

The experiences, challenges and coping strategies of foster parents raising teenage
foster children

By

AZWIDOHWI JACQUELINE MPHEPHU

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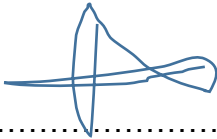
SUPERVISOR: DR S.L. DHLUDHLU

September 2023

DECLARATION

I, Azwidohwi Jacqueline Mphephu (Student Number: 43395678) declare that, the study titled **“The experiences, challenges and coping strategies of foster parents raising teenage foster children”** is my own work and that all the sources that I have consulted, have been dully acknowledged within the text as well as at the end of the text in the form of a bibliography. I also declare that this work has never been submitted to any institution for any qualification.

All sources used in this study have been acknowledged.



.....
Signature

05/03/2023

Date

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I want to thank the following people and organisations from the bottom of my heart for their crucial assistance and support in helping me finish this dissertation:

- It was the Almighty God who enabled me to complete this dissertation; without Him, I could not have done it.
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DEDICATION

This study is dedicated to all foster parents who are raising teenage foster children for their courage and resilience in the face of adversity and their dedication to caretaking responsibilities. I also dedicate this study to my children for their understanding.

ABSTRACT

Globally, there is an estimated high population of teenage children who grow up in foster care. In South Africa, these children are legally placed in foster care by the commissioner of the children`s court inquiry in terms of Section 156 of the Children`s Act 38 of 2005. However, in South Africa and beyond, foster care is just one of the options that are available to care for and protect teenage children in need. Teenage children that are admitted for foster care exhibit various behaviours that originate from their family of origin. This tends to pose challenges to foster parents who, resultantly, may face various difficulties to raise their teenage foster children.

The primary goal of the current study was to develop an in-depth understanding of challenges, experiences, and coping strategies of foster parents in raising teenage foster children. This qualitative study explored, described, and contextualised challenges that are faced by teenage children`s foster parents. Participants were recruited through purposive sampling, which is designed to access participants who have lived experiences and highly likely rich data. The data saturation was reached with fourteen (14) participants. Semi-structured interview questions that were collated into an interview guide were used for data collection. The data was analysed using Tesch`s eight steps. Furthermore, to ensure trustworthiness, Guba`s data verification model of credibility, dependability, conformability, and transferability, was used. The study followed appropriate research ethical procedures.

The study`s findings suggest that teenage children`s foster parents face various challenges in raising them. The challenges include teenage foster children back chatting their parents, coming home late at night, abusing substances, and demanding expensive clothes. However, foster parents reported various coping strategies that they adopted to survive the challenges that they faced. The study recommends that teenage children`s foster parents must receive ongoing support to enhance their coping strategies. The support may include the development of support groups, ongoing foster care supervision, and counselling for foster parents.

KEY WORDS

Foster parents, teenage foster children, experiences, challenges, coping strategies, raising.

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CHAPTER 1: INTRODUCTION

1.1. Background and context of the study

This chapter briefly outlines: the current study's background, setting, problem statement, rationale, significance, primary goal, objectives, research questions, assumptions, and clarification of key concepts. The chapter ends with a synthesised description of the dissertation's structure.

Vulnerable populations such as children, women, the elderly, and people with disabilities are cared for, and protected in all societies around the world (Abebe, 2014:1). Over the last century, to care for and protect children, foster care has been extensively developed. Foster care is a means of giving care and protection to children who have been removed from their homes due to abuse, abandonment, orphanhood, or neglect. Globally, factors such as poverty, underdevelopment, natural disasters, epidemics, and conflicts result in a large population of orphans (Cansu, 2022:4).

Human Immunodeficiency Virus (HIV) is one of the issues that has recently led to a global increase in foster care placement. As alluded by Van Dyk (2012:4), HIV has changed the world through an impact on people's immune systems, economic, and political life. It is critical to provide safety for HIV-positive or HIV-affected children who require care and protection. Kavak's (2014:2) report shows that, HIV-positive or HIV-affected children are the most vulnerable individuals who suffer the worst consequences of global crises and conflicts. Furthermore, Kavak (2014:2) states that by 2014, children were estimated to be 2.2 billion of the world's total population of 7 billion people. Out of the 2.2 billion children's population of 2014, 143-210 million were orphaned. The recent COVID-19 pandemic, its effects, and high parent mortality also increased the global population of orphans. Statistics show that 90% of the 2.7 million children living in orphanages around the world are orphans (Cansu, 2022:9).

According to the United Nations International Children's Emergency Fund (UNICEF) (2017:2), an orphan is a child who has lost one or both parents. In addition, Hall, and Sambu (2017:100) describe an orphan as a child under the age of 18, and whose mother, father, or both biological parents have passed on. Orphans could have a known or unspecified living status (Hall & Sambu, 2017:100). In the current study, an

orphan will be regarded as any individual under the age of 18 years whose parents are deceased. This includes those whose parents' whereabouts is reported to be unknown because this is prevalent in Gauteng Province (GP).

The world's orphaned children population is estimated to be over 132 million (UNICEF, 2017:2). Whereas, according to Adoption and Foster Care Analysis and Reporting System [AFCARS] (2020:1), approximately 437 000 youths are in foster care in the United States of America (USA). According to Kelly (2021:1), by 30 September 2021, in USA, there were 391 098 youth in foster care. This was six months before the coronavirus pandemic (COVID-19) induced lockdowns that halted nationwide mitigation. As such many child welfare agencies backstopped their numerous services and family visits (Kelly, 2021:1).

When natural family care fails, foster care is viewed as an important remedy or choice. Despite being underutilised in developing countries, foster care has become more popular globally (Manukuza, 2013:1). For example, in the USA, there are more than 400 000 children in foster care at any given time. According to Manukuza (2013:1), the underutilisation of foster care in some developing countries can be partly linked to governments' lack of financial resources to keep foster care as a viable resource.

By 2016, in Kansas, USA, an average of 329 children were removed from their homes and placed into foster care each month. This resulted in a total population of 3 952 children placed in foster care, by the year 2016 (Kansas Legislative Research Department, 2016:3). At the end of 2020, 6,870 youth in West Virginia were placed in foster care (Saunders, Surber & Linz, 2021:4).

Therefore, teenagers in the USA make up to 36% of the total population. While these teenagers may have more independence, they still require love, support, and guidance as they grow into early adulthood. Every year it is reported that approximately 20 000 children and youths aged 18 to 21 leave the foster care system in the USA (Verulava, Bedianashvili, & Jorbenadze, 2020:10). According to Baginsky, Gorin and Sands (2017:4), the majority of looked after children (about 74% in 2016) were cared for in various foster care settings such as: kinship, cluster, and residential. Many countries recognise and consider foster care as a viable option for giving care and protection to children in need.

Kavak (2014:8) also reported the prevalence of orphan population relative to some Sub-Saharan Africa (SSA) countries total children's population, as follows: Zimbabwe (22.67%), Lesotho (20.99%), Swaziland (18.73%), and Mozambique (19.25%). Zimbabwe had a total of 1.6 million children and youth orphans, from which 4 000 of them were placed in orphanages (Kanjanda, 2014:334). However, it is important to note that the figures of thousands of families who are associated with child welfare agencies before or after being placed in foster care are usually not reported and this results in skewed global statistics. Nonetheless, the available statistics suggest that there is a high population of orphaned teenage children, and literature shows that their experiences in foster care homes are relatively similar, at global and regional levels.

In the USA, each year, over three million reports of child maltreatment are filed (Gonzalez, 2014:2). The maltreatment includes incidents of neglect, physical abuse, psychological abuse, and sexual abuse. Child abuse and neglect are described as "any recent act or failure to act on the part of a parent or carer that ends in death, major physical or emotional harm, sexual abuse, or exploitation of a child" (Gonzalez, 2014:8). Additionally, removing a child from their home alone might be traumatic.

Teenage foster children that are placed in foster care are reported to have higher rates of mental illness compared to the general population (Scozzaro & Janikowski, 2015:4). Studies show that in some cases, the incidents of cruelty and mental illness have resulted in teenage children being removed from their biological parents' care and placed in foster care. Then they are raised in their relatives or non-relatives' household that acts as temporary foster care, while awaiting reunification with their biological families or placement in a permanent alternative care (Breen, 2015: 4). In most cases, after the death of one or both biological parents, teenagers are cared for by their extended family members. In South Africa, prospective foster parents appear before the commissioner of the children's court inquiry to request financial aid since most of them have low-to-no income.

Every child in South Africa has the right to grow up in a family that is safe, loving, and supporting, so that they can realise their full potential. A child's best interest at the start of his existence is to have a family that, respects, loves, and can meet his or her most basic needs for a healthy growth (Bîrneanu, 2019:3). The South African state's response to child (orphaned or not) abuse and maltreatment is in the form of foster a

care system. It is the major component of child protection system and is in form of family care (Mampane & Ross, 2017:107).

According to Skeleton (2012:1), by 2012, South Africa had nearly half a million of children who were in foster care. Based on the number of foster care grants that were issued to foster children by May 2014, there were about 530 357 foster children in South Africa (South African Social Security Agency, 2014:1). By mid-2015, 18.6 million children under the age of 18 made up to 34% of the overall population of South Africa. Out of this total, alarmingly 3.1 million (17% of the total South African children population in 2015) were orphans (Hall & Sambu, 2017:102).

South African children and families are particularly vulnerable due to a variety of historical, social, economic, cultural, political, and demographic factors (Martin, 2010:229). Some of the myriad of factors that leave parents incapacitated in catering for their children are poverty, drug and alcohol misuse, parental irresponsibility and absence, illness, and the HIV/AIDS epidemic. These factors tend to also contribute to family dysfunction, which leaving parents and families unable to appropriately care for and safeguard their children (Bower, 2014:113).

In South Africa, a court order is used to place the teenage children in an appropriate foster care home. According to the Children`s Act 38 of 2005, unless there are twins involved, a single foster care home is not allowed to accommodate more than six children under one foster parent. When the foster parent(s) are relatives of the child, they approach welfare organisations such as the Provincial Department of Social Development (DSD) or Non-Governmental Organizations (NGOs), or the previous caregivers. Plaatjies (2013:2) stated that grandparents are required to fulfil the role of parents to their grandchildren due to a variety of factors such as high rates of divorce, HIV/AIDS-related deaths, parental mortality, financial constraints, incarceration, other limitations, and restraints that prevent biological parents from raising their children.

According to Statistics South Africa [StatsSA]'s (2016:22) report, three out of ten orphans in South Africa lived in the KwaZulu-Natal Province (KZN). Furthermore, the report indicates that a significant number of orphans was also found in the Eastern Cape Province [EC] (18,6%) and the Gauteng Province [GP] (13,4%). The South African Social Security Agency (SASSA) administers several grants in South Africa.

The grants include those that are allocated for the disabled, elderly people, war veterans, children requiring support including those in foster care, those who are care dependent, and there is a grant-in-aid. Foster parents receive grants that are allocated for foster children thus, the foster child grant (FCG). The grant is allocated on behalf of the child or children placed under the care of the foster parents after the commissioner of the children's court has issued a court order with reference to Section 156. Section 156 states that if the Children's Court has found that the child needs care and protection, it may issue a court order which is in the best interest of the child (Republic of South Africa, 2006:82). Therefore, fostering a child provides financial compensation in the form of a foster child grant, although in previous years it has been considered insufficient to pay the costs of raising a child (Lietz, 2013:50).

The main reason that South Africa opted for foster care over adoption is high financial demands that the adopting family will incur and their inability to care for children without a subsidy (Rochat, Mokomane & Mitchell, 2016:121). The FCG is increasingly being used to offer financial assistance to foster care parents of to support foster children according to Section 150 of the Children's Act 38 of 2005 (Republic of South Africa, 2006:78). In 2013, over 11 million children were enrolled for child support grants, and over half a million were registered for foster care grants (Fortune, 2016:7).

Understanding what motivates foster parents to choose to care for children is critical, because there is a link between foster parent retention, recruiting, and placement outcomes for children's well-being and welfare (Canali, Maurizi & Vecchiato, 2016:2). Kangethe and Kausi (2014:555) adds that child protection social workers and policymakers prefer children to be placed within their relatives' household as a foster care home. This is owing to previous challenges such as that children's best interests tend to be compromised when they are placed in non-relatives' homes for foster care. Yet in some cases it is advantageous to foster children when they remain in their relatives' homes because some of them lose their biological parents when they were already living in the same homes with their grandparents, whom they will continue living with (Boning & Ferreira, 2013: 520; Dhludhlu & Lombard, 2017:165). This could help researchers better understand foster parents' resilience, coping strategies, and mitigate challenges that they may face.

Previous research suggests that some foster parents opt to continue fostering because of their own "internal source of motivation resulting from incentives they obtain as carers from providing for the needs of the children" (Geiger & Lietz, 2013:1361). Baginsky et al. (2017:7) argued that there is a low supply of foster parents who are skilled and willing to care for children and teenagers with special needs. However, it would seem that the foster child grant becomes motivational for many to choose to be foster parents. Thus, they apply for foster care placements, despite possibly having low skill sets or willingness to provide appropriate care and protection to children in need.

As a statutory social worker in the DSD, the researcher has witnessed several cases that are reported as according to the definition of, a child in need of care and protection (Children's Act No. 38 of 2005). Section 150(1)(a)(i) of the Children's Act No. 38 of 2005 states that:

“(1) A child is in need of care and protection if, the child-

- (a) has been abandoned or orphaned and is without any visible means of support;
- (b) displays behaviour which cannot be controlled by the parent or care-giver;
- (c) lives or works on the streets or begs for a living;
- (d) is addicted to a dependence-producing substance and is without any support to obtain treatment for such dependency;
- (e) has been exploited or lives in circumstances that expose the child to exploitation;
- (f) lives in or is exposed to circumstances which may seriously harm that child's physical, mental, or social well-being;
- (g) may be at risk if returned to the custody of the parent, guardian or care-giver of the child as there is reason to believe that he or she will live in or be exposed to circumstances which may seriously harm the physical, mental, or social well-being of the child;
- (h) is in a state of physical or mental neglect; or

(i) Is being maltreated, abused, deliberately neglected or degraded by a parent, a caregiver, a person who has parental responsibilities and rights or a family member of the child or by a person under whose control the child is”.

While Section 150(2)(a)(b) of the Children`s Act 38 of 2005 (Republic of South Africa, 2006:78) provides that;

“(2) A child found to be in the following circumstances may also be regarded as a child who is in need of care and protection and must be referred to the designated social worker for further investigation:

(a) a child who is a victim of child labour; and

(b) a child in a child-headed household”.

Foster care aims to improve the lives of the foster adolescents and children by ensuring their health, safety, stability, and permanence (Republic of South Africa, 2006:175). It is critical for children in need to have a stable placement and supportive foster care. The main goal of foster care is to achieve permanency through reunification or an alternative permanent arrangement in form of adoption, guardianship, or placement within relatives’ homes. Professionals employed within the child welfare sector are responsible for assisting youths who do not attain permanency in developing the range of skills that are required for successful independent living. Emotional involvement in the child leads to a desire to provide for their needs, but this can also lead to monetary concerns (Rochat, Mokomane & Mitchell, 2016:123). Thus, it can be concluded that money can never replace the love and care that foster parents should or provide.

Peers and friends provide emotional support during the transition to adolescence developmental stage (Papalia & Feldman, 2011:459). During this stage, teenagers may engage in anti-social behaviors such as using or abusing drugs or engaging in unsafe sexual activities. Children and teenagers in foster care are more likely than their peers to demonstrate high levels of behavioural and emotional problems (Child Trends, 2015:2). They are also more likely to be exposed to the high risk of substance misuse than teenagers living with their parents.

Despite that there are several studies on foster care, little is known about foster parents' experiences, challenges, and coping strategies when raising teenagers in foster care.

1.2. Problem statement

A problem statement is a claim that identifies and explains the problem and presents the current study's research question (Bwisa, 2018:1; Haseeb, 2019:4). Thus, a research problem is central for any study (Leedy & Ormrod, 2013:27). A research problem is an issue or concern that needs to be addressed as a result of a gap in literature, in form of: conflict in previous studies' findings, topics that have been neglected, a need to uplift the voices of marginalised populations, or real-life problems that are encountered at work or at home (Creswell, 2014:20).

In 2014, the South African Social Security Agency reported that over half a million children were placed in foster care in South Africa (SASSA, 2014:1). The loss of parents as a result of HIV/AIDS is the most important reason that leads to South African children being placed in foster care. In 2013, South Africa had the highest percentage (18%) of the total global population of HIV-positive people (Carter & Van Breda, 2015:3).

The diversity of the population of foster children in the foster system renders foster parenting challenging (Tryc, 2013:8). Hence, foster parents who are ready to provide a home, are essential. Foster care is seen as a realistic option to care for and protect vulnerable children whose home situation is regarded to be problematic and exposes their well-being to risks.

Owing to the HIV/AIDS pandemic, South Africa has become a haven for orphans. In 2011, the overall number of persons who were living with HIV was about 5.38 million (Stats SA, 2011). When biological parents pass away, orphaned children are usually left in the care of their maternal grandmother. After the death of biological parents, foster parents approach the DSD, to ask for help to legally place the orphaned children under their care so that they can obtain a state foster care grant.

With reference to the Social Assistance Act 13 of 2004, to address the needs of the orphaned children in the context of the HIV/AIDS pandemic in South Africa, the DSD

identified provided the social security (Republic of South Africa, 2004:6). According to section 8 of the Social Assistance Act, a foster parent is considered the primary caregiver of the children and is eligible for an FCG. The foster parent is entitled to receive the FCG for as long as the foster child is still in need of care, or they turn 18 years old (Social Assistance Act 13, section 5). In addition, Section 176(2) of the Children`s Act 38 of 2005 provides that, “a child placed in alternative care is entitled, after reaching the age of 18 years, to remain in that care until the end of the year in which that person reaches the age of 21 years if-

(a) the current alternative care-giver is willing and able to care for that person;
and;

(b) the continued stay in that care is necessary to enable that person to complete his or her education or training”.

There are various challenges that are associated with some teenage foster children, such as that they may display aggressive behaviours, may be delinquents who suffer from emotional problems, have learning difficulties, developmental delays, or impairments. Rodrigo (2017:37) reported that 16 out of 24 research studies on social behaviours of foster children found that 94 percent of them displayed bad social behaviour, which tend to contribute to the failure of foster care placements.

According to Mnisi and Botha (2015:8), substance usage was reported in five of seven adolescents or teenagers with behavioural issues. Therefore, foster parents are encouraged to receive training to appropriately care for teenage foster children. Coloumb (2017:9) emphasises that raising teenage foster children necessitate a wide range of possible problems. For example, parents’ trauma history can cumulatively or interactively effect secondary traumatic stress outcomes for foster parents of traumatised children. Furthermore, although foster parents are responsible for meeting the needs of and resolving problematic behaviours that foster teenagers may display, studies have shown that sometimes they cannot do this. In a study that was conducted by Mnisi and Botha (2015:15), foster parents reported being unable to handle their children's behaviours such as disruption of routine, inappropriate sexual behaviour, occult participation, and substance misuse.

Foster care giving requires a skill set that supports a variety of objectives. These include assisting children in reuniting with their biological families, long-term integration with them, or a transition to another family (Lottya, Bantry-Whitea & Dunn-Galvin, 2020:2). However, there is much that needs to be researched and understood about the challenges that are faced and coping strategies adopted by foster parents when raising teenage foster children. In detail, the current study explored the challenges faced and coping strategies adopted by foster parents.

An assessment of foster parents' experiences, challenges, and coping techniques is critical for social service professionals to develop effective social support programs for foster parents. Foster parents must be equipped with superior parenting skills and styles to raise teenagers. While it is critical for foster parents to understand the unique experiences of children under their care, it is also crucial for the carer to have a basic understanding of teenage development (Coleman, Manco, Pievatolo & Goeb, 2016:6).

Although, it seems there is limited knowledge on the experiences, challenges, and coping mechanisms of foster parents of foster teenagers, there is a wealth of research on foster children and foster care. The current study's problem statement is; "there is a lack of research-based knowledge on the experiences, challenges and coping strategies of foster parents who are raising teenage foster children".

1.3. Rationale and significance of the study

The rationale or significance of the study describes its value. This may include the advantages of conducting the study, its contribution to literature and improving practice, policy, and decision-making (Creswell, 2012:119). Concerning a study's rationale, it is important to distinguish between different types of goals or reasons for conducting it. The goals could be personal, practical, or intellectual, which could include the researcher's desire to improve practice or situation, or the need to advance in their career path (Tracey, 2013:55; Maxwell, 2012:24). Researchers, such as Maree (2016:30), argue that that the rationale of the study should explain how the researcher gained an interest in a particular issue, and why they believe that the study endeavour is significant.

For the current study, the researcher was inspired to undertake this study after working as a statutory social worker and offering services for the DSD. Her roles included

providing statutory social work services such as foster care supervision and reunification, to foster care families. She realised that foster parents raising teenagers face unique problems, such as parenting difficulties, teenagers' behavioural problems and having insufficient financial resources to care for teenage foster children.

The foster parents in the researcher's caseload are usually grandparents or aunts, from maternal and/or paternal family lineage. Based on the number of cases that the researcher has received, foster parents do not seem interested in caring for teenage foster children. Resultantly, this qualitative study explored the problems, experiences, and coping techniques of foster parents. Understanding their difficulties, experiences, and coping mechanisms can help child welfare organisations, social workers, and other stakeholders to provide appropriate subsistence solutions that meet the needs of foster parents while minimising any negative events or outcomes. In addition, the current study's findings can be referred to in developing rules for statutory social workers who provide foster care services to foster adolescents and teenage children. Finally, the findings may assist in the creation of social work practice related policies.

1.4. Research goal and objectives

According to Maxwell (2012:4), researchers should ask themselves the following questions: What makes your research worthwhile? What are the issues you'd like it to address? And what kinds of practices and policies do you want it to have an impact on? Why are you conducting this study, and why should we be interested in the results? A research goal is a declaration of the researcher's intentions, and it directs their direction (Creswell, 2014:123). According to Blaikie (2014:8), the three major aims of a study are to uncover, describe, and interpret the conditions of a phenomenon. Therefore, the aim of the current study was:

- To develop an in-depth understanding of the challenges, experiences, and coping strategies of foster parents in raising teenage foster children.

1.4.1. Research objectives

Research objectives are more defined goals that the project wishes to execute, to achieve its overall aim (Haseeb, 2019:9). Sudheesh, Dugaappa, and Nethra (2016:632) define research objectives as the statements that expresses the researcher's basic intentions for the study. For a clear research plan implementation and predictable

duration, research objectives must be explicit, decisive, and practicable (Abdulai & Owusu-Ansah, 2014:6).

The following were the objectives of this study:

- To explore foster parents' experiences, challenges, and coping strategies of raising teenage foster children.
- To describe foster parents' experiences, challenges, and coping strategies of raising teenage foster children.
- To draw conclusions and make recommendations on foster parents' experiences, challenges, and coping strategies of raising teenage foster children.

1.4.2. Research question

A research question can be defined as a query that explicitly expresses what the researcher wants to learn (Bryman, 2016:8). Neri De Souza, Costa, and De Souza (2016:5) describe a research question as one that expresses the investigation's particular focus. The study topic should also be relevant to the subject of knowledge, specific, and without a preconceived response. A research question precisely expresses what the study intends to achieve, by collecting and analysing data from participants (Check & Schutt, 2012:27). According to these definitions and descriptions, a research question is a topic or piece of information that the researcher wants to investigate.

For the current study, the research question was formulated as follows:

- What are foster parents' experiences, challenges, and coping strategies of raising teenage foster children?

1.5. Assumptions

Leedy and Ormrod (2010:62) posit that, "Assumptions are so basic that, without them, the research problem itself could not exist". Testing assumptions in survey research is a necessary step because it enables the researcher to conduct their studies most accurately (Verma & Salam, 2019:45). The assumptions for the current study were:

- Children and adolescents living in foster care have often experienced adversities such as physical abuse, neglect, sexual abuse, parental psychopathology, and family breakdown (Bîrneanu, 2014:5). This poses challenges to foster parents who are raising them. Therefore, this study might help the foster parents to voice their challenges and how they can be addressed or seek solution to them.
- Social workers can be appropriately guided to render supervision services to foster parents raising teenage foster children.
- Understanding foster parents' challenges, experiences, and coping strategies, will assist child welfare organisations, social workers, and other role players to offer appropriate support services, that are suitable to the needs of the foster parents, and minimise anticipated negative events. Furthermore, to develop guidelines that are directed at statutory social workers that render foster care services that focus on programmes for foster parents of teenage foster children.
- The study will contribute to policy development and implications for social work practice.

1.6. Clarification of key concepts

A research dissertation must provide operational definitions of key words (Yegidis, Weinbach & Myers, 2018:317). The key concepts that are important in the current study are explained in this section.

1.6.1. Foster parent

A foster parent is a person who is assigned to make appropriate developmental related decisions on behalf of a child in custody (Children's Law Centre, 2019:11). Foster parents play an important role because they are responsible for providing a new home and a healthy, clean, and supportive environment for children who have been detached from their homes (Haider, 2013:2). Foster parents are also defined in the Children's Act 38 of 2005 as "any active member of an organisation operating a cluster foster care scheme who has been given a responsibility to care for the child by a court order from the commissioner of the Children's Court Inquiry" (Republic of South Africa, 2006:16). In the current study, a foster parent refers to any person or individual who

has been granted permission by the children's court, in a form of a court order, to care for the child in need of care and protection.

1.6.2. Challenges

Zakaria and Yatimi (2013:268) emphasise the effect of uncertainty which allows people to stay focused on the task at hand. According to Calikoglu (2019:1), a challenge reflects the difficulty side. Therefore, in the current study a challenge can be described as something new or difficult and requires great effort and dedication. Furthermore, it can be denoted that a challenge is a problematic circumstance that appeals for a fight, exceptional strength for a hard task that is motivating, demanding, or testing the involved's abilities (McIntosh, 2013:16, Collins English Dictionary, 2010:13).

1.6.3. Experiences

According to Roth and Jornet (2014:1), in irreducible person-in-setting units, experience refers to transactions in and across space and time, and it is saturated with affect that may also be associated with the outcome of mental inventions. Experience refers to something that happens to an individual (Damian, 2017:6). The Oxford Dictionary (2011:112) adds that experience is a procedure that an individual is aware of and is drawn in as it happens. This may shape or alter one's life. The current study understands experiences as people's various lived events, memories, thoughts, and hopes. Furthermore, the current study operationalises experiences as any event through which foster parents who are raising teenage foster children are subjectively undergone.

1.6.4. Coping strategies

In response to daily pressures, coping strategies are conscious, and voluntary efforts to control psychophysiological and environmental variables (Morales-Rodríguez, 2021:4). In contrast to defence systems, coping strategies often require a conscious and direct approach to challenges. Haider (2013:7) suggests that unlike intelligence or skills, which can be tested, coping is viewed and analysed based on individual circumstances, reactions, and actions. Khan, Siraj and Li (2011:210) are of the view that coping is the cognitive and behavioural abilities a person uses to manage specific

problems. Therefore, in the current study, coping strategies are those that foster parents maintain to be successful in raising teenage foster children.

1.6.5. Teenager

According to Bell (2016:3), the concept teenager and adolescent are often used interchangeably, and are defined by biological age. Thus, teenagers are people aged 13 to 19 years. Tatlilioglu (2018:7) describes teenager as the stage between childhood and adulthood, with a consideration of accumulated morals. Therefore, in the current study a teenager is a foster child between the ages of 13 and 19 years, despite their gender or race identity.

1.6.6. Raising

Raising means the process of ensuring the care and upbringing of the child until they are independent (Damian, 2017:6). As noted by Ceka and Murati (2016:1), raising children protects them from harm and danger. Parents have a responsibility to oversee the growth of and assisting their children in becoming fully formed individuals. For the current study, raising a teenage foster child means offering them physical, emotional, and social support until they are more independent.

1.7. Structure of the thesis

Chapter 1 provides the general introduction of the study, background, problem statement, rationale and significance of the study, goal and objectives, research question, assumptions, clarification of key concepts, and structure of the dissertation.

Chapter 2 is a literature review, followed by **Chapter 3** which discusses the theoretical frameworks that were employed for the study. The theoretical frameworks are the strength based and resilience theory.

Chapter 4 discusses the research methodology. It includes a presentation of the research: approach, rationale, paradigm, design, methods, sample, sampling techniques, data collection and analysis, data verification/trustworthiness, ethical considerations, limitations, and reflexivity. **Chapter 5** presents and discusses the study's findings. Lastly, **Chapter 6** presents the conclusions and recommendations based on the study's findings.

CHAPTER 2: LITERATURE REVIEW

2.1. Introduction

This chapter reviews literature that is related to foster parents' experiences, challenges, and coping strategies when raising teenage foster children. The chapter highlights the history and purpose of foster care with a focus on global, African, and South African contexts. Concerning foster parents, the chapter discusses how they are assessed, their motivation, role, experiences, and coping strategies. The focus on children discusses factors leading to them, being placed in alternative care and challenges of raising them. Lastly, the chapter discusses policies and Legislations that guide foster care services in South Africa.

2.2. Global overview of foster care

Fostering – people permanently or temporarily taking children into their homes and upbringing them, – has a long history. But in the United Kingdom (UK) fostering has only enjoyed legal status since 1926 (Nare & Owers, 2018:8). According to Child Treatment (2017:2), in Federal Fiscal Year 2017, an estimated 674 000 (9.1 victims per 1 000) children were victims of abuse or neglect nationwide. In England, In the early 70s, around 29 000, thus, 32-35% of all looked after children were in foster care (Nare & Owers, 2018:16). According to a 2017 child maltreatment report, 674 000 children were victims of child abuse or neglect – this was an increase of 2.7% since 2013 (Child Maltreatment, 2017:12). According to statistics published by the USA Department of Health and Human Services (2015:11), foster care was established with an intention to provide alternative care for homeless children. In the USA, during the 1990s, the number of children that were placed in foster was 400 000, and in 1999, it had risen to 567 000 (Child Data Trends, 2015:3). Foster care is considered a viable tool to provide crucial children's needs such as security, stability, and safety to ensure sound development.

There are various types of foster care, and the phrase "foster care" has varied connotations in different cultures. Foster care in the USA is viewed as a short-term intervention that should last for a maximum period of 22 months (Warwick, 2013:11). It is not regarded as a permanent solution because it is normally used until a child is reunified or reunited with their biological parent(s). Foster care provides round-the-

clock substitute care for nearly 700 000 children who are temporarily or permanently separated from their family of origin each year in the USA (Font & Gershoff, 2020:1).

According to Hyslop (2017:5), foster care provides care and protection services to children, to ensure their safety, security, and well-being. Foster care also provides care and protect to children and young people who have been maltreated, are at risk of being maltreated, or whose behaviour puts them or others in danger. As alluded by the South African Department of Social Development [DSD] (2012a:18), financial stress may add to the likelihood of violence against children in families. Therefore, under certain circumstances, for the best interests of the children, they need to be formally placed with family or friends. This type of alternative care is called kinship foster care. Kinship foster care is described as a type of substitute care in which relatives take on the role of a parent. In this case, kinship foster care, although less, it requires a less formal legal process or protection (Child Welfare Information Gateway, 2016:1).

2.3. Foster care within African context

Although continentally uncommon, the term 'fostering' has varied meanings in various African communities (UNICEF, 2021:5). Motepe, Spies, and Delport (2013:14) state that most family systems have members such as parents, siblings, and kin, who stick together to perform a variety of functions. Family members influence each other to build and maintain a system with properties of its own, governed by the rules that specify roles, power structures, forms of communication and ways of problem solving and negotiating. Roles, power structure, and communication patterns are the active processes of the interconnected and interdependent family system (Motepe et al., 2013:14). Although some African families do not have enough finances to care for additional unexpected children, they always make room for orphans.

2.4. Foster care in South Africa

According to Fortune (2016:12), the expression foster care was first introduced in South African law in 1960. Foster care in South Africa refers to caring for a child as defined in section 180(1) of the Children's Act 38 of 2005. Thus, a child who would be placed under the care of a person who is not their parent or guardian through a court order or being transferred into that person's care, this includes placement in a

registered cluster foster care scheme (Republic of South Africa, 2006:171). The child may be placed in the care of a family member who is not their parent or guardian. Foster care is part of the state's legislative obligation to provide for the care and protection of children in need (Breen, 2015:1). It is a state-run system that cares for children who are in the custody of a public child welfare agency, not a way to alleviate poverty.

In addition, it must be noted that, for children who require extra care and protection, foster care is thought to be a better option than parental care (Boning & Ferreira, 2013:519). According to the Coram British Association for Adoption and Fostering and Fostering Academy (2015:1), fostering is described as a method of providing a family life for children who are unable to live with their biological parents. Coram British Association for Adoption and Fostering Academy (2015:1) states that foster care is usually temporary, and children will frequently return to their birth families once issues have been resolved.

In South Africa foster care is intended to promote family stability (Department of Social Development, 2012:11). Therefore, foster parents and families must be recruited and chosen carefully in order for foster care arrangements to be successful (Brown, Sebba & Luke, 2014:7). National Child Care and Protection Policy (2019:20) emphasises a developmental approach that defines childcare and protection as the full continuum of care, support, and protection that all children need for their well-being, to develop and to thrive to their full potential. This spectrum concerns the care and protection of children who are deprived of parental care and who suffer violence, abuse, neglect, and exploitation.

2.5. History of foster care in South Africa

In South Africa, foster care has a long history that may be traced back to religious practices of caring for orphans. Children who have been cared for outside of their homes of origin are documented in the Bible's Old Testament and the Talmud (National Foster Parent Association, 2016:3). According to Christianity, a clean and undefiled religion involves caring for orphans and widows in their sorrow and remaining undefiled by world filth. Since its establishment in the late 19th century, the foster care system has been a microcosm of broader systemic violence against the

Black race communities. There are historical and present-day effects of which are mostly felt by Black, and American Indian/Alaska Native (AIAN) children, families, and communities (Partners for our Children, 2020:2).

The history of foster care has evolved over the years, and it has accumulated various opinions about its effectiveness. Some studies view the foster care system as an institution that ruins the lives of children, while others recognise it as assisting children in becoming more productive citizens (Mitchell-Welch, 2014:11). The foster care system began by focusing on recognising and preventing child abuse, which was a primary reason for children being removed from their homes in the 1960s (Coleman & Ganong, 2014:5).

There were three perspectives on foster care in the mid-twentieth century (Rymph, 2017:5). The first is public obligation, which sees foster care as a vehicle for society to fulfil its moral and legal obligations to protect the well-being of dependent children. The second views foster care as a tactic employed by birth and foster families to handle the realities of their own economic circumstances. Thus, it views foster care as a component of the household economy. The third views foster family as a practice that establishes alternative family formations, relationships, and love bonds (Rymph, 2017:5).

Furthermore, Partners of our Children (2020:2) suggests that the foster care system is an expansion of private orphanage institutions of the 1800s and other agencies including the Children's Aid Society, the Society for the Protection and Care of Children (SPCC), and alms-houses. Prior to 1994, Thomas and Mabusela (1991:121) presented a historical backdrop of the disadvantages of African foster children, parents, and the social worker's limited role. Black children's foster care placements were limited to the poor due to the restrictions imposed by Section 40(b) of the Child Care Act 74 of 1983. The section stated that a child could not be placed in the custody of anyone whose race classification was not the same as theirs (South Africa, 1987: 27). According to Thomas and Mabusela (1991:121), among the challenges that social workers faced in providing foster care during the apartheid era were a lack of foster care parents, support and resources for the available foster care parents, children dropping out of school, and the termination of the Foster Child Grant (FCG).

Through the International Convention on the Rights of the Child UNICEF (1990:18) established the child's right to information, involvement in decision-making, respect for his or her opinions, literacy, education, family life, care, and protection. In addition, children who are in difficult conditions or danger of harm, require more attention, care, and protection from their families and communities (Section 22 of the Children's Act 38 of 2005). The African Charter on the Rights and Welfare of the Child supports children's rights, with some additional elaboration on issues specific to African children, such as protection against apartheid and discrimination, African unity, parental responsibilities, and child responsibilities (Organisation for African Unity, 1990:1-15). Binford (2016:3) argues that South Africa was an early and active leader in the recognition of children's rights in the international community.

In South Africa, Section 28 of the country's Constitution emphasises the child's right to family, parental, or appropriate alternative care (Republic of South Africa, 1996:9). It also regards the best interests of the children as paramount in all circumstances affecting them (Republic of South Africa, 1996:9). South Africa's White paper for Social Welfare (1997:51) promotes deinstitutionalisation and alternative forms of childcare, such as foster care. By placing children in the care of a family, this method is seen both as cost-effective for the state and beneficial for the child's development. The major purpose of the policy is to strengthen and preserve the family (White paper for Social Welfare, 1997:51).

South Africa's child protection system was transformed by the Child Care Act No. 74 of 1983, which was superseded by the Children's Act No. 38 of 2005. The Children's Act No. 38 of 2005 recognised children's rights and any social, economic, and health issues that affect children and families' well-being. It protected children's rights and the rights and responsibilities of foster parents. In 2009, the DSD published a guideline for the successful management of foster care in South Africa, to assist social workers in consistently interpreting the Children Act of 2005. It lays out the steps that are needed in providing foster care and acts as a basic best-practices guide (DSD, 2009:14).

According to Van Rensburg (2006:19), in South Africa churches became the leading institutions in the 19th century. They took on the role of protecting vulnerable and disadvantaged children and their families. For example, child and family welfare

agencies continue to play a critical role in the placement of children in foster care today (Van Rensburg, 2006:19). Child and family welfare groups enable most foster care placements. Foster care is the preferred form of alternative care for children who have been abused, neglected, or abandoned in South Africa. Given the enormous number of children removed from parental care, it may be argued that social workers in both governmental and non-governmental welfare groups have a critical role to play in aiding foster children and their families (Eloff, 1987:1).

2.6. Purpose of foster care

There are various reasons that children are placed in foster care. These include poverty, inequality, crime, and high levels of violence such as, domestic violence against children and women (Bower, 2014:106). The roots of foster care demonstrate that older systems of caring for dependent children, such as indenture or boarding out, may function as forms of support to poor foster families (Rymph, 2017:12). Initially, family foster care was a way to "save" children who were dependent on charity or whose parents were considered inadequate (Pecora, Whittaker, Maluccio, & Barth, 2012:195). Currently, thousands of genuinely kind and committed foster parents and social workers serve in the foster care system by dedicating their lives to the low-status profession of helping foster children (Rymph, 2017:2).

In addition, foster care aims to act as a temporary intervention for the care and protection of children within a framework of a developmental approach to welfare services (Fortune, 2014:15). The primary goal of foster care is to safeguard children and provide opportunities for their growth, while focusing on providing reunification services to their biological family. When biological parents are poor, ill, overwhelmed, neglectful, or powerless, they often lack the resources, ability, or legal right to hold onto their children (Rymph, 2017:2). The process of accountability begins and will eventually lead to the reunification of foster children with their biological parents/family.

According to the Children's Amendment Act 41 of 2007, foster care serves three important functions, namely: protecting and nurturing children by providing a safe, healthy environment with positive support. It also promotes permanency in planning goals, firstly towards family reunification or by connecting children to other safe and nurturing family relationships that will last a lifetime. Furthermore, foster care respects

individuals and families by demonstrating respect for cultural, ethnic, and community diversity (Republic of South Africa, 2007:72).

The goal of foster care in South Africa is to minimise the impact of harm that may be experienced by the child leading them to requiring care and protection. Thus, foster care protects the ongoing development of the child so that they may still recognise their full potential despite the unfavourable circumstances that they may be going through. This is done through strengthening the child's capacities and resilience, and restoring the child to a permanent, nurturing, and responsive parental or family-based care environment (National Care & Protection Policy, 2019:57). The Children's Act 38 of 2005 makes it explicit that the child's best interests come first in any situation involving them (Republic of South Africa, 2006:66). Foster care attempts to provide safe and healthy care arrangements outside of the biological family context to assure continuing protection and provision of caring and responsive care to children in need.

2.7. Foster parents' motivation on fostering children

McDermid, Holmes, Kirton, and Signoretta's (2012:29) findings suggested that foster parents in the UK were in a better position to provide for children in need. This is because they usually had had similar experiences to those of the children in need, since most of them had been in foster care at some point in their lives. Conway's (2012:13) findings are that the motivations for foster care in the USA included an 'empty nest', a desire to adopt children and expand the family size, for example, to provide companion for the only child. The motivations also include love, a sense of gratitude for what they have, giving back to the community by providing children with a stable home (Canali, Maurizi & Vecchiato, 2016:2; Daniel, 2011:911; McDermid et al., 2012:30). Furthermore, Conway (2012:14) reported that some foster parents are motivated to apply for foster care because of a desire to supplement family income.

Canali, Maurizi, and Vecchiato (2016:2) argue that interest has been raised in understanding foster parents' motivation for foster children considering its link to placement outcomes for children's well-being. Kinyua (2013:8) also mentioned that foster parents were driven by a deep desire to ensure that the children remain in the family and given the chance to have a better life and future. Van Deventer and Wright's (2017:1) study revealed that in Zimbabwe caretakers struggled and were hesitant to

care for extra children due to poverty and a lack of financial support. In addition to these motivating factors, other studies reported that in South Africa foster parents apply because of their passion for children, willingness to keep them safe, help them develop, and succeed in life (Simula, 2016:41). Giving them the right and opportunity to belong to a family and have interactions with individuals, were also amongst the motivations for foster care in South Africa (Du Toit, van der Westhuizen & Alpaslan, 2016:395-396).

2.8. Foster Parent Assessment Tools

For many years, it has been acknowledged that standardised tests with established reliability and validity are necessary for evaluating foster care and foster applications. A multidisciplinary team from the University of Tennessee collaborated with Casey Family Programs to establish and assess the Casey Foster Applicant Inventory (CFAI) and the Casey Home Assessment Protocol (CHAP) (London Borough of Barnet fostering services, 2015:7). These tests were designed to work in tandem, and when used together, they were able to assess a wide range of foster parent`s characteristics that were thought to be linked to the quality of family foster care. The CFAI and the CHAP were designed to assess the strengths and service needs of foster care families to improve foster family outcomes and foster childcare quality.

In Scotland, fostering panels have been an effective way of assessing the suitability of potential foster carers. They also act as a powerful support system in matching foster families with children in need of care. By law, every fostering agency must set up a fostering panel to assess if prospective foster carers should be approved (Keshavarzian & Bunkers, 2015:21).

In South Africa, potential foster parents request for official recognition of caregiver relationship to the child through court processes (De Jager, 2011:69). According to Section 126 (1) of the Children's Act number 38 of 2005 (as amended), any individual who wishes to be appointed as a foster parent must be screened against Part B of the National Child Protection Register, to determine if the prospective foster parent is fit and appropriate to deal with children. According to De Jager (2011:65), one goal of the assessment is to see if the potential foster parent is ready to take on the obligations of a foster parent and can put their excitement into action. A foster parent's key

obligations include providing care, collaborating with a child protection agency and an action system, and making a commitment to the child. According to section 182(2) of the Children's Act no 38 of 2005 (as amended), prospective foster parents must be properly assessed by a designated social worker, to ensure that they are fit and proper to be entrusted with care of the child.

2.9. Factors leading children to be placed in alternative care

According to Erasmus (2021:15), baby abandonment, orphaning, and orphanhood, are a global concern and challenge. Research has found restrictive legislation, poverty, mass urbanisation, high levels of violence (gender-based violence such as rape), and excessive gender disparity, contributing to issues of baby abandonment, orphaning, and orphanhood (Blackie, 2014:12). New-born abandonment was discovered in England and Wales, among Asian groups, due to cultural norms and beliefs, postpartum depression, attachment disorders, pregnancy denial, and panic or anxiety illnesses (Selwyn & Wijedesa, 2011:276).

According to Megahead's (2017:391) study, children in Egypt were abandoned and usually ended up in non-kinship foster care owing to psychological concerns. These were primarily caused by denial of pregnancy, delusions of killing the foetus or the child considered to bring bad luck in the household, unwanted gender of the child, and psychological illnesses. The study also linked Egyptian desertion to unintended pregnancy and a lack of care for or interest in parenting, leading to a desire to get rid of the child.

According to Mitrut and Wolff's (2011:157) study, in Romania, child desertion is usually caused by acute economic challenges and low levels of formal education among biological families. According to Meinck, Cluver, Boyes, and Mhlongo (2015:87), 37% of Egyptian children were abused through being beaten or tied up by their parents. Resultantly, 26% of the abused children suffered physical injuries such as fractures, loss of consciousness, or permanent disability.

Ballet, Sirven, Bhukuth and Rousseau's (2011:656) study focused on the physical abuse of street girls, and it found that 16% of the participants had been subjected to harsh blows that left permanent traces and scars on their bodies. According to the World Health Organisation [WHO] (2014:60), child physical abuse refers to potentially

or physically harmful acts that are perpetrated against the child by a person who they are related to, or are responsible for them, such as a caregiver. Based on the similar definition, Ballet, Sirven, Bhukuth and Rousseau's (2011:656) study in Mauritania investigated physical abuse of street girls. They found that 16% of the street girls in Mauritania reported to have been victims of violent blows that left indelible marks and scars on their bodies.

According to Adeyemi and Oluwaseun (2012:87), there is a growing awareness on the problematic global phenomena of children living, working, and surviving on the streets. There are also calls that this problem requires immediate and comprehensive measures to eradicate. Similar elements reporting family problems and dysfunction, social culture, custom, modernisation, and urbanisation as causation factors for the street children's phenomena were found by Adeyemi and Oluwaseun (2012:92) in Nigeria. Orme and Seipel (2016:489) conducted a study in Ghana and found that parents' death, poverty, sexual abuse, domestic violence, neglect, and divorce were among the causes prompting children to resort to the streets.

According to Section 150 of the Children's Act 38 of 2005, the emphasis is on identifying a child in need of care and protection. Social welfare agencies that provide protection services are guided by the Children's Act 38 of 2005 to assess if the child needs care and protection. According to Section 150 of the Children's Act 38 of 2005, a child is considered for foster care if he or she meets the following criteria:

- Has been abandoned or orphaned and does not have the ability to support himself or herself and such is readily apparent.
- Displays behaviour which cannot be controlled by the parent or caregiver.
- Lives or works on the streets or begs for a living.
- Is addicted to a dependence producing substance and is without any support to obtain treatment for such dependency.
- Has been exploited or lives in circumstances that expose the child to exploitation.

- lives in or is exposed to circumstances which may seriously harm that child's physical, mental, or social wellbeing;
- May be at risk if returned to the custody of the parent, guardian, or caregiver of the child as there is reason to believe that he or she will live or be exposed to circumstances which may seriously harm the physical, mental, or social wellbeing of the child.
- Is in a state of physical or mental neglect; or
- Is being maltreated, abused, deliberately neglected, or degraded by a parent, care giver, a person who has responsibility and rights or a family member of the child or a person under whose control the child is (Republic of South Africa,2006.6).

A case manager or statutory social worker conducts his or her investigation to determine if the child needs care and protection due to the above circumstances as stipulated under Section 150 of the Children's Act 38 of 2005. The Social worker investigate the link between abuse, abandonment, neglect, exploitation, poverty, unemployment, and limited or no access to essential services and utilities as well as the death of a parent or caregiver due to HIV/AIDS (DSD, 2009:2). These conditions have continued to provide the social tunnel through which many children become vulnerable and at-risk leading them being placed in alternative care.

The current South African social welfare system is designed to address the socioeconomic evils that generate such settings that exacerbate children's vulnerability. Furthermore, Hlatywayo, Zimondi and Taurai (2015:2) state that this is a significant step forward in the field because most studies do not regard vulnerable children whose parents or caregivers are unwell or poor and struggle to care for them.

2.10. Foster parent's experiences

Literature has reported on various experiences that foster parents have when raising teenage foster children. Mostly, children and teenagers' uncontrollable and challenging behaviour has been reported during intake. Some of these behavioural difficulties in children and teenagers are caused by early traumatic and dysfunctional family and life experiences (McLean and Octoman, 2014:151). These findings are in

line with those of Smith (2014:39) who found that the risk of children suffering instability in placements, and the development of worsening behavioural and mental health problems, were among the repercussions.

Mnisi and Botha (2015:233) reported behaviours such as violations of routine, refusal to partake on domestic chores, inappropriate sexual behaviour, and early dating that involves sexual intercourse. Roux, Bungane, and Strydom (2010:47) found that teenagers abuse substances such as alcohol. Mnisi and Botha (2015:233) also found that some have joined delinquent gangs, occultism, and Satanism. In addition, Roux, Bungane and Strydom (2010:47) reported that children in foster care have tendencies of absconding from care without permission of foster parents.

In South Africa, some of the reported driving causes of children to become uncontrollable and demonstrate behavioural difficulties are age, peer pressure, interaction with biological family, and reaching puberty (Makhitha, 2013:2; Mnisi & Botha, 2016:232). Mnisi and Botha (2016:232) show that when children approach puberty, they are more likely to exhibit behavioural issues.

From Patel, Hochfeld, and Chiba's (2019:57) findings, sometimes foster parents perceive a lack of compassion from the professional system, when placements are disturbed or when they are unable to connect with a child, and this makes them feel blamed and inadequate. Foster parents expressed the desire to be included in choices and planning relating to their foster children. In addition, they shared that their attachment or relationship with a foster child should be considered when the child's future is being planned. The social worker's role is to supervise and evaluate the foster parents' work, to ensure that they are fulfilling the child's needs, and are providing necessary assistance (Allen, 2011:51).

2.11. Challenges of raising foster children

Foster parents experience many challenges when raising foster children. In countries such as the USA and Canada, there are research findings that suggest that foster carers experience serious challenges that are related to children's behaviour (Cooley, Wojciak, Farineau, & Mullis, 2015: 212,213; Smith, 2014:52). In Canada, some foster parents have been reported to be resentful to children owing to various challenges. Some foster parents are reported to had considered quitting being part of foster care

(Smith, 2014:40). Foster parents cited financial issues as impeding successful distribution of their care tasks and as a major source of stress and strain on their fostering duties (Smith, 2014:40). Some findings in Kenya suggest that foster carers experience serious challenges with children's behaviour (Kinyua, 2013:8).

Some of the most reported troubling children's internalising behaviours are: worry, poor self-worth, falling self-esteem, and sadness. In addition, the most reported problematic externalising behaviours are substance use, defiance, and absconding (Cooley, Wojciak, Farineau, & Mullis, 2015:213). Foster children's worry, dread, and anxiety about why they were removed from parental care and placed in alternative care, and feelings of guilt, can be substantially responsible for the development and expression of behavioural disorders.

Foster parents see contact with birth families as troublesome, stressful, hard, traumatic, and disruptive (Warwick & John-Langba, 2017:43). In keeping with this assumption, Kiraly and Humphreys (2013:358) state that contact is a recognised right with significant advantages. Caregivers may face substantial interference with care and can be blamed by the children's biological parents for their children having been removed from their care (Kinyua, 2013:8,9). Similar findings were observed by Khoo and Skoog (2014:257), that unmanageable foster children's behaviours was the primary cause of disturbance and dissolution of foster care settings.

In addition, Warwick and John-Langba (2016:5) found the absence of sufficient preparation and training for foster parents' caretaking and fostering tasks as one of the most significant factors that were related to the challenges that they faced. In Du Plessis' (2015) study, initial opposition, rejection, lack of support from family members, stigma, and discrimination were also documented. Further challenges that are faced by foster parents in South Africa were reported in Mnisi and Botha's (2016:234) study to include feelings of not being valued and suspicion of being financially motivated to provide care. Their findings include undue interference and intrusion by the biological families concerning the management of the foster care grant. They also endure conflicts from their family members owing to their decisions to foster since there are associated responsibilities. Mnisi and Botha (2016:232) also found that children's developmental issues caused foster parents to experience increased stress and accounted for a considerable amount of placement instability and disintegration.

Foster parents face the rigor of unreasonable delay in the completion of children's court inquiries (Manukuza, 2013:2; Sibanda & Lombard, 2015:340). Yet during the period of court inquiries there are usually insufficient social work services such as psychological support (Mnisi & Botha, 2016:238). During the court processes, foster parents may also face financial difficulties because they are unable to file for the foster care grant on time owing to the lack of a court order, despite that the children may already be in a temporary safe care. Research also suggested that some foster parents may not be well prepared for the court proceedings. They may not know what to expect, the kind of children they would foster, or how to deal with them (Warwick & John-Langba, 2017:43).

Since social workers are not always available to assist the foster parents, they may resort to improvising and obtaining support and assistance from other sources (Mnisi & Botha, 2016:238). When children are placed in foster care homes, the placements are likely to have an impact on the foster parents' own children and family. Hence, foster parents face obstacles from family and extended family members (Du Plessis, 2015:47). Therefore, some foster parents face challenges such as early rejection of themselves and their foster children, and a lack of support.

Despite the lack of support, foster parents must deal with various behavioural challenges exhibited by teenage foster children. The teenage foster children are occasionally unconcerned with other people's feelings, become egotistical, and can be disrespectful to anyone, including their foster parents. Teenagers who may have previously been maltreated, are likely to develop behavioural difficulties, poor social skills, grade repeat, substance use disorders, get in the criminal justice system book, or in the case of adolescent girls, become pregnant (Hamilton & Harris, 2018:14).

A lack of finances to fulfil the needs of children are central to foster parents usually failing to carry out their responsibilities (Tanga, Khumalo, & Gutura, 2017:74). In South Africa, the foster care grants are usually inadequate to sustain or complement the family's present source of income. An additional complexity that affects foster parents in carrying their duties is HIV and AIDS. However, for Richter and Naicker (2013:6) this requires further explorations, but research has shown that in South Africa, HIV and AIDS has subsequent developmental challenges on AIDS-orphaned populations needing alternative care settings. According to Richter and Naicker (2013:6), orphans

are impacted in a variety of ways, before and after their parents die, that could have significant ramifications for their psychological well-being.

2.12. Role of foster parents raising foster children

As shown in John and King (2016:8), teenage foster children may face greater challenges when they are suddenly expected to make their own decisions, advocate for their own needs, manage their financial or health options, pursue further education, find work, secure housing, and access transportation. Therefore, foster parents are expected to provide stable, safe, and sustaining home situations for foster children. The foster parents also have a responsibility to create and sustain areas of healthy development, such as physical, social, emotional, psychological, cultural, and spiritual needs, for the best interest of the teenage foster children.

York and Jones (2017:5) found that foster children are more likely to have common mental health problems such as a range of disorders that include conduct, hyperkinetic, and emotional– depression or anxiety. Thus, according to York and Jones (2017:5) looked after children are four times more likely than their peers, to develop a mental health problem. Hence, foster parents must provide quality care, support, and supervision to promote a child's growth, and this makes the foster family role broad and hard.

Caregivers or foster parents are expected to adjust to significant shifts in their daily routines and activities (Whitehead, 2015:15). In addition, foster parents have a unique role in that they are the primary caretakers but not the legal guardian of the foster children (Bilawski, 2016:10). Furthermore, foster parents play a critical role in providing foster children with family-based care. They must be professionally supported, both emotionally and practically, to be able to care for foster children in a way that gives security, stability, love, and a strong feeling of identity and belonging (Brown, Sebba & Luke, 2014:4).

2.13. Coping strategies of foster parents

In previous studies, foster parents acknowledged that the contribution of extended family members is significant in helping them manage the demands of fostering and enabling foster children to feel included, although this would be separate from their own biological family (Patel et al., 2019:60).

Foster parents are tasked with meeting the physical, health, and welfare needs of orphaned and other vulnerable and at-risk children entrusted in their care. In South Africa, performing everyday parental role of caring to guarantee the healthy growth and development of children have been recognised for posing major obstacles to foster parents and their homes (Kuo & Operario, 2009:1). There is a recognition that this may be exacerbated by a lack of assistance, resulting in the depreciation of the caregiver's health and well-being. Warwick and John-Langba (2016:1) add that caring for HIV-positive, orphaned, and other vulnerable children in need is difficult. To properly fulfil the different needs of children, Warwick and John-Langba (2016:1) found that foster parents needed financial, practical, emotional, psychological, social, professional development, problem-solving, respite, and community support.

Kuo and Operario (2011:1128) argue that when foster parents are properly supported to satisfy their caregiving needs, they are better able to care for and adequately meet the needs of children. Research reported a link between social support, caregiver's health, and placement outcomes (Casale, Wild & Kuo, 2013:2). According to Casale, Wild, and Kuo (2013:3), there are three types of support that foster parents and caregivers of children in need require: emotional support (such as love, caring, and comfort), instrumental support (material objects or other forms of practical assistance), informational support (counsel), and appraisal support (constructive feedback). These are necessary for children's well-being and may reduce foster parents of the stress of caring for them.

Most foster parents have a substantial reliance on the foster care grant, which in South Africa is presently R1100 per month (60,54 US dollar). In addition, studies have reported that foster parents' financial help from family members, their own income, and savings is part of the financial support that they need (SASSA, 2022:13). These helps them in overcoming and mitigating the difficulties that they may face in carrying out their responsibilities and addressing the needs of children that they care for. According to Bejane (2012:74), foster parents receive significant help from family members, mostly their partners, own adult children, siblings, and other extended families, who help them meet the care demands and problems that comes with foster care.

Warwick and John-Langba (2016:2-3) found that family members assisted with domestic tasks, caretaking, driving children to medical check-ups, clinic appointments, and administering medication to sick foster children. Du Plessis' (2015:47) study reported that despite that some family members could have initially sceptical about foster children and the idea of their relatives being foster parents, they tend to later alter their thoughts.

Community-based and organisation-based assistance are another key support and coping strategy used by foster parents in minimising and overcoming care challenges that were identified in previous research (Gono, 2015:97). In South Africa research shows that some of the structures that support foster parents are the DSD, schools, NGOs, Non-profit Organisations (NPOs), Community-Based Organisations (CBOs), and Faith-Based Organisations (FBOs). These organisations provide material and service support to foster parents and their foster children. This greatly aids in resolving difficulties related to children's care and well-being.

Furthermore, foster parents benefit from support groups that are usually therapeutic and restorative. The support groups also provide foster parents, opportunities to participate in activities that allow them to divert their attention and focus, away from difficult realities of their fostering responsibilities and roles to allow them to be productively and profitably engage (Gono, 2015:97). Previous research also shows that some foster parents organise recreational outings and school holiday for their foster children. This is found to support children's development and keeps them occupied during holidays, to prevent their potential involvement in delinquency and crime (Phaka, 2015:52).

In Gono's (2015:99) findings, community- and home-based care services guaranteed that children's prescriptions and treatment regimens were followed. They also guaranteed that children were always in school, had appropriate books and uniforms, and that foster parents were connected to relevant, and essential, local and community resources (Gono, 2015:99). Professional support services rendered and provided by caseworkers and placement agencies to foster parents and children are one of the components of organisation-based support. These services enable foster parents and children in their care to cope with and overcome the challenges that they face while providing care (Phaka, 2015:54).

Furthermore, various studies show that in South Africa, foster parents have a reliance on God, religion, and spirituality, as their other key support mechanism. For example, foster parents in South Africa significantly relied on God and a supernatural power based on their faith and spirituality as major sources of support and techniques for coping with the issues connected with caring for their foster children (Bejane, 2012:75).

According to Gono's (2015:97-98) findings, for spiritual strength and material assistance, most foster parents saw God as their lifeline. They relied significantly on prayer and communion with other members of their church congregation (Gono, 2015:97-98). The understanding that God had called them to be foster parents, and that they were aware of the good they were doing in caring for the orphaned children, was found to be a source of strength (Warwick & John-Langba, 2016:4).

2.14. Policies and Legislations guiding foster care services in South Africa

This section discusses some of the legislations and policies that govern foster care services in South Africa. The discussed policies and legislations are: The Constitution of the Republic of South Africa (1996), the Children's Act 38 of 2005 and the Social Assistance Act 13 of 2004.

2.14.1. *Constitution of the Republic of South Africa (1996)*

As adopted on 8 May 1996 and amended on 11 October 1996 by the Constitutional Assembly, the Constitution of the Republic of South Africa embedded the children's as follows:

(1) Every child has the right

- To a name and a nationality from birth;
- To family care or parental care, or to appropriate alternative care when removed from the family environment;
- To basic nutrition, shelter, basic health care services and social services;
- To be protected from maltreatment, neglect, abuse or degradation;

- To be protected from exploitative labour practices;
- not to be required or permitted to perform work or provide services that are inappropriate for a person of that child's age; or place at risk the child's well-being, education, physical or mental health or spiritual, moral or social development;
- not to be detained except as a measure of last resort, in which case, in addition to the rights a child enjoys under sections 12 and 35, the child may be detained only for the shortest appropriate period of time, and has the right to be kept separately from detained persons over the age of 18 years; and treated in a manner, and kept in conditions, that take account of the child's age;
- to have a legal practitioner assigned to the child by the state, and at state expense, in civil proceedings affecting the child, if substantial injustice would otherwise result; and not to be used directly in armed conflict, and to be protected in times of armed conflict. A child's best interests are of paramount importance in every matter concerning the child. In this section "child" means a person under the age of 18 years.

2.14.2. Children's Act 38 of 2005

According to Section 150 of the Children's Act 38 of 2005, emphasis must be placed on identifying a child who needs care and protection. The social welfare agencies that render protection services are guided by the Children's Act 38 of 2005, Section 150, when assessing foster care cases. The Children's Act 38 of 2005 indicates that a child is considered for foster care if they meet the following criteria. Firstly, both of their biological parents are deceased, and the child is left with no socio-economic support. Secondly, they show extreme behavioural challenges that the parent cannot modify. Thirdly, they are exposed to child labour and substance abuse with no rehabilitation support in place. Fourthly, they are physically or mentally abused and their lives is exposed to harmful circumstances. This criterion shows that there is need for an investigation by a social worker before a child is categorised as in need of care and protection.

Additionally, the modified Children's Act contains a significant quantity of new material (Section 12 of the Children's Act of 2005). It states that children who are brought before the court because they are in need of care and protection, shall be considered for foster care placement. The modified Act goes on to emphasise that the important purpose of foster care is family reunification.

However, the modified Children's Act's provisions for the duration and termination of foster care violate the primary premise of foster care, which is family reunification. The modification appears to keep the child in the statutory system rather than relocating them out of the child protection system. This is because of a long duration and termination process in foster care. The Modified Act also suggests possibilities for permanent foster care placements. It states that after the initial two-year placement, social services may choose to extend the placement for up to two years at a time or they can issue an order that will last until the child reaches the age of 18.

2.14.3. Social Assistance Act 13 of 2004

The Social Assistance Act 13 of 2004 is used to arrange for the social grants through the Minister of Social Development, in consensus with the Minister of Finance (Republic of South Africa, 2004:5). The different kinds of social grants that are provided by the South African government are: child support grant, care dependency grant, foster child grant, disability grant, older person's grant, war veterans' grant, and a grant-in-aid. A foster parent is eligible for a foster care grant if the child requires care and protection and meets the conditions of Section 5 of the Child Care Act 1983. (Act No. 74 of 1983). In the South African context, it has been noted that foster care grant tends to be the "only source of income that provides for the family" (Shaw, Steyn & Simeon, 2020:3). This has been found to be the drive for some households to engage in informal arrangements for foster care so that they may access the grants (Jores, 2013:113). Thus, the foster care grant is perceived as an enabler that "relieves families from experiencing poverty" (Shaw et al.,2020:3). In addition, Jores (2013:113) highlights that the financial gains tend to be a priority over the care and protection of children.

Furthermore, Roelen, Karki, Clulow, Jones, Saksena, and Delap's (2016:14) study on the impact of the South African foster grant found that it immensely assisted foster parents in providing for the basic household needs of the children. They found that it

made family-based care of children possible by helping to avoid a situation where children would have to be placed in an institution because of the lack of financial support within the family. Roelen et al., (2016:14) adds that the foster care grant is beneficial to South African households and communities. It has tremendously helped many communities that would have otherwise fallen into the poverty trap.

CHAPTER 3: THEORETICAL FRAMEWORKS

3.1. Introduction

A theoretical framework is a cohesive account of an occurrence (Vithal & Jansen, 2010:17). A theory is a collection of interconnected constructs (concepts), definitions, and propositions that give a systematic perspective of phenomena by identifying relationships between variables in order to explain and predict the events. (Kivunja, 2018:45). A theory is further understood as a set of interconnected assertions that aim to describe some aspects of a person's interaction with the environmental configurations. Thus, a theory expands our knowledge and comprehension of the meanings that individuals make in their daily lives (Forte, 2014:47). To guide the current study, the researcher adopted Resilience and Strength-Based Theory as theoretical frameworks. The two theoretical frameworks aided the researcher in exploring and describing challenges, experiences, and coping mechanisms adopted by foster parents of teenage foster children.

3.2. Strength-Based Theory

The identification of the client's strengths fosters the process of empowerment by emphasising their positive qualities and assisting them in their development of attributes such as talents, knowledge, abilities, and aspirations to reclaim personal authority in their lives (Pulla, 2017:103). According to Chapin (cited in Lekganyane, 2017:29), the strength-based approach can be linked to Richmond and Perlman's pioneering work in social work. In contrast to the traditional psychotherapy social work model, the strength-based perspective does not classify clients as "dysfunctional, defective, or unwell", instead, it focuses on the client's strengths, and emphasises their positive characteristics (Beckett & Horner, 2016:156).

A strength-based theory is a means of working with and overcoming challenges that are faced by the engaged person (Hammond & Zimmerman, 2012:4). Thus, strength-based theory refers to an individual's strengths and capacity for self-improvement. According to Saleebey (cited in Manthey, Knowles, Asher & Wahab, 2011:126), aiding someone with a strength-based approach is based on allowing or guiding clients to explore, develop, and use their own strengths and resources to attain their goals. The

following are the characteristics of the strength-based perspective derived from Manthey et al. (2010:126-152)

- Individuals, families, and communities have strengths, assets, and resources, for growth (Paquin, 2006:128). According to Guo and Tsui (2010:234), resourcefulness can extend beyond the family. Thus, it can include friends, and other members or groups that participate in relationships and interactions within the community. Inviting family, spiritual advisors, and prominent community people can strengthen a person's commitment to sobriety.
- The goal-oriented perspective is based on strengths. Clients are encouraged to create goals for what they want to accomplish, and their strengths are assessed and mobilised to help them attain those goals. Working from a position of strength, the environment is perceived as abundant in resources. The clients are then connected to appropriate environmental strengths and resources to attain their objectives.
- The supporting connection is hope-inducing. The relationship between the social worker and the client generates a sense of hopefulness, through their engagement in a welcoming, empathic manner, and with a collaborative aim. Such a connection also fosters emotions of empowerment, self-confidence, boosts the client's beliefs on their talents and offers them alternatives and options when dealing with challenges (Saleebey, 1996:7).
- The client oversees the strength-based approach. Clients are encouraged to develop their own solutions and take more positive steps (Beckett & Horner, 2016:157).
- The strength-based approach departs from the belief that cooperating with clients is the best way to assist them. Social workers may have certain talents and experiences to offer, but they must explore and utilise their clients' wisdom, knowledge, insights, and experiences. Therefore, throughout the intervention, the client's contributions are acknowledged and valued. A "partnership" is the term that is used to define the interaction between a family or individual and a professional social worker.

- While trauma, abuse, disease, and challenges are unpleasant and damaging, they can be tools and steppingstones for dealing more constructively with adversities. This is related to the concept of resiliency, which states that hardship, including trauma, can lead to a deeper sense of coherence, empathy, and a stronger link with others (Ungar, 2013:255).
- The strength-based approach emphasises the client's ability to grow and adapt. Therefore, clients are not labeled, thus, they are not confined by labels or previous experiences. They are given the opportunity to explore and believe in their own potential to achieve their objectives. The core of the strength-based perspective is recognising the power to change and actioning it. In effect, it is a process that a client must undertake to overcome and constructively manage a challenging situation (Beckett & Horner, 2016:156).

As Guo and Tsui (2010:233) argue, the strength-based perspective has been widely utilised in a range of social work disciplines, including child welfare, substance misuse, family services, and services for the elderly (Winek, Dome, Gardner, Sackett, Zimmerman & Davis, 2010:50). According to Hammond (2010:5), there are nine (9) guiding concepts that serve as the core of the strength-based approach, and these are:

- Everyone has a certain quality that allows them to grow and progress in their lives. Potential, strengths, and talents are examples of these distinguishing attributes.
- What receives our (or the client's) attention or focus becomes our (or the client's) goal(s) and eventually becomes a reality.
- Watch what you say and how you say it. Our (and our clients') world is shaped by our language.
- Accept change; life and our world are constantly changing; don't fight it.
- Be as genuine as possible in your support of others. You'll notice that your bonds are stronger and more meaningful.
- The individual or client is the author of their own story.

- To dream of the future, build on what you already know and have done.
- Capacity building is a multifaceted and well-organized process. Be adaptable.
- Work together with others. Be flexible and appreciate differences.

The strengths-based perspective allows social workers to assist foster parents to draw on their inner strengths and utilise them to boost their capacity to re-adjust and deal with the obstacles that they may be facing. The strengths-based method emphasises foster parent's capacities, empowerment, and rehabilitation when facing obstacles in raising teenage foster children (Dunn, 2017:395).

The purpose of the social worker is to help foster parents who are raising teenage foster children to discover, explore, and use their skills, and resources to help them manage and cope with the problems and experiences that they encounter. The social worker's job description includes assisting individuals with their difficulties and, "helping service beneficiaries and communities grasp that their problems are linked to social inequity; to understand why they are oppressed, and how to advocate for change" (Baines, 2011:4). Therefore, strength-based approach recognises that a person has strength, and it believes that everyone can deal with their situation.

3.3. Resilience theory

Resilience is described as a dynamic system's potential or manifested ability to successfully adjust to shocks that threaten its operation, survival, or development (Masten, 2015b:187). In addition, it is "the procedures of effectively responding to great hardship" (Theron, 2016:636). Thus, resilience are factors or processes that permit positive results in the face of adversity.

Resilience theory is closely associated with the strength-based perspective because it emphasises the ways in which individuals and communities respond to, recover from, and grow or thrive when confronted with adversity (Van Breda, 2015:1). Galea (in Green, 2014:944) also defines "resiliency" as "bouncing back, whereas Masten and Reed (cited in Munoz, Brady, & Brown, 2016:102) highlight two conditions that are implicitly central when explaining resilience. These include being exposed to a significant threat or extreme adversity and responding positively in the face of significant attacks on the developing process.

The "positive response" necessitates a cognitive ability to motivate goal-directed activities in the face of adversity. Winkler (2014:464) provides a compelling understanding that resilience is a psychological talent or capacity that develops through interaction with others, rather than a personality trait. Characteristics such as intelligence, toughness, sociability, tenacity, and optimism are associated with resilience, and support individuals in overcoming their confusing situations (Shaw, McLean, Taylor, Swartout & Querna, 2016:34). According to Taormina (2015:3), there are four elements of resilience:

3.3.1. Determination

Taormina (2014:36) defines determination as a person's willpower, firmness of purpose, and decision to endure and/or succeed. This component indicates a conscious or cognitive dimension of personal resilience (Taormina, 2015:3). Determination is the ability to persevere and achieve a goal in the face of adversity.

3.3.2. Endurance

Wei and Taormina (2014:37) define endurance as having the personal strength to endure unpleasant or challenging situations. In addition, Wocial (2020:64) describes endurance as a personal strength, fortitude, and capacity to bear unpleasant or tough situations without giving up. Cohesively, endurance is suffering pain and adversity to achieve a goal.

3.3.3. Adaptability

Adaptability is defined as an individual's ability to "constructively manage psycho-behavioral functions in response to novel, changing, and/or unpredictable settings, contexts, and scenarios," (Martin, Nejad, Colmar, & Liem, 2012:66). In addition, Wei and Taormina (2014:36) view adaptability as the ability to be adaptable or to adjust oneself to changing circumstances and being resourceful in the face of adversity.

3.3.4. Recuperability

Recuperability is defined as the ability to recover from a variety of setbacks mentally or physically and re-establish one's regular condition despite difficulties (Wocial, 2020:64). Wei and Taormina (2014:37) define recovery as the ability to return to and

re-establishing one's normal state after suffering physical or mental injuries, setbacks, or obstacles. In resilience, recuperability enables one to recover or gain strength.

The ability to successfully adapt in the face of adversity is referred to as resilience (Wong, Liamputtong, Koch & Rawson, 2017:4392). Resilient people have a healthy psychological development and the ability to recover or bounce back from hardships (Bolton, Hall, Blundo & Lehmann, 2017:1). In the face of hardship, such people show perseverance, adaptation, and resilience (Taormina, 2015:37).

Drawing from the preceding discussion of resilience, foster parents can best develop resilience in a supportive and collaborative environment. Furthermore, for the researcher to explore foster parents' resilience, she had to design research questions that helped participants understand the importance of implementing their resilient strategies in raising teenage foster children. This became primarily a way of data collection to identify coping strategies, but it also benefited the participants by initiating the application of the strengths-based approach in participants.

CHAPTER 4: RESEARCH METHODOLOGY

4.1. Introduction

Research methodology describes how data will be collected, who will be the sample, and how data will be analysed (Green & Thorogood, 2014:57). According to Creswell (2014:6), it is necessary to first identify the philosophical assumption(s) or paradigm(s) on which the study will be based, before the researcher can make decisions on the study approach and design. Sarantakos (2013:29) defines research methodology as a research strategy that translates ontological and epistemological concepts into instructions for conducting research. Thus, research methodology refers to the research strategy and approach that will be used to steer the investigation. This chapter will start by discussing the current study's research approach.

4.2. The research approach

The current study adopted qualitative research approach. Qualitative research approach is largely linked to words, language, and experiences of the participants (Burns & Groove, 2013:35). It tries to reveal people's understanding and perspectives on life, and how they apply their beliefs to their daily lives in their social context while interacting with others (Creswell, 2014:4). Qualitative research is frequently viewed as enabling researcher' access to rich data about actual life to make sense of the behavior in its context (De Vaus, 2016:5).

Therefore, the researcher has used a qualitative research approach. It begins with assumptions and uses interpretive or theoretical frameworks that informs the study of research problems that addresses the meaning which individuals or groups ascribe to, namely; a social or human problem (Cresswell, 2013:44).

4.2.1. *The rationale for qualitative research approach*

Qualitative research can help researchers better understand human experiences (Leavy, 2017:124). Inductive qualitative researchers start by identifying the research problem, followed by gathering data to understand participants' perspectives, and finally use the findings to create a theory (Allen, 2018:3). Qualitative research is conducted through following a set of steps to obtain, interpret, and report on data

(Straights & Singleton, 2018:69). Researchers use qualitative approach to collect data, understand people's ideas and their opinions regarding a phenomenon.

Alpaslan (2010:13) states that qualitative researchers emphasise six significant characteristics, that are listed below:

- Qualitative researchers believe in multiple realities. They do not believe in “one truth” or a “single reality”. They believe that there are multiple realities which need to be considered when trying to fully understand a phenomenon, situation, or experience.
- They have a commitment to identify an approach that will support them in understanding the phenomenon that they are studying. For example, more than one method of qualitative data collection will be used to come to a full understanding of a phenomenon.
- They are primarily interested in the participants' views. In the researcher-participant relationship, the participant is viewed as the “expert” and the researcher as “appreciative enquirer”.

Qualitative researchers attempt to conduct their study in such a way that the natural context of the phenomenon of interest is exposed to minimum disturbance. They acknowledge the role of the researcher in the research process. Thus, that the researcher is the primary instrument of data collection.

The main purpose of qualitative research is to explore how individuals interpret their own concrete, real-world experiences in their own minds and words, before analysing those interpretations. This approach is common in behavioural science such as psychology, sociology, politics, education, health, or, in modern times, business and management, decision-making, or innovation (Cropley, 2022:5). Social sciences posit that people have implicit beliefs about reality. Furthermore, their behaviour is based on their beliefs or understanding on factors such as how things are related to each other, how the world works, and why others behave as they do (Woodman, 2014:465). In the current study, qualitative research approach provided the researcher with a comprehensive grasp of participants' perspectives on the difficulties that they faced and coping strategies that they generated while caring for their teenage foster children.

4.3. Research paradigm

A research paradigm is a researcher's worldview. A paradigm reveals and portrays the researcher's viewpoints, cognitive processes, school of thought, or collection of shared beliefs (Kivunja & Kuyini, 2017:26). In human sciences, the term paradigm can refer to institutionalisation of intellectual activities, broad groupings of specific techniques and research perspectives, and the description of broad research approaches – positivist or interpretative paradigm (Shah, Nasseef & Elyas, 2013:3). The ways that various schools of thought conduct research are influenced by research paradigms. A paradigm provides a framework of assumptions and comprehensions upon which research project's theories and methods might be based. Research paradigms are often considered for data gathering methodologies and can be divided into two: positivist and interpretivist. For the current study, the researcher adopted an interpretive paradigm.

4.3.1. Interpretive paradigm

According to Bhattacharjee (2012:35), interpretive paradigm uses an inductive approach that begins with data and attempts to construct a theory based on the data gathered from the studied phenomenon. This paradigm attempts to grasp participants' thoughts to comprehend what they would be thinking and their interpretations of the phenomenon (Kivunja, 2018:33).

Furthermore, interpretive paradigm is founded on the premise that qualitative research should focus on uncovering many realities rather than searching for a single objective reality. Its origins can be found in that methods that are used to comprehend knowledge in human and social sciences cannot be the same as those used in physical sciences since humans interpret their environment and act on that interpretation, whereas the world does not (Hammersley, 2013:26). Interpretive paradigm is concerned with interpreting the world through the eyes of individuals' subjective experiences. In the current study, interpretive paradigm was used to understand the subjective world of foster parents of teenage foster children.

4.4. Research design

A research design can be described as a framework for conducting effective research (Sreejesh, Mohapatra & Anusree, 2014:27). Through a clear research design,

research findings' uncertainties are minimised (Baran & Jones, 2016:67). In the current study, a research design was used to direct the study process towards answering the research questions. According to Jonson, Reynolds, and Mycoff (2016:23), a research design is a detailed strategy that outlines the researcher's intentions in relation to achieving the research goal. The design of qualitative research is iterative, which means that as the research process progresses, the research questions and procedures are reviewed and reworked (Shaw & Holland, 2014:80). Therefore, a research design is the overall approach the researcher selects to logically integrate various components of a study, to successfully answer the research question. For the current study, the researcher utilised three research designs as a framework for the investigation, these are explorative, descriptive, and contextual research design.

4.4.1. Explorative research design

According to Sreejesh et al. (2014:31), explorative research design can be used to obtain important and detailed data. Explorative research investigates how events unfold within the participants' natural environment (Baran & Jones, 2016:69). Explorative research design is useful in investigations where some problems have been identified but are not fully understood (Yegidis & Weinbach, 2012:125). It is a tool for preliminary research that offers a theoretical understanding of the research problem.

The current study explored challenges, experiences, social support, and coping mechanism for foster parents while raising teenage foster children. The researcher used semi-structured interviews to ask open ended questions. The semi-structured interview questions were cumulated on an interview guide. Through self-reflection the researcher refrained from judgments and biases that would have been based on her values and beliefs about the research topic.

4.4.2. Descriptive research design

As highlighted by Baran and Jones (2016:68), descriptive study design has the purpose of requiring data for focusing on particular issues hindering the growth of people, organizations, or communities, and how they are addressing them. A descriptive design is used in qualitative research, to collect data that is usually in form

of written words. Such data is important in examining and describing circumstances that have no theoretical findings (Clifford & Gough, 2013:79). A research design strives to gather data to comprehensively describe a phenomenon, circumstance, or population. In the current study, the researcher utilised descriptive research design to comprehensively describe the challenges, experiences and coping strategies of foster parents that are raising teenage foster children.

4.4.3. Contextual research design

In qualitative research, the context of the studied phenomenon must be considered, explored, and articulated, because meanings that are associated with participants' experiences are contextually bound (Lichtman, 2014:127). Research refers to personal, community, and socio-economic circumstances in which the research population lives (Creswell & Poth, 2018:322). With reference to a research context, researchers that use a case study, such as in the current study, must locate the case within its setting, when analysing data, and for overall conceptualisation of the study (Creswell & Poth, 2018:322). Contextual research design is the process of gathering data to design any kind of product. In the current study, the researcher applied contextual research design to gain an in-depth understanding of the experiences, coping strategies to the challenges that are experienced by foster parents, based on their perspectives within their context.

4.5. Research methods

Research methodologies are tools and activities that researchers employ to acquire and process data (HesseBiber, 2017:17). Research methodologies are used for gathering, analysing, and interpreting data (Creswell, 2014:247). Qualitative research methods use exploratory methods such as interviews, surveys, and case studies to investigate mechanisms behind human behavior (Van Zyl, 2014:213). This chapter discusses the research methods that were used for the current study.

4.5.1. Population

In research, population refers to all people who meet the overall researcher's criteria to be included in the study (Thomas, 2017:141). Thus, it is "the full group of elements that you would like to explore" (Guest, Namey, & Mitchell, 2013:42). Summarily, research population is the entire group that the researcher wants to make conclusions

about. In the current study, the research population was composed of all registered foster parents of foster teenagers and had received a court order from the Commissioner of the Children's Court. The researcher drew a sample from this population because the complete population could not be included in the study due to time constraints and lack of funding.

4.5.2. Sampling

Sampling is defined as the process of selecting a small sample of a targeted population to monitor and draw qualitative judgments about the research population (Bhattacharjee, 2012:65). The sampling process begins when the researcher selects the subset of the population with which he or she wishes to interact and determines how to locate and involve them (Thorne, 2016:96). According to Mcmillan (2012:86), a sample is a collection of elements, single element, or group of people from whom research data is collected. In the current study, a sample was made up of all foster parents that met the requirements of the study.

4.5.2.1. Sampling techniques

According to Pandey and Pandey (2015:40), sampling processes select a small sample as a representative of the entire world. Its goal is to gather the most accurate and reliable knowledge about the cosmos while spending the least amount of money, time, and energy possible, but also determining the limits of such estimations. Daniel (2012:1) defines sampling as the process of selecting a subgroup of the research population. Sampling procedures or plans are strategies that are used by researchers to select data sources (Tracy, 2013:134). For the current study, non-probability sampling techniques were used to gather the sample.

- **Non-probability Sampling**

In this study, the researcher employed a non-probability sampling technique. Non-probability sampling is the approach that, when used, reduces, or eliminates some people's chances of being chosen for the study (Seale, 2012:580). Non-probability sampling does not require randomisation, which means that not everyone is chosen to participate in the study (Whitehead & Whitehead, 2015:112). Using non-probability sampling, only those who have knowledge and experience are allowed to take part in the study.

Examples of non-probability sampling are convenience, snowball, purposive, theoretical, and quota (Chambliss & Schutt, 2013:97). In the current study, purposive sampling strategies were used because they were more suited to appropriately address the research purpose and objectives. According to Tracy (2013:135), qualitative researchers must engage in deliberate sampling to select the data that fits the parameters of the project's research questions, aims, and purposes. Non-probability sampling, in contrast to probability sampling, does not require randomisation. Therefore, participants in a qualitative study population do not have an equal chance of being chosen (Whitehead, & Whitehead, 2015:112). In this study, the selection of knowledgeable and experienced people was done using a non-probability sampling approach.

- ***Purposive sampling***

Purposive sampling was used in this study because, the researcher's approach was to only invite participants who she considered to have had first-hand experience in raising teenage foster children. Purposive sampling is a more representative sampling strategy in which settings, and specific individuals within them, are selected based on some aspect of the experience connected to the research topic that may aid the researcher to better understand it (Thorne, 2016:99).

Purposive sampling is decided using a random approach that is known to be representative of the overall population or to provide well-matched groupings (Pandey & Pandey, 2015:54). According to Whitehead and Whitehead (2015:112), purposive sampling is aimed at selecting individuals with greater information, expertise, and knowledge about the topic. It is a type of non-probability sampling where researchers use their own discretion to select individuals from the research population to take part in their surveys.

Hence, for the current study, unique cases that offered precise and pertinent information were chosen by the researcher. The participants who fitted in the eligibility criteria were contacted by the researcher. Additionally, the researcher distributed to participants a consent form that included a description of the study's objectives. By asking participants to sign the consent form, they gave their approval to participate. The subjects were chosen by the researcher based on their personal encounters with

the phenomenon. The researcher did not pre-decide on a set number of participants because the sample size was established by data saturation, thus, a point at which replication or confirmation of previously gathered data occurs (Carr, 2018:642). The number of cases at which data saturation was reached is 14 participants. Participants who met the following criteria were included in this study:

- Above the age of 18.
- Caring for at least one foster teen child.
- Gender and ethnic diversity were considered as important.
- Lived within the Kagiso area.
- Available and willing to participate in the study.

Participants who did not meet the following criteria were excluded in this study:

- Under the age of 18 because they are considered children under the Children's Act 38 of 2005.
- Not responsible for the care of teenage foster child(ren).
- Did not live in Kagiso.
- Who were not interested in participating in the study.

The researcher was aware that in most qualitative studies, sample size is not too important than the quality of the collected and analysed data (Carey, 2012:41). The methods of data collection, analysis, and verification are discussed in the next section.

4.6. Data collection

Data collection is a process of collecting information that will be helpful in answering the research question. Data gathering can be direct or indirect and includes observable body language, activities, interactions, recordable, spoken, or written words (Whitehead & Whitehead (2015:115). According to Mohajan (2018:5), data is unprocessed, unstructured, and unevaluated facts that have no significance and are of little use to managers and decision-makers. In qualitative research, data collection

includes a number of processes that range from site selection to the creation of data collection forms (Creswell, 2016:105). This is based on the idea that all forms of qualitative data gathering entail judgements about the relevance of data in the current study (Thorne, 2016:135).

4.6.1. Preparation for data collection

The components of data collection and procedures that were used in the current study, are discussed in the following section,

4.6.1.1. The site or individual

According to Creswell (2018:257), qualitative researchers do not invite participants to the testing area, thus a staged environment. Igwenagu (2016:43) underlines the importance of deciding on the study site to cover and the types of objects to investigate. One of the most important aspects of qualitative research is that it requires talking to people and observing how they behave and act in their natural environment. All participants must have personal experience with and must be able to articulate their thoughts about the studied topic. The current study's participants were foster parents who had an experience and dealt with the difficulties of raising teenagers in foster care and were interviewed within their residential areas.

4.6.1.2. Access and rapport

It is critical for the researcher to form a bond with the people he or she is researching about, especially if data collection will involve observations and in-depth interviews (Babbie, 2013:317). Prior to collecting data, researchers must first locate potential participants (Tracy, 2013:158). Silverman (2013:411) underlines that it is importance for researchers to not project a negative image of themselves because this becomes a barrier to access. Therefore, researchers must portray an appropriately more positive image for the situation. Qualitative research comprises investigating a research site and receiving permission to analyse it in a way that allows for straightforward data collection (Creswell, 2013:147). This entails securing consent from those at the research site, or gatekeepers and institutional review bodies at the university or college.

In the current study, the gatekeeper was the Head of the Gauteng Province (GP) DSD. A gatekeeper is a person who allows the researcher access to the setting and permits the study to be conducted (Creswell, 2014:188). To prepare for data collection of the current study, the researcher emailed a letter to the Head of the GP's DSD, outlining the study's goal and objectives. She asked for permission to interview foster parents of teenage foster children who were listed in the database. After the permission was granted, the researcher then negotiated with the West Rand region statutory manager who oversaw Kagiso, to acquire authorisation to conduct the research project. The manager escalated the message to the service point supervisors to allow the researcher to access the foster parents.

Before sending an email to the Head of the Gauteng Provincial's Department of Social Development, the researcher submitted her proposal to the Department of Social Work Scientific Review Committee in the University of South Africa to seek approval to conduct the study. After the approval was granted, the researcher sought for an ethical clearance from the College Research Ethics Committee (Please see Appendix A).

Researchers must keep in mind that negotiating access to participants in the study site, is never an easy task. Therefore, it must be handled jointly and negotiated with the intended participants (Aurini, Heath, & Howells, 2016:148). Prior to negotiating and gaining access to participants, researchers must have a thorough awareness of the people, communities, organisations that are being studied, the correct processes, rules, and conventions to follow.

4.6.1.3. Collecting data

After choosing the locations or subjects, the researcher must decide on the best methods for gathering data. Because demographic inquiries are tedious and unpopular, Winsome and Travis (2014:321) advises researchers to limit them to a minimum. Creswell (2018:262) describes the data collection steps as including establishing the protocol for recording data, setting the parameters for the study through sampling and participants recruitment, conducting unstructured or semi-structured interviews and observations, or analysis of documents, and visual materials. When the researcher is collecting data, they are gathering information that enables them to answer their research questions. For the current study, the researcher had set prior questions that she had wished to seek answers for during data gathering.

The researcher interviewed the participants by herself, and in-person. Semi-structured, mostly open-ended questions were used in the interviews to extract participants' ideas and opinions.

4.6.1.4. Recording information

Igwenagu (2016:43) emphasises that the researcher should select whether to employ questionnaires or direct observations for data collection. Furthermore, Silverman (2013:418) notes that capturing naturally occurring interactions allows researchers to return to their data in its original form as often as they desire. Recording information or data allows the researcher to preserve data before future usage. To collect data, the researcher developed procedures or written forms, such as interviews or observational protocols. These were aligned with those suggested by Creswell (2013:168) for recording data, as follows:

- ✓ An audio recorder was used to record interviews. It was also used to remind the researcher of her research aim. All relevant information about confidentiality and consent form components were supplied. She also captured notes to record facts.
- ✓ Recognising that people cannot always instantly respond to inquiries, the researcher included blank space between the questions in the protocol form. She used the space to jot notes about all the questions as the interviewee spoke.
- ✓ Memorising the questions and their order allowed the researcher to maintain eye contact with the participants to improve communication from one inquiry to the next.
- ✓ The researcher recorded her final words where appreciated the participants and asked them for any more information.

4.6.1.5. Storing Data

Data can be archived for a period of five to 10 years after being collected (Creswell, 2018:154; Sieber & Stanley, 1998). After five to 10 years, researchers should destroy the data to protect it from falling into the hands that might misuse it (Gravetter &

Forzano, 2012:124). Concerning data storage, the researcher followed the qualitative research data storage and management standards by:

- Backing up copies of computer files.
- Using audio-recorded content during interviews.
- Making a master list of all the gathered data.
- Hiding participants' identities to safeguard their anonymity.
- Creating a data collecting matrix for visual help to find and identifying data for the study.

4.7. Data collection approach

Data collection is a methodical process for precisely gathering data from a variety of sources to offer insights and solutions in relation to the studied topic. According to Stringer (2014:1010), the researcher must clearly define the research problem in terms that are clear to and collect data that incorporates participants' sentiments and opinions. Data can be collected in a variety of ways including the commonly used, organised and standardised interviews. For the current study, semi-structured interviews were used for data collection. Semi-structured interviews are based on a list of issues that need to be addressed in-depth (Babbie, 2013:318). In semi-structured interviews, an interview guide is used to present a sequence of questions for discussion (Whitehead & Whitehead, 2015:116).

4.7.1. The importance of semi-structured interviews

- Directive qualitative interviewers should be avoided, instead according to Spradley (1979:3), qualitative interviewers should learn from people rather than study them. A qualitative interview resembles the natural talking that occurs in everyone's daily spoken communications.
- The researchers using qualitative semi-structured interviews must have a neutral mind-set. Their self-presentation, including body language, expressions, and words, must be neutral. Furthermore, the researcher must keep a good attitude toward participants. The researcher is in charge of setting up the research

conditions and avoiding conversations that could injure the other person. Lastly, the researcher must avoid using terms that incite hatred, divulging topics that are fully private, if not unlawful, or giving the participant significant unhappiness.

The following are the communication skills that the researcher utilised during data collection:

4.7.2. *Listening*

Grobler, Schenk and Mbedzi (2013:49) say that listening is one of the communication skills that are used to grasp a person's experiential world, perceptions, and reality. Active listening is defined by Corey, Corey and Corey (2014:37) as “absorbing content, detecting gestures and small changes in voice or expression, and sensing underlying meanings”. It is critical to develop good listening skills to successfully communicate (Zastrow, 2015:169). In the communication process, listening is the capacity to accurately hear and interpret communications. For the current study, the researcher used listening skills to gain a better understanding of the foster parents' experiences and perceptions without imposing her own understanding. She paid close attention to foster parents' feelings and experiences of foster parenting to fully appreciate their sensory worlds, perceptions, and realities.

4.7.3. *Empathising*

Empathy is the ability to put oneself in another person's shoes and comprehend or feel what they are going through from within their frame of reference. Empathising entails being able to imagine what participant's life is like (Grobler et al., 2013:54). This means that the researcher listens to and understands the subject without prejudice or preconceived beliefs, and they communicate (vocally or nonverbally) this understanding to participants. When demonstrating empathy, it is critical for the interviewer to non-judgementally mirror what the participants state. This will enable the interviewer to comprehend the essence of the participant's thinking or feeling (Zastrow, 2015:208). Furthermore, the ability to fully absorb another's experiences while keeping one's separateness is at the heart of empathy (Corey, Corey, & Corey 2014:38). The ability to empathise allowed the researcher to understand foster parents without prejudice or previous assumptions.

4.7.4. Questioning

To encourage participants to speak, the researcher should ask open-ended inquiries that begin with words such as "what" and "how" (Creswell, 2016:131). As a result, participants are permitted to express themselves in accordance with their own interpretation of the question. Open-ended inquiries help people become better aware of their surroundings (Corey et al, 2014:39). In the current study, the researcher used the questions to seek clarity and explanation of the concepts. She also probed by using prompts such as "tell me more," and "what does that mean?" (Creswell, 2016:131). When questioning, the researcher asks the participants questions in order to learn what is happening. The researcher used questioning and probing skills to allow foster parents to express their experiences freely and openly.

4.8. Pilot testing

Piloting data collection tools entails putting them through a scaled-down version of a proposed study that will be used to create or refine the tools (Grove et al., 2013:703). According to Creswell (2014:161), pilot testing is a critical stage of the research process that allows the researcher to check the content, validity of the research instruments, and the feasibility of the study format. Pilot testing is when the researcher tests research methods, data collection tools, sample recruitment strategies, and other research techniques, in preparation for a bigger study. For pilot testing in the current study, individual interviews were conducted with two participants. The participants for the pilot study were chosen using the same approach as for the main data collection interviews. In addition, participants that were chosen for the pilot study were not included in the main study. The results of the pilot study were used by the researcher to make necessary changes and to improve the data collection tools, recruitment strategy, and other research techniques for this study.

4.9. Data management and analysis

Any qualitative study necessitates decisions regarding how to conduct data analysis, and these decisions influence the rest of the research design (Maxwell, 2013:104). Data analysis is the process of using theory and comparison to evaluate research data to gain better knowledge of a topic (Carey, 2012:245). According to Creswell (2018:267), data analysis comprises segmenting and dissecting data, much like

peeling layers off an onion, and reassembling it. The goal of qualitative data analysis is to examine social research data without translating it to numbers (Babbie, 2013:394). The current study's interviews were collected and recorded in Setswana or IsiZulu, and then through transcriptions were translated into English. The translated transcripts were checked by a translator.

For data analysis in this study, the researcher used the following Tesch's eight steps:

- ❖ Reading through all transcriptions and jotting down any ideas that came to mind. This enabled the researcher to get an overall meaning of the whole data.
- ❖ In-depth reading of each transcript. As the researcher read the transcript, she asked herself questions such as, "What is it all about?" "How does sharing what will be shared translate?" She then recorded, in the transcript's margins, any thoughts that came to her mind.
- ❖ Compiling a list of subjects and organising them into groups based on their commonalities. The key issues were organised into themes, which were latter divided into sub-themes.
- ❖ Coding. During this step, codes were written next to appropriate text portions using abbreviations. Though this technique, new codes were produced.
- ❖ Dividing topics into groups. In this step, the researcher divided the topics into groups using the most common phrases. The researcher aimed to lower the overall number of categories by grouping similar themes. A line was created between categories to demonstrate interrelationships.
- ❖ Each group's abbreviations were finalised, and the codes were sorted alphabetically.
- ❖ The data for each category was collated in one place, and a preliminary analysis was performed.
- ❖ When necessary, she recorded the existing data (Creswell, 2018:270).

The methods of data verification are discussed next.

4.10. Data verification/trustworthiness

Data verification refers to the techniques applied throughout the research process to gradually increase the level of research rigor by guaranteeing dependability and validity. It contributes to research credibility (Pool, 2017:282). Data verification can occur during data collection, shortly after, or during analysis (Williams, 2015:119). During data verification, questions such as "who is speaking?" "to whom are they speaking?" "for what purpose are they speaking?" and "what are they talking about?" are asked (Williams, 2015:119).

Data verification assures that research findings appropriately reflect the studied topic, to result in believable conclusions (Williams & Hill, 2012:175). Some of the requirements for trustworthiness in qualitative research are credibility, reliability, confirmability, and transferability (Houghton, Casey, Shaw, & Murphy, 2013:12). In the current study, the researcher focused on the methods that are proposed by Lincoln and Guba in Loh (2013:5) to verify the research data.

4.10.1. Credibility

Research credibility refers to the belief in the truth of a study's conclusions (Connelly, 2016:435). Credibility includes the researcher's reflections and actions on ensuring good quality of the data that they collect and ensuring that their sample is representative (Roller & Lavrakas, 2017:5). In the current study, the researcher acquired credibility by basing her conclusions on a range of sources. The researcher employed both interviews and observations for data collection.

4.10.2. Dependability

Dependability is defined as the consistency and reliability of research findings, and the extent of the documentation of the research methods to allow readers to monitor, audit, and constructively interrogate the process (Moon, Brewer, Januchowski-Hartley, Adams, & Blackman, 2016:2). It is considered successful when results are repeated with similar subjects under comparable circumstances and the outcomes are the same. (Cope, 2014:89).

Furthermore, dependability questions whether the findings, interpretations, and conclusions accurately reflect the participants' experiences (Amankwaa, 2016:122).

Dependability in trustworthiness is crucial because it demonstrates the study's conclusions as being reliable and reproducible. For the current study, the researcher used dependability by identifying knowledgeable and experienced foster parents to assist her in verifying or examining the codes, conducting thematic analyses of transcriptions for each interview, and consulting online workshops to ensure that the procedures for analysing data were appropriate.

4.10.3. *Transferability*

In qualitative research, transferability is the extent to which findings can be applied to different settings or situations with different respondents. According to Cope (2014:19), part of achieving transferability is providing thick data descriptions that will allow enough details to assess how transferable are the study's conclusions to future research, other contexts, and persons. It is the ability to apply the study's findings to common events, circumstances, and environments (Morris & Burkett, cited in Mohajan, 2018:42). In the current study, the researcher gave extensive data to improve the findings' transferability to similar contexts (Amankwaa, 2016:122). The researcher offered a thorough list of and sufficient information about foster parents who are raising teenage foster children, while retaining anonymity and confidentiality.

4.10.4. *Confirmability*

Confirmability is the extent to which findings may be verified. According to Mohajan (2018:42), the researcher uses confirmability to generate and demonstrate first-hand proof from her interactions with the participants. To achieve confirmability, some of the strategies that can be used are audit trail, triangulation, and reflexivity (Amankwaa, 2016:122). To achieve confirmability, in the current study, the researcher demonstrated that the findings are clearly linked to the conclusions in a process that can be followed and replicated.

4.11. Ethical considerations

Any research project's moral foundation is underpinned by ethical discourses (Fawcett & Pockett, 2015:27). Researchers are obligated to consider their research efforts from an ethical standpoint (Williams, 2015:80). In qualitative research, ethical considerations entail actions intended to guarantee the protection of participants. In the current study, the following ethical principles were followed: informed consent,

confidentiality, privacy and anonymity, data management, avoidance of harm, debriefing, and beneficence.

4.11.1. Informed consent

Informed consent is the process by which researchers inform potential volunteers about the risks, benefits, and anything else that may be involved before they decide to join a study by their own informed free will (Tracy, 2013:104). The researcher in this study informed participants about the study and its implications so that they freely accepted to participate (Williams, 2015:91). It was critical for the researcher to obtain informed consent from all participants and conduct ethical research. Informed consent offered each participant autonomy and was regarded in the current study as a major principle of research ethics (Johnson & Christensen, 2014:148).

4.11.2. Written consent

After participants had read the consent forms that were outlining the investigation, they voluntarily signed it. At this point, participants were free to ask questions about the project and the type of data that was going to be collected. Therefore, written consent was obtained. Participants were provided with a copy of the signed and dated consent form. According to Sieber (2012:64), informed consent should make it apparent to participants what their participation entails, including both potential advantages and hazards. In the information letter for the current study, the researcher clarified the issues of privacy, anonymity, and confidentiality. Participants were informed that the findings could be made public, but their identities and interests would be protected. The researcher also informed participants about the research procedure, goals and objectives, risks and benefits, expectations, and ethical considerations, and allowed them to sign the informed consent form to comply with this ethical guideline (Please see Appendix D).

4.11.3. Confidentiality, privacy, and anonymity

Another way to protect participants is through confidentiality, privacy, and anonymity, which are the primary focus of research ethics (Chambliss & Schutt, 2013:53). In the current study, the researcher considered how to protect the participants from harm when their thoughts, actions, or attitudes are made public (Carey, 2012:102). Participants were informed that, there was no disclosure of their personal information

without their consent. The researcher-maintained confidentiality by not revealing the foster parents' names. This was accomplished by employing numerical codes to replace the participants' real names so that their data cannot be linked to them.

Researchers should be cautious while obtaining or uploading research data online, especially if the material gained may be detrimental (Information Resources Management Association, 2015:270). Confidentiality entails that the researcher does not disclose the participants' information without their permission (Fain, 2017:37). According to Ross (2012:152), confidentiality is a mechanism that protects the privacy, desires, and expectations of participants so that they are not exposed. By not exposing or disclosing information without the participants' consent, the researcher maintains keeps all information secure and safeguards the privacy of the data sources. For the current study, the researcher ensured that no information about the participants was linked to their identities in any way when releasing the findings. In addition, interviews with foster parents were conducted in a room where no one could hear any of the information that was discussed.

4.11.4. *Data management*

Data management is when the researcher has filed the materials to make them easily retrievable and replicable. Researchers should make every effort to guarantee that all research data was handled with care and confidentiality (Stevens, 2013:19). Gajjar (2018:14) also stressed that sensitive records should be kept in a safe location with limited access and stripped of identifying information. Researchers must create a good system to preserve and organise their interview data, otherwise, managing information on individuals, places, events, locations, and reflections becomes difficult (Aurini et al., 2016:113).

In the current study, the researcher kept the research materials in a secure cabinet and ensured that the documents on the computer were password-protected. The researcher obtained participants' consent to use an audio recorder and a notepad to collect data for this study. Participants were also informed that the audiotapes, notebooks, and transcripts would be coded to conceal their identities. To preserve the privacy of the participants, the researcher retained all documents, including audio recordings, written notes, and transcripts, in a secure location. In addition, the researcher informed the participants that the inputted data would be password-

protected and saved on the researcher's laptop. In this case, the plan was to limit information access to the researcher, the promoter, and the independent coder, as indicated to participants.

4.11.5. *Avoidance of harm*

The researcher went to great lengths to safeguard participants from unjustified interference, pain, humiliation, suffering, discomfort, emotional trauma, and other types of traumas (Stevens, 2013:19). The risk of harm is reduced by carefully arranging the study procedure to conduct ethically sound research (McKellar & Toth, 2016:2). The researcher must be aware of both visible and unseen warnings and keep an eye on them during the study because they may have an impact on the volunteers' psychological well-being. In most situations, research participants are asked to reveal beliefs or personal characteristics that they believe are unpopular or demanding, such as welfare payments and poor income, because disclosing such information makes them feel threatened or uncomfortable.

4.11.6. *Beneficence*

According to Chambliss and Schutt (2013:43), beneficence entails minimising potential damage while maximising benefits. Vilma (2018:22) defined beneficence as the commitment of a researcher or scientist to maximise benefits for participants while minimising their risk of exposure to harm. Beneficence is ethical conduct that encourages the researcher to act in a way that benefits participants while promoting their welfare and safety. Participants were informed about the benefits that they were going to receive from participating in the study before agreeing to participate.

4.12. Limitations of the study

According to Theofanidis and Fountouki (2018:156), limitations in a study are frequently out of the researcher's control. However, they should be made clear so that a complete study can be seen (Bachman & Schutt, 2014:14). This is regarded as shortcomings that are encountered by the researcher during the research process.

In this study, the researcher discovered a paucity of academic literature on foster parents' experiences, challenges, and coping strategies in and outside South Africa. This is because there is scarcity of scientific literature. Therefore, it was difficult to

compare the current study's findings to those of other similar studies. However, the researcher made a concerted effort to situate the current study within the South African, and broader African setting.

The study adopted a qualitative approach which focused on data quality over quantity. Kagiso, South Africa, was chosen as the study site. All research participants voluntarily agreed to participate in the study. Resultantly, the researcher was limited to a small sample size. Therefore, this study's findings cannot be generalised to all people living in South Africa. This limitation could have been partially addressed if the study recruited a bigger sample to represent the whole GP. This would have enabled the collection of a more in-depth data to reveal the experiences, challenges and coping strategies of foster parents raising teenage foster children. The data collection was also limited by the participants who participated in the study in terms of their age as the majority of the participants were over 50 years of age, with about 6 of the participants being over 60 years of age.

Furthermore, the current study was constrained because the researcher could only conduct research on a small scale as only one person and in a limited amount of time and space. In addition, the researcher recognises that the empirical data is limited to experiences and phenomenologies of a small number of people that were interviewed, and the researcher's own phenomenology. Although the researcher is confident that this research will be useful to those who are interested in fostering within the society, she believes that more research in this area is required because times, circumstances, and personal experiences change.

4.13. Reflexivity of the study

As described by Chan, Fun, and Chien (2013:3), reflexivity refers to "the key mental activity that helps us detect potential impacts throughout the research process." Reflexivity is defined as "a conscious process of uncovering latent conflicts and assumptions/ideas/beliefs with the objective of liberating self, others, reality, and context thinking and action" (Kalu, 2019:97). Reflexivity helps researchers become more aware of their own biases and prevents them from influencing the accuracy or credibility of their findings (Berger, 2015:221). The researcher is the primary tool in a study, therefore, it is impossible to achieve total objectivity (Chan et al., 2013:3).

While being reflexive, in the current study, the researcher had to mentally prepare herself before beginning this study (Chan et al., 2013:4). Throughout the inquiry, the researcher encountered a variety of situations. The research also assisted the researcher in recognising her own strengths and shortcomings, such as task procrastination and the ability to rapidly acquire research concepts and methods.

Furthermore, through this study, the researcher reflected on her own experiences and knowledge. Based on her background and knowledge concerning the researched topic, she did not have many expectations from this study. The researcher is a registered social worker with eight (8) years of field experience in foster care. She was reflexive by being conscious on her feelings. The researcher used a field journal to practice reflexivity, to ensure that her background, perceptions, and interests did not alter the data's reliability. The researcher also engaged in self-reflection to evaluate if her assumptions about the study were correct. The researcher also had some takeaways from the study, that she could utilise in the future. These include the need to detach oneself from the study to completely appreciate the research and its findings.

CHAPTER 5: PRESENTATION OF THE RESEARCH FINDINGS

5.1. Introduction

This chapter presents and discusses the study's findings from this study that aimed to explore the experiences, challenges, and coping strategies of foster parents who are raising teenage foster children. To achieve the goal of the study which was; "to develop an in-depth understanding of the experiences, challenges and copying strategies of foster parents raising teenage foster children", the data that was collected through semi-structured interviews is used to discuss the findings, along previous studies. The specific objectives of this study were as follows:

- To explore and describe the experiences, challenges and copying strategies of foster parents raising teenage foster children.
- To describe the challenges, experiences and coping strategies of foster parents raising teenage foster children.
- To draw conclusions and make recommendations on foster parents' experiences, challenges, and coping strategies of raising teenage foster children.

5.2. Biographic profile of the research participants

Prior to collecting data, the researcher chose the following inclusion criteria for the selection of participants:

- Foster parents who were raising teenage foster children.
- Foster parents who were experiencing challenges in raising teenage foster children.
- Foster parents who are registered in the data base of the DSD and are raising teenage foster children, through the court order.
- Foster parents who were willing and available to participate in the study.

The focus of the study is on the foster parents' experiences, challenges, and coping strategies of raising teenage foster children. Therefore, the teenage foster children

were not included as participants. Participants in this study consisted of 14 foster parents from Kagiso Mogale city Municipality, who were experiencing challenges in raising teenage foster children. Table 5.1 below is a summary of the biographical information of this study's participants. The table describes the following: participants' age, gender, marital status, employment status, ethnicity, race and number of foster children. To ensure confidentiality and anonymity numerical codes were used in place of original participants' names.

Table 1: Profile of the research participants

No	Age	Gender	Marital status	Employment status	Ethnicity	Race	Number of teenage foster children
1	66 years	Male	Widower	Pensioner	Black	Tswana	1
2	43 years	Female	Single	Unemployed	Black	Tswana	1
3	44 years	Female	Single	Unemployed	Black	Zulu	2
4	62 years	Female	Single	Pensioner	Black	Zulu	1
5	54 years	Female	Widow	Unemployed	Black	Tswana	1
6	69 years	Female	Single	Pensioner	Black	Tswana	2
7	50 years	Female	Single	Unemployed	Black	Tswana	1
8	45 years	Female	Single	Unemployed/injured at work	Black	Tswana	2
9	63 years	Female	Single	Pensioner	Black	Tswana	1
10	55 years	Female	Married	Unemployed	Black	Zulu	1

11	65 years	Female	Married	Pensioner	Black	Zulu	2
12	56 years	Female	Married	Unemployed	Black	Tswana	2
13	40 years	Female	Single	Unemployed	Black	Venda	1
14	82 years	Female	Widow	Pensioner	Black	Tswana	1

5.2.1. Age

The above participants' biographical information was added in this study to help in understanding the foster parents' personalities. Le, Sakaluk, Day, and Impett (2018:2) assert that parenting styles can be influenced by a parent's personality. The participants' ages were distributed as follows: there were four (28.5%) 40-49 years, another four (28.5%) were aged 50-59 years, the majority (five [36%]) of the participants were aged 60-69 years, and the least, one (7%), participant was aged 80-89 years. The category 70-79 did not have any participant. The following graph visualises the age distribution of the participants:

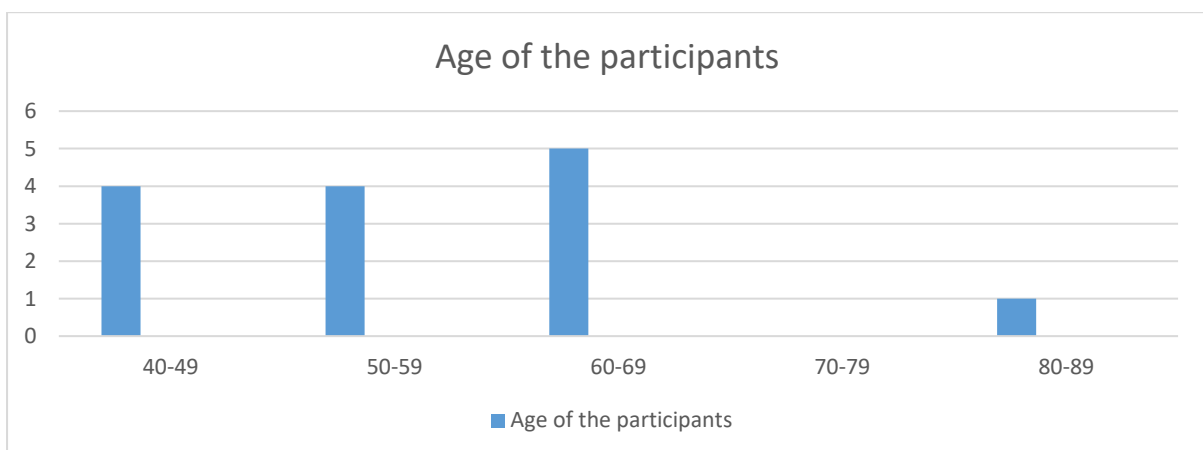


Figure 1: Age of the participants

In terms of the age of the participants, a cross sectional design that allows the people of various ages to be investigated at the same time was used in this study (Shaffer & Kipp, 2014:29). This demonstrates that age may affect the study's conclusions because different ages may lead to different experiences. Furthermore, participants'

ages were taken into consideration in this study because parent's age may have an impact on their parenting style (Le, Sakaluk, Day, & Impett, 2018:3).

Overall, participants' ages ranged from 40 to 82 (Tablet 5.1). Thus, their ages ranged from adults to elderly people, indicating that they had attained a certain level of maturity. In general, an adult is responsible, mature, self-supporting, and fully integrated into society (Tagore, 2022:18). Tagore (2022:18) argues that when people age, they experience a loss of energy and a decline in their physical and financial resources, which can result in dependency and insecurity. The foster parent's health and capacity to care for an active adolescent may be impacted by their age (Rosa, 2013:5).

5.2.2. Gender

Concerning gender, one (7%) of the total participants was male and the majority (13 [93%]) were female. This is in line with Statistics South Africa, which states that in the overall population, there are more than 50,8 percent females, and more than 49,2 percent male (Stats SA, 2022:16). Traditionally, mothers — rather than fathers — are expected to take on the role of primary caretaker. Fathers are problematically frequently socialised to express their masculinity, which may limit their interaction with their children (Rushing & Powell, 2015:410).

Males are equally capable of active involvement in childrearing and serving as mothers' assistants (Rehel, 2014:112). In Don, Biehle, and Mickelson (2013:1125), fathers are also seen as considerate of a positive co-parenting relationship. The current study focused on the foster parents' experiences, challenges, and coping mechanisms of raising teenage foster children than only on foster fathers raising teenage foster children. Therefore, the conclusions are likely to be biased against women or foster care mothers. The gender of the participants is presented in the pie chart below:

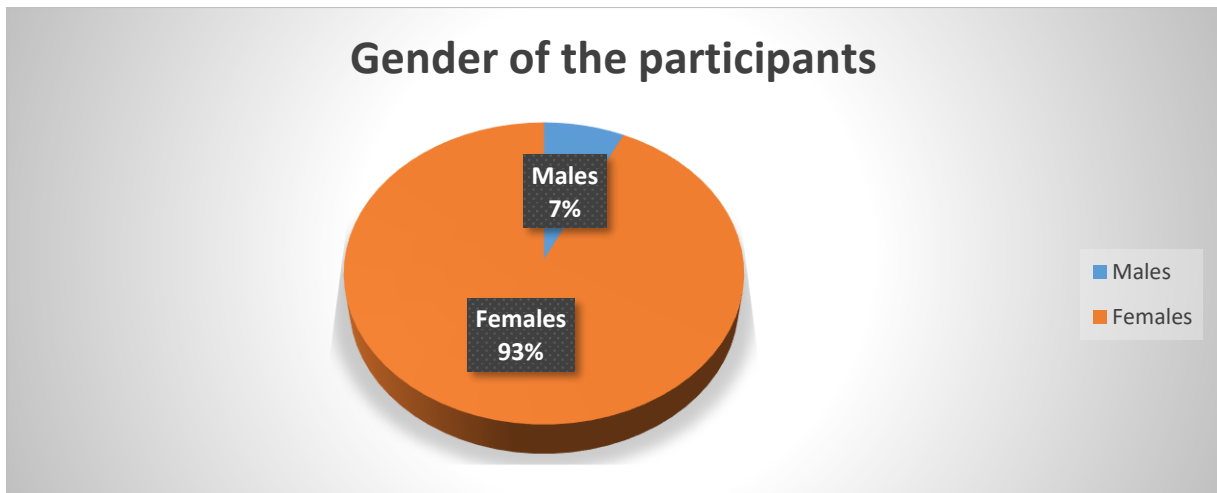


Figure 2: Gender of the participants

5.2.3. Marital status

According to Le, Sakaluk, Day, and Impett (2018:2), cultural standards have a significant impact on parenting. Eight (57%) participants in this study stated that they were single at the time of the study. Being a single parent entails handling everything on your own. But being a single parent may mean that one must request formal, ongoing aid from outside sources or unofficial assistance from family or relatives to support them in caring for children (Manap, Kassim, Hoesni, Nen, Idris, & Ghazali, 2020:112). Furthermore, finding a healthy work-life balance as a single mother requires a long and difficult effort. As a result, single parents may struggle to juggle their various tasks and roles while being able to appropriately foster parent (Manap, Kassim, Hoesni, Nen, Idris & Ghazali, 2020:112).

Two (14%) of the fourteen participants were female widows, while one (7%) male participant was a widower. According to Abdulla's (2019:536) study, when parents are left alone after their spouse dies or divorce, they will have to deal with the lack of spousal support. It also becomes difficult for them to handle increased responsibility that comes with being a parent or guardian in the absence of their spouse. In the current study's sample, there were three (22%) married participants. Children who have both parents are more likely to learn about bad behaviour outside the home, typically from classmates who act audaciously to impress others (Mashamba, 2020:75). The marital status of the participants is described in the pie-chart below:

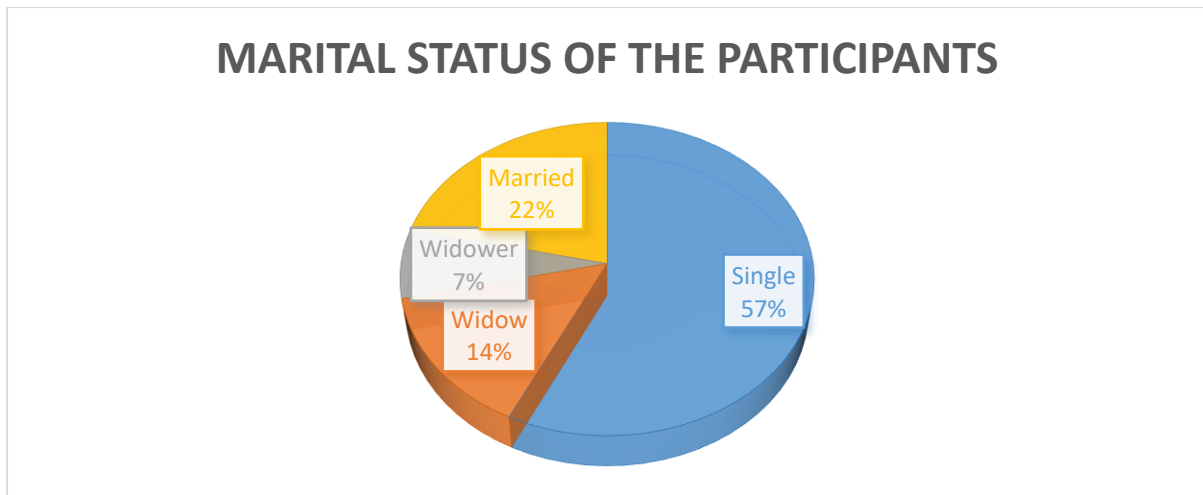


Figure 3: Marital status of the participants

5.2.4. Employment status of participants

The participants' biographical information also shows their individuals' work or employment status. There is a necessity to incorporate participants' occupation since, according to several authors, parenting can be influenced by external elements such as socio-economic circumstances (Le, Sakaluk, Day & Impett, 2018:40). Of the 14 participants, eight (57%) were unemployed and six (43%) were pensioners. Financial expenses associated with parenting can cause stress if parents are unable to meet their responsibilities (Nelson & Uecker, 2018:1771). According to Kaiser, Li, and Pollmann-Schult (2018:2), parents' socio-economic status can have an impact on their children's behaviour.

Furthermore, according to Cottee and Roman (2014:27), parents who live in disadvantaged socio-economic conditions are more likely to have a limited relationship with their children. These parents frequently spend little time with their children. Contrarily, wealthy parents can afford to enrol their children in best schools and place them in safe neighbourhoods (Strohschein & Gauthier, 2018:233). On the other hand, Augustine (2014:238) argues that working parents may also find it difficult to participate in good parenting practices like helping their children with their school tasks. It is common practice for participants in many research projects to contribute information on their experiences about their situations, which makes it a crucial biographical element (Wolgemuth, Erdil-Moody, Opsal, Cross, Kaanta, Dickmann, &

Colomer, 2014:3). The employment status of the participants is illustrated in the bar graph below:

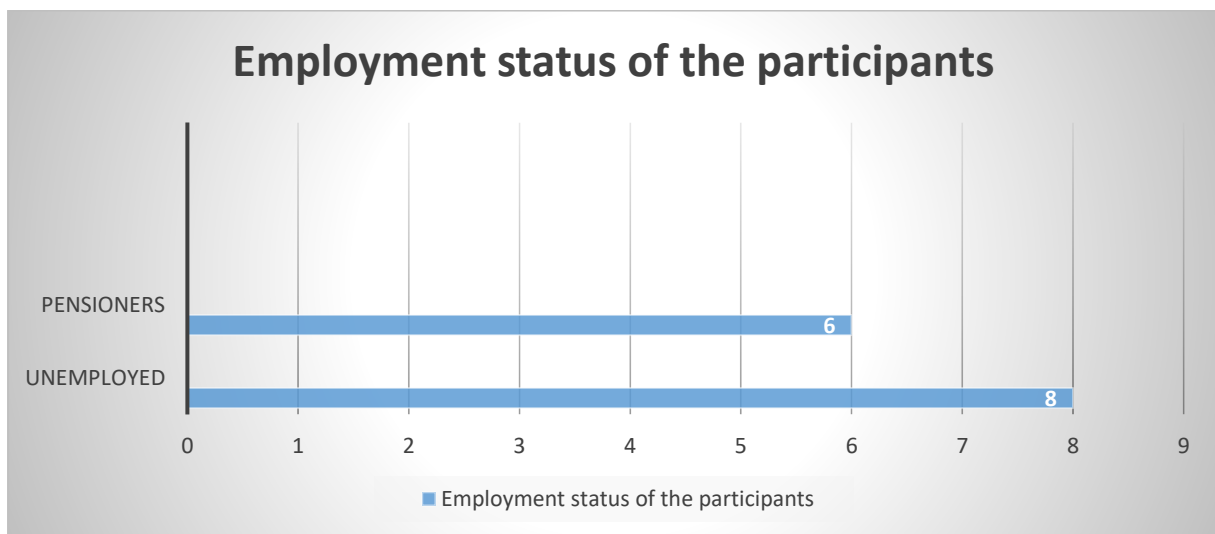


Figure 4: Employment status of the participants

5.2.5. Race and ethnicity

All (100%) of the current study's participants were Black Africans. This corresponds with the majority of the demography of the people who live in the town of Kagiso, Mogale city Municipality, who are nearly all Black Africans. Since this was not a requirement for inclusion in the study, the researcher did not select the participants based on their ethnicity. However, the presence of other ethnic groups made it possible to explore the studied topic through a variety of cultural lenses. As such, most (nine [64%]) of the participants spoke Tswana. Four (28.5%) participants were IsiZulu speakers, and only one (7%) participant was Venda speaking. All participants reported that they could comprehend and speak in English, despite Tswana and IsiZulu being the most spoken languages. The race and ethnicity of the participants is presented in the table below:

Table 2: Race and ethnicity of the participants

Race	
Black Africans	14
Ethnicity	
Tswana	9
IsiZulu	4

Venda	1
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5.2.6. Number of foster children

For the current study, participants were foster care parents to a maximum of two teenage foster children. Most (nine [64%]) participants were foster parents to one teenage foster child each. Five (36%) of the participants were foster parents of two teenage foster children each. Statistics from accessible figures in South Africa show that, as of mid-2015, 18.6 million (34% of the then country's total population) South Africans were under the age of 18 years. Out of the 18.6 million, 3.1 million were orphans, accounting for 17% of all children (Hall & Sambu, 2017:102). The number of foster children under each foster parent are presented in the table below:

Table 3: Number of teenage foster children

Number of foster parents fostering one teenage foster child	9
Number of foster parents fostering two teenage foster children	5

5.3. Presentation and discussion of key themes

This section uses themes and sub-themes to present and discuss the study's findings. The study's conclusions were based on the data that was gathered from 14 participants who gave their consent to participate in this study. The researcher used semi-structured interviews with open-ended questions to gather data. The researcher then transcribed and analysed the data in accordance with Tesch's eight-steps as highlighted in Creswell (2009). The researcher discovered similarities between her coding and that of the independent coder. The researcher chose to combine the two reports because the results were largely comparable after consulting the supervisor. The following table describes the seven main and 28 sub-themes that emerged from data analysis:

Table 4: Themes and sub-themes

Themes	Sub-themes
Theme 1: Foster parents' experiences.	1.1 Hardships. 1.2 Stress.
Theme 2: Challenges faced by foster parents.	2.1 Coming home late. 2.2 Backchatting. 2.3 Friends' influences. 2.4 Being stubborn. 2.5 Engagement in sexual activities. 2.6 Teenage foster children's laziness. 2.7 The love of expensive materials. 2.8 Lack of finances to meet basic needs. 2.9 Substance abuse. 2.10 Biological children not accepting foster children. 2.11 Violence towards other children. 2.12 Lack of support
Theme 3: Foster parents' coping strategies.	3.1 Prayer 3.2 Acceptance. 3.3 Talking to the teenage foster children.
Theme 4: Available social support services.	4.1 Family members.
Theme 5: Types of social support services suggested by foster parents.	5.1 Counselling for teenage foster children. 5.2 Counselling for foster parents. 5.3 Financial support 5.4 Educational support.
Theme 6: Foster parents' recommendations for social workers.	6.1 Social workers to provide timeous home visits.

Theme 7: Foster parents' recommendations for other foster parents.	7.1 Consulting social workers. 7.2 Treating all children equally. 7.3 Open conversations. 7.4 Love and respect. 7.5 Patience.
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5.4. Foster parents' experiences

Participants for this study reported various reasons for choosing to be foster parents of teenage children. Findings suggested that by the time they were interviewed they had cumulated a wide experience on raising teenage foster children. Most participants for this study reported to have experienced various hardships and stress in raising teenage foster children. Overall foster parents' experiences of hardships and stress are discussed below.

5.4.1. Hardships

Most participants indicated that, raising teenage foster children was difficult. The highlight of their experiences was associated with the children's stage of development – teenage. Participants associated teenage foster children with: laziness, back chatting, disrespect, demanding foster care grant, and coming home late at night. The following are some of the quotations from foster parents:

"It is very hard to raise a child who does not have a parent or whose both parents are deceased" (Participant 1, 66 years old).

"It's not easy, and it's hard, most especially when you don't have support from the other family members. Teenage boys are so demanding, and they always want expensive things or materials and their adolescence stage the one that gives us problems. They become more difficult when they are under foster care, and sometimes they demand all their foster care grant to be given to them" (Participant 2, 43 years old).

Sentiments like those of Participant 1, and Participant 2 above, were shared by Participant 4, below:

“It’s hard, because sometimes it’s like it clicks to his mind that I’m not his biological mother. However, sometimes we can be happy and rejoice at home. Anyway, I do understand that, and I got used to it because he’s not the first child that I’m fostering or raising, who doesn’t have parents. What I like about myself is that I don’t have time to beg a child and all my children are raised like that. I don’t discriminate him; I want him to be like my biological children. Raising a child like this is very hard, because sometimes when you tell him to do something... I don’t know if it’s because he forgets or what, especially now when he’s a teenager its hard but I thank God that at school he’s doing well” (Participant 4, 62 years old).

Participant 6 also stated that:

“Sometimes it’s too much. It’s too hard. you are always reprimanding them. If you tell them to remove something here, you’ll find it there, being not removed. It’s hard in such a way that those who came when they were young, they understand” (Participant 6, 69 years old).

In addition, Participant 11 who is a 63-year-old married pensioner said:

“It’s hard I don’t want to lie. There are times where it’s tough, when they do things that are out of line, you end up crying” (Participant 11, 63 years old).

Participants for this study chose to be foster parents of teenage children, they contacted a government agency or foster care organisation, and went through the necessary background checks, training, and preparation. According to Bird (2015:16), due to the scenarios and circumstances that lead to children being placed in out-of-home care, foster parents typically want to better the child's life. However, when they feel powerless to make a difference in the child's life, they may experience feelings of distress, remorse, and failure. As alluded by Cooley, Thompson, and Newell (2018:2), it is important to understand foster parents' experiences. The current study's findings show that foster parents experience hardships owing to problem behaviours of teenage foster children. In a study conducted by Rosa (2013:36), foster parents reported that most teenagers in foster care have problems with authority and they often lack respect for household rules.

5.4.2. Stress

Previous research has demonstrated that some foster parents incur significant emotional stress because of caring for children with high behavioural and emotional needs (Bird, 2015:17). Bryman (2012:401) highlighted that the stress is on the understanding of the social world through an examination of the interpretation of that world by participants. Participants in the current study reflected on their emotional experiences owing to the care that they offer to teenage foster children. Several participants reported that raising a teenage foster child was stressful as shown in the following quotations:

“Here are they, (pointing at a room they are at), they are the ones who causes headaches, yes, it’s stressful. I don’t want to lie……. “My mother told me that if she can die, I must raise them, but the way things are, raising them is stressful” (Participant 8, 45 years old).

In addition, Participant 10 expressed herself as follows:

“I am very stressed; I don’t want to lie. Sometimes I use my powers to talk so that this other one must not hear that I was talking to the other one” (Participant 10, 55 years old).

Participant 3 also found raising a teenage foster child as stressful, and she reported the following:

“It’s challenging, overwhelming, and draining, especially when you have children who are difficult to raise. In most cases you end up regretting some of the decisions you have made for example, accepting an offer to foster a child. Even that main decision to say let me foster, at some point you end up saying shouldn’t I have done that, but it’s not always like that because children are children at the end of the day” (Participant 3, 44 years old).

Stress is an expected and common experience when people are doubtful of their ability to handle the demands of their environment (Patnaik, 2014:20). High levels of stress that come with parenting are a significant environmental risk factor that has a history of parent depression (Neece, Green, & Baker, 2012:3). Furthermore, it is hypothesised that parental stress directly correlates with child behavioural problems. This is because

it is believed that stress is a causal agent of child behavioural problems. According to Cronin and Becher (2015:3), in addition to overseeing children's development generally, parents may experience stress that is related to issues such as the availability of social support and economic hardships. The stress directly related to overseeing children's development can manifest owing to immediate demands of providing a child with food, comfort, attention, and the need to balance a child's needs with parents' own needs.

Due to the negative experiences that foster parents encounter over time they may regret the decision of fostering. This is because they are the ones who spend most of the time interacting with the foster children. Noteworthy, the failure of a foster care placement may also stem from challenges that are related to the carers' biological children. Foster parents experience empathic tiredness and high levels of stress owing to their inability to deal with these behaviours due to the lack of therapeutic assistance and skills (Hannah & Woolgar, 2018:185).

As shown by Rush (2018:70), due to their involvement in and responsibility for the foster care system, foster parents suffer stress that biological parents do not. Some of the difficulties that, according to the current study's findings, are experienced more by foster parents include, managing their own lives while fostering, creating a link with their foster child, and addressing the requirements of the foster care agency. The high cost of care for foster parents lowers foster parent retention and causes placement breakup (Khoo & Skoog, 2013: 255).

5.5. Challenges faced by foster parents

Foster care parents' duties include caring for everyday physical health and welfare needs of orphaned, vulnerable, and at-risk children who are placed in foster care. Foster parents hope to support foster children as they improve their own lives. However, the current study's findings clearly suggest that foster parents of teenage children experience numerous and sometimes overwhelming obstacles. The challenges that were experienced by foster parents in raising teenage foster children are highlighted in the following sub-themes:

5.5.1. Coming home late

One of the challenges that were commonly reported by foster parents was that teenage foster children tended to come home late. Participant 1, who was a 66-year-old widower explained the following:

“He doesn’t sleep at home, and he comes at home whenever he feels like or at the time he likes. Sometimes a week can pass by without seeing him”
(Participant 1, 66 years old)

On a similar note, Participants 7 also shared her challenges as a foster parent, below:

“On Friday he came back home at 11pm. I have made him aware that at 6pm he changed his school clothes or uniform to private clothes and went out, he said, I’m coming back now, then he came back at 11pm” (Participant 7, 50 years old).

In addition, Participant 8 explained the challenge that she experienced of her teenage foster child coming home late:

“I told the foster child that if something can happen while she is there at the Shebeen, I won’t get involved in that yard. Whether she gets hurt or what, I won’t get involved because I have reprimanded her and told her that there are Sotho’s who are killing and shooting at people. Even us as adults, we are afraid to walk in the street but them they come back around 12 am, still from the Shebeens” (Participant 8, 45 years old).

Furthermore, Participant 3, indicated that fostering many children was a major challenge, compared to fostering one child. Her explanation is captured in the quotation below:

“They are a lot if there are two foster children under your care. I’ll be honest with you, the child who gives me trouble is N. She always comes home late, and she is good in bad mouthing...” (Participant 3, 44 years old).

Participants frankly reported the above challenges. Foster adolescents typically return late at night or do not come back home. Therefore, foster parents fear being held accountable by the state or social workers if something were to happen to their foster

children. In the current study, most participants acknowledged facing significant challenges during fostering. This finding is consistent with previous studies' findings where in which foster children are subject to peer pressure which forces them to go out late at night with friends and sometimes come back later (Mnisi & Botha, 2015:232; Mosemege, 2017:189). Foster parents reported that the extent to which fostering can be emotionally draining can contribute to burnout (Conway, 2012:25).

5.5.2. Back chatting

Findings suggested that foster parents worry that there is something wrong with their teenage foster children, when they noticed a sudden behavioural change. They believed that their foster teenagers' behaviour had dramatically changed such that they now backchat when speaking to them. The following quotes show this finding:

Participant 3 shared the new behaviour of her teenage foster child by saying, *“She back chat, and she beats other children”* (Participant 3, 44 years old).

Participant 6 added the following:

“Children seemed to have changed because when you reprimand them back then or in the past, they wouldn't back chat, but these days they back chat to you” (Participant 6, 69 years old).

As highlighted by Mmusi, Malan, and Herbst (2022:2) frequently, adolescents lack the ability to control their emotions such as anger and are more likely to engage in risky behaviour. According to Khoo and Skoog (2014:257-258), disruption and collapse of foster care settings are primarily caused by foster children acting out in an unpredictable manner. Additionally, Smith's (2014: 52) findings suggest that all foster parents struggle greatly with managing their foster children's behaviours.

5.5.3. Friends' influences

This study's participants expressed a concern about their foster children being badly influenced by their friends. They expressed their dissatisfaction with their foster children's friends. However, participants such as Participant 12 felt that foster teenage boys were behaving better compared to teenage girls, as she explained below:

“A teenage boy is much better. Teenage girls seem to be lazy, and they like spending time with friends a lot” (Participant 12, 56 years old).

Participant 8 (45 years old) added that she always reprimanded her foster children’s friends, *“..... and also friends, they like friends and I don’t like it”*. Participant 7 also said that her teenage foster children tended to spend too much time with friends:

“When I reprimand her, she listens for a while or for days after some couple of days she does it again. Her problem again is friends; she likes friends too much” (Participant 7, 50 years old).

Based on the above quotations, it can be concluded that adolescents or teenagers in foster care face a special set of difficulties since they must manage old connections, deal with the pressures of adolescence, and have little time to prepare themselves for the future. Problem behaviours such as emotional issues, anger, and running away from home, are regularly reported as adding to foster parent’s stress and teenage foster children potential placement disruptions (Geiger, Hayes, & Lietz, 2014:5).

5.5.4. Being stubborn

Some of the participants reported being worried about their foster children's obstinacy. Waini (2015:86) concurs by adding that teenagers may exhibit uncooperative, irritable, or abusive behaviour towards their parents and others. From the current study, Participant 7, described her experiences with her teenage foster child, below:

“He sometimes becomes difficult, and stubborn”. He goes to school but at school they complained about him being stubborn and not listening to the teachers” (Participant 7, 50 years old).

Participant 12 (56 years old) added the following:

“When I reprimand her, she listens for a while or for days after some couple of days she does it again”.

The relationship between parents and teenagers is important because it is key to a functional family (Clark, Donnellan & Robins, 2016:1). Mosemege’s (2017:143) study also revealed a challenge where some foster children would stubbornly display unacceptable behaviours. For example, when some foster children are requested to

complete some chores, they hesitant to complete them. Emovon (2019:266) argues in a similar manner that, as part of their everyday social interaction in their families, children are expected to perform or participate in the house chores. Therefore, when foster children refuse to perform their expected duties on home chores, they will be demonstrating their lack of compliance with family membership requirements.

5.5.5. Engagement in sexual activities

Most participants reported that their foster teenager children had started partaking in intimate or romantic relationships. Participant 3 viewed it as problematic that her teenage foster child had started entering intimate relationships at a teenage. She said, *“Then obviously dating. Yes, she’s a bit better right now”* (Participant 3, 44 years old).

Participant 7 (50 years old) also disappointedly said,

“My child was showing a picture of him kissing a girl at school”.

In addition, Participant 8 reported that her teenage foster child had started spending nights at her boyfriend’s home. The following is a verbatim quotation that was reported by Participant 8 (45 years old):

“This other one, (pointing at her at the kitchen), it is only now that she’s coming home. She’s coming from the boyfriend as we speak”.

The above verbatim quotations show foster parents’ frustrations and disappointments about their foster children having started participating in intimate relationships at an early age. Some of the foster parents voiced that, instead of their foster children concentrating on their schoolwork they were focusing on intimate relationships. This negatively affected their academic performance. Smith (2017:3) argues that the lack of assistance, direction, supervision, and socialisation opportunities for young people in care and custody of the child welfare system raises concerns about their ability to acquire skills that are necessary to successfully transition to adulthood. Smith (2017:3) further mentions that it is impossible to overstate the importance of parent-child interaction for teenage development. Less dangerous sexual conduct has been linked to a constructive, open, and healthy communication between children and parents, about sex.

According to Child Trends (2012:2), adolescence as a developmental phase, is a crucial period for adults to mentor their children's decision-making to prevent them from partaking in risky behaviours such as using drugs or early sex debut. Teenage children may make judgments regarding sex and friendships without access to necessary resources and reliable information (Nkosi, 2020:103). Previous studies have shown that adolescents in foster care engage in riskier sexual activities, putting them at a higher risk of early pregnancy and childbearing. These risky behaviours include early sex debut and inconsistently utilising contraception (Mosemege, 2017:146). Foster parents worry about the problem of early sex debut because this may lead to problematic teenage pregnancy or contracting sexually transmitted infections (STIs).

5.5.6. Teenage foster children's laziness

Some of the participants reported facing a challenge of teenage foster children being lazy. When speaking about this challenge, Participant 12 (56 years old) said, "*The teenage girl is lazy*". In addition, Participant 3 (44 years old) reported:

"It's been long since fighting about the dirty clothes or laundry (pointing to clothes or dirty washing). I've been fighting about the kitchen for a long time.....I'm sure when you entered the house, you were greeted by plates, you know, it's those things, there's attitude, there's is back chatting, there's disrespect, there is..... it's a lot".

Foster parents in the current study suggested that, mostly foster teenage girl children were lazy. They were reported to be lazy in doing household chores and preferred to spend their time playing with their friends. There are also previous studies where foster parents reported experiencing some problems that were related to the laziness and carelessness of their foster children (Mosemege, 2017:160; Roux, Bungane, and Strydom, 2014:5).

5.5.7. The love of expensive materials

Most of the participants reported facing a challenge of their foster children demanding that they buy them too expensive clothes than they could afford. Participant 14 reported that her teenage foster child demands expensive clothes with known brands. She explained below:

“You see the challenge that I have is that this child likes clothes that are expensive. If you can buy her a sneaker, she first looks at it and she won’t wear it if it is not from a well-known brand. I will force myself to take that sneaker back to the shop and take the one she wants or demands. I no longer go to the shops to buy for her, instead, I go with her so that she chooses what she wants” (Participant 14, 82 years old).

Participant 13 added similar sentiments below:

“The other challenge is that you can’t do things for him, you know how kids are, if his friend has a new sneaker, he will come demanding that same sneaker, and mind you, I can’t afford to buy sneakers from shops such as Sportscene. I can only buy a sneaker from Mr Price or Pep store; I can only buy what I can afford and that’s a challenge because he’s a teenager and he is controlled by peer pressure” (Participant 13, 40 years old).

Participant 7’s teenage foster child did not want to wear cheap clothes anymore, as she explained:

“He no longer wants cheap clothes; he wants expensive clothes, and they are expensive; at the same time, he wants food” (Participant 7, 50 years old).

Furthermore, Participant 10 expressed her opinion as follows:

“The other day, I think it was last year October, when I was in Mpumalanga I was retrenched at work, and I went home to build rooms so that I can get income because the foster care grant sometimes delays and it’s not enough because he needs a lot of things, and he doesn’t want any clothes without label or big names” (Participant 10, 55 years old).

She added the following:

“Last year when I received the foster care grant around this time, on a black Friday when I arrived there, he wrote two things, he said he wants cellular phone and clothes. We wanted to buy him a bed, but we didn’t. He also wanted clothes and to make an application for an Identity Document (ID). He went to

Game store where he bought a cellular phone costing about R2000.00. I paid for it because there was nothing I could say or do. I had to try to make sure that he is happy” (Participant 10, 55 years old).

Most foster parents reported that they could not afford expensive products because the foster care grant was not enough to cater for all the needs of their foster children. Foster children were reported to force their foster parents to buy expensive products – for the children to remain impressed. Six of the fourteen participants were pensioners who depended on old age grant. The rest of the foster parents were unemployed. These employment statuses of the foster care parents made it difficult for them to provide the wants for teenage foster children. Foster parents reported that their teenage foster children did not accept or understand the financial status of the family. Inadequate training and support may be among these stressors and feeling that they had no one to turn to in times of crisis or difficulties in dealing with the diverse needs of foster children (Nkosi, 2020:62).

5.5.8. Lack of finances to meet basic needs

When foster parents were asked about the difficulties that they were experiencing, lack of money was one of the main challenges that they reported. Eight participants were unemployed, and the rest of them depended on the old age grant. The study’s findings revealed that the unemployment of foster parents negatively affected foster care placements. Almost all participants reported having financial difficulties owing to being foster parents and unemployed. Below, Participant 7 suggested that the foster child grant needs to be increased, to ensure that foster parents meet their foster children’s needs:

“Maybe if you can increase the foster care grant, because I don’t want the case where when he might go to family members and ask money from them” (Participant 7, 50 years old).

Participant 8 added:

“The older one was supposed to go to university, and we didn’t have money because the money I’m earning is not enough, all it is spent for, is to buy them food in the house” (Participant 8, 45 years old).

The following participants also shared their views that were in relation to those of the above participants, on the lack of finances to cater for the basic needs of teenage foster children:

“I don’t want her to lack food and to struggle in the spirit, everything that she wants I want her to get them. I don’t want her to struggle and sometimes I can’t afford because the foster care grant is too little to pay for everything” (Participant 9, 63 years old).

“I have a worry that next year he won’t get the foster care grant anymore. Therefore, I ask myself about the step I must take about this child, because I’m not working, and my husband is not working either” (Participant 10, 55 years old).

“The support that I have is foster care grant only” (Participant 12, 56 years old).

“Like finances, because sometimes he would come to me requiring something and you find that there’s no money and you can see that he needs that thing. At least if there was support system from somewhere since the foster care grant is not enough. Where we are staying at Ext 8, we are renting, so the money I receive is not enough to cater for the foster child’s financial needs” (Participant 13, 40 years old).

“I don’t know what to say, if there was someone who can help me, I would ask for help from that person. I need the help of money because foster care is not that much” (Participant 14, 82 years old).

Sandstrom and Huerta (2013:18) argue that families with less financial security are more likely to experience material hardships. Yet the current study’s participants were from lower socio-economic backgrounds, and financial challenges were seen as one of the main challenges that the foster parents experienced. In Warwick (2013:69) lack of funds to meet children's financial needs are also cited as being a crucial challenge for foster parents to properly carry their caregiving responsibilities. Khoo and Skoog (2013:255) highlight that the high cost of care lowers foster parent’s retention and causes placement breakup. In the current study, while some foster parents were

unemployment, those who were recipients of the foster care grants reported that it was insufficient for the financial needs of raising a foster teenager.

However, Roelen, Karki, Clulow, Jones, Saksena, and Delap's (2016:14) study argued that the foster care grants in South Africa significantly aided foster parents in meeting foster children's fundamental household needs. Based on this argument, it can be said that the foster care grant is advantageous to South African households and communities. According to Roelen, Karki, Clulow, Jones, Saksena, and Delap (2016:14) the grant has significantly aided many communities that would have otherwise fallen into the poverty trap. They further argue that it helped prevent a scenario where children would need to be institutionalised due to a lack of support from home. In addition to meeting the basic requirements of foster children, the monthly grants provide some low-income families with a much-needed source of cash or financial income.

Evidence from the African continent demonstrates it is nations such as South Africa that have a strong foster care system where foster parents receive grants. To entice prospective parents, other nations in Africa and Asia, are building their foster care systems by also distributing a small amount of monthly stipends (Flagothier, 2016:27). Foster parents reported that, not having enough money to meet children's basic needs such as food, clothes, housing, school expenses, paying water, energy bills, and health, affected their expected role as foster parents.

5.5.9. Substance abuse

Some of the participants reported that teenage foster children's substance abuse is one of the challenges that she experienced. Participant 7 reported that, indeed her teenage foster child was abusing substances. She reported as follows:

"With lot of things. If you can see him when he smokes...but I know how to handle him. I keep quiet and when he's on his senses or asking something that's when I confront him...." (Participant 7, 50 years old).

"I told the foster child that if something can happen while she is there at the Shebeen, I won't get involved in that yard. Even us as adults, we are

afraid to walk in the street but then they come back around 12 am, still from the Shebeens” (Participant 8, 45 years old).

According to Mnisi and Botha (2016:226), some foster youth exhibit problematic and disruptive behaviours, such as substance abuse and improper sexual behaviour owing to mental health issues and traumatising experiences. Furthermore, smoking cigarette, dagga usage, and other drug use have been linked to having few close relationships (Hornor, 2019:617). This is in line with Hoeck and Van Hal’s (2012:11) findings that noted that behavioural changes are warning indicator that the teenager may be addicted to chemical drugs.

In addition, Han, Kim, and Lee (2016: 352) found that peers had a significant impact on a child’s likelihood of substance misuse since close friendships with those who use illicit substances can tempt someone who does not use drugs to start misusing them (Han et al., 2016:352). According to Dennis, Davis, Bernardo, and Kelleher (2017:294), drug addiction has a negative impact on a substance abuser’s physical health and affects their physical appearance. there are higher chances that they are caring for children who are either using or abusing drugs (Molepo & Delpont, 2015:154). Therefore, foster parents are forced to live in continual danger for their life because having a teenager that relies on substances contribute to stress and problems, mostly on their health (Smith and Estefan, 2014: 11). Waini (2015:86) added by saying that substance abuse contributes to the teenager’s behaviour as they end up not cooperating and rude to the people they are living with.

5.5.10. Biological children not accepting foster children

Foster parents own biological children and family are likely to be impacted by child placements in their house. The refusal of foster parents’ own children to accept teenage foster child was identified as a problem, that was explained by Participant 10, below:

“My biological son was born in 2001, the foster child was born in 2002, both in August. Therefore, my biological son because he’s the only child, we had the challenge, at first it was better, we accepted him and things got better, we took him as our own child and then my child accepted. My biological son when he was doing grade 8, he started to be against us. He said we favour the foster

child. I remember he was studying at Krugersdorp KHS. When he arrived on Saturday, he showed me that he has anger or is angry. He would beat the foster child..... He ended up attending sessions with the social workers in one of the welfare organisations and then he ended up taking a treatment for depression” (Participant 10, 55 years old).

Höjer, Sebba, and Luke’s (2013:5) study found that children and young people may feel that their parents are deeply interested in their fostering tasks. They claimed that the demands of fostering prevented their parents from giving them enough time and listening to them attentively. In previous studies, children and teenagers have occasionally expressed feeling abandoned by their parents and left out of the family. They understood the significance of the fostering responsibility and that their biological parents had to give foster children enough care, but yet felt excluded. According to Smith (2014:40), the effects of these encounters and difficulties lead to foster parents’ anger toward their biological children and a general desire to continue caring for them (Ntshongwana & Tanga, 2018:3). These changes create a family lifestyle that is not normal for biological children.

5.5.11. Violence towards other children

One of the participants of the current study reported that she was often concerned about the violent behaviour of her foster child, she said, *“She beat other children”* (Participant 3, 44 years old).

According to Jan and Husain (2015:1), bullying is an everlasting problem in the lives of school children. Whereas, according to Fox, Corr, Gadd, and Butler’s (2014:512) study, teenage relationships frequently involve shoving, slapping, smacking, holding someone down, punching, strangling, beating up, and hitting each other with objects. Children’s future usually incorporates their prior experiences. Hence, they may adopt violent coping mechanisms that coerce reluctant caregivers to respond.

5.5.12. Lack of support

People decide to become foster parents because they feel compelled to help local children who need care (Diogo & Branco, 2017:4). A study conducted in Turkey with 124 foster parents, shows that 76% of them viewed their role as a societal obligation

(Vural, Aral, Korukcu, & Korukcu, 2014:572). Foster parents in the current study also had a sense that they were helping the community by protecting the teenage foster children. However, they reported that they were not receiving support from the social service practitioners and family members, except the foster care grant they are receiving monthly. The following are the participants' quotations were they expressed a lack of support from social workers:

"I don't have any support; I only take the foster care documents to the social worker where I will talk with the social worker about the challenges, I experience in raising the teenage foster child. However, after the deliberations with the social worker, no action is taken. And besides that, I don't have anyone to talk to. I just leave everything to myself" (Participant 1, 66 years old).

"There's no support, not at all. I once went to my younger sister who took the other foster child. There is my elder sister as well who is at home, there is also an eldest, the first born from my mother, she's older, when you talk to her you can see that she's old. There is also my brother from Eswatini, I don't count him because in everything is like he doesn't care" (Participant 10, 55 years old).

"The support that I have is foster care grant only. There's no other support that I'm getting from anywhere" (Participant 11, 65 years old).

None whatsoever, my little brother is the one who helps me sometimes" (Participant 13, 40 years old).

In South Africa, foster parents are required to provide daily care for their foster children. However, Warwick and John-Langba (2016:1) observed that this responsibility implies tremendous work, which may be difficult and unpleasant. Unless sufficient support and help are provided to lessen the impact and effect of external and internal impinging variables, foster parents and their foster children may have detrimental experiences (Warwick & John-Langba, 2016:1).

Previous literature shows that there is often limited-to-no support (including from the biological family) for foster adolescent children (Child Trends, 2015:15; Nkosi,

2020:107). Most parenting assistance is offered to younger children aged up to five years. Interventions for parents of teenagers seem to be uncommon in low to middle-income countries (Child Trends, 2015:15). In the current study, most participants believed that their family networks would be a significant source of emotional and financial assistance. Previous research has found that, in some cases, food and other home supplies that are needed for children's care have not been provided when families were in desperate need (Du Plessis, 2015:37). This lack of crucial support has negative effects on the foster parents' physical, emotional, and social health. Foster parents' poor health also negatively affects their interactions with their foster children (Mnisi & Botha, 2016:239).

In addition, some foster parents lack training, readiness, and knowledge of their foster children (Octoman & McLean, 2014:9). Training and support for foster parents have been found to reduce their stress and improve placement quality. The training may focus on offering foster parents informing about their potential foster children's circumstances, any current problems, health conditions, race, culture, and sexual orientation (Octoman & McLean, 2014:8).

Additional difficulties that may lead to a lack of support for foster parents is that they are usually faced with inherent stigma and prejudice (Du Plessis, 2015: 48). Foster parents could benefit from support in form of appraisal, material (such as gifts), information (such as advice), and emotional (such as care and comfort) (Casale, Wild, & Kuo, 2013:3). In South Africa, the Children's Act 38 of 2005 mandate is that a designated and licensed social worker (registered with the South African Council for Social Service Professions) provides foster care and foster care services to foster parents, children, and the public. Noteworthy, previous literature has shown that foster parents usually feel unsatisfied with their role due to their undervaluation in the care system, because they are considered volunteers and have which limited access to support services (López & Del Valle, 2016:126).

5.6. Foster parents' coping strategies

Foster parents in the current study reported having to had developed coping techniques to assist them overcome the difficulties that they experienced upbringing teenage foster children. The following sub-themes discuss these coping strategies.

5.6.1. Prayer

Prayer as a reliance strategy was one of the main coping mechanisms, that was reported by some of the foster parents in the current study. Participants reported that they often used prayer as a source of strength to overcome the difficulties that they faced in relation to being foster parents of teenage children. They had faith that God was helping them to deal with the challenges of raising teenage foster children. The findings along this analysis are shown below:

“I don’t know what I will say I do to cope, except to share that I only pray to God that he must give me strength on the journey that I’ve started because I have already started it” (Participant 10, 55 years old).

“I can say that I’m trying, but not 100%. Sometimes he listens to me and sometimes he doesn’t.....I trust so much in God for help so that He can enter their minds so that they can respect me as their grandmother” (Participant 2, 43 years old).

“With regard to the challenges I’m facing I depend on God. Because if God is not present things are hard” (Participant 11, 65 years old).

The above quotations show that foster parents experience empathic tiredness and high levels of stress owing to their inability to deal or cope with some of the teenage foster children’s behaviours (Hannah & Woolgar, 2018:185). However, foster parents in the current and previous studies in similar contexts such as Botswana, have used coping strategies that include spirituality and religion to cater for their welfare, to better handle the daily challenges of raising teenage foster children (Dube, 2016:176; Mosimege, 2017:209; Shaibu, 2013:62). In addition, Gono (2015:97-98) found that most foster parents regard God as their only hope and they place a strong emphasis on prayer and spiritual support from other churchgoers. In Gono’s (2015:97-98) study, participants indicated that their faith in God had a significant impact on them, it helped them overcome problems and difficulties so that they could provide quality care. Furthermore, in Warwick’s (2013:71) study, many foster parents reported that they were leaning on God to help them survive their challenging times.

5.6.2. Acceptance

Four participants in this study reported that one of the methods that helped them to cope with the difficulties of raising teenage foster children was unconditionally accepting them. Below, foster parents explained their acceptance of the teenage foster children:

“As I told you, I take him as my child, it’s not something that I can say that it’s hard for me” (Participant 4, 62 years old).

“When coping with raising teenage foster child, you just need to tell yourself that when this child is giving you problems, what must you do, must you throw him or her away, if it was your own biological child what were you going to do. you need to take it like that in a way that if it was your own blood, what will you do, but the children who stays in this house they are my own blood because I’m taking care of them” (Participant 6, 69 years old).

“I told myself that they are my sister’s children. Where will they go? As long as I’m their parent, my mother left them in my care” (Participant 8, 45 years old).

“I have accepted that she is a child, just like every other child” (Participant 14, 82 years old).

Unconditionally accepting teenage foster children was one of the strategies that foster parents used to cope with their challenges. Foster parents were excited to reveal that they had a feeling of purpose. They suggested that they treated and spoke about their foster children as their biological children. They also felt that teenage foster children viewed them as their biological parents. It was clear why the participants' responses reflected an atmosphere of sympathy and closeness to their family. Thus, because, despite some teenage foster children not having any other known biological family members, they had experienced love, care, and affection. As shown in literature, foster parents believe that caring for the foster children was crucial in overcoming the foster children’s difficulties (Mosemege, 2017:204).

5.6.3. Foster parents talking to teenage foster children

Some of the participants reported that talking to their teenage foster children was helpful in coping with their challenges. They reported that, to cope with the challenges of raising teenage foster children, they preferred to converse with them. This finding was demonstrated by few participants such as Participant 12 (56 years old), who said, *“I’m trying, I talk. Sometimes when you talk to her, she listens for some days”*.

Participant 14 (82 years old), added that:

“I must discipline her. if she doesn’t listen, that’s when I’ll take further steps. But when I reprimand her, she ends up listening to me”.

Furthermore, Participant 13 (40 years old) said:

“I’m one person, even my kids know, and they know very well that I sit down with the child and talk with them. I sit down with my children and talk with them. I don’t make the foster child to feel out of place”.

Using the above quotations, participants demonstrated that they spoke to their foster children in efforts to support their development. They showed that beating children does not make a positive impact. Instead, they preferred talking to children so that they felt safe in their care. As described in Foster Parent Training Manual (2018:19), foster care is a way of providing a family life to children who cannot live with their biological parents. Thus, foster parents should be able to help their foster children, who may be struggling with behavioural problems to gain control and accountability, by explaining to them how their actions have consequences (Foster Parent Training Manual, 2018:18).

5.7. Available social support services

Some foster parents expressed frustrations with their families' lack of support. They explained that foster care funding is the only source of assistance that is available for them. Participants also provided descriptions of the support that they thought would help them to effectively raise their teenage foster children. These findings are discussed through the following sub-themes.

5.7.1. Family members

According to World Health Organisation (2015:14), practical forms of assistance might come in form of drop-in centres and can include financial, emotional, psychological, social, professional development, problem-solving, respite, and community support. Warwick and John-Langba (2016:45) found that some of the recognised key support systems for foster parents are their own families, assets, income, spiritual and religious convictions, and faith-based organisations. Other sources of assistance may include foster children's biological family, other foster parents, and support organisations that help them meet their needs and overcome the difficulties of caring for their foster children. This is in line with Conway's (2017:19) findings that, supportive partners and friends provide important support to foster parents. For instance, Gono (2015:94) reported that foster parents had significant support from family members such as spouses, own adult biological children, siblings, and extended family members.

In addition, foster parents may use their own income and savings in addition to the foster care grant, in the South African context. These financial sources aid in reducing and overcoming the difficulties that foster parents face while performing their caregiving responsibilities. The following quotes affirms the arguments discussed in this sub-theme:

"Like my friends, at times they speak to him about his friends because they are not the same, some have both parents and some it's only a mother or a father. He must see that he's not on the same level with them" (Participant 2, 43 years old).

"Well, honestly speaking the support I get so far is from my friends, there and there from my sister but mostly from my friends. They are my outlets when I'm frustrated. I'd talk to them, and they would be like, you will be okay friend" (Participant 3, 44 years old).

"Mostly I speak with my first-born T. She's the one I sit down with and talk to, and she sits them down and talk with them" (Participant 5, 54 years old).

"My child is the one who was working, helping there and there by buying groceries but now his contract ended and now we are depending on the

Unemployment Insurance Fund (UIF) from The Department of Labour” (Participant 7, 50 years old).

Yes, I get the support because I have a child, she goes there and stay there for school. She doesn't have a problem (Participant 9, 63 years old).

“The support that I get is from my husband and their uncles. Their uncles help me where they can. They talk to them. My husband also helps with finances, and he also talks to them and when he talks to them, they listen to him more than myself (Participant 12, 56 years old).

“Yes, I get the support from M because when she's somewhere in their meetings she remembers these foster children because she's in the welfare organisation dealing with children, so she works with police officers and social workers, if there are teenagers who are misbehaving when they see her, they behave. The other weekend M came with the other women who is the pastor, and they asked at their church if there is something that they can help with in the community during Mandela Day (18 July). She's the one who helps me. She brings school uniform for the foster children, even though it is not a full uniform. The pastor brought for youths last weekend, and they cooked for us” (Participant 6, 69 years old).

For several participants, it seemed to be a recurrent theme that the support they received from their family members helped them overcome some of the obstacles that they faced in raising teenage foster children. According to Mosemegem (2017:164), foster parents can make ends meet with the aid of their working children. The foster care system in South Africa serves as the government's prevention for child abuse, maltreatment, and orphan crisis. Foster care is a type of family care and a significant part of the child protection system (Mampane & Ross, 2017:107).

5.8. Types of social support services suggested by foster parents

There is a number of sub-themes that emerged to demonstrate the kind of social support services that foster parents need for them to effectively raise teenage foster children. The sub-themes that arose under this theme are presented and discussed below.

5.8.1. Counselling for teenage foster children

Understanding child behaviours can help foster parents better understand their stress levels and the importance of social support (Cooley, Thompson & Newell, 2018:3). Previous studies have shown that adolescent foster children need more counselling or emotional support. Children's emotional and behavioural problems are a significant predictor of the success of foster care outcomes (Salas, Miguel, Fuentes, & Bernedo, 2014:2). In the current study, participants acknowledged that teenage foster children needed counselling. Participants suggestions are as follows:

“So far, I think that if he can get counselling from somewhere or somebody or social workers, because his social worker was supposed to talk to him, but I don't know what disturbed her. Maybe If he can get somebody who can show him and talk to him besides myself, he can take that person serious because as for me he takes advantage of me” (Participant 1, 66 years old).

“If the social worker can arrange counselling for children, since I'm not perfect myself, maybe there might be things that I'm doing to them that impacts them in a negative way. I think that in order for us to be a loving family and moving forward counselling will go a long way” (Participant 3, 44 years old).

“I wish if I can get someone who can speak with the foster children, mostly this one, he's the one who is very naughty and misbehave, but sometimes they make me happy because they sometimes acknowledge their mistakes” (Participant 8, 45 years old).

“I would like social workers to have time to talk with the foster children on how to behave. Both girls and boys because sometimes as the community we like to focus on the mistakes done by girls and we put boys aside as if they are doing good, whereas they are the same as girls” (Participant 11, 65 years old).

From the above quotations, it is critical to note that participants highlighted counselling for teenage foster children because they felt unsupported by the agency or social workers who would have provided counselling for the children. Participants thought that if social work professionals could talk to or set counselling sessions with children,

it would change their behaviour. They also thought that children's behaviours might have been caused by something that the parents were not aware of. Psychologically, passive set of behaviours, such as physical complaints and withdrawal, can be used to classify internalising symptoms. Many participants reported that they occasionally had trouble understanding their foster children.

Foster parents would benefit from having someone who could better communicate with their foster children and translate information to them. Foster children's problem behaviours could be characterised by underlying sentiments of fear or distress that can appear as anxiety or sadness (Cooley, Farineau, & Mullis, 2015:36). This is in line with earlier research that indicates that young adversity may put children at risk of behavioural issues and trauma symptoms (Dozier & Bernard, 2017:114).

Foster parents may experience mistrust and cynicism towards social workers and the foster care system. This could result in poor placement outcomes and retention issues (Blythe, Jackson, Halcomb, & Wilkes, 2012:92). According to studies Emovon's (2019:255) study, foster parents encountered difficulties in accessing support from their case manager and placement agency. Nearly all the participants reported receiving little-to-no childcare help from social workers or agencies. Lack of assistance by case managers and placement agencies also increased foster parent's stress. Likewise, Morrison (2016:1) asserts that children value social workers who are honest, dependable, and consistent in their interactions.

5.8.2. Counselling for foster parents

Some participants reported that many foster parents do not feel adequately supported in their responsibility to care for their teenage foster children. They acknowledged their own need for counselling, as follows:

"I sometimes need support emotionally because sometimes I just get angry. They make me angry and then afterwards I become better, and sometimes children can make you shout, and reprimanding them. So now because I have high blood pressure and sugar diabetes, I don't become fine, but I try"
(Participant 12, 56 years old).

“I need counselling in my life. I have a lot of challenges through counselling. This is the result that, foster care grant will be suspended next year. But if next year he can be studying or furthering his studies, the foster care grant will be extended for a year. I will see what I can do if he wants to register for any qualification” (Participant 10, 55 years old).

Foster parents in this study viewed counselling as an important part of their empowerment because they found it difficult to handle their foster children's behaviour. Foster parents who may require advice on how to encourage their children and control their behaviour can benefit from the services offered by psychologists (Doran, 2022:40). In addition, it is hinted that a child's behavioural problems may occasionally arise in response to a parent's own problems. Abdulla (2019:352) also highlighted that parents had to deal with a variety of difficulties and needed expert assistance. According to the DSD (2015:40), probation officers and social workers offer psychological services to address a person's psychological needs.

Social workers who were responsible for the foster placements of the participants in the current study, did not frequently visit the children's foster homes to oversee the placement or offer the necessary support. Owing to this, most participants felt that they were under supported by the agency or social workers. For example, several participants expressed their disappointment in the lack of counselling services to assist them in coping with the emotional difficulties that comes with caring for teenage foster children.

Caregivers are expected to take care of foster children who come from a range of cultures and backgrounds. To manage the foster children's demands and meet their requirements, caregivers need aid from the social service professionals who are in their immediate environment. This could mean having a capable employee who is emotionally present, has good communication skills, is aware of the community and its resources, and always conducts themselves professionally. Additionally, empirical evidence shows a link between parental emotional accessibility and a reduction in emotional and behavioural disorders (Clay, Coates, Tran & Phares, 2017:112). Mancinelli, Dell'Arciprete, and Salcuni (2021:16) noted that the experience of being a foster parent can have a negative impact on people's overall wellbeing, putting them "at risk" of experiencing high parenting stress, distress and being more likely to have

mental and physical health problems which may make it more difficult for them to provide children with the level of care that they consistently need.

5.8.3. Financial support

Few participants stated that while the financial award in form of foster care is useful, they believe it should be increased because of the variety of requirements that their foster children have. Foster parents claimed that in caring for teenage foster children they needed more money to effectively achieve their fostering goals. Foster parents in the current study made the following suggestions:

“I don’t know what to say, if there was someone who can help me, I would ask for help from that person. The help of money is important, because foster care grant is not enough to cater for the financial needs of the foster children” (Participant 14, 82 years old).

“The support that I need I can say, since my family knew that I’m no longer working, they should have helped me financially to raise the foster child until he gets a job” (Participant 10, 55 years old).

One of the foster parents voiced a concern that the foster care grant which expires when the child turns 18, does not cater for the children who wish to continue with their education after grade 12. Other foster parents stated that although the award of foster care grant is useful, it should be increased, given the variety of requirements that their foster children have. Financial difficulty can lead to neglect, this is possible in various ways such as when it negatively impacts parental stress and mental health (White-Wolfe, Charron-Chenier, & Denby-Brinson, 2021:4). Furthermore, in Smith (2014:40), financial difficulties were cited as a significant obstacle for foster parents' ability to effectively undertake their caregiving responsibilities effectively.

Tanga’s (2013:178-179), study that was conducted in Lesotho found that the lack of financial means negatively affected the caregivers’ ability to provide for orphans and other vulnerable children's basic needs, such as food and school supplies. This becomes a problem that also negatively affects extended family households. Kinyua (2013:8) found similar challenges that were related to financial problems in Kenya – foster families frequently lived below the poverty line and struggled to provide basic

needs for their foster children. Warwick (2013:57) noted that in most times, older foster parents are usually financially supporting their unemployed family members in addition to their foster children.

In another study that was conducted in Ghana, it was reported that foster parents were neither paid for their services nor reimbursed for the expenses that they incurred, to satisfy the requirements of children (Frimpong-Manso, 2014:406). Frimpong-Manso (2014:406), argued that this arrangement could be difficult for many foster parents who were generating an income through the informal economic activities such as women, since they receive low wages. When foster parents are compared to biological parents, it is expected that compassion will lead them to volunteer their services (Roman, 2016:179). Therefore, people that ask to be paid for their services are seen to problematically have profit-driven motivations (Hardesty, 2018:93).

Nonetheless, the participants of the current study were mostly motivated to become foster parents by an altruistic desire to meet the needs of vulnerable and orphaned children, as other foster parents that were reported in previous research (López & Del Valle, 2016,126; Muchinako, Mpambela, & Muzingili, 2018:41). Child-centred motives, such as those of the current study's findings, have been found to be intrinsically rewarding for foster parents since they give them a sense of fulfilment that works as a source of resilience during their stressful situations. Previous literature has reported that financial limitations are the primary difficulty that is faced by caregivers when they are provided care to additional children in their households (Osafo, Knizek, Mugisha, & Kinyanda, 2017:6; Warwick (2013:72).

5.8.4. Educational support

According to Moyer and Goldberg (2019:2), adolescence or teenagers in foster care continue to suffer educational and emotional challenges despite improvements in federal and state foster care legislation. Furthermore, Moyer and Goldberg (2019:2) argue that children who have previously lived in foster care may have a lesser chance of graduating from high school and college. Therefore, in the current study, most participants thought it was crucial for social workers to prioritise education as part of their foster care supervision programme. They believed that social workers need to emphasise the value of education to teenage foster children. Participants made the following suggestions:

“You social workers need to always ask him about his schoolwork. Every time when he comes back from school, I also ask him how the school was, and he will say it was fine” (Participant 7, 50 years old).

“The support that I want is for them. I want them to be successful in their education, studies and after that I believe they can work for themselves” (Participant 8, 45 years old).

“Social workers need to encourage the foster children to go to school. That’s the very important thing because when they do not go school or complete any form of qualification, it becomes very hard for them to cope with the outside world and the challenges that are there” (Participant 7, 50 years old).

“Maybe if there can be support groups, and workshops, where the children can be taken so that they can be taught about the importance of education. In addition, so that they can see the importance of going to school, and what they can benefit from going to school, you understand” (Participant 5, 54 years old).

According to Brendtro (2014:6), children who are separated from positive attachment can become resentful and withdraw, oppose attempts to earn their trust, retreat by skipping school or dropping out, or turn to substance addiction. The educational programs have a significant role in transforming disadvantaged children. According to Loetzerich (2017:126), children need education to build a strong foundation for their future, and every student should have an equal chance to pursue their education. Furthermore, students who do not have access to education are found to begin their lives economic endeavours and securities later than their peers. Reyneke (2018:7) argues that social workers support students' general well-being and academic success in a secure and healthy learning environment.

Considering that in most foster care adolescents have special needs, therefore, family engagement in education programmes is important (Bass 2017:12). Teaching foster parents to play a more prominent role in teaching their foster children more prosocial skills and helping them access services for young children with special needs in education is an important step (Bass, 2017:6). Reyneke (2018:7) emphasises that social workers use ecological systems theory and a strengths-based approach to

address social, emotional, and behavioral learning hurdles that students at educational institutions confront. Educators also play an important role in the lives and success of all youth, including foster youth (Moyer & Goldberg, 2019:4). Furthermore, social auxiliary workers can contribute towards improving foster care services by monitoring the placements and reporting their findings to social professionals (Mathebula, 2012:117).

5.9. Foster parents' recommendations for social workers

Some participants provided recommendations on how social workers might help foster parents of teenage foster children to cope with the challenges that they face. The participants' recommendations are discussed through the following sub-themes.

5.9.1. Social workers to provide timeous home visits

Foster care supervision and monitoring services are essential components of foster care programmes globally. They manifest as regular interactions, visits, and contacts between the foster care family and placement agency (WHO, 2015:14). These must be investigated as potential channels that may offer social workers an opportunity to assist the foster child and foster parent with after-care placement or foster care monitoring services. They may also serve as a way for social workers to monitor the placement of the foster child. A few of the participants mentioned the value of social workers making frequent house visits. They believe that the children's behaviour will improve if social workers frequently spoke to them. Participants' recommendations are made below:

"Is to give them support, once in a while they must come and check on the foster children even if they don't come, they must call, ask to see the children, and sit down with them" (Participant 13, 40 years old).

"By coming to the house to talk with children. I was used to it at Child Welfare, and I didn't have complaints. When I complain the social worker will come and talk to them and give them the rules, telling them that what they are doing is wrong" (Participant 6, 69 years old).

“A social worker can help by talking to them. They must talk with them when they are getting out of hand. That can help me a lot, showing them the right way” (Participant 12, 56 years old).

Parents suggested that the government should launch additional initiatives such as workshops or campaigns to support teenage foster children. They recommended social workers to take teenage foster children for retreats where they will teach them appropriate behaviour. Fostering teenage children were found to be different from what they had imagined since it was harder, more interesting, and more challenging than they had anticipated. However, they were less satisfied by the function of social services. Foster care families and foster children require oversight and follow-up services, such as supportive assistance and therapeutic treatments (Ngwabi, 2014:31). According to De Jager (2011:54), the goal of a foster care is to clarify everyone's responsibilities, including supervision services and placement monitoring, for social workers, foster children, and foster parents.

Relative to participants' recommendation for social workers to regularly visit foster homes, previous research have shown that foster placements are more troublesome when social workers are not adequately prepared and supported, which has a negative effect on the foster care arrangement outcomes (Salas, Fuentes, Martin & Bernedo, 2015:2). Social workers were not always available to assist foster care parents in resolving their problems. Therefore, they were forced to innovate and independently seek support and assistance from other sources (Mnisi & Botha, 2016:238). The purpose of supervision is to support and empower the biological family, the foster care family, and the foster child through routine supervision (Guidelines for Effective Management of Foster Care in South Africa, 2009:62). Children with attachment issues are referred for emotional support in form of counselling, direction, and consolation (Jones, 2014:85).

5.10. Foster parents' suggestions and recommendations for other foster parents

Participants provided several suggestions and recommendations on how foster parents can raise teenage foster children, and this is discussed in the next sub-themes.

5.10.1. Consulting social workers

One of the key recommendations that were made by the current study's participants was that foster parents needed to consult with social workers about the challenges they face in fostering. Several participants stated that social workers are in a better position to speak to children. This is because when foster parents talk to them alone, teenage foster children tend to not listen. Participants' suggestions and recommendations are indicated below:

"Foster parents must talk to the social workers so that they can be able to talk with these children because when you speak to them by yourself, they don't listen and there is nothing that you can do" (Participant 1: 66 years old).

"When you have a problem, the first thing you need to do, is to go to the social workers to tell the social workers that here is the child, he or she is not going to school. The child is giving me problems because I don't know what to do with him or her. I'm asking that you help me. They will help" (Participant 9, 63 years old).

"They can go to the social workers to seek for help so that they can come and hear them because sometimes when we talk to them after giving us problems, they do not listen to us. At least if someone from outside can come and talk to them like a social worker, I think that's where they can get help" (Participant 12, 56 years old).

"The advice that I can give other foster parents is that they must have a relationship with their social workers. Right now, I might be raising the issue of counselling, whereas the social worker is not aware about it" (Participant 3, 44 years old).

"We have social workers, aunts, uncles and other relatives, and the foster parent can go to one of them and tell them what is happening. Then if they are failing to resolve in the family, that's when the foster parent will go to the social worker whom he or she is under her supervision, to report the matter, the social worker will then call the child and speak to him or her" (Participant 14, 82 years old).

Section 156(3) of the Children's Act 38 of 2005 mandates social workers and other social service professionals in South Africa to continue offering a variety of services regarding placements of children who need care and protection (Republic of South Africa, 2006:67). Additionally, foster care services need to be provided before and during placements. After the foster care placement is finalised, services are aimed at assisting the whole foster care family, which consists of the foster child, foster parent, the foster parent's own biological children, and the biological family of the foster child.

After a child is legally placed in foster care, supportive and therapeutic services are offered to the foster care family, the child, and the child's biological family. These services help the foster care family, child, and biological family achieve their intended outcomes. This includes safeguarding and nurturing the child by offering a secure and healthy environment with supportive elements that will foster their development and overall well-being. In the study conducted by Conway (2017:6), foster parents emphasised the importance of role, clarity and good relationships with others who are professionally involved with foster care youth. Foster parents appear to be more likely to make use of additional agency support and services if they speak about their foster children, network with other foster parents, and keep good relationships with the agency staff (Conway, 2012:21).

5.10.2. *Treating all children equally.*

The current study's participants also suggested that foster parents must treat their biological and foster children equally. This is demonstrated through the following participants' direct quotations:

"Foster parents must treat the foster children the same way as their biological children. Foster children must not feel that they don't have biological parents because of the bad treatment. Most of the people don't believe when I tell them that they are not my biological children because I treat them fairly" (Participant 2, 43 years old).

"What I like about myself is that I don't have time to beg a child and all of my children are raised like that. I don't discriminate them, and I want them to be like my biological children" (Participant 4, 62 years old).

Children develop a schema on how to care for themselves and others through early nurturing and caring relationships. The schema begins to develop from warm, trustworthy connections with their parents, to foster children's compassion. One of the foster parents in the current study expressed that treating children fairly and equally is crucial in foster care placements. As such, foster parents are urged to develop close relationships with their foster children (Gribble, 2016:113).

5.10.3. Open conversations.

Talking to teenage foster children was recommended by several participants as one of the key components in raising foster adolescents or teenage children. Participants' suggestions are shown below:

“You can be able to sit down with the foster child, talk and show him the way. Normally I like the child who goes to church because the child won't end up walking or roaming around the streets” (Participant 4, 62 years old).

Below, Participant 6 also emphasised the importance of talking with children as a tool that foster parents can use to deal with challenges that they are facing in raising teenage foster children:

“I think it is important to speak with the children. Let me say I love children; look I have my two biological children and two that I'm fostering N and G and besides them there is another one I'm staying with and their biological mother is still alive. I think that for the house to feel warm you need to be honest to your children and have time for your children” (Participant 6, 54 years old).

In addition, Participant 11 (65 years old), suggested the following:

“If you are staying with the child, you must sit him or her down and speak to him or her because there is time where you can be very angry but you won't get help because if you are talking while angry, you shout, and you end up raising your voice up and the person you are talking to won't be able to hear you”

Participant 13 (40 years old) also expressed similar recommendations, as the above participants, by saying:

“The foster parents must speak to them, and they must not hide things from them. If the child is wrong, he or she must be sited down. To beat the child does not solve anything” (Participant 13, 40 years old).

“I suggest that a foster parent who is given challenges by a foster child, he or she can sit down with the child and talk to him/or her, when the challenge is not resolved we have social workers, aunts, uncles and other relatives that can intervene, The foster parent can also go to one of them, and tell them what is happening and then if they are failing to resolve within the family, that’s when the foster parent will go to the social worker whom he or she is under her supervision to report the matter to, the social worker will call the child and speak to the child” (Participant 14, 82 years old).

According to Wahler (2019:251), "communication, relationship formation, and rapport building are important abilities for launching services and retaining clients in social work services". This is consistent with the claim that foster parents are supposed to talk with their foster children to determine their preferences and feelings (Handley & Doyle, 2014:443). Children who experience unfavourable emotional reactions from their parents or primary caregivers develop a bad self-image and tend to develop feelings of worthlessness (Kanak, 2018:184). Empirical research has demonstrated that institutionalised children are more vulnerable to non-secure attachment connections and behavioural issues related to attachment challenges (Lionetti, Pastore & Barone, 2015:3).

5.10.4. Love and respect.

Almost all participants suggested that it was crucial to love and respect the foster care teenagers. Literature has also shown that for successful foster parenting, foster parents must offer their foster children: warmth, attention to their needs, and interaction (Salas, Fuentes, & Bernedo, 2015:2). The current study’s participants recommended the following:

“To other foster parents I want to say to them that when you take the foster children to foster care, you need to treat them with love. They need love and care” (Participant 6: 69 years old).

Participant 7 (50 years old) added:

“The foster child needs that love. He tells himself that he’s still the child even when you are reprimanding him, and you say to him you are old; he will say no I’m still a child”.

Showing love for teenage foster children was further explained by Participant 11 (65 years old) below:

“I love you, but I wish that we live in this way, I still love you, but what you are doing I don’t like it”.

It is the child's best advantage to be born into a family that can meet their most basic requirements for a healthy development and that can also love and respect him. This is in line with the ideology that love is a prerequisite for a healthy child development the absence of basic love may mean that the foster parent would have to rethink continuing being in care of children (Garfat, Freeman, Gharabaghi & Fulcher, 2018:17). According to Moretti, Pasaich and O'Donnell (2015:194), reflective capacity "enables caregivers to respond to their child's behaviour with openness and acceptance of tough sentiments" and helps the caregiver and child to comprehend each other's perspectives. Thus, love is a crucial component of the bond between foster parents and their teenage foster children. All people want to feel that they belong, regardless of their age, class, culture, status, or colour.

5.10.5. Patience

Participants reported that challenges that are associated with fostering can be reduced through exercising patience with teenage foster children. According to Thibodeau (2015:66), there could be difficult periods and unpleasant comments from the child. It is crucial for foster parents to maintain their optimism throughout these trying times, continue to laugh, and be a positive influence in the child's life. The following similar recommendations were shared by the current study's participants regarding their patience with the adolescent or teenage foster children:

“Foster parents must be strong and be patient for the sake of these children because the child didn’t do anything” (Participant 10, 55 years old).

“They have to be patient with them, because there is nothing they can do, they must be patient with them because there is no place, they can take these children to, but now they must also reprimand them” (Participant 8,45 years old).

“They must be patient with them” (Participant 7, 50 years old).

In a study conducted by Mosemege (2017:204), it was found that 95% of foster care mothers need to persevere to manage the difficulties of raising teenage foster children. They also suggested that foster parents need to be patient and focus on emphasising their strength. According to Section 181 of the Children’s Act 38 of 2005 (Republic of South Africa, 2006:175), foster care should safeguard and develop children by giving them a secure, and healthy environment which has supportive adults. Foster care should further the objectives of long-term planning, encouraging family reunion, and introducing children to other stable, nurturing families that are meant to be lifelong partners (Republic of South Africa, 2006:178).

Every child and adolescent deserve to grow up in a nurturing, safe, and caring environment that encourages them to reach their potential. Kleinhans’ (2013:177) study concluded that parents have a significant role in their children's performance and that these collaborations and engaged tactics should receive continual support, monitoring, and development. According to Ward, Van der Merwe, and Dawes (2016:127), positive child development occurs when the child is socially integrated into a family, and structures that support and promote their growth. High risk for the development of anti-social behaviour is discovered in children who are raised in families that has unsupportive parenting, such as authoritarian parenting, low levels of positive reinforcement, problem-solving, engagement, monitoring, and cognitive simulation (Ward, Van Der merwe & Dawes, 2013:66).

5.11. Summary of the chapter

The current study’s findings are based on the experiences that are associated with the difficulties that were faced by foster parents while raising their teenage foster children. Using the available literature and chosen theoretical framework, findings were presented and discussed through seven themes and 27 subthemes to highlight the foster parents’ experiences, challenges and coping strategies.

CHAPTER 6

CONCLUSIONS AND RECOMMENDATIONS

6.1. Introduction

Factors such as poverty, drug and alcohol misuse, parental irresponsibility, parental absence, illness, and HIV/AIDS epidemic contribute to parental incapacity and family dysfunction. As such, in South Africa some families and parents are left unable to appropriately care for and safeguard their children (Bower, 2014:113). South Africa also experiences a high population of orphaned children. By mid-2015, in South Africa there were 18.6 million children who were under the age of 18. Thus, the population of children in South Africa by mid-2015 amounted to 34% of the overall population. Out of the 18.6 million, 3.1 million, thus 17% of the total population of children were orphans (Hall & Sambu, 2017:102).

In 2018, there were 2.7 million orphans in South Africa (Hall, 2019:1). Thus, 14% of the total population of children in the country had lost one or both of their biological parents (Hall, 2019:1). By 2019, most (63%) were paternal orphans in South Africa. The province that recorded the lowest orphaning rates was Gauteng, which was at 11%, where children had lost at least one parent (Hall, 2019:3).

In 2020, there were 2.9 million orphans in South Africa – this also accounted for 14% of the total children's population in the country (Hall, 2022:1). However, the number of orphans who had only their fathers had decreased to 61% from the 62% that was reported in 2019 (Hall, 2022:1). The above statistics show that there is a high number of orphans in South Africa. This means many children in the country need to be placed in foster care.

The current exploratory study's objectives were to explore the challenges that foster parents face when raising their teenage foster children and to initiate effective parenting strategies. To better understand foster parents' challenges and coping strategies, the study employed exploratory semi-structured interviews. The current chapter will provide an overview of the study's main findings, conclusions, and recommendations. The conclusions and suggestions made in this chapter are meant to assist social workers to design strategies that foster parents might employ to deal

with the challenges of caring for teenage foster children. In addition, the findings and resultant recommendations are meant to assist foster parents in building resilience during their fostering period.

6.2. Research Summary

6.2.1. Goal of the study

The study's sole goal was to develop an in-depth understanding of the challenges, experiences and coping strategies of foster parents raising their teenage foster children. Maxwell (2013:23) makes an argument that a research goal should widely indicate the researcher's desire, purpose for conducting a study and their anticipated outcomes. Research objectives are described by Grové, Burns and Gray (2013:708) as declarative statements made to guide a study. The current study's goal was accomplished through the following specific objectives:

6.3. Summary based on the objectives of the study

6.3.1. Objective 1

6.3.1.1. To explore the experiences of foster parents raising teenage foster children

This study aimed to reveal the experiences of foster parents who were raising teenage foster children. The literature review and the current study's findings demonstrate that foster parents cumulate various experiences that seem to depend on their interactions with their teenage foster children. Owing to, what seemed to some as deplorable experiences, a portion of the current study's sample was not pleased with the decision of fostering. Most foster parents seem to struggle with parenting teenage foster children. The current study's findings suggest that some of the teenage foster children's negative behaviours, as also reported in Ntshongwana and Tanga (2018:5), may worry their foster parents. When children are teenagers or adolescents, it might be challenging to raise them without their biological parent. After the passing of the children's biological parents, foster parents may feel that they have no choice but to take on the responsibility of raising the orphaned children. However, the difficulties of raising their foster children may be discouraging.

According to the DSD (2012:110), the primary goal of foster care is to give children and teenagers in need of care and protection the chance to reside in a safe, nurturing, stable, and secure family environment. But teenage foster children may be seen as a source of stress-related illnesses including headaches. Foster parents regretted adopting or fostering teenage children owing to the negative experiences that they had. It can then be concluded that raising teenage foster children is challenging, stressful, and difficult for most foster parents.

6.3.1.2. To explore foster parents' challenges in raising teenage foster children

Overall, previous literature has reported that foster parents exhibit greater parenting stress than biological parents. Their greater stress is often related to poor externalising behaviours from foster children in their care, which foster parents often tend to respond by attempting to end as quickly as possible, rather than dealing with the behaviours and the children in positive ways (Hamilton, 2018:4). In the current study, foster parents' narratives of their experiences showed how difficult and time-consuming it was to care for their teenage foster children. The difficulties that they reported in this study, and those that are discussed in literature suggest that foster parents face comparable care challenges. Yet numerous studies have demonstrated that foster children's conduct may cause instabilities in their placements (Vanderfaeillie, Van Holen & Vanschoonlandt, 2014:8).

One of the key challenges that seem to be faced by many foster parents is that their foster children may go away from home and return late at night. Another challenge that was reported in the current study is that when foster parents are attempting to talk to their teenage foster children, children tend to invariably talk back. Resultantly, foster parents may feel belittled. The study's findings further suggest that teenage foster children are usually negatively affected by their peers or friends – their parents associate the teenage foster children's idleness with having friends who tend to badly influence them. In support of the above findings, most participants in Lesetja (2020:114) mentioned that their teenage children were influenced by their friends.

The current study's findings suggest that foster parents face difficulties when dealing with the stubbornness of their teenage foster children. Some teenage foster children may not pay attention to their foster parents, and they occasionally change their behaviour after briefly listening to them. The foster parent role is challenging and

complex because it has multiple pressures that frequently go beyond the typical difficulties that parenthood brings (Mancinelli, Dell'Arciprete & Salcuni, 2021:1).

The current study's findings also suggest that one of the difficulties that are faced by foster parents is foster children's early dating or initiating romantic relationships. Yet, entering intimate relationships early may result in children being reluctant on engaging with their schoolwork to build a better future, and early sexual debut whose consequences can be high risk of pregnancy or acquiring STIs, which have been found to be common among adolescents in foster care (Hamilton & Haris, 2018:10).

Furthermore, the current study's findings suggest that teenage foster children's demand for expensive items present a difficulty to foster parents. In the South African context, most foster parents are unable to purchase pricey items because the foster care grant is insufficient to meet all the financial needs and wants of the foster children. To satisfy their teenage foster children, foster parents are compelled to purchase pricey items, yet most of them are either unemployed or survive on their old age grant. This suggests that they are already of lower socio-economic status and primarily rely on the, often too little, foster care grant [FCG] (Fortune, 2016:22; Nkosi, 2020:62). However, some teenage foster children do not accept or comprehend the family's financial situation.

More difficulties that are faced by foster parents as suggested by the current study's findings are foster children engaging in substance abuse, being violent against other children, and sometimes rejecting the foster parents' biological children. Some foster parents have problems with their biological children because they are envious of the teenage foster children. The placement may make biological children feel threatened by the teenage foster children. Thus, foster parents find challenges in issues such as biological children's feelings of stress and anxiety, foster children living in seclusion and silence, frequent fighting, teasing and quarrels between the children, foster children's rude behaviour, and their resentment towards foster parents and their biological children. Teenage foster children are sometimes reported to not care about other people's feelings and become selfish.

Therefore, caring for teenage foster children have many difficulties that make foster parents' role challenging. Teenage foster children's behaviours may influence foster

parents to hesitate to raise them because they worry about what might happen to them (DSD, 2012:111).

6.3.1.3. To explore foster parents' coping strategies in raising teenage foster children

Many families are currently faced with daily enormous challenges including major stressful events, poverty, housing difficulties, dangerous neighbourhoods, conflicts in the family, divorce, violence, substance abuse, physical or mental illness, and incarceration (Zimmer-Gembeck & Skinner, 2016:4). Parents' socio-economic circumstances such as their jobs, can impact how they raise their children. For some participants, being unemployed limits their capacity for coping. Lesetja's (2020:124) study also found that most late biological parents for the orphaned had spent most of their lives unemployed hence they left no estate for their children.

Therefore, most teenage foster children lack inherited resources concurrent to that foster parents face myriad of challenges while raising them. However, the current study has shown that foster parents employ a variety of coping mechanisms to achieve their role.

The current study's findings suggest that religion and faith are among the main coping strategies. Foster parents hold fast to the conviction and faith that, with God, anything is possible. This finding is also reported in other studies where prayer to God was reported as one of the tools to cope with challenges of fostering teenagers (Mosemege, 2017:210; Warwick (2013:70). Foster parents think that praying to God about their issues helps them relax. Faith was also among the resilience resources that foster parents used as coping mechanism (Lopez, Pedrotti & Synder, 2015:204).

The study's findings also suggest another coping strategy for foster parents to be unconditional acceptance of teenage foster children. Thus, they can be considered equally as children, just like the biological children of the foster parents (Mosemege, 2017:204). Overall, despite the challenges that they faced, foster parents developed coping strategies that helped them execute their foster parenting role.

6.3.2. Objective 2

6.3.2.1. Social support services available to foster parents in raising teenage foster children

The study's findings suggest that foster parents experience various stressors that are related to the high demands of their role (Gabler, Kungl, Bovenschen, Lang, Zimmermann, Nowacki, Kliwer-Neumann, & Spangler, 2018:326). However, some do not receive institutional or professional support that they wish to have had. In some cases, they receive better and primary social support from their biological children and some financial support from the rest of their families (Lesetja, 2020:125).

The current study's most participants shared that they had no assistance from organisations or social workers to support them in caring for their teenage foster children. Similar findings to those of the current study were reported by Warwick (2013:64) that many foster parents do not feel well supported in their responsibility to raise their foster children. However, some studies reported that foster parents faced significant social, economic, or financial difficulties for which they received no assistance from their relatives, social workers, or placement organisations (Warwick, 2013:53). These difficulties tend to have severe detrimental effects on emotional, financial, and social life of the foster parents. Feldman and Kubota's (2015:211) findings indicate that the virtue of hope enhances people's lives both in the absence and presence of difficulties.

6.3.2.2. Social support services suggested by foster parents in raising teenage foster children

Foster parents in the current study acknowledged that they needed counselling for their teenage foster children. They had a conviction that it could be helpful if professionals such as social workers or psychologists spoke with teenagers in foster care about their challenges. Thus, counselling might have a significant impact on the lives of teenagers. Fernandes-Alcantara, Cadwell, and Stoltzfus (2017:6) also alluded that foster children are more likely than other children, to have a mental health diagnosis.

The findings of the current study showed that raising teenage foster children requires foster parents to make a significant emotional commitment. Foster parents also think

that it is crucial for them to receive counselling because this could empower them since they find it challenging to manage the difficult behaviour of their teenage foster children. This is due to the requirement that they essentially assume parental responsibility for the everyday provision of care. Professionals who are emotionally present are needed to support foster parents as they raise teenage foster children.

Foster parents need financial support to effectively carry out their caregiving responsibilities. In the South African context, foster parents report that the foster care grant should be increased. Furthermore, teenage foster children's access to education must be improved. Foster parents in the current and other studies, also believe that there must be better involvement of social workers in supporting them to raise their foster children (Bilawiski, 2016:46).

6.3.3. Objective 3

6.3.3.1. Foster parents' suggestions on how social workers can assist foster parents in raising teenage foster children

In the current study, foster parents emphasised the value of social workers conducting home visits. Social workers are advised to make frequent visits to foster homes and ensure that teenage foster children's placement is stable and that children are doing well. Some difficulties that are faced by foster parents will be eased by monitoring and supervising the foster care placements and teenage foster children. The findings for the current study are comparable to that of Mancinelli, Dell'Arciprete, and Salcuni's (2021:1), that indicated that social workers are not offering enough monitoring or support. Foster parents, in the current study, expressed a variety of unmet needs. They were dissatisfied by children's agencies, which they frequently described as being unresponsive to their requests, failing to offer them proper emotional, financial, and training support. Social workers also fail to adequately include them in case planning and management.

6.3.4. Objective 4

6.3.4.1. Recommendations on how foster parents who are facing challenges in raising teenage foster children should do

According to the current study's participants, social workers should be made aware of the behaviours of the teenage foster children. As in other studies, in the current study,

foster parents described social workers as important sources of support (Bilawski, 2016:87). Because children do not listen when spoken to by the foster parents alone, social workers are the best people to talk to them. However, besides that it is difficult, foster care parents still believe that it is important for them to try openly communicating with their foster children, about any topic.

Foster parents spoke openly about the need to treat their teenage foster children with love and respect. They further said that it is best for a child to be born into a household that can provide for his most basic needs such as love and respect, for a healthy development. The Children's Act 38 of 2005 clearly specifies that the purpose of foster care is to protect and nurture children by providing a safe, and healthy environment for development (Republic of South Africa, 2006:175). One of the suggestions made by foster parents was patience. They stated that foster parents must be patient with the children and keep correcting and disciplining them when they cause them difficulties.

6.4. Conclusion

Fostering plays an important role in foster parents' lives of foster parents – the inputs that they make has significant inspiration in their daily lives. Foster parents who usually are grandparents want to help and contribute to the well-being of younger generations. This is an important contribution to the society, and it inspires others who may want to foster, in future. However, many negative experiences may demotivate them because they might perceive fostering as a system that brings problems to the family.

Therefore, for foster parents to understand the dynamics of foster care placement, social workers need to help them understand care giving, and that it occurs in various contexts. Managing behavioural issues in foster children is exhausting, frustrating, and persistent (Ntshongwana & Tanga, 2018:14). Some of the challenges that were identified by the researcher include finances and behavioural problems by teenage foster children. Foster parents' experiences include hardships and stress that they encounter through raising teenage foster children.

Few participants seem to receive support from their immediate family members such as their biological children while others do not have any support. Foster parents experience a variety of issues as they attempt to meet the needs of foster children with

little assistance after committing to foster care (Ntshongwana & Tanga, 2018:16). Social service professionals do not offer sufficient professional help such as counselling and home visits. With the acknowledgement that raising teenage foster children is stressful and demanding, parents rely on foster care grant and family members that are working to earn some support in raising their teenage foster children. Foster parents employ various coping strategies such as prayer, to cope with the challenges that they face.

6.5. Recommendations

The following recommendations are made based on the current study's findings on foster care parents' experiences, challenges, and coping strategies when raising teenage foster children.

6.5.1. Support programmes

Based on the challenges that foster parents face when raising teenage foster children, the DSD need to develop a structured programme uniquely for foster parents who are raising teenage foster children. The DSD (2012:112) emphasises that the social worker's job and duty is to work to satisfy the needs of the foster child while empowering and assisting the foster parent in carrying out their duties. The establishment of foster care groups for caregivers and focus groups for foster children is recommended to create a platform where these groups will support each other and share common issues (Nkosi, 2020:124).

6.5.2. Foster care supervision

Social workers should monitor foster care placements and provide supervision services on an ongoing basis. It is crucial to conduct frequent home visits to give support to foster parents. Social workers' home visits are advised as a major method to reduce the challenges that foster children and their foster parents may be facing (Nkosi, 2020:122). Social workers' inability to conduct home visits increases challenges to foster parents because social workers would not know about their needs. Lack of supervision and aftercare services to foster care placements were evident (Nkosi, 2020:120).

6.5.3. Counselling for foster parents

Social workers should arrange counselling services for the foster parents that are raising teenage foster children, to offer them emotional support. As mentioned by Mancinelli, Dell'Arciprete, and Salcuni (2021:2), the experience of being a foster parent can have a negative impact on an individual's overall well-being. This could put them at risk of experiencing high levels of parenting stress and distress. Foster parents would also be more likely to suffer from mental and physical health, which may hinder their ability to provide consistent levels of care to children. According to Bilawiski (2016:83), additional emotional support from social workers is required. The study conducted by Khoo and Skoog (2014:88), foster parents reported being unsupported by social workers throughout difficulties in foster placements.

6.5.4. Implementation of foster parents' support groups

Social workers should develop and maintain support groups for foster parents who are raising teenage foster children. According to Bilawiski (2016:62), agencies may need to create chances for foster parents to connect with other foster parents, to guarantee that they have adequate support in their role. Supportive connections among foster parents can be effective in helping foster parents to manage their grief and worries related to fostering.

6.5.5. Counselling for teenage foster children

Social workers should arrange counselling or frequent communication with the teenage foster children. This would reduce the challenges that foster children may cause on their foster parents. Foster children should be prepared for independent living by participating in programmes such as counselling, mentorship programs, developmental programs, social life skills, vocational training, employment opportunities, access to bursary schemes, internship, and scholarship programs (Guidelines for Effective Management of Foster Care in South Africa, 2009:66-67).

6.5.6. Recommendations for future research

- This study has revealed that raising foster teenagers presents various difficulties to foster parents. It would be helpful to undertake additional research on the difficulties faced by adolescent or teenage foster children themselves.

This would comprehend their perspectives on being placed in foster care, experiences, difficulties, and their coping strategies.

- To fully grasp foster parents' experiences, difficulties, and coping techniques, more research of a similar nature, as the current study, should be conducted in other cities, provinces, or with people of different ethnicities.

6.6. Conclusion

The aim of this study was to explore and describe the experiences of foster parents that are raising teenage foster children. The study found that foster parents who are raising teenage foster children tend to face more challenges compared to those who are not raising teenage foster children. They end up regretting their decision of fostering teenage foster children. More challenges that are faced by foster parents include, back chatting, coming home late at night, substance abuse, and demanding expensive clothes. Most foster parents depend on foster care grants to raise teenage foster children. Foster care grant serves as a powerful incentive for fostering orphans in the context of scarce income opportunities. The empirical data revealed that most foster parents find it difficult to cope with the challenges that they face. Some of the foster parents felt that they do not receive enough support from their social workers.

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APPENDIX A: RESEARCH ACKNOWLEDGEMENT FORM



COLLEGE OF HUMAN SCIENCES RESEARCH ETHICS REVIEW COMMITTEE

31 January 2022

Dear Ms Azwidohwi Jacqueline Mphephu

Decision:
Ethics Approval from 31 January
2022 to 31 January 2025

NHREC Registration # :
Rec-240816-052
CREC Reference # :
43395678_CREC_CHS_2022

Researcher(s): Name: Ms Azwidohwi Jacqueline Mphephu
Contact details: 43395678@mylife.unisa.ac.za
Supervisor(s): Name: Dr S.L. Dhludhu
Contact details: [012 429 4285](tel:0124294285)

Title: The experiences, challenges and coping strategies of foster parents raising teenage foster children

Purpose: MSW

Thank you for the application for research ethics clearance by the Unisa College of Human Science Ethics Committee. Ethics approval is granted for three years.

The *low risk application* was reviewed by College of Human Sciences Research Ethics Committee, in compliance with the Unisa Policy on Research Ethics and the Standard Operating Procedure on Research Ethics Risk Assessment.

The proposed research may now commence with the provisions that:

1. The researcher(s) will ensure that the research project adheres to the values and principles expressed in the UNISA Policy on Research Ethics.
2. Any adverse circumstance arising in the undertaking of the research project that is relevant to the ethicality of the study should be communicated in writing to the College Ethics Review Committee.
3. The researcher(s) will conduct the study according to the methods and procedures set out in the approved application.
4. Any changes that can affect the study-related risks for the research participants, particularly in terms of assurances made with regards to the protection of participants' privacy and the



APPENDIX B: REQUEST LETTER TO CONDUCT RESEARCH AT DEPARTMENT OF SOCIAL DEVELOPMENT



Enquiries: Dr. Sello Mokoena
Tel: 082 331 0786
File no.: 26/04/22

Dear: Ms A.J Mphephu

RE: APPLICATION TO CONDUCT RESEARCH IN THE GAUTENG DEPARTMENT OF SOCIAL DEVELOPMENT

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


Your application on the research on "*The experiences, challenges and coping strategies of foster parents raising teenage foster children*" at the University of South Africa (UNISA). Has been considered and approved for support by the Department as it was found to be beneficial to the Department's vision and mission. The approval is subject to the Department's terms and conditions as endorsed on the 13th November 2019.

You have permission to interview departmental officials and beneficiaries, conduct observations and access relevant documents where necessary.

May I take this opportunity to wish you well on the journey you are about to embark on.

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

With thanks


Dr Sello Mokoena
Director: Research and Policy Coordination

Signature:
Date: 26/04/2022

APPENDIX C: SEMI-STRUCTURED INTERVIEW SCHEDULE FOR FOSTER PARENTS

Research title: The experiences, challenges and coping strategies of foster parents raising teenage foster children

Biographical questions

- ✓ How old are you? O na le dingwaga di le kae?
- ✓ What is your marital status? Boemo jwa gago jwa lenyalo ke bofe?
- ✓ Do you have children? If yes, how many? A o na le bana? Fa go le jalo, ke ba le kae?
- ✓ What is your highest school or educational qualification? Sekolo sa gago se se kwa godimo kana thuto ya gago ke efe?
- ✓ Are you currently employed? If yes, what type of job do you have? A o a berekela gone jaanong? Fa go le jalo, o dira tiro ya mofuta ofe?
- ✓ How many teenage foster children are you caring for or that you cared for? O tlhokomela bana ba le kae ba ba godileng ba ba tlhokomelwang ke batsadi ba e seng ba gago kgotsa one o ba tlhokomela?

Questions related to the topic

- ✓ Tell me about your experiences as a foster parent raising a teenage foster child (Mpolelele ka maitemogelo a gago a go godisa ngwana yo o mo tlhokomelang)

- ✓ What are the challenges you are facing as a foster parent raising a teenage foster child? Ke dikgwetlho dife tse o lebanang le tsone jaaka motsadi yo o godisang ngwana yo o mo dingwageng tsa bolesome
- ✓ What are your coping strategies in the challenges you are facing of raising a teenage foster child? Ke mekgwa efe e o e dirisang fa o godisa ngwana wa gago wa dingwaga tsa bolesome?
- ✓ What type of support do you have while raising a teenage foster child? O na le mofuta ofe wa tshegetso fa o ntse o godisa ngwana wa gago wa dingwaga tsa bolesome?
- ✓ What kind of support do you need in raising a teenage foster child? O tlhoka thuso ya mofuta ofe fa o godisa ngwana wa gago wa dingwaga tsa bolesome?
- ✓ How can social workers assist foster parents who are raising foster children? Bandera ba tsa loago ba ka thusa jang batsadi ba ba godisang bana ba ba ba tlhokometseng?
- ✓ What suggestions and recommendations can you give to other foster parents who are facing challenges with regard to raising teenage foster children. Ke dikakantsho dife le dikakantsho dife tse o ka di nayang batsadi ba bangwe ba ba godisang bana ba e seng ba gago ba ba lebaneng le dikgwetlho tsa go godisa bana ba ba mo dingwageng tsa bolesome ba ba godisitsweng ke batsadi ba bangwe?
- ✓ How can social workers assist in foster parents who are raising teenage foster children? Badiri ba loago ba ka thusa jang batsadi ba ba godisang bana ba ba mo dingwageng tsa bolesome?

APPENDIX D: CONSENT FORM FOR FOSTER PARENT

Research title: Experiences, challenges and coping strategies of foster parents raising teenage foster parents.

Researcher: Azwidohwi Jacqueline Mphephu

I, _____ (participant name), confirm that the person asking my consent to take part in this research has told me about the nature, procedure, potential benefits, and anticipated inconvenience of participation.

I have read (or had explained to me) and understood the study as explained in the information sheet.

I have had sufficient opportunity to ask questions and I am prepared to participate in the study.

I understand that my participation is voluntary and that I am free to withdraw at any time without penalty (if applicable)

I am aware that the findings of this study will be processed into a research report, journal publications and/or conference proceedings, but that my participation will be kept confidential unless otherwise specified.

I agree to the recording of the semi structured interview.

I have received a signed copy of the informed consent agreement.

Participant Name & Surname..... (please print)

Participant Signature.....Date.....

Researcher's Name & Surname..... (please print)

Researcher's signature..... Date.....

APPENDIX E: CONFIDENTIALITY AGREEMENT FORM

This agreement is between: Azwidohwi Jacqueline Mphephu and the research participant for the research titled: ***THE EXPERIENCES, CHALLENGES AND COPING STRATEGIES OF FOSTER PARENTS RAISING TEENAGE FOSTER CHILDREN***

I, Azwidohwi Jacqueline Mphephu, will:

1. Maintain the privacy and confidentiality of all the interview information. I won't talk about the research findings with anyone else.
2. Retain all the data gathered for this study in a secure location.
3. Not keep anything from the study that could be used to identify the participants' identities.
4. Follow all guidelines for the secure maintenance of records, both physically and digitally. These guidelines may include, but are not limited to, file encryption, password protection, and secure electronic transfers.
5. Under no circumstances give anyone else access to the raw data from the research.

Researcher:

(Print Name)

Signature:

Date:

Research participant:

(Print Name)

Signature:

Date:

APPENDIX F: RISK ASSESSMENT TOOL

RISK ASSESSMENT

Complete the Research Ethics Risk Assessment by answering each question below. If you answer “YES” to any of the items, the outcome of the risk assessment is considered to vary from a low to high-risk level. The UNISA research ethics review system is based on the UNISA Standard Operating Procedure (SOP) for Research Ethics Risk Assessment. If you are an external applicant, a copy of this document can be requested from urerc@unisa.ac.za; internal applicants can click on this [link](#) to obtain the document. If you are unsure about the meaning of any of these concepts, please consult your supervisor or project leader.

1	Does your research include the direct involvement of any of the following groups of participants (<i>Refer to Section 4 in the SOP</i>)	YES	NO
<i>Place an 'x' in box [if yes, provide details in the space allocated for comments]</i>			
	a) Children or young people under the age of 18 Include the parental consent letter and explain how assent will be obtained in section 6.1 of the application form.		x
	b) Persons living with disabilities (<i>physical, mental and/or sensory</i>) ¹		x
	c) Persons that might be considered vulnerable, thus finding it difficult to make independent and/or informed decisions for socio, economic, cultural, political and/or medical reasons (<i>such as the elderly, the dying, unconscious patients, prisoners, those in dependant relationships, women considered to be vulnerable due to pregnancy, victimisation, etc.</i>)		x
	d) Communities that might be considered vulnerable, thus finding it difficult to make independent and informed decisions for socio, economic, cultural, political and/or medical reasons		x
	e) UNISA employees, students or alumni Indicate that you will apply for permission at the UNISA Research Permission Subcommittee (RPCS) in section 3.1 of the application form to involve any of these participant groups in the proposed research.		x
	f) Persons whose native language differs from the language used for the research Attach the translated data collection instrument(s), interview guide(s), participant information sheet and consent form in the participants' first language, as well as a letter from the language practitioner certifying the credibility of the translated material. The services of an interpreter may need to be secured for fieldwork activities.		x
	g) There is likelihood that a person or definable group will be identified during the research process and it is likely to be of concern.		x
	h) Other ² . Please describe.		

Comments: If you selected any option above, please describe it in detail here.

2	Does your research involve any of the following types of activity that could potentially place the participants at risk of harm?	YES	NO
<i>Place an 'x' in the box provided [if yes, provide details in the space allocated for comments]</i>			
	a) Collection, use or disclosure of personal, identifiable information <u>without</u> the consent of the individual or institution that is in possession of the required information (with the exception of aggregated data or data from official databases in the public domain)		x
	b) Collection, use or disclosure of personal, identifiable information directly from participants <u>with</u> consent		x
	c) Personal, identifiable information to be collected about individuals from available records (e.g. employee records, student records, medical records, etc.) and/or archives		x
	b) Participants being exposed to questions which may be experienced as stressful or upsetting, or to procedures which may have unpleasant or harmful side effects		x
	e) Participants being required to commit an act which might diminish self-respect or cause them to experience shame, embarrassment, or regret		x
	f) Any form of deception of participants, concealment or covert observation		x
	d) Examining potentially sensitive or contentious issues that could cause harm to the participants		x
	g) Research which may be prejudicial to participants		x
	f) Research which may intrude on the rights of third parties or people not directly involved		x
	f) Audio-visual recordings of participants which may be of a sensitive or compromising nature (with or without consent)		x
	g) Disclosure of the findings of the research could place participants at risk of criminal or civil liability or be damaging to their financial standing, employability, professional or personal relationships		x
	h) Any form of physically invasive diagnostic, therapeutic or medical procedure such as blood collection, an exercise regime, body measurements or physical examination		x
	k)*Psychological inventories / scales / tests		x
	q) Other. Please describe		
Comments: The respondents are youth adult exiting kinship foster care. They are legally able to make informed decision without compulsion			

**Please add details on copyright issues related to standardised psychometric tests and registration at the HPSCA of test administrator if test administration*

is in South Africa or of an equivalent board if administration is non-South African.

3	Does your research involve any activity that could potentially place the researcher(s) at risk of harm?	YES	x NO
	a) There is a possible risk of physical threat, abuse or psychological trauma as a result of actual or threatened violence or the nature of what is disclosed during the interaction		x
	b) There is a possible risk of being in a compromising situation, in which there might be accusations of improper behaviour		x
	c) There is an increased exposure to risks in everyday life and social interactions, such as working with hazardous materials or sensitive information		x
Comments:	The participants shall be interviewed by the researcher at their work places which are safe places where children stay.		

4	Does any of the following apply to your research project?	YES	NO
<i>Place an 'x' in the box provided [if yes, provide details in the space allocated for comments]</i>			
	a) Participants will be offered inducements or incentives to encourage their involvement in the research		x
	b) Participants will incur financial obligations as a result of their participation in the research		x
	c) The researcher(s) can anticipate financial gains from involvement in the research (i.e. contract research)		x
	d) Any other potential conflict of interests, real or perceived, that could be seen as compromising the researcher(s) professional judgement in carrying out or reporting on the research		x
	e) Research will make use of Unisa laboratories		x
	f) Research will be funded by UNISA or by an external funding body that could compromise the integrity of the research project		x
Comments: If you selected any option above, please describe it in detail here.			

5	Guided by the information above, classify your research project based on the anticipated degree of risk. <i>[The researcher completes this section. The ERC critically evaluates this benefit-risk analysis to protect participants' rights]</i> <i>Place an 'x' in the box provided</i>			
Category 1 Negligible No to indirect human participant involvement. If you choose this option, stop completing this form and contact URERC@unisa.ac.za	Category 2 Low risk Direct human participant involvement. The only foreseeable risk of harm is the potential for minor	x	Category 3 Medium risk Direct human participant involvement. Research that poses a risk above the everyday norm, including	Category 4 High risk Direct human participant involvement. A real or foreseeable risk of harm including physical,

	discomfort or inconvenience, thus research that would not pose a risk above the everyday norm.	physical, psychological and social risks. Steps can be taken to minimise the likelihood of the event occurring.	psychological and social risk which may lead to a serious adverse event if not managed responsibly.	
<p>(a) Briefly justify your choice/classification Adults who are 18 years of age or older and have the legal capacity to consent to or decline participation in the study are the intended audience.</p>				
<p>(b) In medium and high-risk research, <u>indicate the potential benefits</u> of the study for the research participants and/or other entities.</p>				
<p>(c) In medium and high-risk research, <u>indicate how the potential risks of harm will be mitigated</u> by explaining the steps that will be taken to minimise the likelihood of the event occurring (e.g. referral for counselling, debriefing, etc.).</p>				

APPENDIX G: LETTER FROM THE LANGUAGE EDITOR

26 March 2023

To Whom it May Concern

Re: Proof of editing

This letter serves to confirm that I have edited a dissertation authored by **Azwidohwi Jacqueline Mphphu (43395678)**.

The **title of the dissertation** is: *The experiences, challenges and coping strategies of foster parents raising foster teenage children*. **To be submitted** in fulfillment of the requirements for the degree of Master's of Social Work in Social Development, at the University of South Africa.

In this dissertation, I conducted both language and structural editing.

Note: The student made further input after my editing.

If there are any questions, do not hesitate to contact me.

Kindest Regards
Oncemore Mbeve
Postdoctoral Researcher, Wits, African Centre for Migration and Society
(ACMS)MA Psychology Research and Coursework, Wits University
BSW, Wits University
Email: oncemore.mbeve@gmail.com
Cell: +27622028278

APPENDIX H: TURNITIN REPORT

THE EXPERIENCES, CHALLENGES AND COPING STRATEGIES OF FOSTER PARENTS RAISING TEENAGE FOSTER CHILDREN

ORIGINALITY REPORT

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