening to the participants when they were relating their experiences and perceptions. The researcher used appropriate eye contact, gestures and facial expressions.
**Rephrasing:** The researcher should always check whether phrasing of the research questions elicit responses that meet the research purpose (Glesne, 2011:119). In cases where the responses were not in line with the research purpose, the researcher always cross-checked whether the problem was with the phrasing of the question. In most cases the researcher rephrased the questions.

**Clarification:** The researcher should sensitively probe for further clarification (Nieuwenhuis & Smit, 2012:133). In this study, the researcher requested clarification on the meanings attached by the participants to their responses.

**Silence:** Silence is used to allow participants to think about their responses and to fully answer questions (Hesse-Biber & Leavy, 2011:110). The researcher utilised silence and waited for participants to think about the questions and provide their responses at their own pace.

**Neutral probing:** Neutral probes are employed to indicate that the researcher is open to accept the participants’ views without being judgmental (Hesse-Biber & Leavy, 2011:110). During the interviews, the researcher employed open-ended neutral probes to demonstrate willingness and openess to gather information as experienced and perceived by the participants. The researcher avoided channelling the interview in the direction of her own perspectives and experiences. As such, the researcher accepted and respected participants’ responses.

**Motivational probing:** The researcher can make use of motivational probes which are short verbal reactions intended to encourage the participant to continue telling their stories for example, “aha?”, “is it?”, “how is that?”, “can you please tell me more?” (Hennink et al., 2011:120). The researcher made use of motivational probes to encourage the participants to keep on telling their stories. In this regard, the researcher used short verbal reactions such as, ‘aha’, ‘can you give me more information about that?’, ‘can you please tell me more?’ and ‘in what ways?’

**Attentiveness:** The researcher should be attentive or fully aware that responses to questions can be verbal and non-verbal (Glesne, 2011:119). In particular, the researcher should observe the emotions in non-verbal responses that lend meaning to the verbal responses (Nieuwenhuis & Smit, 2012:133). During the semi-structured interviews, the
researcher used attentiveness as an interviewing skill to observe the participants’ body language and facial expressions that gave meaning to the participants’ verbal expressions.

**Closing questions:** Closing questions are general questions related to the research topic and are intended to slowly reduce the established rapport and to terminate the interview in a therapeutic manner, thus addressing the emotional state of the participant (Hennink et al., 2011:114). Towards the end of the interview sessions, the researcher asked closing questions such as, ‘which suggestions or recommendations would you make to improve family preservation services?’, ‘how did you feel about the research interview?’, ‘Is there anything related to family preservation services that you would like to comment on?’, ‘Alright, I think we have come to the end of the interview, do you have any comment to make with regards to family preservation services?’

**Recording:** When conducting interviews in qualitative research, recording the participants’ answers verbatim is encouraged; hence, utilising a voice recorder is ideal as it allows the researcher to focus on asking questions, listening and observing the participant (Glesne, 2011:115; Rubin & Babbie, 2010:228). Reviewing interview notes, listening to the recorder and transcribing should be done as soon as possible for the researcher to gain an idea of the areas for improvement, emerging topics and points for further exploration (Glesne, 2011:117). In this research study, the interviews were audio-recorded which made it easier for the researcher to store and manage the data. After every interview the researcher revised the field notes, listened to the audio-recording and transcribed the interviews word for word.

**Language:** The interviews were conducted in English, as the researcher is a foreigner and is not familiar with the indigenous languages. All the participants were able to express themselves clearly in English which is one of the official languages in South Africa. This made it easy for the researcher to gather the data since there was no need for translation.

The following section looks at the pilot testing conducted to familiarise the researcher with the research study methods and procedures.
3.8 Pilot testing

Pilot testing is a purposeful role-playing exercise which is conducted by the researcher to test, learn, get acquainted with and improve the research methods, questions and skills (Glesne, 2011:56; Hennink et al., 2011:120; Mack et al., 2005:37). The pilot testing participants are selected from the target population, meaning that they share the same characteristics with the actual participants (Glesne, 2011:56; Hennink et al., 2011:120). The researcher should clarify the purpose of the pilot testing to the participants (Glesne, 2011:56). After conducting the study, the researcher should ask the participants whether the questions were clear, appropriate and whether there are additional questions that could be included in the study (Glesne, 2011:56). In doing so, the researcher assesses the applicability of the questions, concepts, sentences and wording to the context of the participants (Hennink et al., 2011:120). From the pilot testing results, the researcher might rephrase the questions, put them in a more logical order and assess whether the interview guide was too long or too short (Glesne, 2011:57; Hennink et al., 2011:120).

In conducting the pilot testing, the researcher utilised the same purposive sampling method discussed in Section 3.5.1. The researcher clarified to the two participants (one from the DSD and another from a Child Welfare organisation) the purpose and procedures of the pilot testing. The face-to-face semi-structured interviews were conducted in English and based on a list of open-ended questions included in an interview guide. The interviews were audio-recorded after permission was obtained from the participants and later on transcribed and analysed to determine if the questions yielded the required responses. During the interviews, the participants were able to answer all the questions and the researcher had the opportunity to become acquainted with the research questions and interviewing skills.

The feedback received from one of the participants indicated similarities in the following questions:

- “What do you understand to be the requirements of the Children’s Act (Act No. 38) of 2005, with regard to family preservation?”
- "What are your views with regard to family preservation as outlined in the Children’s Act (Act No. 38) of 2005?"

After consultation with the study supervisor, it was agreed that an addition should be made to the second question, to read as follows: “What are your views regarding family preservation services as outlined in the Children’s Act (Act No. 38) of 2005? By this question I mean your opinions or perceptions.”
Overall, the researcher concluded that the questions were well structured, logically presented and also elicited relevant information required for the study. The data acquired from the pilot testing did not form part of the findings for this study.

The following section is based on the data analysis process.

### 3.9 Data analysis

Qualitative data analysis refers to the process of organising and interpreting field notes and interview transcriptions, aiming at making sense out of the material and answering the research question (Remler & Van Ryzin, 2011:75; Creswell, 2009:183; Durrheim, 2006:52). This involves reducing the data into themes through the process of coding; condensing the codes and looking for themes that can describe the central phenomenon under study (Creswell, 2013:180; Royse 2008:276).

In qualitative research, the focus is not on the numerical data rather it is on interpreting textual data to understand the phenomenon under study from the participants’ perceptions and experiences (Hennink et al., 2011:14; Remler & Van Ryzin, 2011:57; Engel & Schutt, 2009:23). As such, the data analysis process tends to be inductive, thus, unfolding in a discovery form in which the researcher identifies emerging themes and the relationship between these themes (Nicholls, 2009:531; Durrheim, 2006:52). To organise the data collected into themes that provided information on the experiences and perceptions of social workers who provide family preservation services, the researcher utilised the eight steps of Tesch (cited by Creswell, 2009:186) as indicated below. The steps allowed for the researcher to interpret and understand the data collected from the perceptions and experiences of social workers.

- The researcher got a sense of the whole by reading all of the transcripts carefully and jotting down some ideas as they came to mind.
- The researcher selected and read through one transcript to get the underlying meaning of it. The thoughts that came to mind were written in the margin.
- After completing the above-mentioned task for all the transcripts, the researcher made a list of all the topics putting similar topics together then organising them as major topics, unique topics and others.
• The researcher took the list of topics and went back to the data. The topics were abbreviated in the form of a code and the codes were written next to the appropriate segments of the text. This preliminary organising scheme was used to see if new categories and codes emerged.

• The researcher established the most descriptive wording for the topics and turned them into categories. Reduction of the total list of categories was done by grouping similar topics together. Lines were drawn between categories to show interrelationships.

• The researcher made a final decision about the topics, codes and categories.

• The data material belonging to each category was then assembled in one place, and a preliminary analysis was performed.

• The researcher recoded existing data as it was necessary to do so.

In addition, the expertise of an independent coder was sought to analyse the data by means of the Atlas Ti software package. This package enabled the analyst to code the data by means of free or open coding in which codes are inductively assigned to the quotations from the interview transcripts and notes (Friese, 2014:14). The findings from the independent coder’s report were compared with those of the researcher during a consensus discussion between the study supervisor, the independent coder and the researcher. Nine themes with forty eight sub-themes and nine categories were identified and agreed upon.

3.10 Verification of data

In qualitative research, data verification relates to a process in which the researcher utilise validation strategies to demonstrate ways of claiming that the research was conducted in a rigorous manner and that the findings are trustworthy (Creswell, 2013:251; Glesne, 2011:49; Porter, 2007:81). The readers will then ascertain whether or not they are persuaded that the researcher was thorough and explicit when conducting the research study (Porter, 2007:81). In verifying the data, qualitative researchers do not rely on a standardised measure rather a naturalistic approach is utilised (Creswell, 2013:244-246; Rubin & Babbie, 2010:89). As such, the researcher utilised Guba’s model (cited by Krefting, 1991:214-222). This model addresses four components of data verification that are relevant to qualitative research namely, truth-value, applicability, consistency and neutrality which are also termed credibility, transferability, dependability and confirmability respectively (Thomas & Magilvy,
In this study, these components were applied to verify the data as discussed below.

### 3.10.1 Credibility of findings

In addressing credibility, a researcher presents the extent to which the findings are a true picture of the phenomenon through prolonged engagement in the field, triangulation of data and negative analysis (Nicholls, 2009:645; Shenton, 2004:63). Prolonged engagement relates to the extended time in the research setting which enables the researcher to establish a good working relationship with the participants so that he or she will be able to learn about their experiences (Creswell, 2013:250; Nieuwenhuis & Smit, 2012:137; Nicholls, 2009:645). According to Nieuwenhuis and Smit (2012:137) the researcher should ensure that the natural setting does not change as a result of the contact made. Hence, creating a safe and non-threatening environment through establishing an open, trustworthy and relaxed relationship becomes critical in authenticating the findings (Nieuwenhuis & Smit, 2012:137). The researcher should assure the participants that the data collected will be treated with sensitivity and in confidentiality.

In this study the researcher utilised prolonged engagement as she was able to spend a considerable period of time in the field, enabled by the good working relationship with the participants. This was done through upholding the ethical considerations of informed consent, confidentiality, anonymity and management of information. The researcher provided the participants with all the relevant information related to the study and the research procedures that were to be followed. The interviews took place in a safe and non-threatening environment determined by the participants. Thus, the participants were willing to freely talk about their own experiences.

Triangulation refers to the process in which the researcher corroborates evidence that is necessary to bring understanding on the findings (Cresswell, 2013:251). To establish the credibility of the findings, the researcher may utilises triangulation of data sources to gather, analyse and describe information on the emerging reality (Creswell, 2013:246; Nieuwenhuis & Smit, 2012:137). Cresswell (2013:251) states that triangulating information from data sources occurs when a researcher codes information or evidence from different participants to build up themes. The results will be the reality which crystallises from a combination of data sources (Nieuwenhuis & Smit, 2012:138).
The researcher utilised triangulation of sources by collecting data from twelve participants employed by six different welfare organisations in the Ekurhuleni Metropolitan. The researcher and the independent coder analysed the qualitative data independently. Thereafter, together with the study supervisor, they held a discussion to reach agreement on the themes, sub-themes and categories that emerged from the data.

According to Creswell (2013:251), reality is composed of both positive and negative analysis. Hence, negative analysis occurs, when a researcher provides evidence that negates a theme or code, thus, providing the reality to the phenomenon understudy (Creswell, 2013:251). The findings of this study are presented in Chapter Four and Chapter Five are subjected to both confirming and contrasting literature.

3.10.2 Transferability of findings

Transferability of findings relates to providing evidence that can be related to other contexts or groups (Nicholls, 2009:645). The findings should be found to have meaning and to be applicable to the audience’s personal experiences (Ryan-Nicholls & Will, 2009:77). In qualitative research, the researcher provides rich and thick textual descriptions of the setting for the findings to become more realistic, thus transferring readers to the setting and giving them an element of shared experiences. (Creswell, 2013:252; Creswell; 2009:191-192) Nicholls, 2009:645). This involves selecting a sample which permits the researcher to conduct semi-structured interviews on multiple perspectives and meanings (Rubin & Babbie, 2010:89).

After data collection, the researcher compiles a qualitative report which provides detailed information on the experiences of the participants in such a way that the reader will be convinced that the phenomenon exist (Rubin & Babbie, 2010:89). This includes “interconnecting the details, utilising strong action verbs, and quotes” (Creswell, 2013:252). The report should leave the reader with a sense of having walked in the shoes of the participants, having obtained a deeper sense and meaning of the subjective situations and experiences of the participants (Rubin & Babbie, 2010:89). A dense description of the demographics and geographic boundaries of the population should also be provided (Thomas & Magilvy, 2011:153).
To meet the transferability of the findings, the researcher utilised the purposive sampling method to select participants who could provide detailed information on their experiences and perceptions on the provision of family preservation services. This was followed by conducting semi-structured interviews which yielded detailed information on the topic under study. In-depth descriptions of the themes, sub-themes and categories that emerged and are presented in Chapter Four and Five are supported by direct quotations from the transcribed semi-structured interviews. In addition, descriptions of the participants’ biographical data such as age, gender, work position, and areas of work are provided.

### 3.10.3 Dependability of findings

Dependability relates to whether the process of the study is consistent across researchers and research methods, hence, another researcher should reach the same conclusions with the use of the researcher’s perspective, data and situation (Miles et al., 2014:312; Ryan-Nicholls & Will, 2009:78). In order to address the dependability issue in qualitative research, the researcher should demonstrate consistency and accuracy in data collection, coding and analysis, thus creating an audit trail which will enable another researcher to repeat the process (Thomas & Magilvy, 2011:153; Shenton, 2004:71; Nicholls, 2009:645). This involves providing explicit, detailed and interrelated information about the procedures and the qualitative methodology of the study in such a way that the reader is able to have complete information about all aspects of the research study and to follow the procedures (Miles et al., 2014:311-312).

Specifically, the researcher needs to provide thick descriptions of the purpose of the study, sampling methods, data collection methods, length of data collection, data analysis, interpretation and presentation of the research findings and techniques used to determine the trustworthiness of the data (Thomas & Magilvy, 2011:153). The detailed descriptions of qualitative research procedures and the findings are presented in Chapters Three, Four and Five of this report.

According to Creswell (2013:253), the dependability of the findings can be improved when the responses are stable to multiple coders of data. This can be achieved when individuals code the data separately; examine and compare the codes and reach consensus on the codes (Creswell, 2013:253). The researcher and an independent coder coded the data
independently and reached similar conclusions on the findings. Consensus was reached on the codes, themes, sub-themes and categories.

3.10.4 Confirmability of findings

Confirmability is based on the researcher’s relative neutrality and reasonable detachment from bias (Miles et al., 2014:311). The research results should be clear evidence of the outcomes of the study, not the researcher’s selective output (Nicholls, 2009:645). To address bias, the researcher can make use of reflexivity which relates to being thoughtful and sensitive about the possible impact of one’s personal views and understanding when interacting with the participants and interpreting their experiences (Doyle, 2013:252-253). Utilising reflexivity enables the researcher to be open to the unexpected, thus maintaining focus on the research purpose (Doyle, 2013:253).

To meet confirmability of the findings, the researcher utilised reflexivity as she was able to consciously and sensitively guard against interference in the analysis and interpretations of data obtained from the participants. For example: firstly, the researcher was perturbed by the way the participants were struggling to articulate the services they are rendering to vulnerable children and their families. Secondly, when they explained about the challenges they encounter during the implementation of family preservation services such as shortage of resources, heavy caseloads, feelings of exhaustion and burnout this reminded the researcher of her own experiences. However, the researcher made an effort to remain neutral and used probes to gather more information on their unique experiences. After each interview, the researcher reflected on her performance and the information gathered. This process was enhanced during the transcriptions of the interviews which helped the researcher to gain new insights into the area under study.

3.11 Chapter summary

Chapter Three explored the application of a qualitative research methodology in realising the aims and objectives of the study. A qualitative methodology was considered most suitable as the research sought to understand the experiences and perceptions of social workers on the provision of family preservation services in the Ekurhuleni Metropolitan. Hence, a qualitative approach enabled the researcher to engage with the participants in their context as providers of family preservation services in the Ekurhuleni and to gather information on their
lived experiences. Focus was given to describing the application of the qualitative research approach, the research design utilised, population and sampling, data collection and analysis and methods employed to ensure validity and reliability.

The following chapter covers the presentation of the first part of the research findings.
CHAPTER FOUR

PRESENTATION AND DISCUSSION OF THE FIRST PART OF THE FINDINGS

4.1 Introduction

A qualitative research study was conducted to explore and describe the experiences and perceptions of social workers on the provision of family preservation in the Ekurhuleni Metropolitan. An exploratory, descriptive and contextual strategy was adopted in this undertaking. The sample was procured through non-probability purposive and snowball sampling techniques.

The first part of the research findings is presented in this Chapter and the second part will be presented in the following Chapter. The research findings emanated from twelve semi-structured interviews conducted with social workers who provide family preservation services in the Ekurhuleni Metropolitan, Gauteng Province. To give credence to the study, the researcher and an independent coder analysed the qualitative data independently. Discussions between the researcher, the independent coder and the researcher’s supervisor were held to reach consensus on the nine themes, forty eight sub-themes and nine categories that emerged from the analysis. The findings are discussed below with supporting direct quotations from the interviews which are subjected to a literature control.

4.2 Biographical profile of the participants

This section presents the biographical profiles of the participants who provide family preservation services in the Ekurhuleni Metropolitan, Gauteng Province as tabulated below. Twelve participants were interviewed. Prior to data collection the researcher determined the criteria for inclusion of the social workers in the sample. Included in the sample were social workers who had at least one year’s experience in providing family preservation services and were willing to participate in the study. The social workers had to be employed by the DSD or Child Welfare in the specific area of Ekurhuleni Metropolitan. The demographic data (partly presented in the Table 4.1 below) reflect the participants’ ages, gender, race, professional status, educational institutions, years of working experience, positions at work and areas of work.
In order to ensure confidentiality and anonymity, alphabetical codes were used instead of names of participants.

**Table 4.1: Biographical profile of the participants**

<table>
<thead>
<tr>
<th>Participant</th>
<th>Age</th>
<th>Gender</th>
<th>Race</th>
<th>University from which participants acquired Bachelor of Social Work (BSW) degree</th>
<th>Duration of employment (providing family preservation services)</th>
<th>Position at work</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>28</td>
<td>F</td>
<td>White</td>
<td>University of South Africa</td>
<td>5 (5)</td>
<td>Social Worker</td>
</tr>
<tr>
<td>B</td>
<td>38</td>
<td>F</td>
<td>Black African</td>
<td>University of Zululand</td>
<td>11 (11)</td>
<td>Senior Social Worker</td>
</tr>
<tr>
<td>C</td>
<td>28</td>
<td>F</td>
<td>Black African</td>
<td>University of Witwatersrand</td>
<td>2 (2)</td>
<td>Social Worker</td>
</tr>
<tr>
<td>D</td>
<td>30</td>
<td>M</td>
<td>Black African</td>
<td>University of Zimbabwe</td>
<td>6 (3)</td>
<td>Social Work Manager</td>
</tr>
<tr>
<td>E</td>
<td>34</td>
<td>F</td>
<td>Black African</td>
<td>University of Zululand</td>
<td>5(5)</td>
<td>Social Worker</td>
</tr>
<tr>
<td>F</td>
<td>26</td>
<td>F</td>
<td>Asian</td>
<td>University of Johannesburg</td>
<td>4 (4)</td>
<td>Social Worker</td>
</tr>
<tr>
<td>G</td>
<td>31</td>
<td>M</td>
<td>Black African</td>
<td>University of Zimbabwe</td>
<td>7 (7)</td>
<td>Social Worker</td>
</tr>
<tr>
<td>H</td>
<td>33</td>
<td>F</td>
<td>Black African</td>
<td>University of South Africa</td>
<td>11 (5)</td>
<td>Social Worker</td>
</tr>
<tr>
<td>I</td>
<td>41</td>
<td>F</td>
<td>Black African</td>
<td>University of Fort Hare</td>
<td>11 (10)</td>
<td>Social Worker</td>
</tr>
<tr>
<td>J</td>
<td>29</td>
<td>F</td>
<td>Black African</td>
<td>University of South Africa</td>
<td>7 (3)</td>
<td>Social Worker</td>
</tr>
<tr>
<td>K</td>
<td>29</td>
<td>F</td>
<td>White</td>
<td>University of South Africa</td>
<td>5 (1)</td>
<td>Social Worker</td>
</tr>
<tr>
<td>L</td>
<td>37</td>
<td>F</td>
<td>Coloured</td>
<td>University of Potchefstroom</td>
<td>14 (8)</td>
<td>Social Worker</td>
</tr>
</tbody>
</table>
A discussion on the demographic information of the participants is provided in the section below.

4.2.1 Age distribution of participants

The ages of the participants ranged from 28 to 41 years. Eleven of the participants were between 28 and 38 years of age. Drawing from Erik Erikson’s model of life development, 20 to 30 years of age is a critical stage of development which requires individuals to develop intimate relationships outside the family (Walker & Crawford, 2010:29). Failure to achieve this developmental goal might yield feelings of isolation (Walker & Crawford, 2010:29). Apart from developing intimate relationships, this age group constitutes the working population. In the Ekurhuleni Metropolitan the total population is about 3 178 470 (City of Ekurhuleni, 2013:9). More than one third (39.4%) of the population, constitutes those who are 0 to 14 years and 65 years and above and they are dependent upon the working population aged between 15 and 64 years (Statistics South Africa, 2012:12). Despite the high ratio of dependents, the unemployment rate among the working population is 3.2% higher than the national rate of unemployment at 25.6% (City of Ekurhuleni, 2013:9). This indicates that the participants’ age group might be having dependents from their family of origin, whilst they would also like to establish intimate relationships.

4.2.2 Gender distribution of participants

Of the twelve participants, ten were females and two were males. According to the Census 2011 Municipal Report Gauteng, in 2011 48.7% of the 3 178 470 people in the Ekurhuleni Metropolitan were females (Statistics South Africa, 2012:35). Conversely, the high proportion of female participants in this study shows the domination of females in the social work profession. In South Africa, the statistical analysis of social work graduates shows a consistent domination of females, ranging from 89.7% of 667 students who graduated in 1996 to 85.0% of 700 social work graduates of 2003 (Earle, 2008b:56). In 2009, 88.9% of 14 072 social workers who registered with the South African Council for Social Services Professions (SACSSP) were females (SACSSP, 2009:17). This confirms Earle’s (2008a:139-140) assertion that the social work profession is dominated by women as it is considered to be a feminine profession and also an extension of traditional roles of women. Men who join the profession aspire to occupy managerial position (Earle, 2008a:140). Similarly, one of the two male participants in this study occupies a managerial position.
4.2.3 Race distribution of participants

The race distribution of the participants indicates that eight participants were Black Africans, two were Whites, one was Coloured and one was Indian. Therefore, all the four race groups in the Ekurhuleni Metropolitan were represented as the Census 2011 Municipal Report Gauteng shows that in 2011, the population in the Ekurhuleni Metropolitan which was 3 178 470 constituted 79.2% Black Africans, 15.9% Whites, 2.7% Coloureds and 2.2% Indians or Asians (Statistics South Africa, 2012:10). The race of the participants is critical on matters related to language and culture as children and families relate better to social workers who speak their language and are accustomed to their culture (Earle, 2008a:15).

4.2.4 Highest level of qualification and educational institution

Ten of the participants completed their BSW Degree at six different universities in South Africa. Only two acquired their degrees in Zimbabwe. The six universities in South Africa are among the fourteen universities accredited to offer social work training (SACSSP, 2014a:1-10) by the South African Qualifications Authority (SAQA). In South Africa, the Bachelor of Social Work degree is considered as a higher educational qualification required for one to register as a social worker with the SACSSP and to be able to practice social work (Rautenbach & Chiba, 2010:23). The needs of families in South Africa and social service organisations demand that social workers should be equipped with relevant knowledge and skills (Rautenbach & Chiba, 2010:23). Therefore, social workers are expected to continuously keep abreast of new developments and sharpen their skills (SACSSP, 2014b:3). Hence they are required to participate in Continuing Professional Development (CPD) by the SACSSP (SACSSP, 2014b:3).

4.2.5 Length of working experience and position at work

The length of the participants’ working experience as social workers ranged from two to fourteen years. Ten of the participants had over five years working experiences. Based on their experiences, most participants provided rich information which gave credibility to the findings. Although, ten of the participants had over five years work experience, only one participant is a senior social worker while another one is a social work manager. The findings suggest that social workers’ positions are stagnant as they are not upgraded considering the number of years that they have been working.
4.2.6 Duration of providing family preservation services

The participants' experience in providing family preservation services ranged from one to eleven years. Six participants provided family preservation services since they started working as social workers. One of the criteria used to identify social workers who could be recruited to participate in the study was that they should have been involved in the implementation of family preservation services for at least one year. The participants’ varied years' experience of the provision of family preservation services added to the credibility of the findings.

4.2.7 Participants' area of work

The study was conducted with social workers providing family preservation services in the Ekurhuleni Metropolitan, Gauteng Province. The participants’ area of operation includes formal and informal settlements located in the Ekurhuleni Metropolitan which is a metropolitan municipality that forms part of the local government of the East Rand region of Gauteng Province, South Africa. Ekurhuleni is one of the five districts of the Gauteng Province of South Africa and one of the eight metropolitan municipalities of South Africa. The South African Constitution (1996:section 155(1) (a)) describes a metropolitan municipality as a municipality which executes all the functions of local government for a city or conurbation.

The Ekurhuleni Metropolitan constitutes 9 towns, 13 townships, 119 informal settlements with 218 259 households and rural settlements with 10 949 households (City of Ekurhuleni, 2013:13-14). The participants provided services in three towns, namely Benoni, Springs and Brakpan with a population of 184 513, 121 610 and 73 080 respectively (City of Ekurhuleni, 2013:13). Of the thirteen townships the participants operated in Etwatwa, Daveyton, Tsakane and Geluksdal townships with a population of 15 1866, 103 727, 135 994 and 14 489 respectively (City of Ekurhuleni, 2013:13). They also provided family preservation services in some of the informal settlements.

4.2.8 Employing organisation

Seven participants were employed by the Gauteng Provincial DSD; three were placed in the Benoni Office, three in the Springs office and one in the Daveyton office. The other five participants were employed by Child Welfare organisations, three in Greater Benoni Child
Welfare, one in Actonville Family and Child Welfare and one in Child Welfare Tsakane or Geluksdal. In South Africa, social workers in both the government and non-governmental agencies play a major role in delivering social welfare services to vulnerable children and their families (Lombard, 2008a:128).

### 4.3 Discussion on themes, sub-themes and categories in relation to literature

In this section various themes, sub-themes and categories that emerged from data analysis will be presented and contrasted with available literature. To maximise the credibility of the findings after the researcher and an independent coder had analysed the qualitative data, a discussion on the outcome of the analysis was held which included the study supervisor, in order to reach a consensus on the themes, sub-themes and categories that emerged.

The first four themes, twenty sub-themes and nine categories that emerged from the qualitative data are presented in Table 4.2 below. The other themes, sub-themes and categories are presented in Chapter Five.

**Table 4.2: An overview of themes, sub-themes and categories that emerged from data analysis**

<table>
<thead>
<tr>
<th>Theme 1: Meaning of family preservation services</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sub-themes</strong></td>
</tr>
<tr>
<td>1.1: The participants’ general understanding of the meaning of family preservation services</td>
</tr>
<tr>
<td>1.2: Knowledge of the requirements of the Children’s Act (Act No. 38) of 2005</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Theme 2: The participants’ perceptions of family preservation services</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sub-themes</strong></td>
</tr>
<tr>
<td>2.1: Positive perceptions of family preservation services</td>
</tr>
<tr>
<td>2.2: Negative perceptions of family preservation services</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Theme 3: Kinds of social problems experienced by families</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sub-themes</strong></td>
</tr>
<tr>
<td>3.1: Marital and custody issues</td>
</tr>
<tr>
<td>3.2: Single parenting</td>
</tr>
<tr>
<td>3.3: Unemployment and inability to meet basic needs</td>
</tr>
<tr>
<td>3.4: Parental substance abuse and domestic violence</td>
</tr>
<tr>
<td>3.5: Child neglect and abuse</td>
</tr>
<tr>
<td>3.6: Child behavioural problems</td>
</tr>
</tbody>
</table>
3.7: Emotional problems
3.8: Physical and mental health problems
3.9: Lack of parental knowledge and skills
3.10: Lack of documentation
3.11: State of the family

Theme 4: The provision of family preservation services as a helping process

<table>
<thead>
<tr>
<th>Sub-themes</th>
<th>Categories</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1: Referral for social work intervention</td>
<td>4.3.1: Information gathering</td>
</tr>
<tr>
<td>4.2: Engagement phase</td>
<td>4.3.2: Analysing and identifying the client’s problems and strengths</td>
</tr>
<tr>
<td>4.3: Assessment and planning phase</td>
<td>4.3.3: Establishing an intervention plan</td>
</tr>
<tr>
<td></td>
<td>4.3.4: Referral to other professionals for assessment</td>
</tr>
<tr>
<td>4.4: Intervention phase</td>
<td>4.4.1: Provision of concrete services</td>
</tr>
<tr>
<td></td>
<td>4.4.2: Educating parents on child care</td>
</tr>
<tr>
<td></td>
<td>4.4.3: Educational programmes for children</td>
</tr>
<tr>
<td></td>
<td>4.4.4: Providing counselling or therapeutic services</td>
</tr>
<tr>
<td></td>
<td>4.4.5: Referral for specialised services</td>
</tr>
<tr>
<td>4.5: Evaluation and termination phase</td>
<td></td>
</tr>
</tbody>
</table>

In the following section, the findings based on theme one to four, including, sub-themes and categories (where applicable) mentioned in table 4.2 above, are discussed supported by excerpts from the transcribed interviews and subjected to literature control.

4.3.1 Theme 1: Meaning of family preservation services

This theme focuses on the meaning of family preservation services as understood by the participants. From a strengths perspective, the meanings that social workers attach to the services they provide affects the way they perceive and approach children and families’ experiences and challenges (Saleebey, 2013a:11; Collins et al., 2010:265). The participants provided the meaning of family preservation services from their general understanding and
from their comprehension of the requirements of the Children’s Act (Act No. 38) of 2005. The relevant sub-themes and storylines are presented below based on the research findings.

4.3.1.1 Sub-theme 1.1: The participants’ general understanding of the meaning of family preservation services

The participants mentioned that family preservation services are services that capacitate or strengthen families thus enabling them to solve their problems together and take care of their children. The following excerpt illustrates the point:

“My understanding is that families are supposed to be capacitated with coping mechanisms needed for them to deal with their problems and take care of children. So the bottom line is to strengthen family structures as a means of child protection.”

This confirms the assertion that the provision of family preservation services is based on the belief that strengthened families improve their problem-solving skills and home environment and lead to a reduction in incidents of child maltreatment (Strydom, 2010:192; Popple & Leighninger, 2008:315; Janzen et al., 2006:55).

The participants also described family preservation services as services that seek to encourage families to become functional, thus minimising the removal of children from their homes, as evinced by the following responses:

“….keeping them together and strengthening them in terms of their way of functioning as a family. If families have problems instead of disintegrating them we try to keep them together.”

“….giving support towards the nuclear family so that it remains intact or at least functional, thus, providing its vital services or functions such as socialisation, care and protection for the children.”

The findings confirm Swart’s (2012:24) assertion that family preservation services seek to encourage parents to take responsibility for raising their children, thus minimising the removal of children from home. Similarly, research revealed that the provision of family preservation services is sought to keep children and their families together or intact (Sandoval, 2010:48; Maccio et al., 2003:6). A shortcoming noted in the participants’ responses is their failure to mention the responsibilities of the parents as the responses focused only on a collective approach that families should follow when they are facing challenges.
4.3.1.2 Sub-theme 1.2: Knowledge of the requirements of the Children’s Act (Act No. 38) of 2005

The Children’s Act (Act No. 38) of 2005 prescribes statutory provisions for family preservation services in South Africa. It is recognised as “the cornerstone of the policy and legislative framework” for delivering services to vulnerable children and to protecting their well-being (DSD, 2013a:9). With regards to their knowledge on the requirements of the Children’s Act on family preservation services, participants stated that they are required to provide services to children within their families, focusing on meeting the best interest of the children through helping families holistically, as illustrated in the following storylines:

“…there is one thing which it [the Children’s Act] emphasises, that is the best interest of the child is of paramount importance. So whatever we do; whatever services we render to families, we have to look at the family [as a whole] not just the children, we have to serve the family holistically. If the problem is within the family, you cannot just help the child; you have to help the family as well.”

The findings are consistent with the provision of the Children’s Act (Act No. 38) of 2005 (2006:section 9) which states that services should be rendered in the best interest of the child considering the following factors where relevant, namely; “the need for the child to remain in the care of his or her parent, family and extended family and to maintain a connection with his or her extended family, culture or tradition” (Children’s Act No. 38 of 2005, 2006:section 7).

In relation to meeting the best interest of the child, one participant spoke about meeting the child’s developmental needs, by saying:

“Looking at the best interest of the children is to see if the children’s educational needs are met; whether they have a shelter or their health needs are met. Those are their best interests. If those needs are not met then we need to act on their [children’s] behalf to ensure that those needs are met.”

This is in line with the DSD (2009:6) which states that the best interest of the child means prioritising the child’s needs when making decisions that pertain to the child’s well-being. In meeting the needs required for the child’s well-being and development, reliance is placed on the parents’ and families' stability (Children’s Act No. 38 of 2005, 2006:section 7).
The participants understood that the Children’s Act (Act No. 38) of 2005 requires social workers to assist families in addressing their problems to avoid removal of children from their homes as illustrated by the following excerpt:

“So according to the Children’s Act, we can say that the last resort is to remove the children, therefore, we should keep them within the family context. The mindset [target] is to try to do everything that we can do to help the family first before the removal of the child.”

This finding is in line with the stipulation in the White Paper for Social Welfare (1997:64) which requires social workers to preserve families and minimise statutory removal of children at risk.

According to the participants, the Children’s Act (Act No. 38) of 2005 seeks to protect children with regards to family preservation services, as indicated by the following quotation:

“It [the Children’s Act] calls for the social workers and other relevant structures, to ensure that, if they investigate all matters to do with children, wherever reported or no matter how they are encountered, they have to ascertain if the conditions or the existing situation is good enough or is endangering the safety and well-being of a child; that is basically what the Children’s Act No. 38 of 2005 is saying. It clearly spells out the conditions or the situations under which the child can be regarded to be in danger or in need of care and protection. Hence, we have to intervene.”

The finding confirms Popple and Leighninger’s (2008:314) view that family preservation considers protection of children from further harm, as social workers providing family preservation services are expected to ensure that children are safe in the short term and in the long term.

With regard to the requirements of the Children’s Act (Act No. 38) of 2005 for family preservation services, some participants expressed a lack of clarity on the matter and mentioned that they did not read the Children’s Act in its entirety as indicated in following quotations:

“…you see, I haven’t been reading the Act.”

“Okay, with the Act… I do not know all of it, though …”

“I do not know if I answered you well.”

“I am not so sure yet but that is my understanding.”

“Oh no, I haven’t read that part in a long time. I am not even going to lie to you about it.”
“We normally do not read our Bible [Children’s Act] but anyway there is no time to read it. We only open the Children’s Act when we have to quote while writing a report. I do not know it very well.”

“Mostly with the Act, I would look at protection of vulnerable children and that is what I would concentrate on…your Section 155 or Section 37 or whatever and then I neglect the other sections. For example, I do not normally go to the family preservation Chapter in the Children’s Act.”

Similar to these findings, Mashigo (2007:91) found that social workers had misconceptions and misunderstanding with regards to legislative changes. The findings suggest that the participants’ failure to read the Children’s Act (Act No. 38) of 2005 on family preservation is a concern as this is likely to compromise the quality of services they are required to provide families.

The following theme is on the perceptions of participants with regards to family preservation services as outlined by the Children’s Act (Act No. 38) of 2005.

4.3.2 Theme 2: The participants’ perceptions of family preservation services

Research on the perceptions of social workers with regard to the provision of family preservation services has revealed both positive and negative perceptions (Sandoval, 2010:48; Strydom, 2010:201; Van Puyenbroeck, Loots, Grietens, Jacquet, Vanderfaeillie & Escudero, 2009:229; Kauffman, 2007:558). In this study, the participants’ perceptions of family preservation services as outlined by the Children’s Act (Act No. 38) of 2005 are presented in two sub-themes, namely positive perceptions of family preservation services and negative perceptions of family preservation services.

4.3.2.1 Sub-theme 2.1: Positive perceptions of family preservation services

Most of the participants had positive perceptions of family preservation services. The following excerpts are illustrative:

“I think it [family preservation services] is a very important part of what we do…”

“I think the Act is stepping in the right direction.”

“All I am saying about family preservation from my side [point of view], as I see it, is that, it is an ideal world. It would be good to do it.”
Similarly, previous research revealed positive perceptions attached to the provision of family preservation services such as expansion of parental knowledge and skills, prevention of child maltreatment and reduction in removal of children from home (Sandoval, 2010:48; Van Puyenbroeck et al., 2009:229; Kauffman, 2007:558,561-562).

The participants mentioned children receiving care from their families as positive as illustrated by this excerpt: “I think it is a good idea because we have to preserve families and we have to nurture the kids within the families...they have to get love and care from the family.” In a study by Sandoval (2010:48), participants also mentioned helping families to take care of their children as one of the most positive aspects of family preservation services.

One of the participants in this study indicated that family preservation services create parental knowledge on child rearing. She stated that: “I feel that family preservation services are extremely important, as I have said numerous times, since there is no guideline or school of parenting where you go before you have children. So with family preservation services, I would think they create awareness and would hopefully bring insight into parents’ daily lives.” This corroborates previous research findings which revealed that family preservation services improve parental knowledge and skills (Kauffman, 2007:558).

The fact that the Children’s Act (Act No. 38) of 2005 provides for family preservation services as a preventative programme was commended by the participants, as illustrated by the following quotation: “I think it is better to prioritise prevention than curative programmes”. Similarly, the National Strategic Plan (Draft) of the DSD (2013b:7) states that the goal of prioritising the provision of family preservation services at prevention level is to reduce reacting by removing children from parental care when they are harmed which increases the demand for statutory services.

The participants’ perceptions of family preservation services also related to the reduction in child abuse and removal of children from their homes, as illustrated by the following excerpt: “I think family preservation is an important aspect and it will most probably help social workers in reducing cases of removals and abuse occurring in families.” Similarly, in a study conducted by Kauffman (2007:561-562), participants believed that family preservation services helped in reducing child abuse and preventing alternative placement. Research has associated a reduction in the removal of children to alternative care to a high commitment to
Recognising that the family is a system that needs to be helped holistically was identified as another positive aspect of family preservation services. In supporting this, one of the participants said: “I think serving families has to be done holistically as I said earlier in terms of….for example, I cannot come and help the mother and leave out the father because he is also part of the family. I cannot help the child and leave out the mother.” This assertion is consistent with research findings which perceive the focus on the family rather than individuals to be a positive aspect of family preservation services (Sandoval, 2010:48). This is supported by the findings revealing that the provision of family preservation services improves the interaction among members, thus leading to better family functioning (Kirst-Ashman & Hull, 2009:9; Van Puyenbroeck et al., 2009:229).

4.3.2.2 Sub-theme 2.2: Negative perceptions of family preservation services

From the research findings it is evident that participants also had negative perceptions of the provision of family preservation services. Notably, participants mentioned too much paperwork at the expense of children’s needs, as evidenced by the following quotations:

“*You find out that it [the requirements of the Children’s Act on family preservation services] does not cover other children’s needs. It has more admin stuff.*”

“I cannot take a child to a place of safety without a medical report.”

“She goes back home to the abuse because at the place of safety they say, we want the documents. No, we will not be able to take her because they are not enough. They do not look at the seriousness and the risk that the child is in; they are looking at whether all the documents are submitted or not. They will even say, no, we cannot admit this child if the care plan is not there.”

Similarly, in a study conducted by Sandoval (2010:48), participants perceived paperwork as an unfavourable aspect of providing family preservation services. This confirms the perception that successful implementation of family preservation services requires a reduction in unnecessary administrative responsibilities (Strydom, 2010:201).

The participants perceived the high caseloads of social workers as a stumbling block to the provision of family preservation services. One participant said: “*We have a very big caseload such that it is difficult to provide those quality services as we may desire or as expected by*
the Children’s Act.” This assertion confirms research findings which concluded that South Africa is ill-prepared to provide effective services for families at risk due to the high caseload of social workers (Human Sciences Research Council, 2012:28; Strydom, 2010:196,199).

Lack of funding from government was mentioned as a hindrance to achieving the requirements of the Children’s Act (Act No. 38) of 2005 on family preservation services. The following remarks made by one participant have reference: “I think it [the requirements of the Children’s Act on family preservation services] lacks implementation from the government. It is a policy that they formulated but they [the government] did not provide the necessary funds to implement that programme.” This concurs with findings which established that the government had not developed a funding model that suits social service transformation requirements (Patel et al., 2012:222). Similarly, Gray and Lombard (2008:143) conclude that the South African government, being the major social service funder, will determine allocation of adequate funding for success in service delivery.

The participants perceived the lack of resources, such as employment, to be detrimental to implementation of family preservation services, as evidenced by the following excerpt: “How do you keep the child in his family if you cannot find job for the mum [mother] or the father; if there are no immediate services for the family?” Similarly, in a study conducted by Strydom (2010:199), social workers expressed comparable views in that communities lack sufficient resources needed to meet legislative requirements that prioritise family preservation.

From the participants’ perspective, the magistrates’ varied interpretation and application of the Children’s Act (Act No. 38) of 2005 undermined the needs of poverty stricken families. This is confirmed by the following utterance made by one participant:

“The way other magistrates interpret this Act….they feel that the children are not in need of care even if both parents are deceased. The relatives are expected to look after those kids but I feel that somewhere somehow we are depriving the children because even if the family is there to look after them, financial assistance is needed in order for those families to look after those children. We can do family preservation programs but if there is no financial income it [conducting family preservation programmes] is of no use. I feel it [the Children’s Act (Act No. 38) of 2005] has gaps because one magistrate will interpret it her or his way and you will find that it disadvantages the client.”

This assertion is consistent with Patel et al. (2012:221) conclusion stating that social welfare policies remain unclear and thus they are interpreted differently. In addition, the inability to order for poverty-stricken families to receive financial assistance in the form of social security
grants was also identified by Matthias and Zaal (2009:294-295) as a hindrance to the provision of family preservation services.

The following theme discusses the social problems that social workers attempt to address when providing family preservation services.

4.3.3 Theme 3: Kinds of social problems experienced by families

In South Africa, some families are unable to adequately meet the needs of their children thus making them vulnerable to social problems such as neglect, emotional abuse and sexual abuse (Green Paper on Families, 2011:5; Matthias & Zaal, 2009:291; Collins et al., 2007:22). The discussion below focuses on ten sub-themes on the nature of the social problems encountered by families and the last sub-theme addresses the state of the family. According to the Manual on Family Preservation Services (2010:35) it is important for social service providers to recognise the social problems encountered by families in South Africa that require improvement of the family functioning and resilience.

4.3.3.1 Sub-theme 3.1: Marital and custody issues

The participants shared challenges facing families experiencing the effects of divorce, particularly the custody of children, as reflected in the following quotation:

“With custody cases, in most instances the biological parents that have separated but then, one [parent] claims that the other parent who is residing with the child is neglecting the children or denying them [parents] access to the children and then they [parents] would go through to court and then the case would come to us from the court and then we have to conduct an investigation”.

This finding confirms the outcome of Makofane and Mogoane's (2012:314) study which found that the relationship between custodial and non-custodial parents is characterised by conflicts and tensions as one partner may be seeking to punish the other partner by denying him/her access to the children.

4.3.3.2 Sub-theme 3.2: Single parenting

The participants mentioned that single parents, mostly women, lack support in caring for their children. One of the participants indicated that: “Most issues are to do with the fathers
not wanting to maintain [care for the children]. Basically, women are complaining that men are just there to make them pregnant and disappear with no sense of responsibility.” The finding confirms the assertion that women continue to carry the burden of caring for the children in the absence of men (White Paper on Families in South Africa, 2012:23-24). Statistical analysis of the demography of families depicts single parenting as a common phenomenon among South African families. In 2011, 39% percent of all children lived with their mothers in the absence of the fathers and only 4% of children lived with their fathers in the absence of the mothers (Meintjes & Hall, 2013:86).

4.3.3.3 Sub-theme 3.3: Unemployment and inability to meet basic needs

Unemployment and the inability to meet basic needs were observed by the participants as factors that contribute to the family’s inability to provide for the needs of children as illustrated by the following excerpts:

“….if the family has a problem…the father cannot work, the mother cannot work….mostly these things [problems] are linked to unemployment…..”

“….where they are staying, it is a one roomed house; there is no food, so there is only one bed and the couch. He [the child] sleeps on that couch and then that is it, there is nothing…anyway, the circumstances are really bad.”

These findings confirm the view that low and unreliable income in some families makes it difficult for them to meet the basic needs of their children (White Paper on Families in South Africa, 2012:27). In 2011, 65% of more than seven million children in South Africa lived in households with at least one working adult and 35% lived in households without a working adult (Hall, 2013:90-91).

4.3.3.4 Sub-theme 3.4: Parental substance abuse and domestic violence

In some cases the children’s removal took place as a result of the parents’ use and abuse of alcohol and drugs. One of the participants stated that: “…the children were removed because of [parents’] alcohol abuse and drug abuse”. This confirms the assertion that the prevalence of substance abuse among parents destabilises family functioning as parents fail to care, protect and socialise their children (Setlalentoa, Pisa, Thekisho, Ryke & Loots, 2010:14). For example, parents may end up being emotionally unavailable to their children and inconsistently responding to the children’s needs (Holland, 2011:136-137).
Another participant linked substance abuse to domestic violence as follows:

“We find at times that the family has a problem of domestic violence. In most cases the father who is an alcoholic, abuse the family that is, the children and mother. He is not maintaining; he is not doing his part as a father, his role to maintain the family. Instead of this [playing his role], he will be beating up the family members.”

Similarly, the Manual on Family Preservation Services (2010:35) reports the prevalence of domestic violence against women and children as a cause for concern.

4.3.3.5 Sub-theme 3.5: Child neglect and abuse

Child neglect and abuse were also reported as problems encountered by families. The participants stated the following in support of this:

“She [the child] was neglected, not getting enough food, malnourished…”

“…where they [parents] deliberately hurt the child or did not feed the child or did not take the child to the doctor when the child had a serious injury…..”

“The most prevalent one [child abuse] is the sexual abuse that can take place.”

“I think emotional abuse do occur…..”

This confirms Makoae, Roberts and Ward’s (2012) assertion that in South Africa child maltreatment occurs in different settings and the perpetrators might be parents. The Manual on Family Preservation Services (2010:50) on the other hand, indicates that parents abuse and neglect their children due to various stressors and inability to cope with parenting their children. Similarly, Proudlock, Lake, Jamieson and Draga (2013:15) state that the prevalence of child abuse and neglect in South Africa continues to affect children’s well-being.

4.3.3.6 Sub-theme 3.6: Child behavioural problems

The participants’ responses show that families experience various problems with their children’s behaviour, such as negative peer influence, coming home late, non-cooperation, truancy at school, dropping out from school, sexually acting out, substance abuse, stealing and violent behaviour. The participants shared the following experiences about their clients:

“…..through interaction with the friend at school and in the community, she ended up engaged with wrong friends that gave her wrong influence.”
“The child does not come home early as he would be playing soccer somewhere and he is not listening to his parents. When the parent says wash the dishes, do one two, three [tasks], he does not cooperate.”

“Nowadays they do not wanna go to school and they would disappear for the whole weekend or weeks.”

“Apparently, the girl is sleeping out with older men, stealing…but most of the time we find that the stealing is drug related.”

“…a child murdered three family members and then he attempted to murder the grandmother.”

These findings support the view of Flisher and Gevers (2010:53) that families in South Africa bear the burden of managing risky behavioural problems among their children. Notably, children engage in unsafe sexual practices, present interpersonal violent behaviour and also abuse substances (Flisher & Gevers, 2010:53).

**4.3.3.7 Sub-theme 3.7: Emotional problems**

Emotional problems experienced by children were reported by the participants as follows:

“….the child feels that the mother is rejecting her.”

“…this child wanted to commit suicide.”

The findings confirm the South African National Youth Risk Behaviour survey results which revealed that in 2010, six months prior to the survey, 24% of grades 8 to 11 school learners reported to have experienced feelings of sadness or hopelessness, 21% had thought of committing suicide and 21% had attempted suicide (Reddy, James, Sewpaul, Koopman, Funani, Sifunda, Josie, Masuka, Kambaran & Omardien, 2010:11). Similarly, the Green Paper on Families (2011:67) recognises that families in South Africa suffer a lot of emotional problems which result in suicide and depression.

**4.3.3.8 Sub-theme 3.8: Physical and mental health problems**

Families are also confronted with physical and mental problems. Parents are reportedly overwhelmed by the children’s physical and mental health needs, as stated in the following storylines:

“…you find that other families would sit with children who maybe disabled, who have physical challenges.”
“They [the Children’s Home officials] have a section where they have cerebral palsy kids. They took Bongi [not real name] because he was blind and he had cerebral palsy....”

Similarly, according to Westwood, King and Lake (2010:59), children with disabilities from birth defects and chronic illnesses require the provision of health care services to improve their functioning. The participants also noted that some parents are unable to take care of their children due to their own poor health. One of the participants stated that: “she [the mother] was ill, very ill. She was unable to look after the kid.” The Manual on Family Preservation Services (2010:32-33) recognises the fact that the prevalence of HIV/AIDS and other diseases impacts on the well-being of the children as parents struggle to take care of children due to ill health.

On family health issues, participants reported their observation of unhygienic home environments as follows: “.... [Families encounter lack of] basic skills like hygiene, especially in the informal settlements.” Poor sanitation in most informal settlements is a health hazard (Hall, 2013:97).

4.3.3.9 Sub-theme 3.9: Lack of parental knowledge and skills

Some parents were found to lack the necessary information and skills to care for their children and to address social problems as stated below:

“I would say they [parents] are ignorant, others they do not have information. Therefore, they need to be informed.”

“They [parents] are not equipped in dealing with them [social problems].”

“They [parents] lack that skill of raising their children together when they are apart [they have separated].”

“....it is a lack of knowledge and awareness of birth control…”

The findings confirm the statement that parental skills and knowledge are essential for the care, protection, education and socialisation of children (Action for Child Protection, 2008:8). One of the participants specified that other parents have low intellectual abilities. She said: “We have got parents that have very low intellectual ability.” This is in line with the indication that developmentally challenged or parents with low intellectual ability face challenges in carrying out their child-rearing duties as they might lose concentration (Action for Child Protection, 2008:8).
4.3.3.10  Sub-theme 3.10: Lack of documentation

The participants mentioned lack of identity documents and birth certificates as an obstacle for parents to access social security grants. The following excerpt is illustrative: “You will be surprised with the number of people that do not have IDs [identity documents] and birth certificates. She [the mother] cannot access the child grant; she cannot apply for the child support grant because she does not have an I.D.” The birth certificates, identity documents and death certificates of parents are a requirement for accessing social service grants in South Africa (DSD, 2013b:15).

4.3.3.11  Sub-theme 3.11: State of the family

According to the participants, the state of the family is characterised by the absence of family members as indicated by the following quotation:

“…a lot of time the problem with family preservations is when there is no family [parents or adults] left. The family members have passed away and the children are left without relatives.”

This finding indicates the reality of the absence of adult care givers within some families. According to the South African Institute of Race Relations (2011:1), the HIV/AIDS pandemic has led to the death of parents leading to an increase in orphans and child-headed households in South Africa.

Apart from family disintegration and changes in the family structure, families are also confronted with the cycle of child abuse and neglect as noted by one of the participants that:

“…the mother does not know how to protect the child because it happened to her when she was a child. So if the mother could have sorted her issues out when she was a child this might not have happened and she would have been able to protect her child…You know, that cycle of abuse goes on, from parent to child, child to parent.”

Similarly, Ritcher (2013:7) notes that, children’s response to their circumstances lays the foundation for their own children’s responses, thus setting patterns of responses which become vicious cycles of being incapable to address problems or vicious cycles of vulnerability to problems. Therefore, if the problems encountered by the children and their families are not resolved they will be passed from one generation to the next.

The following theme discusses the provision of family preservation as a helping process.
4.3.4 Theme 4: The provision of family preservation services as a helping process

According to Kirst-Ashman (2010:54; 253), social workers providing family preservation services focusing on the client’s strengths are actively involved in the helping processes. They help families to clearly assess their problems and strengths and to explore, select, implement and evaluate strategies needed to address their problems (Black-Hughes & Strunk, 2010:115; Zastrow, 2008:72). Similarly, the White Paper on Families in South Africa (2012:36) encourages service providers to utilise the strengths perspective throughout all stages of the helping process, namely assessment, intervention and evaluation.

The participants’ descriptions on the provision of family preservation services are presented as a helping process based on the four sub-themes, namely referral for social work intervention, engagement, assessment and planning, intervention, evaluation and termination.

4.3.4.1 Sub-theme 4.1: Referral for social work intervention

The provision of family preservation services begins when children or their families in problematic situations are referred to social workers by a parent, neighbours, the police, community leaders, educators and other professionals as illustrated by the following quotations:

“…parents might come to our attention through the school or they can come to us by self-referrals, stating that they have problems and they are not coping; even a neighbour might come to us, saying that these people have a problem.”

“If the police find children on the streets whom they think that they are in need of care, they will remove them to temporary safe care places and then social workers at temporary safe care places will refer those cases to our department.”

“I am working with the lady who is running a crèche and the ward councillor for that area. They tell me that these are the people whom you can invite [for the family preservation programme].”

“I send out invitations to other organisations and I also have my own clients [from my caseload]; I have clients from our department [Department of Social Development], meaning that my colleagues also refer clients to me.”

“All of them [parents] were basically referred through the court.”
Likewise, Spray and Jowett (2012:42) indicate that in most cases child welfare cases are referred to social service providers by parents, relatives, neighbours, other adults and professionals. Parents may approach social workers on their own, requesting assistance to address their family problems or they may be mandated by the court to receive family preservation services (Collins et al., 2010:79).

4.3.4.2 Sub-theme 4.2: Engagement phase

The engagement phase involves the social worker's establishment of a good working relationship with the family and relevant family systems that might be a source of strengths and resources needed in addressing the family's problematic situation (Birkenmaier et al., 2011:7-8). To successfully engage families in family preservation services, participants reported utilising communication and listening skills as indicated by the following quotation: "We use communication skills, listening skills….we also use verbal and non-verbal communication skills."

This confirms the assertion that throughout the helping process, beneficiaries of social work services value good communication skills in building, maintaining and ending working relationships (Higham, 2006:32).

The importance of respect in the helping relationship was indicated as evidenced by the following quotation: “You have to respect the clients, the family. Understand their values, understand their culture....” Similarly, in the study conducted by Grockel et al. (2008:102), effectiveness of respecting the families’ boundaries was indicated as important. Furthermore, when families are respected they easily engage in the helping process and “regain a sense of power and efficacy in the face of feelings of powerlessness and despair” (Grockel et al., 2008:102).

One of the participants spoke about accepting clients and said that: “…..and really accepting your clients. I think you need to accept your clients as they come.” Similarly, Mullins et al. (2012:271) found that families place value on relationships that are based on unconditional positive regard. Another participant spoke about showing a non-judgemental attitude towards clients by stating that: “…. I have learnt that every client is unique…you need to take each and every case seriously no matter how small the problem is.” A study by Forrester et al. (2008:417) showed that parents value a non-judgemental approach and described the service providers utilising this approach as caring, trustworthy and understanding.
Empathy was mentioned as an important ingredient in the establishment of a working relationship. One of the participants mentioned that: “...empathy comes into play because you have to be in the shoes of the father. You really have to be in the shoes of the mother as well and try to understand, why is it like that?” A study conducted by Grockel et al. (2008:102-103) revealed that service providers who were empathic assisted parents in identifying meaningful goals and motivated them towards goal achievement. Empathy helps social workers to assist clients to identify and process feelings that were previously overwhelming (Birkenmaier et al., 2011:72).

4.3.4.3 Sub-theme 4.3: Assessment and planning phase

During assessment and planning, social workers rendering family preservation services from a strengths perspective create an environment in which the child and family strengths are fully explored and acknowledged (Birkenmaier et al., 2011:112). According to Coulshed and Orme (2012:21-22), assessment begins at the referral stage and occurs throughout the helping process. The purpose of conducting an assessment is to establish services that can be rendered to improve the client's situation (Coulshed & Orme, 2012:22). The Manual on Family Preservation Services (2010:44) recognises the importance of assessment at all levels of service delivery.

Three categories emerged from this sub-theme, namely information gathering; identification of the problems and strengths; establishment of an intervention plan; and referral to other professionals for assessment.

Category 4.3.1: Information gathering

To gather relevant information on the client’s problem and strengths, participants reported that they interview the child to request information related to the following:

“Family history is very important, the support system...if it is a child, where are the parents, grandmother, aunt, cousins, whoever....”

“...the [child's] interaction with the child's family members.”

Information requested from the parents related to the following aspects:

“...when do you allow your child to take part in the decision-making process?”

“...what behaviour is the child displaying?”
“….we try to learn from them, their experiences on discipline.”

“How do they [parents] support one another in raising the child? How do they handle decision making?”

These findings are in support of Anderson’s (2013:191) assertion that the social worker’s role is to facilitate the process of getting to understand the presenting problem from the perspective of the child and the family. Forrester et al. (2008:418-419) found that interviewing children and their significant family members sets the tone for achieving family preservation goals. They discovered that children who were allowed to express their views and feelings during interviews gained a sense of self-esteem and confidence for achieving important life aspirations (Forrester et al., 2008:418-419).

Apart from interviewing the child and the relevant family members, participants stated that they also interview neighbours and educators as indicated by the following types of questions they pose to them:

“I want to know from the neighbours, does Thando [name of child changed] go to school; whom is she staying with…you will get as much information as possible from the neighbour; information that the family cannot tell you.”

“We interviewed the teacher…How does she perceive the child? What kind of a child is she? How does she [the child] interact with other children at school?”

“….we go to the child’s school and check if she is attending school and what are the challenges [experienced by the school with regards to child’s well-being]. How is the child progressing? How can we help?”

“From the school, I normally check the involvement of the parent in the school; how the parent is involved? Is she coming to check the child’s school progress? Is she reporting if the child is not coming to school and on the physic [physical well-being] of the child…is the child clean when she comes to school? Is she having the school uniform? Does she have a lunch box when she comes to school? How many times per week does she attend classes?”

From the above storylines it is evident that participants ask open-ended questions to establish a common ground of the different perspectives narrated by the individuals involved in the client’s system (Anderson, 2013:191) and also to establish how the child or family is surviving during the problematic situation.

The participants reported conducting home visits to establish more information on the home environment; as summed up by one participant: “With regards to the home environment, we
check whether the home environment is conducive for the upbringing of the child." According to the Manual on Family Preservation Services (2010:43; 82), social workers rendering family preservation services are expected to conduct home visits and to deliver services within the home environment.

The following category is the analysis and identification of the clients’ problems and their strengths.

**Category 4.3.2: Analysing and identifying the client’s problems and strengths**

The participants mentioned that they analyse the information gathered to identify the client’s problem. One of the participants said: "We identified the problems that she [the mother] has been having and we tried to reach common grounds on whether she is aware of these problems that we are also noticing." This process is supported by Birkenmaier et al. (2011:8) who state that during assessment, social workers should analyse the problematic situation from the information gathered.

During the assessment of the client’s strengths, one of the participants indicated that: “...I try to identify what is good about the client. Even if there is a problem, there must be a strength. It [identifying the strengths] helps the client to open up.” In a study by Grockel et al. (2008:100-101), the parents linked effective intervention to the ability of the worker to identify parental strengths thus equipping them to face more challenging parenting issues. From a strengths perspective, parents acquire specific strengths and skills in challenging situations which need to be identified, utilised and expanded to alleviate the presenting problem (Saleebey, 2013a:15; Birkenmaier et al., 2011:77).

**Category 4.3.3: Establishing an intervention plan**

An intervention plan is described as a plan that elucidates goals and methods of achieving the stated goals (Birkenmaier et al., 2011:8). After assessing the client’s problems and strengths, participants reported establishing an intervention plan as evidenced by the following quotation: “...from the information that I get; whether it is information from school or information from the neighbours, I will be able to see the kind of help they [families] need.” This finding is contrary to the third principle of the strengths perspective which requires social workers to take families’ goals and preferences into consideration (Saleebey, 2013a:18). Saleebey (2013a:19) cautions that social workers should admit that they cannot
make a perfect diagnosis of the client’s situation, hence the need for them to work in partnership with clients to explore the client’s problems and strengths.

One of the participants mentioned that risk assessment involves the following:

“Risk assessment is like, if a case comes, you go out to check the circumstances of the family, to find out if there is an urgent need. What is it that they need urgently? If they need services in the form of a preventative service….I can do it on a slow pace. If it needs attention as in yesterday, I need to give them 1, 2, 3, 4, 5 [referring to the sequence of actions to be taken to resolve the problem] as in yesterday [urgently].”

This assertion is in line with Higham (2006:33) view which postulates that establishing an intervention plan that seeks to protect a family member who is in a risky situation subverts the need for a collaborative working relationship.

On the other hand, some of the participants reported collaborating with clients in establishing an intervention plan, as evidenced by the following excerpt: “…it is not just your decision or what is expected from you as a professional, but then, you get the solutions from the very people who are experiencing that problem.” Likewise, in a study conducted by Sandoval (2010:48), the participants stated viewing clients as experts on their own lives and collaborating with them to be the strength of family preservation services.

Category 4.3.4: Referral to other professionals for assessment

The following storylines indicate that the participants made referrals to psychiatrists, South African National Council on Alcoholism and Drug Dependence (SANCA) and medical practitioners for further assessment, intervention and recommendations.

“…the psychiatrist evaluated their [parents] personalities to see if they can look after the children….."

“We also refer the foster parent to SANCA [South African National Council on Alcoholism and Drug Dependence] so that they can test if that prospective foster parent is on drugs or not....”

“…with physical and sexual abuse cases, you get a medical report from the doctor...”

These findings are congruent with the fact a social worker might request an assessment from another professional to facilitate decision making with regard to the client’s presenting problems (Coulshed & Orme, 2012:21-22). The Green Paper on Families (2011:27) indicates that psychologists and psychiatrists should collaborate with other medical

The following sub-theme focuses on the process of achieving the set family preservation goals.

4.3.4.4 Sub-theme 4.4: Intervention phase

Intervention is described as the joint activity between the social worker and the client in achieving the goals agreed upon during assessment (Birkenmaier et al., 2011:9). This sub-theme is presented in four categories namely provision of concrete services; educating parents on child care; providing counselling or therapeutic services; and referral for specialised services.

Category 4.4.1: Provision of concrete services

As part of providing concrete services, participants mentioned distributing food parcels and linking children and families with organisations or projects providing food. One of the participants indicated that:

“We refer them to institutions that can assist them with food and food parcels... also as an organisation, we have good Samaritans [generous people] who come and donate food vouchers.”

The Integrated Service Delivery Model indicates that the basic needs of children and families can be met through the provision of food parcels (DSD, 2006a:16-17). One of the participants spoke about involving families in socio-economic projects. She stated that: “I go to NGOs [Non-Governmental Organisations] and link them [families] up for the food parcels but they [families] have to enroll for group work and voluntary services. They [NGOs] can provide food for families every day but these families must be part of their programmes; they offer computer skills programme, knitting and sewing programme....” This finding is in support of Patel et al. (2012:220) findings that the development of sustainable income generation projects through micro-economic development interventions is a prerequisite with regards to improving the well-being of families.

Another participant mentioned the improvement observed in family relationships when family members are involved in a vegetable project. She indicated that: “The process of doing
Community work also improves the relationship between the children and their parents and it also alleviates poverty because the garden gives them some vegetables and they will be able to have open relationships.” According to Berry (2005:321), helping families to work together to improve their home environment creates an environment for problem solving and fosters good relationships.

The participants reported that they assist families to apply for child support, disability and foster care grants as indicated in the following quotations:

“…sometimes you find that the children do not have birth certificates or whatever and then you would assist them in getting those birth certificates so that they can be able to get the CSG [Child Support Grant] meaning your child grant or foster care grant or whatever [any other social security grant] that they may need.”

“…they might be someone with a disability in the family that is when we help the person to apply for a disability grant.”

The efforts by the participants to help their clients secure documents to be able to apply for social security is in line with the requirements stipulated by the DSD (2013b:15) that service providers should assist families to apply for birth certificates, identity documents and death certificates to facilitate their access to social grants.

Due to the high unemployment rate, the participants encourage parents to consider looking for casual jobs and or entrepreneurial work as illustrated below:

“…I advised the parent to try some piece jobs [casual jobs]”

“…if you do group work, you involve them with entrepreneurial skills. Teach them how to do things [generate income] for themselves not to rely on the government.”

Lombard (2008b:28) is of the view that social workers who work with poor families play a critical role in poverty eradication through the integration of social and economic development.

One of the participants also spoke about educating parents on financial management to relieve them from unrealistic demands made by their children as indicated below:

“We also talk about the ways of spending and teaching children about budgeting. We tell the children that they must be part of the budgeting at home; they must not ask for things that parents do not have because parents will be stressed and they will not be able to be productive at work.”

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Teaching families the ways of handling their income has been identified as one of the roles of family preservation service providers (Mullins et al., 2012:271). Consistent with this finding, Tyuse, Hong and Stretch (2010:214) postulate that financial management may enable parents to meet the basic needs of the children.

Regarding medical issues, the participants spoke about referring clients to other organisations for specialised assistance, inviting nurses to talk to parents and they also engage clients in discussions. The following quotations demonstrate this point:

“…we educate parents on the medical needs of the children.”

“When there is a terminally ill person, I assist that family to get help from a Hospice, to get to an old age home or to consider placing the child in a children’s home…”

“I also rendered a parental programme to a lady. We discussed issues such as personal hygiene and how to deal with her situation because she was HIV positive. For example, how important it is to take the medication and to eat healthy food.”

“At times I also involve the clinics, the nurse, for instance, when I talk about prevention and family planning. I invite the nurse to come and do a presentation to the mothers.”

The participants’ responses are consistent with the provisions in the Constitution (1996: section 27, section 28(1) (c) which award children and families the right to have access to health care services and gives children the right to basic nutrition services. In South African health care facilities provide preventative and curative services, support, information and appropriate referral on health-related matters (Hall, Nannan & Sambu, 2013:97).

**Category 4.4.2: Educating parents on child care**

The participants shared information on how parents are educated through parenting skills programmes on taking care of their children. One of the participants stated that:

“You give them some form of education. It is about parenting skills; you provide them with information and you give them support.”

Similarly, Hurley et al. (2012:1003) state that the primary goal of family preservation services is to improve parenting skills and family functioning in order to prevent removal of children experiencing maltreatment in the home.

During parental skills programmes, parents are educated on their responsibility to care, protect, educate and socialise their children. As summed up by one of the participants: “I
educate them on parenting rights, responsibilities…what it means to be a parent then I go in
detail regarding the care, protection, education and socialisation of children; those are the
four themes on the responsibilities of parents.” According to Popple and Leighninger
(2008:314), the provision of family preservation services presents a strategic way of
reconciling the rights of children to be protected and the rights of parents to rear their own
children.

To raise parental awareness on child abuse, the participants reported providing in-depth
information on child abuse: The following excerpts capture the participants’ responses:

“I give more information on why they should prevent it [child abuse] from happening
and if it happens, they need to report it. I inform them on how to report child abuse
even if it is not happening in their houses.”

“I go into [explain] the different kinds of [child] abuse that can take place and I tell the
parents that this is what sexual abuse is; this is what emotional abuse is and this is
what neglect is; deliberate neglect falls under abuse…”

“We inform parents about child trafficking…it is something that is new to the
community so, parents are not aware of what it is.”

These findings are consistent with the stipulation by DSD (2006a:20) that educating parents
on child abuse is provided to safeguard the well-being of children and protecting them from
further harm. Similarly, Popple and Leighninger (2008:315) indicate that family preservation
services seek to improve the general family’s social environment to enable families to
effectively take care of their children, thereby preventing child abuse.

To a greater extent, participants reported educating parents on how to discipline their
children. Most of the participants mentioned discouraging parents from utilising corporal
punishment, shouting and threatening children as illustrated by the following quotations:

“….they can make use of different kinds of disciplining measures and making
corporal punishment the last resort.”

“…they must not tell the child that, I hate you; I do not love you because you are this
problematic child…..and they must always be careful of what they are saying when
they are angry, like I will kill you… that might scare the child to think, my parents do
not love me, how can they say they will kill me.”

“We talk of disciplinary methods. How does a good parent talk to the child? When
you should raise your voice; when not to raise your voice…”
Research on family preservation services states that parents are discouraged from using physical punishment and are taught alternative forms of discipline (Hurley et al., 2012:1010; Kauffman, 2007:558-560). The alternative forms of disciplining children taught to parents by the participants are presented in Table 4.3 below.

**Table 4.3: Alternative forms of discipline taught to parents**

<table>
<thead>
<tr>
<th>Alternative forms of discipline</th>
<th>Storylines</th>
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</thead>
<tbody>
<tr>
<td>Establishing rules and a routine</td>
<td>“If there are no rules, no expectations; how do you discipline your child? Again it [discipline] forms part of the routine, structure and love.”</td>
</tr>
<tr>
<td>Positive reinforcements</td>
<td>“They have to acknowledge the child’s positive behaviour and they have to accept the child as unique.”</td>
</tr>
<tr>
<td>Withdrawal of privileges</td>
<td>“…[The parents are taught to] stop them [children] from watching TV instead of punishing them; or to ground the child by stopping her from going out to play with her friends.”</td>
</tr>
<tr>
<td>Verbal reprimanding</td>
<td>“Under verbal reprimanding, we try to teach her [the mother] different forms of voices because I think tones affect how you verbally reprimand someone. Which tone should you use and at what moment.”</td>
</tr>
<tr>
<td>Discussing the consequences of negative behaviour</td>
<td>“We teach them how to sit down and talk to their children and to educate their children whenever they make mistakes, so that the children learn from those mistakes.”</td>
</tr>
<tr>
<td>Modelling</td>
<td>“….the children would display the same behaviour that the parents are displaying and they will question the parents’ authority. Actually, I always say that [use an expression that], do not do as I do, do as I say….which parents always laugh at because that is a fact of life. We normally tell our children, do this, but we do not do it.”</td>
</tr>
</tbody>
</table>

In a study conducted by Kauffman (2007:559), clients expressed an improvement in family structures and household rules as a way of improving family functioning and behavioural
control. Furthermore, a general improvement in parental skills enabled parents to model appropriate behaviour to their children recognising that children exhibit behaviours they have learnt from their parents (Kaufman, 2007:559;561).

Parents are also assisted to identify and address problems experienced by their children as explained by the following storylines:

“We inform them [parents] about other issues such as drugs; what symptoms they should look for when a child starts to be involved in drugs or alcohol.”

“We advise parents to give support [to the child] if it happens that the child falls pregnant….also to give her a second chance to go to school and to talk about it [the pregnancy] as open as possible.”

“We were telling them about the services we render; the procedures they should follow when experiencing problems with their children.”

The above support Sandoval’s (2010:49) view that social workers rendering family preservation services assist families to identify and solve problems. Flisher and Gevers (2010:56) recommend that parents should be able to seek help from social service providers and find guidance on supporting their children.

Apart from helping families to identify and address problems, the participants spoke broadly about the child-parent relationship. One of the participants indicated that: “I normally start by explaining to the parents that they need to be more open to their children, to have that good relationship with their children so that they can trust them. They [children] can be able to open up…..” This finding supports that of Forrester et al. (2008:418) who found that families involved in family preservation services programmes get help in improving their parent-child relationships.

With regard to building healthy family relationships, participants reported educating the parents on communication, as illustrated by the following storyline:

“We teach them [parents] how to communicate, the communication skills and the need to listen. Sometimes we have a child saying something but we do not listen. We just lash out and we scream without even thinking that we are screaming. They [parents] need to learn to listen to a child and the child’s needs, because children can say many things with their body language.”

Likewise, Moss (2010:158) found that communication helps families to build and maintain relationships for them to become functional. Allowing family members to openly express their thoughts and feelings in a positive and constructive manner ensures ongoing support for the
family members and promotes child development (Collins et al., 2010:264; Flisher & Gevers, 2010:56; Kauffman, 2007:559).

One of the participants shared how she helps family members to address conflicts in relationships. She said: “You try to work with the family to resolve those problems; the disputes that might be there; the misunderstanding that might be there; try to create peace and understanding. Negotiate with the people and then they find each other and they learn to live with one another.” As mediators, social workers strive to help children and their families to resolve their conflicts. The social worker remains neutral in the process and helps the conflicting family members to clearly present their concerns, to identify miscommunications and to reach consensus (Kirst-Ashman & Hull, 2009:22; Zastrow, 2008:72).

**Category 4.4.3: Educational programmes for children**

The participants shared information on education programmes they conduct with vulnerable children as follows:

“…inform them about the dangers of substance abuse; why people are vulnerable to substance abuse; the different kinds of drugs; the problems that you can encounter when you are older, for instance, going to jail…”

“It [the programme] is mostly about teenage pregnancy; why children get involved in sex at that age, which has to do with their hormones and physical development; the dangers of early pregnancy, STIs and STDs and the disadvantages of teenage pregnancy and then the options afterwards. For example, you may place the baby for foster care, raise the baby yourself if you can or give the baby up for adoption.”

“…what kind of a child should you be at home; how to avoid danger? The kind of friends you should choose as a child.”

“…we raise awareness to them [children] about child abuse and how to report abuse”

The Human Sciences Research Council (2012:29) indicates that children should be informed about their sexuality and reproduction health to prevent them from risky sexual practices which will result in teenage pregnancy.
Category 4.4.4: Providing counselling or therapeutic services

Regarding therapeutic services to families affected by child sexual abuse, domestic violence and substance abuse, the participants indicated that:

“We gave counselling to the mother because she was affected by the incident when her child was raped.”

“We can advise the mother to apply for a protection order against the father and again to counsel the whole family around the domestic violence”

“….we just advise and then we talk about the Domestic Violence Act. We talk about her [the wife’s] rights and the consequences of living in that kind of environment, whereby the husband is always beating her [the wife] up or abusing her physically, mentally, emotionally…we just advice [give her alternatives] and then she is the one who needs to take a decision.”

“[When providing] bereavement counseling is whereby I let the child talk about what she knows about the death of the father. She narrates and as a social worker I have to be there to empathise with her.”

The participants did not articulate their intervention very clearly, especially in relation to the advice that they provide to clients. However, a study by Forrester et al. (2008:418) shows that families in receipt of family preservation services value getting assistance in handling difficult and strong emotions.

Category 4.4.5: Referral for specialised services

The participants explained the referral of the children and their families for specialised services, as presented in Table 4.4

Table 4.4: Specialised services

<table>
<thead>
<tr>
<th>Specialised services</th>
<th>Storylines</th>
</tr>
</thead>
<tbody>
<tr>
<td>Play therapist</td>
<td>“We have a play therapist that comes and does things [activities] with them [the children]…”</td>
</tr>
<tr>
<td>Psychologist</td>
<td>“If there is a psychologist that needs to help, we can link up the family.”</td>
</tr>
<tr>
<td>Attachment therapy</td>
<td>“We refer these kids to Dr B [not real name]. She does attachment therapy…”</td>
</tr>
</tbody>
</table>
Counselling at Lifeline
“I sent her [the mother] to Lifeline for further counselling because I think that she is probably overwhelmed by being a young mother.”

Family Counselling at Families South Africa (FAMSA)
“I gave them that option to say, you would rather go to FAMSA [Families South Africa] because they are strictly working with families and I believe they will be able to help you better.”

Trauma counselling at Ithemba Rape and Trauma Centre
“…children that are physically and sexually abused normally get free psychological services at Ithemba Rape Crisis Centre in Benoni and the parenting skills training is offered for the biological parents.”

Therapeutic counselling (Kids Clinic)
“We referred the child to Kids Clinic; they do therapeutic counselling for rape victims.”

Drug rehabilitation (SANCA)
“…if it is the father who is abusing alcohol or whatever substance, we refer him to SANCA [South African National Council on Alcoholism and Drug Dependence].”

The DSD (2006a:10) promotes partnerships in the provision of services to vulnerable children and families. Therefore, collaboration of various stakeholders allows families to have access to specialised services in the community and the multi-disciplinary team (DSD, 2006a:15).

The following sub-theme focuses on the evaluation and termination process.

4.3.4.5 Sub-theme 4.5: Evaluation and termination phase

With regards to the evaluation and termination process of the services rendered, one of the participants spoke about reviewing the achievements made, as indicated by the following storyline: “In terms of assessing; we are looking at the progress she [the mother] has made; has she changed her behaviour in terms of taking care of the child?” This is consistent with the assertion that termination of services depends on the work that has been accomplished (Birkenmaier, 2011:9). However, a social worker who provides family preservation services from a strengths perspective is required to collaborate with the client in recognising the progress made (Birkenmaier et al., 2011:157).
The following storyline shows how the participants conduct an assessment during termination to determine future intervention plans, as indicated by one participant: “If I feel that you have not gained enough then you have to redo it [the programme].” This is in consistent with the assertion that during termination an assessment is done to determine whether there is a need to change the services or terminate the service provision (Coulshed & Orme, 2012:22).

One participant mentioned that she has not terminated any case. She said: “With my little [two years] experience I have never really had a closed file because you would have a quiet [dormant] file because the minute something [a problem] comes up; they [the clients] would come back to you.” Similarly, Van Puyenbroeck et al., (2009:229) established that families experience problems even after receiving professional help, hence ongoing support is recommended to help families sustain the changes that were made during family preservation programmes. However, from a strengths perspective, social workers are encouraged to reduce family dependency on professional help by helping members to recognise their ability to resolve problems and become self-reliant (Collins et al., 2010:220).

4.4 Chapter summary

Chapter Four presented the first part of the research findings emanating from the transcribed interviews with twelve social workers providing family preservation services in the Ekurhuleni Metropolitan, Gauteng Province. The biographical profile of participants was given in the first section followed by a discussion of four themes, twenty sub-themes and nine categories, providing direct quotes from the transcribed interviews and subjecting them to literature control.

The first theme looked at the description of family preservation from the participants’ general understanding and from their understanding of the requirements of the Children’s Act (Act 38) of 2005. In the second theme, the perceptions of social workers on the provision of family preservation were presented. This was followed by theme three on the social problems experienced by families. The fourth theme presented the participants’ descriptions on the provision of family preservation service as a helping process which includes referral, engagement, assessment, planning, intervention, evaluation and termination phases.

In the following Chapter the second part of the research findings is presented.
CHAPTER FIVE

PRESENTATION AND DISCUSSION OF THE SECOND PART OF THE FINDINGS

5.1 Introduction

This chapter constitutes the second part of the presentation and discussion of the findings from theme five to nine, as indicated in Table 5.1 below.

5.2 Presentation of themes and sub-themes

The five themes and twenty eight sub-themes emanating from the framework for the provision of family preservation services, positive experiences and challenges experienced by the participants, their coping mechanisms and recommendations are discussed below.

Table 5.1: An overview of themes and sub-themes that emerged from data analysis

<table>
<thead>
<tr>
<th>Theme 5: A framework for the provision of family preservation services</th>
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<tbody>
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<td>Sub-themes</td>
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<td>5.1: Levels of intervention</td>
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<td>5.2: Traditional methods of social work</td>
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<table>
<thead>
<tr>
<th>Theme 6: The participants’ positive experiences on the provision of family preservation services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sub-themes</td>
</tr>
</tbody>
</table>

<table>
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<tr>
<th>Theme 7: Challenges experienced by the participants during the provision of family preservation services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sub-themes</td>
</tr>
<tr>
<td>7.1: Difficulties in engaging families</td>
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<td>7.2: Parents refusing to take their child-rearing and caring responsibilities</td>
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<tr>
<td>7.3: Handling false and inadequate information on referral</td>
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<td>7.4: Difficulties in establishing a relevant intervention plan</td>
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<td>7.5: No change or improvement in the client’s system</td>
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<td>7.6: Child abuse cases</td>
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<td>7.7: Addressing cultural issues among family members</td>
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<td>7.8: Lack of communal resources</td>
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<td>7.9: Lack of clear guidelines and training</td>
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<td>7.10: Lack of funding and organisational resources</td>
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<td>7.11: High caseload and low salaries</td>
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<td>7.12: Lack of supportive services for social workers</td>
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<td>7.13: Addressing political agendas</td>
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<td>7.14: Inter-organisational challenges</td>
</tr>
<tr>
<td>7.15: Participants experiencing emotional problems and burnout</td>
</tr>
</tbody>
</table>

| Theme 8: Coping mechanisms utilised by participants |
| Sub-themes |
| 8.1: Support from work colleagues |
| 8.2: Support from family and friends |

| Theme 9: The participants’ recommendations |
| Sub-themes |
| 9.1: Prioritising and broadening the provision of family preservation services |
| 9.2: More funding for family preservation programmes |
| 9.3: Low caseloads and more service providers |
| 9.4: Training and guidelines on family preservation services |
| 9.5: Organisational support services |
| 9.6: Conducting proper assessments |
| 9.7: Accessible and affordable communal resources |
| 9.8: Utilising available communal resources |
| 9.9: Inter-organisational changes |

### 5.2.1 Theme 5: A framework for the provision of family preservation services

Two sub-themes, namely levels of intervention and the traditional methods of social work as discussed below, emerged during the discussion on a framework for the provision of family preservation services.

#### 5.2.1.1 Sub-theme 5.1: Levels of intervention

Four levels of intervention, namely prevention; early intervention; statutory; and aftercare levels, are discussed under this sub-theme. These levels of intervention are identified by the DSD as central to family preservation service delivery (White Paper on Families in South Africa, 2012:38; Manual on Family Preservation Services, 2010:44).
According to the participants, family preservation services are provided at a prevention level to create awareness on the importance of the family on children’s well-being, as illustrated by the following quotation:

“I think we were mainly focusing on pregnant women and those that have recently gave birth to children. We were telling them about the value of the family setup; the need for the children to grow up in a conducive family set up.”

The finding confirms the claim that services provided at a prevention level target families who have not yet experienced problems in child rearing and aims to reduce the prevalence of child maltreatment (White Paper on Families in South Africa 2012:8).

On the early intervention level, participants indicated that they focus on rendering services to alleviate the presenting problem in order to avoid the removal of children from their homes. One of the participants said: “…we work as much as we could, just to keep the family together because most of the time we consider removal as a last resort.” In line with this finding, the White Paper on Families in South Africa (2012:38) indicates that family preservation services rendered at early intervention level seek to keep families at risk together as far as possible, thus preventing them from entering and receiving statutory services.

In some cases, parents requested the removal of their children from home to alternative placements. However, participants mentioned that they try to convince such parents to consider addressing the problem while the child is at home. “I said, no, I am not going to remove the child, you need to work on this problem as a family before we can remove and place the child at the place of safety.” This quotation shows the assertiveness of a social worker who knows that family preservation services encourage family members to resolve their issues and is able to discourage placement of children in alternative care. However, the participant did not offer her services in helping the family to resolve the presenting problem (Kirst-Ashman & Hull, 2009:24; Zastrow, 2008:73).

One participant mentioned providing clarification on the reasons for not removing the child, as follows:

“I explained that we cannot just remove a child before we have done our own interventions because we need to explain to the magistrate that this is what we have tried.”

Another participant reported clarifying the consequences of removing a child from home, as follows:
“I explained to the mother the consequences of removing the child, saying, the child will feel that really you do not want her in your life. The child still needs her mother’s love. She still needs her mother’s guidance. The child is crying for belonging…”

These findings corroborate previous research outcomes that open communication creates positive perceptions towards service provision (Forrester et al., 2008:417).

Nevertheless, there are situations in which the participants were compelled to remove the children from home, as illustrated by the following quotation: “Sometimes we remove children because we believe that or there is enough sound evidence that warrant a removal via Form 36 [the form grants interim authority for placement of children in a temporary safe care], because we believe the child is in need of care and protection. For example, in cases where there is abuse, neglect and abandonment.” This is in line with the requirement that statutory removal of a child from home should be the “last resort” to protect the child against risk of imminent harm (DSD, 2013b:3).

Other participants reported placing a child in alternative care as being part of family preservation services as illustrated by the following excerpt:

“The child has been removed for the time being and has been placed in an institution where they [children] receive therapy and when they are healed they come back to their family. It is a temporary measure.”

This finding supports the Manual on Family Preservation Services (2010:47) which states that the statutory process is a level of intervention in which family preservation services are provided and this process may involve the removal and placement of children in foster care, extended family, shelters and children’s homes.

One of the participants shared that they do not provide prevention services in her agency. She stated that: “In this organisation, we have not really done much on prevention. We mainly do statutory work…when there is a problem [when clients are experiencing social problems].” This finding confirms Strydom’s (2010:204) conclusion that in South Africa, social workers are still focusing on statutory services instead of prevention and early intervention services.

The participants reported rendering family reunification services to children and their families in cases where children have been statutorily placed in alternative care. This excerpt illustrates the point: “We also have reunification services especially with children who have been placed at CYCCs [Child and Youth Care Centres] after being removed from home.”
According to the White Paper on Families in South Africa (2012:38) aftercare services should be provided to families whose children have been placed in alternative care to enable children to be reunified with their families.

The discussion of the following sub-theme is based on the traditional methods of social work as a framework for the provision of family preservation services.

5.2.1.2 Sub-theme 5.2: Traditional methods of social work

The intervention levels discussed above, take place within the traditional methods of social work namely; casework, group work and community work.

The participants reported utilising the casework method when rendering family preservation services, as remarked by one participant:

“…because of the nature or the sensitivity of issues, we do not necessarily deal with them [families] in groups, we deal with the individual family because some things are sensitive, for example, rape cases and the family may not understand the need for them to work with other families and talk about such issues.”

These findings are confirmed by the statement that social workers who render services to children and families undertake casework which is a method of social work that focuses on helping individuals to solve problems on a one-to-one basis (Zastrow, 2008:46; Higham, 2006:90).

In addition to the services provided to individuals as presented in Chapter Four theme 4, the participants reported commencing individual sessions with the parents followed by the children or vice versa and later bringing both parties together in conjoint sessions. The following statement made by one participant is illustrative of this: “We talk to the child and try to show her the danger of her behaviour, followed by a joint interview with the parent.” At times, extended family members are involved in individual and or conjoint sessions. The following storyline depicts this: “A joint interview is whereby you invite all the family parties that are involved in the problem and on the case that we are discussing about, I had to invite the granny; I had to invite the mother, the child; I had to invite the uncle….“ The finding supports Higham’s (2006:90) assertion that casework allows social workers to utilise a collaborative approach to help families and children in need.
Regarding group work, the participants said:

“We have the group learning goals which is common to everyone but if they [parents] want to add individual goals, I refer them to their respective social workers.”

“In some cases we use group work to help parents understand that they are not the only ones facing problems with their children.”

“We facilitate discussions whereby they [children or parents] will be given a topic to discuss in their smaller groups and they will give feedback in a larger group, but before they go to a smaller group, we give them information to make sure that they interact and participate.”

These findings are in line with the requirement of the DSD (2006a:15) that the group work method should be applied as group work processes enable members to interact and to work towards the achievement of common group goals. With a shared purpose and a sense of interdependence, group members become a source of help to other group members while receiving help from others (Strydom, 2010:122).

With regards to community work, the participants had the following to say:

“…our community have to know us, what we do, what we stand for, who we are as the social workers, we are here to help the community not to harm or hurt the community.”

“We identify their needs with them [parents], for example, you are single parent, your children are hyperactive or are doing so and so, then we do some community projects which will benefit them. We make sure that it [the project], for example, food gardening can be used by families in future.”

“…we invited the broader community, father, mother, children…everybody was there and…it was…I forgot the theme but it was on family preservation.”

These findings are in line with the South Africa’s efforts to mobilise, strengthen and empower communities for them to effectively address their problems and to improve their capacity for development (DSD, 2006a:15). The strengths perspective encourages social workers to recognise and utilise the strengths in communities (Saleebey, 2013a:17).

The following theme describes the positive experiences encountered by participants in providing family preservation services.
5.2.2 Theme 6: Positive experiences on the provision of family preservation services

Positive experiences were related to:

- **Empowerment of clients** - “…..when you empower [individuals]…..at the end of the day the family is stable, they can manage or deal with the family crisis issues. You feel so good that at least you did something for the family by preventing the removal of a child.” Similar experiences among social workers were recorded by Sandoval (2010:48).

- **Reduction in the removal of children from their homes** - “Our rate of removing kids has greatly fallen down [decreased] because we used to remove many kids. Now we remove less...” Similar findings were reported by Nelson and Nash (2008:195) that the provision of family preservation services leads to a reduction in the removal of children from their homes to alternative care.

- **An improvement in home circumstances, parental behaviour and parents’ ability to care for a child** - “So he found a stable job; he went to rehab [for drugs and alcohol]; he fixed his issues then we had to convince the court in Pretoria that the father can look after his children.” “She is able to take care of that three year old boy; the child is clean. She does not neglect that child; she has improved a lot.” Similarly, research shows that family prevention services enhance family functioning and the parents’ ability to create a safe, caring and nurturing environment for the children (Nelson & Nash, 2008:195; Kauffman, 2007:558-559; Kirk & Griffith, 2004:13-14).

- **Improvement of the child’s behaviour** - “Eventually, the child’s behaviour [of bunking school and abusing substances] changed. She started to leave the friends that were having a negative influence on her; she started interacting with friends that have a positive influence in her life.”

- **Cooperation and confidence in clients** - “I should say, when you return the kids to parental care or back to the family’s care, you know that this family has been working with you.” This finding is consistent with Sandoval’s (2010:50) statement that a family’s success in family preservation services is determined by the family’s ability to accept responsibility, receive services and be cooperative. Nelson and Nash (2008:195) equate receiving family preservation services for an extended period of time to the family’s willingness to cooperate in service provision.
The return of the children back into their family is viewed as an accomplishment in family preservation services. The following storyline points this out:

“He [the stepfather] made efforts for the children to return back home. He provided whatever the social workers wanted to know, a stable home, stable income and a good relationship with the children. Now they are fine [at home].”

Research has identified keeping vulnerable children at home as a positive outcome of providing family reservation services (Sandoval, 2010:48; Forrester et al., 2008:418).

5.2.3 Theme 7: Challenges experienced by participants when providing family preservation services

Social workers who are rendering family preservation services face various challenges within the family, communal and organisational context (Strydom, 2010:200; Earle, 2008a:32; Sewpaul & Hölscher, 2007:198; Bak, 2004:90). The participants providing family preservation in the Ekurhuleni Metropolitan, Gauteng Province indicated their challenges that are presented below under fifteen sub-themes.

5.2.3.1 Sub-theme 7.1: Difficulties in engaging families

The participants experienced resistance from parents. One participant explained: “They [parents] have this push away thing [resistant attitude] like I do not want a social worker in my life.” This confirms findings from other studies which found that family members’ resistance and lack of cooperation negatively impacted on the provision of family preservation services (Sandoval, 2010:36-37; Strydom, 2010:200). This finding refutes the claim that when families are confronted with problems they are more receptive to help as they would be seeking for strategies to resolve their problems and restore their level of functioning (Coulshed & Orme, 2012:130).

Clients’ resistance was attributed to involuntary participation as indicated below:

“The people that are actually instructed by the court or requested by the social worker to attend, I struggle with them.”

According to Collins et al. (2010:282), involuntary clients might be reluctant to work towards the goals set by the social worker or the authoritative system and may exhibit resistance.
Regarding the feelings and perceptions of involuntary clients, participants had the following to say:

“…they think you are coming to mess up their lives.”

“…they really feel that; why are you mixing [meddling] in their lives; why are you here in their lives, making their life difficult?”

“Maybe it is because when they called to report at our offices, the first thing they say is that they had been arrested; they have been arrested and reported to the social workers.”

“…mostly it appears like people view us in a bad light as people that are there to remove their children.”

“…sometimes they feel that they are being victimised, because they are poor or they are being victimised because… maybe neighbours called you and they were fighting with the neighbours.”

“…some families become aggressive when you try to provide services for them.”

These experiences confirm the view expressed by Grockel et al. (2008:104) that parents exhibit feelings of anger and fear towards child welfare workers. Some authors caution that coming up with superimposed programmes or treatment protocols might yield what seems to be resistance from families, yet it could be an indication that the goals of the programmes do not equate to the family goals (Saleebey, 2013a:19; Collins et al., 2010:270-271).

In relation to the resistance shown by family members, the participants reported that:

“You find that in some instances there is somebody [in the family] who is not willing to participate…”

“We got feedback from SANCA that she skipped two sessions.”

“…it frustrates you when your clients do not work as fast as you sometimes want them to.”

The findings confirm the assertion that working with involuntary clients might be uncomfortable for some social workers (Birkenmaier et al., 2011:137).

One participant indicated that: “…they would want to know what is it that they are going to benefit? For example, is there food or free gifts that we gonna give them for attending?” This is in line with the findings of Strydom (2010:200) that the supply of refreshments determines
the attendance of families in family preservation programmes. Strydom (2010:200) suggests that organisations should provide incentives to encourage family participation.

Other participants mentioned lack of seriousness, a lack of interest and an inability to accept that they have a problem, as indicated by the following excerpts:

“I think to us it is a lack of seriousness....”

“They are not interested.”

“She does not really value what we are trying to do, in terms of giving her parenting skills.”

“…they do not always see that they have a problem. They do not see the reality of the situation.”

In contrast to these perceptions on lack of participation and attendance of programmes, Cash and Berry (2003:21) correlate parent's lack of participation and attendance in family preservation programmes to service providers' failure in establishing a good working relationship with families.

5.2.3.2 Sub-theme 7.2: Parents refusing to take their child-rearing and caring responsibilities

The participants attributed the parents' unwillingness to take responsibility of raising and caring for their children to the following aspects:

“....parents say no, we do not want the child anymore; place the child somewhere....they are pushing their responsibility to social workers.... see to finish on what to do with this child, you know.”

“...like mothers dumping kids at our offices because they are tired or the kids are naughty or they cannot discipline them enough.”

The findings confirm the view that challenges in parenting can raise a sense of hopelessness, passiveness and pessimism which dishearten parents from carrying out their child care responsibilities (Collins et al., 2010:265). Some of the participants are of the view that government initiatives are creating dependency among parents and hence, some are abdicating their responsibilities of caring for their children. For instance, one participant said: “I think it is this thing we have created, a dependent nation that is depending on the government and the government does not have resources to fulfill all these needs.” However, the strengths perspective mentions that social workers should try to eliminate total
dependency on the child care system and foster opportunities for families to be self-reliant, thereby strengthening clients’ abilities and capacities to develop new coping mechanisms (Collins et al., 2010:270).

5.2.3.3 Sub-theme 7.3: Handling false and inadequate information on referral

The participants expressed their inability to rely on referral information. For instance one said:

“So the kids told lies about the mother, that the mother is drinking alcohol; the mother will drive with them when she is drunk; the mother will take them to the bar and will dance on top of the table....”

This finding confirms Maccio et al.’s (2003:6) view that referral information may under-estimate or over-estimate the severity of the risk; hence workers rely on their own assessments.

One of the participants shared the negative results of relying on referral information. She stated:

“Come Tuesday, the lawyers were on my back. Did you take the children for medical assessment? Did you do this; did you do that and I did not do it; I just listened to what the kids were saying.”

According to Anderson (2013:191), when children and families in need of care are referred to the child welfare system, the social worker’s role is to facilitate the process of getting to understand the presenting problem.

5.2.3.4 Sub-theme 7.4: Difficulties in establishing a relevant intervention plan

The participants admitted to failure in establishing the severity of the problem and a relevant intervention plan during assessment. One participant reported:

“You can have the timeframe to say I am monitoring my families that are on family preservation on fortnightly basis for example, but over that fortnight you can hear stories like I had a child in 2010 who was part of a family preservation group programme [that was focusing on addressing his behavioural problems while he was in his parent’s care]. He burnt himself [to harm himself]..... They tried to rush the child to Medical [not real name] hospital but it did not help; he passed away.”
Holland (2011:50) states that social workers conducting assessments may make recommendations which may have profound effects on the children and families involved. In some instances, the provision of family preservation services to children and families has been found to expose children to further abuse or harm (Sandoval, 2010:48).

Another participant who questioned her decision said:

“Sometimes I think and feel maybe we were supposed to have removed the child while we were offering family preservation services. We were really supposed to remove the child but we just thought it was general child behavioural problems.”

This finding confirms Bywater’s (2008:45) opinion that social workers providing family preservation services are often faced with the dilemma to either let the children involved remain in their vulnerable family environments or to find them alternative placements somewhere else.

5.2.3.5 Sub-theme 7.5: No change or improvement in the client’s system

The participants mentioned that some clients do not change or improve their circumstances following intervention. They stated the following circumstances:

- Lack of change in clients - “…the same parents did the same thing again. They left their children alone.” “...you get frustrated 'cos in as much as you might want to see yourself succeeding with your client and following up your client up until you see that, yes that is my product [my achievement]; you cannot.” Cash and Berry (2003:22) caution that intensive family preservation services do not necessarily contribute to successful case closure or positive changes in child and family systems.

- Lack of change associated with communal problems - “…problems that they are facing are macro-economic. So it is like you are treating a person and then taking them back to the same community which infected them.....the same place or the same environment where they got their infection has not changed.” “Like there is crime...too much crime. There is poverty, unemployment and all that …which has a negative impact on our services as social workers. Even if we try our level best to give them awareness programmes and strengthen them in whatever way, there are other factors that will always affect us.” The findings confirm that communal issues, such as poverty, health, employment and social injustice, have greater impact on
families and cannot be ameliorated by a short term intensive programme such as family preservation (Cash & Berry, 2003:22).

- Substance abuse - “Some things are out of our control; the issues of drugs…if a mother is taking drugs there is no way that she can properly look after her own child; no matter how much advocacy you might do; no matter how much counselling you might offer, if they are high on drugs, no ways, no ways.” This finding supports that of Sandoval (2010:49) which revealed negative results on the provision of family preservation services to mothers who are addicted to substances.

5.2.3.6 Sub-theme 7.6: Child abuse cases

The Children’s Act (Act No. 38) of 2005 (2006:section 153) provides for perpetrators of child abuse to be removed from home instead of ordering the removal of the child to alternative care. However, the participants found it difficult to render family preservation services where there were incidents of child abuse. They indicated the following impediments such as protection of the perpetrator by his partner and or family members, as illustrated by the following excerpts:

“…mothers are coming forward and defending their husbands or boyfriends…when the child is saying I was abused by the father, the mother says, no ways.”

“The family members do not want the abuser to be arrested. So they will try to protect the perpetrators to protect them from going to prison and that is a challenge, you know.”

“…our justice system is failing us because in those cases you find out that the perpetrator is not sentenced; the perpetrator is sent back to the family and then you cannot leave the child in such kind of a family where the same person who sexually abused the child is there.”

The findings confirm a report by the Mail and Guardian of 28 June 2012 in which Swart (2012:24) mentions that recommending imprisonment of the perpetrator in family preservation is not an alternative, since perpetrators are released on the basis that the prisons are full.
5.2.3.7 Sub-theme 7.7: Addressing cultural issues among family members

The participants experienced challenges with cultural issues when trying to preserve families, as illustrated by the following storylines:

“… sometimes people would say, I do not do this because of tradition and culture and you do not understand…everything, from circumcision, to going to the mountains, to initiation, to lobola and damages, to marriage, to sexual activities [comes in].”

“They [the maternal family] say, we cannot let this child go because this guy has not paid lobola. Yes, the court is enforcing its orders but an order will never create peace because the other party feels aggrieved because they hold on to their culture. So we are having problems in trying to negotiate with our clients especially when we are doing our parenting plans. They [the maternal family] will try at all costs to frustrate whatever moves you are trying to ensure that the child is transferred to the father.”

“….it is difficult because some of them based their argument on their culture, they believe that, if the child is behaving in an unacceptable manner instead of disciplining the child by withdrawing the privileges you should hit the child and that for us it is physical abuse.”

This finding suggests that legislative obligations and responsibilities do not take cultural aspects into consideration. Additionally, the findings suggest that social workers find it difficult to utilise social work knowledge, values and skills regarding diversity to develop cultural competence in effectively engaging families across ethnic and cultural boundaries (Downs, Moore, McFadden, Michaud & Costin, 2004:299). From a strengths perspective, Benard and Truebridge (2013:216) emphasise that social workers should seek to identify and recognise the strengths and resilience of every culture.

5.2.3.8 Sub-theme 7.8: Lack of communal resources

The participants noted the need to refer clients for specialised services such as psychological services. However, participants reported inaccessibility of affordable psychological services as follows:

“Some of the hospitals have psychologists while some are understaffed. Some of the clinics have psychologists, but, they are overworked and they do not have time to see everybody.”

“You have to ferry them [clients] to the psychologist and back. When am I going to do my job if I am going to drive clients to and from the psychologist?”
“I mean for some of the psychologists, one assessment cost R400.00 or R500.00 for them to see one child once [per session].”

Strydom (2010:199) established that communal resources are not accessible for families who are financially disadvantaged. On the other hand, the Green Paper on Families (2011:67) accentuates the importance of the State psychologists and psychiatrists in assessing the stability of families encountering psychological problems and for providing recommendations on intervention plans.

The participants also mentioned challenges regarding the inaccessibility of communal resources such as developmental centres, drug rehabilitation centres, children’s homes, home-based care services and doctors. The following storylines are illustrative:

“They [developmental centres] only provide for certain people not the whole community is allowed to be involved in these things [income-generating programmes].”

“…you do not advertise it [the feeding scheme programme] because you will be overwhelmed by the response.”

“I will start with the queue to get the file from the filling queue, to the doctor’s queue; which means the whole day I have done the medical [assessment].”

“I have not looked for a placement [children’s home], I do not know where I will get it and whether I will find it…that time, where is that child? She is going back to that abuse.”

“You do not always have people that can help you with the drug abuse problem or have somebody that can go out and check on the family when you are not able to go out every day.”

“I mean to try and get a child some therapy it is almost impossible unless somebody can pay for it. Good therapists are hard to find.”

“They [home based care organisations] are useful but they are few”

These findings support the premise that in South Africa, child welfare policies have prioritised strengthening families to become self-reliant rather than focusing on the creation of an enabling communal environment that would facilitate such a process (Sewpaul & Hölscher, 2007:196).
5.2.3.9 Sub-theme 7.9: Lack of clear guidelines and training

The participants spoke about the lack of clarity on family preservation services. The following excerpts are illustrative:

“Like I said before, most social workers do not really understand when you say, family preservation. They do not understand, what is the aim of family preservation; why do we do it; what are the advantages? So, we end up just doing.”

“Family preservation is just too vague; so you need to have specification on how you are going to conduct it. I mean it can sometimes confuse you as a worker.”

“People just got modules to say, this is family preservation but the actual practical training; I do not think it was given to us.”

The findings confirm that a lack of clear guidelines results in confusion and misunderstanding among social service providers which in turn derails effective service provision (Dlangamandla, 2010:80-81; Mashigo, 2007:57). In a study conducted by Patel et al. (2012:220), social workers felt ill-equipped in meeting social service legislative requirements.

5.2.3.10 Sub-theme 7.10: Lack of funding and organisational resources

In addition to a lack of clarity and training on family preservation services participants from both NGOs and government (the DSD) mentioned the following stumbling blocks:

- Lack of funding - “They [the organisation’s authorities] said that they do not have a budget for that [family preservation programme] but they expect us to render services.” Similarly, Strydom (2010:200) found that organisations have insufficient funds for social worker to initiate, run and maintain family preservation programmes. This is supported by Dlangamandla (2010:90) who established that social workers are expected to initiate programmes yet when it comes to implementation they are told that there is no funding to run the programmes.

- Lack of organisational resources - “….the other challenge is not getting resources from the organisation, ‘cos for me to go out to the community I need resources, as in, I need a car.” “…..we do not have resources, you know. When you render services, to people you take their time and you need to offer them refreshments.” These findings confirm those from previous research that organisations have insufficient
resources such as vehicles which pose as an obstacle to the provision of family preservation services (Strydom, 2010:198). Tyuse et al. (2010:214) equate failure of family preservation services to insufficient organisational resources.

5.2.3.11 Sub-theme 7.11: High caseload and low salaries

The participants reported carrying high caseloads as a hindrance to the provision of family preservation services. The following remarks are illustrative:

“I think for now we have a problem of many cases that we are handling.”

“At times we are under pressure with emergency cases so that we may not even get [the time] to do family preservation...”

The findings are supportive of the outcomes of previous studies in which workers had a caseload that is above one hundred families thus making it difficult for social workers to provide family perseveration (Strydom, 2010:196;199). Additionally, Dlangamandla (2010:90) also found that due to a high caseload, social work cases tend to be crisis oriented.

The participants attributed their inability to cope with the demand of attending to multiple responsibilities. One stated that: “I have got family preservation, foster care; I have got custody cases; I have got children’s homes; so many things...you do not have time to give to one.” The social workers’ failure to cope with the demand to attend to statutory and family preservation services in an effective manner has been noted by several authors (Mashigo, 2007:95; Landman & Lombard, 2006:2).

Although NGOs employ few social workers they are unable to pay competitive salaries compared to the DSD. One participant stated that:

“…..but when you come to how it is arranged or how they decide to reward child welfare, it is quite disheartening. It is the least rewarding sector within the social work profession but it has most of the work. There is a lot of work and less pay in child welfare.”

“We are not earning the same as the department social workers yet we are doing the same job.”

This is consistent with the views that social work in South Africa continues to be a low status profession with poor salaries (Gray & Lombard, 2008:143). Similarly, Patel et al. (2012:223)
noted the inability of the formal welfare sector to provide employees with adequate salaries. A recommendation has been made to eliminate the inequalities in salaries between the State and the NGOs social workers to enable effective implementation of family preservation services (Strydom, 2010:201).

5.2.3.12 Sub-theme 7.12: Lack of supportive services for social workers

Notwithstanding the participants’ failure to cope with their workload, they also reported a lack of support as follows:

“We get overworked but we do not have the debriefing sessions, whereby we get group supervision and we are debriefed.”

“…normally we are only told that, if you get something that is bothering you, speak to your supervisor. My question obvious is; if it is your supervisor who is bothering you, whom do you speak to?”

“…it is not like we are not mentioning it [lack of funding for programmes] in our sectional meeting. We mention this all the time to our supervisors.”

“We do not have team building here; we do not have a supportive system.”

According to Crosson-Tower (2009:242), the provision of competent supervision to social workers is essential to meet the demands of providing effective family preservation services. Research shows that social work organisations should provide team building and supportive sessions on an ongoing basis in order to promote a positive organisational culture (Cock, 2008:105; Collins, 2008:1183).

5.2.3.13 Sub-theme 7.13: Addressing political agendas

One participant from the DSD spoke about the challenges of responding to cases which tend to be politically oriented, as indicated by the following quotation:

“…you have planned to do a programme on that day and a case will appear on a media and they will say, ‘there is this family; they do not have documents; they are experiencing poverty’. Just because the case appeared on the media you will be expected to drop everything and attend to that case. You know, politicians are not social workers, they did not train to become social workers; they do not know how we work.”

This finding supports Dlangamandla’s (2010:86-87) opinion that social workers encounter challenges with the influence of political mandates on social service delivery that seems to
focus on immediate results. A study conducted by Cock (2008:100) revealed that political mandates create unrealistic expectations and exert work pressure on social workers.

The following sub-theme presents the lack of communal resources as a hindrance to effective service delivery.

5.2.3.14 Sub-theme 7.14: Inter-organisational challenges

The participants expressed their frustration about the lack of support from other practitioners, particularly those working in the health, child welfare and judicial institutions, as follows:

“When you take the child to Far East [Hospital] they will send you from pillar to post as if you are zero [nothing], the nurses do not recognise you. They scream at you as if you are crazy. If you go to the crisis centre they will tell you that they are dealing with rape cases.”

“At the police station they will send you from pillar to post because nobody wants to take the responsibility of opening a case for you. At the place of safety they will not take the child without the J88 [a form completed by a medical health practitioner after examining an individual on physical and sexual abuse]. You will handle one case the whole week. One case, begging the police, begging the doctor, do you get this.”

“We end up being beggars to say, can you help us with this child, can you please, can you please, as if it is not their job.”

“I think we end up working in vacuum where it is just us who are expected to do everything; who are expected to mend families, of which some things [family problems] need the police; some things [family problems] need a different organisation, a different professional; some things [family problems] they need lawyers; some things [family problems] they need doctors...”

These findings confirm those from a study conducted by Maccio et al. (2003:8) wherein workers rendering family preservation services in a multidisciplinary setting were frustrated due to the inability to access needed resources. Generally, the findings revealed that the absence of effective collaboration among role players in the social service sector makes them unable to realise family preservation goals.
5.2.3.15 Sub-theme 7.15: Participants experiencing emotional problems and burnout

The participants admitted feeling emotionally drained and re-experiencing trauma. In support of this the following Storylines are quoted:

“When you go home, you feel emotionally drained and you feel as if you went through a whole lot of trauma and you re-experience those situations yourself.”

“You just think, this child murdered…you are also a human being…at the end of the day it gets to [affects] you…Sometimes you come back [from handling such a case] and another case is waiting for you.”

In a study conducted by Pistorius, Feinauer, Harper, Stahmann and Miller (2008:186), service providers expressed feelings of being traumatised by the clients’ stories and tired when they are supposed to attend to clients. Likewise, van Heugten, (2011:11-12) established that when social workers spend a lot of time with traumatised clients they experience vicarious trauma and compassion fatigue.

One participant said: “…we also get burnout from our work.” Earle (2008a:32) reported an increase in incidents of high burnout rates among social workers. Due to feelings of trauma, exhaustion and burnout, the participants reported feelings of wanting to change the area of work as stated by one participant that: “I feel that I need a change. Maybe, if I can go and work at a school as a school social worker….” This finding supports the previous one by Patel et al. (2012:223) that there is a high incidence of staff turnover among social workers due to high caseloads and pressure to deliver services.

5.2.4 Theme 8: Coping mechanisms utilised by participants

Despite the challenges encountered by the participants during service delivery, they mentioned that they had developed coping mechanisms, as illustrated by the following statement:

“You need to be basically like a chameleon and adapt to your circumstances and your surroundings…despite the fact that there are challenges that you face.”

This finding confirms what Mashigo (2007:61) asserts that social workers need to make sense of what is happening to them, assess how they need to continue providing services and to be committed to their work.
Four sub-themes that emerged from this theme on the coping mechanisms utilised by the participants are discussed below.

5.2.4.1 Sub-theme 8.1: Support from work colleagues

Informal support from well informed work colleagues has been found to be accessible and beneficial in helping social workers cope in their difficult working environment (van Heugten, 2011:112; 126). Support from work colleagues was identified as one of the coping mechanisms utilised by the participants. The following quotations are illustrative:

“We [social workers] just do our own debriefing sessions so that we overcome our boredom, our frustrations...”

“When we [social workers] sit down with colleagues, we discuss...how we think we can handle particular situations; how we are seeing things, our work itself, our evaluation of one another....”

The findings confirm what Collins (2008:1183) concludes that formal or informal group support from colleagues provides opportunities for mutual sharing of experiences, strengths, challenges and possible solutions.

Some of the participants found discussions on issues affecting them during staff meetings to be beneficial, as illustrated by the following storylines:

“We try to raise the problems on the cases, so that your colleagues will have an input and the supervisor will have an input. I get time to ventilate, to say, no, no these people [clients] are giving me problems.”

“If you have a case that cannot be managed because of its content [complexity] then the other workers will help you.

“Pistorius et al. (2008:193) found that an agency environment which enables social service providers to talk openly about their cases creates a supportive and collaborative system.

5.2.4.2 Sub-theme 8.2: Support from family and friends

Collins (2008:1180) states that informal support from family and friends helps social workers to cope with job stress. The participants mentioned that:

“Having that [family] support system is also very important.”
“...going out for massages and going out to have fun...that is coping mechanisms for me.”

“...many of my friends are forensic social workers or professionals...yah others are not social workers. We basically go out and we just let go not on cases but on our feelings...so you just need to de-stress.”

The findings support the view of van Heugten (2011:126) that creating social networks and spending quality time with friends and family members enables social workers to cope with the challenges they encounter in their work setting. One of the participants stated that:

“Sometimes you know what, you just need to laugh. Laugh therapy does one thing, you just need to laugh.”

This confirms the findings of a study conducted with social service providers which established that the ability to laugh provided relief from heaviness and deep emotion, thus enabling social service providers to cope in difficult situations (Pistorius et al., 2008:192).

5.2.5 Theme 9: The participants’ recommendations

With regards to addressing the challenges encountered during the provision of family preservation services, eight sub-themes emerged, as discussed below, focusing on the participants' suggestions in relation to what social workers, organisations and the government should consider in the delivery of effective family preservation services.

5.2.5.1 Sub-theme 9.1: Prioritising and broadening the provision of family preservation services

The responses addressed the following aspects:

- Organisational changes - “I think social workers must concentrate more on family preservation. It should be more people concentrating on families and keeping families together.” Developing the scope of social work practice to prioritise family preservation is in line with South African legislation, notably, the first object of the Children’s Act (Act No. 38) of 2005 (2006:section 2) is to promote the preservation and strengthening of families.

- Broaden the scope of family preservation services - “I think that the scope of family preservation must be widened in order to accommodate the different types of families
that are out there, because I know that sometimes, instead of just removing the children and placing them in different areas, we would look for the grandmother and have the children preserved in that family unity.” Broadening the scope of family preservation to incorporate the extended family is consistent with the White Paper on Families in South Africa (2012:11) which includes the extended family. Kinship placement is also considered in family preservation (Down et al., 2004:304).

- Inclusion of families who have not yet experienced problems in family preservation services -. “To improve the provision of family preservation I recommend that it should be an ongoing thing whereby we will not only involve the people that have the problems but the community…like for instance, you feel it is not necessary to involve family B because they are not experiencing problems but they need also to be involved so that we could enrich their knowledge.” Strydom (2010:201) also confirms a need for preventative services.

5.2.5.2 Sub-theme 9.2: More funding for family preservation programmes

The participants recommended that more funding should be provided to enable NGOs to provide family preservation services. They stated:

“…we need specific funding for family preservation programmes….I think it is a big project; it is a big programme…”

“I recommend that government gives us more funding for programmes.”

Trevithick (2012:321) notes that without sufficient funding the family preservation approach may not yield positive results. In the same vein, Streak and Poggenpoel (2005:41) found that adequate funding for NGOs is crucial for effective service delivery. Consistent with these findings, September (2008:155) states that the government must take full responsibility for child protection services and meet the costs of family preservation service delivery. It is envisioned that the government should take a leading role in funding relevant organisations (Patel et al., 2012:215).

Regarding fund raising for organisations, the participants said:

“...it is also our duty as organisations to fund raise, to do fund raising, to come up with programmes that can attract donors into funding certain programmes. The government is trying, that is why they call it a subsidy, it is not enough. We are supposed to supplement it.”

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“...there are other organisations that just pop up from nowhere and they will only be doing counselling services on rape victims...We [need to] work together to get funding, you do the counselling and I do the court process [share responsibilities] and at the end of the day the client is the one who benefit from all those things [services], not us...and you have information [knowledge on counselling rape victims] and I may not have any. We can share information and then we become clever together.”

The need for collaboration between social welfare agencies has also been noted in a study conducted by Patel et al. (2012:225) that fragmentation and competition between social service agencies calls for pooling of resources and information.

5.2.5.3 Sub-theme 9.3: Low caseloads and more service providers

In addition to more funding social workers recommended the following:

- **Caseload and human resources** - “They [Child welfare organisation’s authorities] need to hire more social workers....in order for us to concentrate on fewer cases and that concentration will not be divided to other cases.” This is in line with Berry et al. (2000:191) who state that social workers working with children and families in receipt of family preservation services should carry low caseloads allowing, them to spend enough time for a high intensity of service during that period.

- **Volunteerism** - “I think we can also train volunteers to do such programmes [family preservation programmes] because it is not only social workers that can give them [family preservation programmes]; they are other people who have interest at heart in community work.” Accordingly, the Green Paper on Families (2011:67) states that volunteers provide the bulk of family-oriented services and have a critical role to play in providing crucial services to families. The South African government pledged to provide resources needed to support the role of volunteers and to make their work more effective (Green Paper on Families, 2011:67-68).

- **Rendering family preservation services after normal working hours** - “.... [providing family preservation services] after working hours... not easy for you as a social worker that has a family...but that is what I am figuring out now, to get a time that can suit all my clients” This is consistent with the findings by Strydom (2010:201) that social workers felt that overtime work would be required for the provision of family preservation services to be successful. However, requesting social workers to work
overtime was postulated to be impossible as social workers have family responsibilities (Strydom, 2010:201).

5.2.5.4 Sub-theme 9.4: Training and guidelines on family preservation services

The participants recommended the following:

- Training for social workers - “I think more training in terms of family preservation, what is it; the models required...” The research by Mullins et al. (2012:270) revealed the importance of services providers’ experience, knowledge and training needed to adequately provide family preservation services.

- Recognising of prior learning - “We have degrees yes but we have to grow [expand our knowledge and skills] as well. We cannot remain stagnant…we cannot remain what we are today. We need to grow and change as the environment changes…and be able to offer better services.” This confirms September’s (2008:155) recommendation that a strategy for training and ongoing staff development is required as most child protection social workers are only equipped with the baseline undergraduate training programmes, yet the Children's Act (Act No. 38) of 2005 introduces a new approach to service delivery.

- Practice guidelines - “…maybe if we can have the guidance, something that will guide us to see if we are on the right track of helping families out there.” The finding confirms Tyuse et al.'s (2010:215) opinion that for the successful implementation of family preservation services, social workers should be trained on ways of helping vulnerable children and their parents. Another participant stated: “…not all people in government and…from a legal perspective have the same knowledge because everyone has his or her interpretation, a different interpretation…So we need something that can govern us the same way.” The DSD has drafted a Concept Paper on Family Preservation Services which seeks to promote a common understanding of family preservation programmes (DSD, 2013a:65).

- Government’s responsibility to offer training - “The people who formulated the policy that is the government; I think there is no better person to train us than them.” In a study conducted by Patel et al. (2012:221), the government was held responsible for providing guidance on social service delivery.
5.2.5.5 Sub-theme 9.5: Conducting proper assessments

In this regard, the recommendation focuses on the establishment of an intervention plan - “We need to individualise our cases, be with the client, do the proper assessment on what are the presenting problems other than behavioural problems and if possible refer them for psychological assessment because they will also help and also check if the child is abusing substances because I think also this thing was not done to like take the child to SANCA because we thought, no, it is normal, the child is stealing no, it is normal. If we can move from normalising [cases] to individualising cases it can help; conducting proper assessment…” The finding confirms the assertion that family preservation services need social workers to conduct thorough assessments to ensure that families receive appropriate services (Gandarilla, 2009:72-73).

5.2.5.6 Sub-theme 9.6: Organisational support services

The following recommendations were made by the participants:

- Support from supervisors - “…for me to go and work outside there I need support from my supervisor. If she does not see interest in what I do then it becomes difficult”. The finding of Patel et al. (2012:224-225) supports the need for managers to change their mindset and provide leadership in aligning service provision to legislative changes is critical.
- Debriefing - “We also need some debriefing so that we do not become exhausted…” The finding confirms Cock’s (2008:105) opinion that debriefing sessions and stress management workshops for social workers are essential.

5.2.5.7 Sub-theme 9.7: Accessible and affordable communal resources

Recommendations in this instance focused on:

- Resources - “…more resources should be available to families, for example family therapists and play therapists for the kids, free resources ‘cos the people that really need them are economically not always able to pay for them.” According to the Integrated Service Delivery Model indicates that psychological services complement social work services and allow for integrated and holistic service delivery which enhances the capacity and functioning of the family (DSD, 2006a:15).
• Reduction of dependency on social grants - “We need to move away from state grants and pensions…the developmental centres are a good thing, where people are taught skills and there should be a market for them to go and implement these skills so that they can have an income.” This finding is similar to September’s (2008:151-152) assertion that it is important to align the provision of social welfare grants to specific developmental strategies such as poverty eradication programmes.

• Creation of self-sustainable development and financial independence - “….help them [families] with projects which can enable them to sustain themselves and be financially independent, maybe that could also work.” This is in line with the assertion that poverty eradication programmes enable poor families to access sustainable employment and exit from poverty (September, 2008: 151-152). Similarly, Cash and Berry (2003:22) are of the opinion that a variety of sustainable family preservation services are required to ameliorate poverty and unemployment.

• Extension of developmental programmes to white communities - “…most of these developmental centres are in the black areas and now white people… most of them are also in the same place where black people are….they are experiencing poverty, not working, no homes…” Contrary to this finding, Patel et al. (2012:220) earlier made an assertion that the need for developmental services should be primarily accessible to black South Africans.

5.2.5.8 Sub-theme 9.8: Utilising available communal resources

In addition to establishing developmental programmes, the participants suggested that social workers should make use of available resources by collaborating with service providers in the community. This is summed up by the following excerpt: “….you as a social worker, you also have to make your own means to link with all these people [stakeholders]. Make sure you build your relationships with other NGOs, other stakeholders, private sectors so that they can help with resources.” This finding supports the opinion expressed by Maccio et al. (2003:9) that family preservation workers should take the initiative in establishing interagency collaboration with relevant welfare agencies for the benefit of their clients.
5.2.5.9 Sub-theme 9.9: Inter-organisational changes

In order to facilitate inter-organisational collaboration with stakeholders, the participants indicated:

“I recommend that we have stakeholders’ meeting whereby we come up with solutions.”

“If our supervisors sort of...involve different stakeholders, SAPS, clinic, district surgeon, like these people that we work with and explain that when we deal with crisis, what do we do? What is it that we are doing? When we look for medical assessment, why it is needed?”

“I think the more we prioritise an integrated approach I think family preservation would be easier.”

This is consistent with the view that maintaining networking relationships with relevant service providers and empowering other organisations with relevant knowledge is essential for service delivery (Strydom, 2010:202-203).

5.3 Chapter summary

This chapter presented the research findings focusing on themes five to nine that emanated from the transcribed interviews conducted with twelve social workers providing family preservation services in Ekurhuleni, Metropolitan, Gauteng Province.

The fifth theme focused on the framework of the provision of family preservation services which includes levels of intervention and traditional methods of social work. The sixth theme discussed the positive experiences of the participants when providing family preservation services. This is followed by theme seven on the challenges experienced by participants in providing family preservation. The challenges pertain to difficulties in engaging families, nature of cases, organisational constraints and lack of communal resources. The eighth theme illustrated the coping mechanisms utilised by the participants to overcome challenges experienced during service implementation. Lastly, theme nine dealt with the recommendations made by participants for improved family preservation services.

The following chapter will provide the summary, conclusions and recommendations from the research study.
CHAPTER SIX

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

6.1 Introduction

The aim of the research study was to develop an in-depth understanding of the experiences and perceptions of social workers on the provision of family preservation services in the Ekurhuleni Metropolitan, Gauteng Province. This chapter provides a brief summary of the previous chapters, the qualitative research process followed and the findings. Conclusions and recommendations are also presented, based on the qualitative research process and the findings.

6.2 Summary of the previous chapters

Chapter One provided a general introduction and orientation to the research study. The first section of the chapter described the background and motivation for the study. The research question and goal which are linked to the topic were provided, followed by objectives that guided the investigation. The qualitative research method was briefly introduced. Informed consent, confidentiality, anonymity and management of information as fundamental ethical considerations that guided the researcher's conduct were elucidated. Finally, the key concepts utilised in the study were clarified.

Chapter Two provided a literature review based on the history of family preservation services, an overview of the various theoretical perspectives underpinning the provision of family preservation services, namely crisis intervention theory, the strengths perspective, empowerment approach, ecological approach, human rights perspective, systems theory, attachment theory, the life cycle approach, cognitive behavioural approach and eclectic perspective. Attention was also given to the South African perspective of family preservation.

Chapter Three focused on a detailed application of the qualitative research method which was introduced in Chapter 1. The emphasis is placed on the process followed in the recruitment and procurement of a sample, preparation of participants for semi-structured interviews and the analysis of the data.
Chapter Four and Five focused on the research findings derived from the semi-structured interviews conducted with the twelve participants who provide family preservation services in the Ekurhuleni Metropolitan, Gauteng Province. The outcome of the data analysed by both the researcher and the independent coder, who used the Atlas Ti software package, resulted in nine themes, forty eight sub-themes and nine categories. The findings were subjected to literature control.

In this Chapter Six, summaries of the first five chapters of the research report are provided. A summary and the conclusions reached based on the qualitative research process and major research findings are presented below. Recommendations based on the major findings are also presented.

6.3 Summaries, conclusions and recommendations of the research study

This section is based on the summaries of the qualitative research process and the major findings; the conclusions reached; and recommendations for practice, policy and future research.

6.3.1 Summary and conclusion of the research process

In order to accomplish the set goal for the study, a qualitative research method coupled with the explorative, descriptive and contextual strategy was employed. This process enabled the researcher to gather rich information on the experiences and perceptions of social workers on the provision of family preservation services in the Ekurhuleni Metropolitan, Gauteng Province. The overarching research question was: What are the experiences and perceptions of social workers on the provision of family preservation services in the Ekurhuleni Metropolitan, Gauteng Province? The research goal was: To develop an in-depth understanding of the experiences and perceptions of social workers on the provision of family preservation service in the Ekurhuleni Metropolitan, Gauteng Province. The aim of the research study was attained as rich information was gathered from the participants through semi-structured interviews aided by an interview guide.

The research objective that guided the research process was to explore and describe the experiences and perceptions of social workers who provide family preservation services in the Ekurhuleni Metropolitan. This was accomplished through the application of the
The above research goal was divided into the following task objectives:

- To obtain a sample of social workers who provide family preservation services in the Ekurhuleni Metropolitan.
- To conduct semi-structured interviews facilitated by open-ended questions included in an interview guide.
- To explore the experiences and perceptions of social workers on the provision of family preservation services in the Ekurhuleni Metropolitan.
- To sift, sort and analyse the qualitative data gathered using Tesch's eight steps (cited in Creswell, 2009:186) and by means of the Atlas Ti software package.
- To describe the experiences and perceptions of social workers who provide family preservation services in the Ekurhuleni Metropolitan.
- To interpret the data and conduct a literature control in order to verify the findings.
- To draw conclusions and make recommendations based on the perceptions and experiences of social workers who provide family preservation services, for the improvement of service delivery.

The task objectives enabled the researcher to follow a well-structured process to attain the set goal successfully.

A qualitative study was conducted to develop an in-depth understanding of the experiences and perceptions of social workers on the provision of family preservation services in the Ekurhuleni Metropolitan in the Gauteng Province. Qualitative data was obtained from the twelve participants through semi-structured interviews. Analysis took place through the application of the eight steps proposed by Tesch (in Creswell, 2009:186) and Atlas Ti software package. Nine themes, forty eight sub-themes and nine categories emerged from the data. Data verification was conducted, following Guba’s model (in Krefting, 1991: 214-222).

The qualitative research methodology employed in this study was appropriate and valuable as it enabled the researcher to engage with participants and to gather in-depth information. Thus, the goal of the study which was to develop an in-depth understanding of the experiences and perceptions of social workers on the provision of family preservation service in the Ekurhuleni Metropolitan in the Gauteng Province was accomplished.
following conclusions are drawn from the qualitative research process that was applied in this study:

- The purposive and snowball sampling methods utilised to select the sample were appropriate for the study as the participants with rich information took part in the study.
- Preparing the participants for data collection proved to be a significant process as the researcher managed to establish a trustworthy relationship with the participants. As a result, the participants were willing to sacrifice their time and volunteer to participate in the study. They freely expressed their thoughts, feelings and experiences.
- The semi-structured interviews allowed the researcher to explore the phenomenon under study.
- The themes, sub-themes and categories that emerged from data analysis provide broad descriptions of the participants’ experiences and perceptions on the provision of family preservation.
- Guba’s model (in Krefting, 1991: 214-222) of data verification was useful in the demonstration of the findings’ trustworthiness.
- The ethical considerations guided the researcher’s conduct throughout the study.

However, it is important to note that the research study was limited to a specific geographical area which is Ekurhuleni Metropolitan, Gauteng Province and to social workers employed by DSD and Child Welfare Organisations. Hence, the findings cannot be generalised to other contexts such as rural areas.

6.3.2 Summary and conclusions based on the research findings

A brief summary of the nine themes, forty eight sub-themes and nine categories that emerged from the qualitative data analysis followed by the researcher's conclusions are presented below:

**Theme 1: Meaning of family preservation services**

The participants' description of the meaning of the concept ‘family preservation services’ is similar to the one provided in the Children’s Act (Act No. 38) of 2005. Generally, they understand the aim of family preservation services as seeking to strengthen the functioning of families to reduce the removal of children from their homes into alternative care. The
participants are aware of the requirements of the Children’s Act that seek to meet the best interest and needs of the children within the family environment and to prioritise prevention and early intervention.

**Theme 2: The participants’ perceptions of family preservation services**

The participants shared positive and negative perceptions on the provision of family preservation services. Most of them are in favour of these services as they are of the view that:

- Children will receive care from their families;
- Parents will gain knowledge on child rearing;
- Prevention will be prioritised rather than being reactionary when problems arise;
- Child abuse and the removal of children from parental care can be minimised, and
- The family can be assisted holistically.

From the positive aspects mentioned by the participants, it can be deduced that they are optimistic about the outcomes of the family preservation programme.

The negative aspects identified related to:

- Too much paperwork such as compilation of medical assessment reports and care plans which minimise attention to the children’s needs;
- High caseloads among social workers;
- Lack of adequate funding for intervention programmes;
- Inadequate communal resources including the high unemployment rate which constrains parents from meeting the basic needs of their children; and
- Magistrates’ different interpretations and application of the Children’s Act (Act No. 38) of 2005. For instance, when a child is placed with the poverty-stricken extended family, the magistrates may or may not order financial support (for example, foster care grant) for such a child.

The negative aspects expressed by the participants indicate the lack of human resources, high caseloads, lack of funding for programmes, scarce community resources and inconsistencies in the implementation of the Children’s Act by magistrates make it difficult for them to provide effective family preservation services.
Theme 3: Kinds of social problems experienced by families

Families in the Ekurhuleni Metropolitan experience a myriad of social problems such as: marital and custody of children, single parenting, unemployment, inability to meet basic needs, parental substance abuse, domestic violence, child neglect and abuse, child behavioural problems, emotional problems, physical and mental health problems, lack of knowledge and skills, and lack of documentation. The state of the family is compounded by the absence of adult caregivers resulting from parental death, untraceable and/or separated parents and the cycle of abuse.

The families in the Ekurhuleni Metropolitan experience multiple problems in relation to familial relationships, social and economic problems that require greater attention from the social workers. In some instances, these problems interfere with the accomplishment of the fundamental goal of family preservation services of not removing vulnerable children from their homes.

Theme 4: The provision of family preservation services as a helping process

According to the participants, the provision of family preservation services falls under five sub-themes, namely, referral for social work intervention, engagement, assessment and planning, intervention then the evaluation and termination phases.

The participants explained that the provision of family preservation services follows the following process:

- Referral for social work intervention is made by neighbours, the police, community leaders, school teachers and other professionals. In some cases, parents approach social workers requesting assistance.
- During the engagement phase, a working collaborative relationship is established with families utilising communication skills, respect, acceptance, a non-judgemental attitude and empathy.
- The assessment and planning phases entail interviews conducted with needy children and their families to gather relevant information on the presenting problem. In some cases, interviews are conducted with the client's neighbours and educators to gather more information. In addition, the home environment is observed and the client's strengths determined. Thereafter, a relevant family preservation intervention plan is compiled.
During the intervention phase, the concrete needs of families are addressed through the provision of food parcels and assisting families to access social security grants. In addition, clients are involved in various programmes such as: parenting skills, health management, food gardening, income-generation skills and financial management. Educational programmes are offered to children with the aim to reduce risky behavioural problems such as substance abuse and sexually acting out. Counselling or therapeutic services are provided to families affected by child sexual abuse, domestic violence and substance abuse while some children and families are referred for specialised services such as psychologists, attachment therapists, FAMSA, Lifeline, Ithemba Rape and Trauma Centre, Kids Clinic and SANCA for counselling, therapy and rehabilitation.

During the evaluation and termination process, the participants and the family members assess their accomplishments and plan for the future.

The findings suggest that some participants drew up the intervention plans independently without the involvement of the clients. The participants were unable to clearly articulate the counselling or therapeutic services provided to families affected by child sexual abuse, domestic violence and substance abuse. Information on who is responsible for case management, their roles, functions and responsibilities was not provided.

**Theme 5: A framework for the provision of family preservation services**

The fifth theme focused on the framework for the provision of family preservation services which includes levels of intervention, casework, group work and community work. The levels of intervention are summarised as follows:

- At the prevention level, awareness campaigns are conducted in communities
- During early intervention, focus is on rendering services to alleviate the presenting problem and to avoid removal of children from their family homes. However, in certain instances, parents approach the participants requesting the removal of children from home. Such a request leads participants to intervene and assist with the resolution of the problem.
- At the statutory level, some children who were at risk of further harm, were removed from their homes and placed in residential care centres.
- Aftercare services are provided to render reunification services to families of children who have been statutorily removed from their families to alternative care.
Based on the above summary of the findings, the researcher concluded that the participants did not provide a clear explanation on the provision of family preservation services at the levels of intervention according to the White Paper on Families in South Africa (2012) and the Manual on Family Preservation Services (2010). There appears to be confusion among the participants regarding the provision of family preservation services at the statutory and the aftercare services (reunification) levels.

The process followed during the implementation of casework, group work and community work as a framework for the provision of family preservation services is summarised as follows:

- In casework, participants reported individual and conjoint sessions with children, parents and significant family members.
- Group work is conducted with children and parents with similar problems to provide mutual aid and to offer support to each other.
- The participants conduct awareness campaigns to educate communities about family preservation services. Some parents are involved in poverty alleviation projects such as food gardening, knitting and sewing.

The researcher concluded that even though the participants indicated that they are rendering individual, group and community services, the level of success and effectiveness of these services could not be determined.

**Theme 6: The participants’ positive experiences of family preservation services**

The participants experienced keeping children within their families or returning them to their homes as the positive outcomes of providing family preservation services. Other participants mentioned an improvement in the parent’s circumstances such as refraining from using substances and obtaining employment while, on the other hand, children’s behaviour improved as they started attending school and stopped abusing substances. The participants linked positive case outcomes to cooperation from the children and parents. The findings point to the fact that there were few accomplishments and this is attributed to the fact that the participants are rendering services to poverty-stricken families with multi-faceted problems.
Theme 7: Challenges experienced by the participants during the provision of family preservation services

The challenges encountered by the participants when providing family preservation services include:

- Resistance, non-cooperation, lack of participation and aggressive behaviour from involuntary parents who have been mandated by the court to enrol in the family preservation programme.
- Parents who refuse to take responsibility for raising their children and leaving them at the participants’ offices especially those who are physically violent, abusing substances or teenage girls who sleep out or are sexually involved with older men.
- Inability to rely on referral information which could under-estimate or over-estimate the severity of the problem.
- Establishing the severity of the problem during assessment without exposing the children to further harm and developing an appropriate intervention plan.
- Lack of change or improvement in the family’s circumstances, regardless of the services provided. The participants attributed this to the environment which is characterised by poverty, high unemployment and criminal activities.
- When rendering services to sexually and physically abused children, the participants experience interference from family members, especially mothers defending the perpetrator who is often their spouse. The mothers accuse their children of lying. In other cases, perpetrators are not arrested or are released and they go back to the same area where the victim (child) resides. This puts participants in a dilemma regarding protection of the child and whether it is ideal to keep the child at home in terms of family preservation.
- Clashes between cultural practices and the provision of the Children’s Act (Act No. 38) of 2005 in which the father may apply for the custody of the child even though he has not paid lobola “bride-price” for the mother.
- Addressing the demands of political mandates which hamper family preservation schedules.
- Inaccessibility and a shortage of communal resources such as psychological services for families’ mental health, feeding scheme programmes, developmental centres required for income-generation projects, drug rehabilitation centres, children’s homes for the placement of children at risk, home-based care services for follow ups on family progress and doctors needed for medical assessment.
• Lack of continuous training and guidance for social workers on family preservation services.

• Lack of funding to buy refreshments for programmes, lack of social workers, high caseloads, salaries that are not commensurate with the amount of work and the shortage of cars for participants to transport families during the provision of family preservation services.

• Lack of organisational support in terms of effective supervision, debriefing services and team building. This reportedly results in them struggling to cope with the demands of their work and some participants experienced emotional drain, exhaustion, burnout and an urge to change their area of work.

• Lack of cooperation from other practitioners, particularly those working in the health sector, children’s homes and the judiciary (the police, lawyers and magistrates). Some of the participants felt undermined and others felt that other professionals do not want to fulﬁl their responsibility when it comes to child protection.

Based on the above-mentioned challenges, the researcher concluded that the participants will not be able to offer effective family preservation services without the required human, communal and financial resources including organisational support for the participants. The lack of cooperation from parents and the lack of collaboration from other role players appear to frustrate the efforts by the participants in the provision of family preservation services. In addition, social workers are confronted with uninformed parents regarding their legal rights on the custody of their children which creates an impediment in the implementation of the family preservation services.

Theme 8: Coping mechanisms utilised by participants

The participants utilise the following coping mechanisms to manage the challenges they encounter when providing family preservation services:

• Emotional and educational support from colleagues which enables them to work with complex cases.

• Emotional support from family members and friends which helps to sustain them and to cope with stress-inducing situations.

• Going out and having fun with friends. Laughter was also reported as one of the stress relieving mechanisms used.
The findings suggest that the participants use limited coping mechanisms as none mentioned for instance, the use of physical exercise and relaxation techniques.

Theme 9: The participants’ recommendations

The participants made the following recommendations:

- Services should be prioritised and broadened by focusing on prevention and involvement of the extended family for alternative placement.
- More specialisation in family preservation services.
- Adequate funding for the services should be provided by government and NGOs.
- The caseload of social workers rendering family preservation services should be reasonably low to enable them to offer effective services in respect of affected children and their families. In addition, social workers should be permitted to render family preservation services outside of normal working hours.
- DSD and NGOs should organise workshops and conferences for social workers to be empowered with the required knowledge.
- The accessibility of psychological and family therapy services should be improved.
- Dependency of families on the State grants and pensions should be reduced and self-sustainable development should be promoted through the establishment of developmental and poverty alleviation programmes.
- Good working relationships with other agencies and stakeholders (the police, health service providers and the judiciary) should be developed and/or enhanced.

The researcher reached the conclusion that the recommendations made by the participants are sound and generally attainable. However, the recommendation that relates to rendering family preservation services after working office hours is not feasible considering the level of crime in the Ekurhuleni Metropolitan. This could place the social workers’ lives in danger.

6.3.3 Recommendations based on the research study

Based on the research findings and research process, the researcher makes the following recommendations for practice, policy and research.
6.3.3.1 Recommendations for practice

- The education of social workers in the provision of family preservation services and the Children’s Act (Act No. 38) of 2005 should be given adequate attention by schools and departments of social work in institutions of higher learning. In particular, the training should provide clarity on the provision of family preservation services as required by the White Paper on Families in South Africa (2012), the Manual on Family Preservation Services (2010 and the relevant provisions in the Children’s Act (Act No. 38) of 2005.

- The DSD in collaboration with Child Welfare organisations should provide ongoing workshops to social workers on the provision of family preservation services. Such training should receive approval from the SACSSP in the form of CPD points.

- Apart from training social workers, other child and family welfare role players namely, psychologists, police officers, medical health workers and magistrates should receive training from the government on the roles they are supposed to play with regards to family preservation services. Social service agencies should conduct meetings with these practitioners to address the interagency problems encountered by social workers. This will ensure effective collaboration between the role players and social workers.

- The DSD and Child Welfare organisations should provide adequate funding, organisational resources, human resources and supervision for the effective implementation of family preservation programmes. They should also provide information on who is responsible for case management, their roles, functions and responsibilities.

- The DSD and Child Welfare organisations should allocate manageable caseloads to social workers involved in the implementation of family preservation services. This will enable them to concentrate on fewer cases and provide intensive services that might have positive outcomes.

- An effective monitoring and evaluation tool should be developed and implemented by the DSD and Child Welfare organisations in order to determine the level of success and the effectiveness of services provided to individuals, families, groups and communities.

- The researcher recommends that social workers should involve affected children and families in goal setting and the development of the intervention plan when providing family preservation services.
• To overcome burnout, social workers should expand their coping mechanisms and they should also consider using physical exercise and relaxation techniques.

6.3.3.2 Recommendations for policy

The policies on the provision of family preservation services, from a strengths perspective, exist as indicated in the White Paper on Families in South Africa (2012), Manual on Family Preservation Services (2010) and the Children’s Act (Act No. 38) of 2005. However, the responses from the participants did not clearly elucidate the integration of these policies in the provision of family preservation services and therefore, the researcher recommends that:

• The DSD and child welfare agencies should continuously monitor and evaluate the implementation of these policies to determine their effectiveness in alleviating problems among vulnerable children and their families. They should also advocate for the policies to be amended as required, for effective service provision.

6.3.3.3 Recommendations for further research

• Future research should focus on exploring and describing the perceptions and experiences of needy children and their families to determine the benefits of family preservation services in terms of improving the quality of their lives.

• Research should also be conducted in other geographical areas to determine good practices in the provision of family preservation services.

6.4 Chapter summary

In conclusion, the research study commenced with an overview of the research study which incorporated a general introduction, problem formulation and an introduction to the research process. This was followed by the process of data collection and a review of literature on the meaning of family preservation services and the theories or perspectives informing the provision of family preservation services. Particular attention was given to family preservation perspectives that are utilised within the South African context. This chapter is the culmination of the research report and presented summaries and conclusions based on the themes, sub-themes and categories, followed by recommendations concerning policy, practice and future research.
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ADDENDUM A: LETTERS REQUESTING PERMISSION TO CONDUCT THE RESEARCH STUDY

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The Director
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1500

Date: 28/01/2013

REF: REQUEST FOR PERMISSION TO CONDUCT A RESEARCH STUDY AT THE DEPARTMENT OF SOCIAL DEVELOPMENT IN BENONI

I Felistas Nhedzi, the undersigned, am a social worker in service of Kids Haven Child and Youth Care Centre in Benoni, and also a part-time Master’s student in the Department of Social Work at the University of South Africa. In fulfilment of requirements for the Master’s degree, I have to undertake a research project and have consequently decided to focus on the following research topic: The experiences and perceptions of social workers on the provision of family preservation services in the Ekurhuleni Metropolitan, Gauteng Province. I therefore, request for permission to conduct face-to-face semi structured interviews with social workers based at the Department of Social Development in Benoni.

The aim of this study is to report on the experiences and perceptions of social workers who provide family preservation services. The information gathered from this study will contribute towards the development of more practical and effective strategies that can help social workers to improve service delivery. After successful completion of my study, I will provide the management of Ekurhuleni Metropolitan with a copy of my dissertation.

Your favourable consideration of my request will be appreciated.

Yours Faithfully,

Felistas Nhedzi
(Researcher)
Enquiries: Mrs F. Nhndzi
38 Cranbourne Avenue
Benoni
Cell: 084 044 7077

The Director
Greater Benoni Child Welfare
P.O. Box 600
Benoni
1500

Date: 28/01/2013

REF: REQUEST FOR PERMISSION TO CONDUCT A RESEARCH STUDY AT GREATER BENONI CHILD WELFARE

I, Felista Nhndzi, the undersigned, am a social worker in service of Kids Haven Child and Youth Care Centre in Benoni, and also a part-time Master’s student in the Department of Social Work at the University of South Africa. In fulfilling the requirements for the Master’s degree, I have to undertake a research project and have consequently decided to focus on the following research topic: *The experiences and perceptions of social workers on the provision of family preservation services in the Ekurhuleni Metropolitan, Gauteng Province*. I therefore, request for permission to conduct face-to-face semi-structured interviews with social workers based at Greater Benoni Child Welfare.

The aim of this study is to report on the experiences and perceptions of social workers who provide family preservation services. The information gathered from this study will contribute towards the development of more practical and effective strategies that can help social workers to improve service delivery. After successful completion of my study, I will provide the management of Greater Benoni Child Welfare with a copy of my dissertation.

Your favourable consideration of my request will be appreciated.

Yours Faithfully,

Felista Nhndzi
(Researcher)
Enquiries: Mrs. F. Nhedzi
38 Cranbourne Avenue
Benoni
Cell: 084 044 7077

Date: 31/05/2013

The Director
Actonville Child and Family Welfare Society
P.O. Box 18304
Actonville
1500

Dear Ms P. Singh

REF: REQUEST FOR PERMISSION TO CONDUCT A RESEARCH STUDY AT ACTONVILLE CHILD AND FAMILY WELFARE SOCIETY

I, Felistas Nhedzi, the undersigned, am a social worker in service of Kids Haven Child and Youth Care Centre in Benoni, and also a part-time Master’s student at the University of South Africa. In fulfilment of requirements for the Master’s degree, I have to undertake a research project and have decided to focus on the following topic: **The experiences and perceptions of social workers on the provision of family preservation services in the Ekurhuleni Metropolitan, Gauteng Province.** I therefore, request for permission to conduct my research study at Actonville Child and Family Welfare Society.

The aim of this study is to report on the experiences and perceptions of social workers who provide family preservation services. The information gathered from this study will contribute towards the development of more practical and effective strategies that can help social workers to improve service delivery.

Your favourable consideration of my request will be appreciated.

Yours Faithfully,

[Signature]
Felistas Nhedzi
(Researcher)
ADDENDUM B: A LETTER FOR PERMISSION TO CONDUCT THE RESEARCH STUDY
WITHIN THE DEPARTMENT OF SOCIAL DEVELOPMENT, GAUTENG PROVINCE

Enquiries: Refilwe Makapela
011 355 7876; Cell No. 082 469 3131
Sub-directorate Research and Policy Co-Ordination
Dir.: Research and Demography
CD: Development and Research

Dear Ms. F. Nhedezi

RE: YOUR APPLICATION TO CONDUCT RESEARCH WITHIN THE DEPARTMENT

Thank you for your application to conduct research within the Gauteng Department of Social Development.

Your application on the research on “The Experiences and Perceptions of Social Workers on the Provision of Family Preservation Service in Ekurhuleni Metropolitan, Gauteng Province” has been considered and approved for support by the Department as it was found beneficial to the Department’s vision and mission.

The approval is subject to the Departmental terms and conditions as endorsed by you on the 28th March 2013

May I take this opportunity to wish you well for the research.

Looking forward to a value adding research and a fruitful co-operation.

With thanks,

MS W.R. Tshabalala
HEAD OF DEPARTMENT OF SOCIAL DEVELOPMENT

DATE: 6/6/2013

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ADDENDUM C: A LETTER REQUESTING THE INDIVIDUALS’ PARTICIPATION IN THIS RESEARCH STUDY

Dear ……………………………..

REF: REQUEST FOR PARTICIPATION IN A RESEARCH STUDY

I Felistas Nhedzi, the undersigned, am a social worker in service of Kids Haven Child and Youth Care Centre in Benoni, and also a part-time Master’s student in the Department of Social Work at the University of South Africa. In fulfilment of requirements for the Master’s degree, I have to undertake a research project and have consequently decided to focus on the following research topic: The experiences and perceptions of social workers on the provision of family preservation services in the Ekurhuleni Metropolitan, Gauteng Province

In view of the fact that you are well-informed about the topic, I hereby approach you with the request to participate in the study. For you to decide whether or not to participate in this research project, I am going to give you information that will help you to understand the aims of the study and the reasons for a need for this particular study. Furthermore, you will be informed about what you will be asked, what you will be requested to do during the study, the risks and benefits involved by participating in this research project, and your rights as a participant in this study.

This research project originated as a result of the challenges experienced by social workers on prioritising family preservation as required by the Children’s Act (Act No. 38) of 2005 instead of the removal and placement of children in alternative placements. The aim of this study is to report on the experiences and perceptions of social workers on the provision of family preservation services. The information gathered from this study will contribute towards the development of more practical and effective strategies that can help social workers to improve service delivery.

Should you agree to participate, you would be requested to participate in a face-to-face interview that will be conducted at a place and time that will be convenient to you. During the interview the following questions will be directed to you:

- Tell me about your understanding of the concept: family preservation services?
• What do you understand to be the requirements of the Children’s Act (Act No. 38) of 2005, with regard to family preservation?
• What are your views regarding family preservation as outlined in the Children’s Act (Act No. 38) of 2005? By this question I mean your opinions or perceptions.
• Which family preservation services have you been providing?
• How would you describe your experiences with regard to family preservation?
• What are the challenges often encountered in the implementation of family preservation services?
• What mechanism do you often apply to address such challenges?
• What suggestions or recommendations would you make to improve family preservation services?

With your permission, the interviews will be audio-recorded. The recorded interviews will be transcribed word-for-word. Your responses to the interview, both the audio-recorded and transcribed versions will be kept strictly confidential. The audio-records will be coded to disguise any identifying information. The records will be stored in a locked office at Kids Haven and only I will have access to them. The transcripts will be made available to my research supervisors, and an independent coder with the sole purpose of assisting and guiding me with this research undertaking. My research supervisor and the independent coder1 will each sign an undertaking to treat the information shared by you in a confidential manner.

The audio-records and the transcripts of the interviews will be destroyed upon the completion of the study. Identifying information will be deleted or disguised in any subsequent publication and/or presentation of the research findings.

Please note that participation in the research is completely voluntary. You are not obliged to take part in the research. Your decision to participate, or not to participate, will not affect you in any way now or in the future and you will incur no penalty and/or loss to which you may otherwise be entitled. Should you agree to participate and sign the information and informed consent document herewith, as proof of your willingness to participate, please note that you are not signing your rights away. If you agree to take part, you have the right to change your

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1 The independent coder is someone who is well versed and experienced in analysing information collected by means of interviews and is appointed to analyse the transcripts of the interviews independently of the researcher to ensure that the researcher will report the participants’ accounts of what has been researched.
mind at any time during the study. You are free to withdraw this consent and discontinue participation without any loss of benefits. However, if you do withdraw from the study, you would be requested to grant me an opportunity to engage in informal discussion with you so that the research partnership that was established can be terminated in an orderly manner.

As the researcher, I also have the right to dismiss you from the study without regard to your consent if you fail to follow the instructions or if the information you have to divulge is emotionally sensitive and upsets you to such an extent that it hinders you from functioning physically and emotionally in a proper manner. Furthermore, if participating in the study at any time jeopardises your safety in any way, you will be dismissed.

Should I conclude that the information you have shared left you feeling emotionally upset, or perturbed, I am obliged to refer you to a counsellor for debriefing or counselling (should you agree).

You have the right to ask questions concerning the study at any time. Should you have any questions or concerns about the study, contact me (Felistas Nhedzi), the researcher on these numbers: cell phone number 084 044 7077 or Professor Makofane, my supervisor/advisor on telephone number 012 429 6884.

Please note that this study has been approved by the Research and Ethics Committee\(^2\) of the Department of Social Work at UNISA. Without the approval of this committee, the study cannot be conducted. Should you have any questions and queries not sufficiently addressed by me as the researcher, you are more than welcome to contact the Chairperson of the Research and Ethics Committee of the Department of Social Work at UNISA. His contact details are as follows: Professor AH (Nicky) Alpaslan, telephone number: 012 429 6739, or email alpasah@unisa.ac.za.

If, after you have consulted the researcher, researcher’s supervisor and the Research and Ethics Committee in the Department of Social Work at UNISA, their answers have not

\(^2\) This is a group of independent experts whose responsibility it is to help ensure that the rights and welfare of participants in research are protected and the study is carried out in an ethical manner.
satisfied you, you might direct your question/concerns/queries to the Chairperson, Human Ethics Committee\textsuperscript{3}, College of Human Science, PO Box 392, UNISA, 0003.

Based upon all the information provided to you above, and being aware of your rights, you are asked to give your written consent should you want to participate in this research study by signing and dating the information and consent form provided herewith and initialling each section to indicate that you understand and agree to the conditions.

Thank you for your participation.

Kind regards

__________________
Felistas Nhedzi
(Researcher)
Contact details: (084 044 7077)
(011 421 4222)
(50828711@mylife.unisa.ac.za )

\textsuperscript{3} This is a group of independent experts whose responsibility it is to help ensure that the rights and welfare of participants in research are protected and the study is carried out in an ethical manner.
ADDENDUM D: INFORMATION AND INFORMED CONSENT DOCUMENT

Title of the research project:
The experiences and perceptions of social workers on the provision of family preservation services in the Ekurhuleni Metropolitan, Gauteng Province

Reference number: 50828711

Researcher: Mrs Felistas Nhedzi

Address: 38 Cranebourne Avenue
         Benoni
         1501

Contact cell phone number: 084 044 7077

<table>
<thead>
<tr>
<th>DECLARATION BY THE PARTICIPANT:</th>
<th>Initial</th>
</tr>
</thead>
<tbody>
<tr>
<td>I, THE UNDERSIGNED, __________________________ (name), [ID No: ________________] the participant of __________________________</td>
<td></td>
</tr>
<tr>
<td>____________________________________________________________________</td>
<td></td>
</tr>
<tr>
<td>____________________________________________________________________</td>
<td></td>
</tr>
<tr>
<td>(address)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A. HEREBY CONFIRM AS FOLLOWS:</th>
<th>Initial</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I was invited to participate in the above research project which is being undertaken by Felistas Nhedzi of the Department of Social Work in the School of Social Science and Humanities at the University of South Africa, Pretoria, South Africa.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. The following aspects have been explained to me:</th>
<th>Initial</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1 Aim: The researcher is studying the experiences and perceptions of social workers on the provision of family preservation services in the Ekurhuleni Metropolitan, Gauteng Province.</td>
<td></td>
</tr>
</tbody>
</table>
2.2. The information will be used to inform the development of more practical and effective strategies that can help social workers in preserving families.

<table>
<thead>
<tr>
<th>2.3 I understand that:</th>
</tr>
</thead>
<tbody>
<tr>
<td>The goal of the study, the need for the study and the benefits it will have for me, my work colleagues and other stakeholders.</td>
</tr>
<tr>
<td>The reasons for being selected to participate in the study and that my participation is voluntary.</td>
</tr>
<tr>
<td>I will participate in a face-to-face interview at a place and time convenient to me for a period not exceeding two hours.</td>
</tr>
<tr>
<td>The information that I will share will be audio-recorded and paper recorded and later on transcribed.</td>
</tr>
<tr>
<td>The information that I will share will be made known to the public by means of a research report and might be used in subsequent scholarly presentations, printed publications or further research.</td>
</tr>
<tr>
<td>I have the right to withdraw from the study at any point.</td>
</tr>
<tr>
<td>I have the right to ask for clarification or more information throughout the study.</td>
</tr>
<tr>
<td>I may contact the relevant administrative person or body if I have any questions with regard to the researcher’s conduct or procedures of the study.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2.4 Risks:</th>
</tr>
</thead>
<tbody>
<tr>
<td>I do not see any risk associated with this study</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Possible benefits:</th>
</tr>
</thead>
<tbody>
<tr>
<td>As a result of my participation in this study, more information on the experiences and perceptions of social workers on the provision of family preservation services in the Ekurhuleni Metropolitan, Gauteng Province will be established and publicised.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Confidentiality:</th>
</tr>
</thead>
<tbody>
<tr>
<td>My identity will not be revealed in any discussion, description or scientific publications by the investigators/researchers.</td>
</tr>
</tbody>
</table>
Access to findings: Any new information/benefit that develops during the course of the study will be shared with me. | Initial
---|---
Voluntary participation/refusal/discontinuation: My participation is voluntary. My decision whether or not to participate will in no way affect me now or in the future. | Initial
---|---
3. The information above was explained to me by Felistas Nhedzi in English and I am in command of this language. I was given the opportunity to ask questions and all these questions were answered satisfactorily. | Initial
---|---
4. No pressure was exerted on me to consent to participate and I understand that I may withdraw at any stage from the study without any penalty. | Initial
---|---
5. Participation in this study will not result in any additional cost to me. | Initial
---|---
B. I HEREBY CONSENT VOLUNTARILY TO PARTICIPATE IN THE ABOVE PROJECT.
---|---
Signed/confirmed at ______________ on ________________ 20
---|---
__________________________  __________________
Signature of participant  Signature of witness
STATEMENTS AND DECLARATIONS

STATEMENT BY THE INVESTIGATOR

I, Felistas Nhedzi, declare that

- I have explained the information given in this document to ____________________________ (name of participant);
- he/she was encouraged and given ample time to ask me any questions;
- this conversation was conducted in English and no translator was used.

Signed at ___________________ on _______________20___
(place) (date)

__________________________________  ________________________
Signature of investigator/representative  Signature of witness
**ADDENDUM E: CONSENT FORM REQUESTING PERMISSION TO PUBLISH INFORMATION**

As part of this project, I have made an audio-recording of you. I would like you to indicate (with ticks in the appropriate blocks next to each statement below) what uses of these records you are willing to consent to. This is completely up to you. I will use the records only in ways that you agree to. In any of these records, names will not be identified.

<table>
<thead>
<tr>
<th>Use of Records</th>
<th>Place a tick [✓] next to the use of the record you consent to</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The records can be studied by the research team quotations from the transcripts made of the recordings can be used in the research report.</td>
<td></td>
</tr>
<tr>
<td>2. The quotations from the transcripts made of the recordings can be used for scientific publications and/or meetings.</td>
<td></td>
</tr>
<tr>
<td>3. The written transcripts and/or records can be used by other researchers.</td>
<td></td>
</tr>
<tr>
<td>4. The records quotations from the transcripts made of the recordings can be shown/used in public presentations to non-scientific groups.</td>
<td></td>
</tr>
<tr>
<td>5. The records can be used on television or radio.</td>
<td></td>
</tr>
</tbody>
</table>

__________________________  __________
Signature of participant  Date
Dear ………………………………………………………………………….

Thank you for your participation in this study. Should at any time during the study
- an emergency arise as a result of the research, or
- you require any further information with regard to the study, or
- you need to refer someone who is a potential participant for this study,
  kindly contact me (Felistas Nhedzi) at cell phone number, 084 044 7077.

| Dear ………………………………………………………………………….

Thank you for your participation in this study. Should at any time during the study
- an emergency arise as a result of the research, or
- you require any further information with regard to the study, or
- you need to refer someone who is a potential participant for this study,
  kindly contact me (Felistas Nhedzi) at cell phone number, 084 044 7077. |