

**FACTORS CONTRIBUTING TO THE FOSTER CARE BACKLOG:
SERVICE PROVIDERS' PERSPECTIVES AND SUGGESTIONS**

By

P.M. NGWENYA

Submitted in partial fulfilment of the requirements
for the degree of

MASTERS OF ARTS IN SOCIAL SCIENCE (MENTAL HEALTH)

at the

UNIVERSITY OF SOUTH AFRICA

SUPERVISOR: MS P. BOTHA

31 JANUARY 2011

STUDENT NUMBER: 802 – 221 – 6

I declare that

“Factors contributing to the foster care backlog: service providers’ perspectives and suggestions” is the result of my independent investigations and that all sources used have been acknowledged by means of complete references.

.....

SIGNATURE:

PHINDILE M. NGWENYA

.....

DATE:

ACKNOWLEDGEMENTS

My deepest gratitude and sincere appreciation to the following people:

- The Regional Director of the Department of Health and Social Development, Mr Solly Ndweni for allowing me to conduct the research project in the Johannesburg office.
- All the participants who gave their time and valuable information.
- My colleague Beauty Mlamla who was very supportive throughout.
- My daughter Busisiwe Ngwenya who was always willing to help.
- My supervisor Ms Botha for her encouragement, patience and support.
- Professor De Kock for her guidance, encouragement, constructive criticism and extensive contribution to help me realise my goal.
- Not forgetting my fiancé Nkone Ndlovu who was also supportive and helped me to complete my studies.
- God Almighty, I thank Him for His grace, for giving me strength and walking me through the valley of success.

This study is dedicated to you with all my love and gratitude.

ABSTRACT

The backlog in foster care applications has been an issue in the Department of Health and Social Development, Johannesburg office, for the last number of years, resulting in foster care placement applications accumulating and families' quality of life being affected and compromised. The service providers are inundated with high caseloads. Foster care applications could take up to a year or longer before they are processed and finalised at the Children's Court.

The aim of the study was to explore and describe the factors contributing to the foster care backlog from the service providers' perspective and to provide suggestions to address this continuing backlog. The researcher employed a qualitative research approach and an explorative, descriptive and contextual research design. Factors such as high caseloads, lack of resources and lack of support and training from management were identified as contributing to the backlog. Recommendations made are the immediate filling of vacant posts, induction of new social workers, provision of adequate resources and infrastructure as well as the division of foster care services.

KEY WORDS: Foster care, foster care backlog, social work caseloads, foster care applications, service providers' perspective, Department of Health and Social Development, contributory factors and social work

CONTENTS

CHAPTER ONE

INTRODUCTION, PROBLEM STATEMENT AND MOTIVATION

1.1 INTRODUCTION	1
1.2 PROBLEM STATEMENT	6
1.3 MOTIVATION FOR THE RESEARCH	6
1.4 THE RESEARCH QUESTION, GOAL AND OBJECTIVES OF THE RESEARCH	7
1.4.1 RESEARCH QUESTION	7
1.4.2 GOAL	7
1.4.3 OBJECTIVES	8
1.5 RESEARCH METHODOLOGY	8
1.5.1 RESEARCH APPROACH	8
1.5.2 RESEARCH DESIGN	9
1.5.3 RESEARCH PROCESS	10
1.5.3.1 Population	10
1.5.3.2 Sampling	11
1.6 METHOD OF DATA COLLECTION	11
1.7 METHOD OF DATA ANALYSIS	13
1.8 METHOD OF DATA VERIFICATION	14
1.9 ETHICAL CONSIDERATIONS	14
1.10 LIMITATIONS OF THE RESEARCH	15
1.11 CLARIFICATION OF KEY CONCEPTS	15
1.11.1 BACKLOG	15
1.11.2 FOSTER CARE	16
1.11.3 SERVICE DELIVERY	16
1.11.4 SERVICE PROVIDERS	16

1.12 DISSEMINATION OF RESEARCH RESULTS	17
1.13 STRUCTURE/FORMAT OF THE RESEARCH REPORT	17

CHAPTER TWO

RESEARCH METHODOLOGY

2.1 INTRODUCTION	18
2.2 RESEARCH METHODOLOGY	18
2.2.1 RESEARCH APPROACH	18
2.2.2 RESEARCH DESIGN	19
2.2.3 RESEARCH PROCESS	20
2.2.3.1 Population	20
2.2.3.2 Sampling	21
2.3 METHOD OF DATA COLLECTION	22
2.3.1 PILOT STUDY	22
2.3.2 PREPARATION OF PARTICIPANTS	23
2.3.3 FOCUS GROUPS	24
2.3.4 INTERVIEW ENVIRONMENT	26
2.3.5 INTERVIEW QUESTIONS	26
2.3.6 THE INTERVIEW	26
2.4 ROLE OF THE RESEARCHER	27
2.5 DATA PRESERVATION	27
2.6 METHOD OF DATA ANALYSIS	28
2.7 METHOD OF DATA VERIFICATION	29
2.8 ETHICAL CONSIDERATIONS	30
2.9 REFLECTION ON THE RESEARCH PROCESS	31
2.10 CONCLUSION	32

CHAPTER THREE

RESEARCH FINDINGS AND LITERATURE REVIEW

3.1 INTRODUCTION	33
-------------------------	-----------

3.2 PROFILE OF PARTICIPANTS	33
3.3 RESEARCH FINDINGS	35
3.4 CATEGORIES AND THEMES	37
3.4.1 CATEGORY 1: PERCEPTIONS OF FOSTER CARE BACKLOG	37
3.4.2 CATEGORY 2: REASONS FOR/FACTORS CONTRIBUTING TO FOSTER CARE BACKLOG	38
3.4.3 CATEGORY 3: CONSEQUENCES OF FOSTER CARE BACKLOG	50
3.4.4 CATEGORY 4: SUGGESTIONS TO ADDRESS THE FOSTER CARE BACKLOG	60
3.5 CONCLUSION	67

CHAPTER FOUR

LIMITATIONS, CONCLUSIONS AND RECOMMENDATIONS

4.1 INTRODUCTION	70
4.2 LIMITATIONS OF THE STUDY	70
4.3 CONCLUSIONS	71
4.3.1 CONCLUSIONS PERTAINING TO THE RESEARCH METHODOLOGY AND PROCESS	71
4.3.2 CONCLUSIONS PERTAINING TO THE RESEARCH FINDINGS	71
4.3.2.1 Perception of service providers regarding the foster care backlog	72
4.3.2.2 Reasons for or factors contributing to the foster care backlog	72
4.3.2.3 Consequences of the foster care backlog for the social work profession	73
4.3.2.4 Suggestions to address the foster care backlog	73
4.4 RECOMMENDATIONS	75
4.4.1 RECOMMENDATIONS PERTAINING TO THE RESEARCH PROCESS	75
4.4.2 RECOMMENDATIONS FOR PRACTICE BASED ON THE RESEARCH FINDINGS	75
4.4.3 RECOMMENDATIONS FOR FURTHER RESEARCH	78
4.5 CONCLUSION	78
BIBLIOGRAPHY	80
APPENDIX A: A PREAMBLE TO INFORMATION	84
APPENDIX B: INFORMATION AND INFORMED CONSENT DOCUMENT	86

LIST OF TABLES

TABLE 3.1 PROFILE OF PARTICIPANTS IN FOCUS GROUPS	33
TABLE 3.2 CATEGORIES AND THEMES WHICH EMERGED FROM THE DATA ANALYSIS	35

LIST OF FIGURES

FIGURE 2.1 FOCUS GROUPS

25

LIST OF APPENDICES

APPENDIX A: PREAMBLE	84
APPENDIX B: INFORMATION AND INFORMED CONSENT FORM	86

CHAPTER ONE

INTRODUCTION, PROBLEM STATEMENT AND MOTIVATION

In this section the topic of the research will be introduced and the problem statement as well as the motivation for the research will be discussed.

1.1 INTRODUCTION

Since South Africa became a democratic country in 1994, policies and programmes have been developed to address social problems and provide equal access to social services for all the people of South Africa. Programmes such as the child support grant, sustainable livelihood and Banapele (a programme focussing on children's needs) are some examples. The White Paper for Social Welfare (SA 1997:63) facilitates the provision of appropriate developmental social welfare services to all South Africans, especially those living in poverty. Foster care is a child-centred service to children in difficult circumstances regulated by the Children's Act 38/2005, which is the basic instrument of the protection of children in need of care. Section 155(2) places the child's best interest at the forefront (Children's Act 38/2005).

The Children's Act section 180-182 defines foster care as the placement of a child by means of an order of the children's court, in the custody of a suitable family or individual, willing to act as foster parents to the child, who has the capacity to provide an environment that is conducive to the child's growth and development.

Crumbley and Little (in De Vos 1998:23) explain that foster care refers to the substitute family care for children who cannot be adequately maintained and cared for at their home of origin. Simultaneous welfare services have to provide for these children and their families to help resolve the situation that led to the need for placement.

The Children's Act section 181 also states the purpose of foster care as to protect and nurture children by providing a safe, healthy environment with positive support.

A child is found to be in need of care and protection in terms of section 150(1) and (2) of the Children's Act when he/she:

- has been abandoned or orphaned and is without any visible means of support
- is displaying 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 well-being
- may be at risk if returned to the custody of his/her parent, guardian or caregiver as there is reason to believe that he/she will live in or be exposed to circumstances which may seriously harm his/her physical, mental or social well-being
- is in a state of physical or mental neglect
- 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 or by a person under whose control he/she is
- is a victim of child labour
- is in a child-headed household

Research studies focusing on foster care of vulnerable children, children in care and child protection in European countries have shown that the vast majority of children at risk are victims of poor social conditions, family breakdown, poverty, substance abuse, lack of parenting skills, child abuse and neglect. Although almost all the countries mention child abuse and neglect as one of the main reasons for separation and placement, Central and Eastern European countries clearly reflect the lack of basic social services and family support (Gudbrandsson 2004).

Research conducted in KwaZulu-Natal in 2004 on social security for children in the context of AIDS indicates that most orphaned children are in foster care with their family members (Social Security for children in the context of AIDS 2004). Children's eligibility for placement in alternative care is captured in the concept of a child being "in need of care". Children who are without surviving biological parents were, in terms of the Child Care Act 74/1983, automatically considered to be in need of care, and therefore eligible for foster placement and grants. This seemed to be a contradiction as orphans in care of their families are not "in need of care". The situation with the new Children's Act is still the same because the child who has been abandoned or orphaned and is without any visible means of support is regarded as a child in need of care and protection in terms of section 150(1) (a). According to research done, the purpose of processing foster care placements for orphans seems to be less about legalising placement/custody of the children than about accessing foster care grants to financially support them and the poor households in which they are residents (Social Security for children in the context of AIDS 2004).

The previous statement is in line with Mokgosi (1997:21), who says that families and next of kin were encouraged to take care of children at no cost to the state. However, in recent years families have been applying for foster care to access foster care grants due to their socio-economic status determined by the high rate of unemployment and poverty in South Africa. Families have the responsibility to take care of one another if members are not able or not available to execute their roles as parents.

There thus seems to be a difference between foster care in South Africa and in European countries. In South Africa, a high percentage of children are placed with their families and relatives when their biological parents die of AIDS related diseases and other causes and a lesser percentage are placed in unrelated foster care. As indicated by the above study done in 2004 in KwaZulu-Natal, the focus of foster care is often financial support. In Europe, parents are mostly still alive and foster care placements are short term since the biological family receives intervention in the form of reunification services. The focus of foster care in European countries is more on providing care for the child while the parents receive services.

The scourge of the HIV and AIDS pandemic and the high rate of unemployment and poverty in South Africa have all accelerated the growth of the need for foster care. The death of biological parents by AIDS related illnesses has left children orphaned. The 2007 report of the South African HIV and AIDS statistics (SA 2007) estimated that based on its sample of 1 415 antenatal clinics across all nine provinces, 28% of pregnant women were living with HIV at the time. The researcher is of the opinion that this situation could create a rising need for foster care services that will pose challenges to service delivery. In addition to this, the White Paper for Social Welfare (SA 1997) advocates for quality service delivery according to the principle of Batho Pele which entails an acceleration of quality service delivery.

This research study has evolved as a result of the escalation of foster care applications in the Department of Health and Social Development's Johannesburg office. The researcher observed an increase in foster care applications which negatively impacts on quality service delivery. This state of affairs creates stress and frustration amongst the clients and the service providers, i.e. social workers. Furthermore, it impacts negatively on the quality of life of the family who has no adequate finances to provide for the needy child. In some instances the children drop out of school and engage in criminal activities and prostitution to meet their financial needs. The service providers are left with high caseloads and cannot deliver effective and efficient services to clients. Upon application, the clients wait for six to twelve months before they are screened.

The researcher conducted an interview with the Assistant Director of the department who stated that in November 2005 the office of the Johannesburg Department of Health and Social Development had 6 567 applications for foster care placements. In 2009 the overall number of new foster care cases per month from the different satellite offices was 2 000 (Assistant Director 2009).

While there is a call for an acceleration of quality service delivery by the government, service providers and recipients (i.e. foster care applicants) are confronted with the reality in terms of a delay in processing foster care applications. The researcher noticed that although the issue of the backlog of the foster care applications was vigorously addressed in the past few years, the backlog is still accumulating. In the Department of Social Development's annual report

2005/2006, (SA. Department of Social Development 2006:6) the increase in the foster care backlog was mentioned. It was further stated that a systematic implementation should be used to address the backlog in the Department of Health and Social Development, Gauteng, i.e. employing new social workers to focus on the foster care placement backlog. The issue of the backlog is still a priority in the department, and the Director and Chief Director are still emphasising speedy delivery of service to the clients. The backlog is monitored in the Johannesburg office but still there is no appropriate strategy to minimise it; instead, social workers are expected to miraculously accomplish the impossible.

The Member of the Executive Committee (MEC) for Social Development took the initiative to prioritise and focus on the issue of the foster care backlog from 2006. The Johannesburg office of the Department of Health and Social Development came up with a programme to accelerate foster care placements. The Deputy Director convened a meeting with foster care social workers to address the backlog. In April 2006 eighteen contract social workers were employed in addition to 47 full-time social workers. From 2006 to 2007 the contract social workers were mandated to complete twenty foster care cases per month. The full-time workers were mandated to compile and finalise ten reports per month and render supervision services to the families. The objective of the department was to curb and address the foster care backlog that has accumulated. Even now the issue of the backlog is putting pressure on the service providers, supervisors and management because there is no solution or way to curb the backlog as it accumulates daily in the office. According to the Assistant Director (2009), the old backlog from 2006-2007 has decreased to ± 300 cases. However, there is now a new backlog that is confronting the office. Factors contributing to the existing backlog are the fact that the Johannesburg Commissioner does not open an enquiry into a case where the prospective foster parent has income or receives a pension since it is argued that the child has a visible means of support. Furthermore, in a case where the biological father's whereabouts or identities are not known, the social worker has to advertise in the local newspaper to trace the father. Despite all the strategic plans in place, the backlog is growing.

1.2 PROBLEM STATEMENT

In the introduction to this study it was confirmed that the AIDS pandemic has orphaned a large number of children and escalates the demand for foster care in South Africa. This state of affairs has led to a backlog in the processing of foster care applications which negatively impacts on the quality of life of children in need of care. Despite a strategic plan introduced by the Department of Health and Social Development, Johannesburg, to address the backlog, the latter is still growing.

The researcher embarked on this research endeavour with the goal to explore (identify) and describe the factors contributing to the foster care backlog and to search for possible suggestions and action plans that could enhance the quality of service delivery to benefit clients.

1.3 MOTIVATION FOR THE RESEARCH

As a senior social worker responsible for statutory services at the Johannesburg office of the Department of Health and Social Development, the researcher usually encounters difficulties in answering clients' phone calls wanting to know about their applications and the reasons for the delay in respect of finalising these applications. Other clients visit the office to explain their impoverished situation while they have to provide for the children in their care.

The researcher conducted interviews with the Acting Assistant Director and Secretary at the Department of Health and Social Development, Johannesburg office (2009), and the following data relating to foster care and the foster care backlog was obtained: In October 2007 the office had 4 000 foster care applications that needed to be finalised or completed. By April 2008 the backlog had increased to an estimated 10 528 foster care applications. According to the Assistant Director, the estimated monthly intake was 400. The office had 91 field social workers doing foster care. Each social worker was expected to screen the clients, finalise the matter for the Children's Court, monitor and supervise the placement. This backlog and the factors contributing

to the situation served as motivation for the researcher to investigate the topic and to put forward suggestions on how the problem can be curbed.

1.4 THE RESEARCH QUESTION, GOAL AND OBJECTIVES OF THE RESEARCH

1.4.1 RESEARCH QUESTION

Strauss and Corbin (1998:76-77) argue that central to any research investigation is the asking of questions along with the pursuit of their answers. This is in line with what Bickham and Rog, cited by Krueger (1994:80-82) say, namely that the research questions, what the researcher specifically wants to understand by doing the study, are at the heart of the research design. Research questions help to focus the study and to give guidance for how to conduct it and what needs to be accomplished by doing the study.

The research question for this study was:

From the service-providers' perspective what are the factors contributing to the foster care backlog and how can they be addressed?

To be able to answer this research question a primary goal and objectives were required to give direction or structure to the undertaking. These will be presented in the next section of this document.

1.4.2 GOAL

According to De Vos, Strydom, Fouche and Delport (2002:107), the researcher has to decide consciously what the research goal and objectives are going to be. The goal is defined as a dream, the broader, more abstract conception of "the end toward which effort or ambition is directed". The objectives are the steps that have to be taken, one by one, realistically at grassroots level, within a certain time span, in order to attain the dream.

The goal of this research was to explore and describe the factors contributing to the foster care backlog and to make suggestions to resolve this problem from a service provider's perspective.

1.4.3 OBJECTIVES

In working towards the realisation of the above goal, the following objectives were formulated:

- To explore and describe the perceptions of service providers about the foster care backlog.
- To explore and describe the perceptions of service providers about factors contributing to the foster care backlog.
- To explore and describe the perceptions of service providers about the consequences of a foster care backlog in social work service.
- To explore and describe suggestions to address the foster care backlog from the perspective of the service providers.
- To make conclusions and recommendations in terms of possible suggestions and action plans to address the foster care backlog.

1.5 RESEARCH METHODOLOGY

In this section the research approach, design and process are presented.

1.5.1 RESEARCH APPROACH

According to De Vos et al (2002:272), the qualitative research approach differs inherently from the quantitative approach in that it does not usually provide the researcher with a step-by-step plan or a fixed recipe to follow. In qualitative research the researcher's choice and actions will determine the design or strategy. Rubin and Babbie (1997:272) define qualitative research as a method that emphasises depth of understanding and the deeper meanings of human experience that are used with the aim of generating theoretically richer observations. Bell (1993:6) argues that qualitative researchers are more concerned with understanding individuals' perception of the world; they seek insight rather than statistical analysis. Qualitative research aims to understand and interpret the meaning that the subject gives to everyday life (De Vos & Strydom 2000:28).

The researcher wanted to explore and better understand the phenomenon under investigation, namely factors contributing to the foster care backlog and possible suggestions to address the backlog. Therefore the research approach used in the study was the qualitative approach.

Royse (2008:279) explains that some of the characteristics of a qualitative approach are as follows:

- Exploratory: the qualitative researcher explores problems and phenomena about which little is known; qualitative research is basically inductive, generating new theory from the observation of a special situation.
- Value-free: the role of the researcher is that of a learner, not an expert or specialist; he/she wants to know “what is going on here?”
- Journalistic/narrative: qualitative research most often is narrative and is based on the words used by informants to describe their life experiences.

1.5.2 RESEARCH DESIGN

The concept “research design” involves a clear focus on the research question; the purpose of the study, what information most appropriately will answer the specific research questions and which strategies are most effective for obtaining it. A research design describes a flexible set of guidelines that connect theoretical paradigms first to strategies of inquiry and second to methods for collecting empirical material (Denzin & Lincoln 2003:36).

In view of the fact that the researcher wanted to explore and describe the factors contributing to the backlog and offer possible suggestions to address the backlog, she decided to employ an explorative, descriptive and contextual research design for this purpose.

Exploratory research is research conducted to gain insight into a situation, phenomenon, community or individual (De Vos et al 2002:109). Rubin and Babbie (1993:107-108) state that exploratory research is typical when a researcher is examining a new interest or when the subject of study is relatively new and unstudied. The researcher could not find other studies exploring the foster care backlog in South Africa.

The purpose of descriptive research is to describe situations and events (Rubin & Babbie 1990:84). The researcher observed and then described what was observed. Thus she had a more intensive look at the phenomenon and deeper meaning, leading to a denser description. Factors contributing to the backlog were identified, resulting in a denser description of the service providers' perspective.

Contextual studies seek to avoid the separation of participants from the broader context to which they may be related (Schurink in De Vos 1998:281). The contextual design was employed in that the researcher explored the foster care backlog in the specific context of the Department of Health and Social Development's Johannesburg office.

1.5.3 RESEARCH PROCESS

In this section the population and sampling procedures, method of data collection, method of data analysis, method of data verification and ethical considerations and limitations of the research are introduced.

1.5.3.1 Population

De Vos et al (2002:199) define population as a totality of persons, events, organisations, units, case records or other sampling units with which the research problem is concerned. Rubin and Babbie (1990:194) state that the population is that aggregation of elements from which the sample is actually selected and requires specifications, i.e. whom do we want to be able to draw conclusions about?

The population for this study included all social workers from the Department of Health and Social Development's Johannesburg office who were in the foster care division, namely production and advanced production. Production refers to junior social workers and advanced production means senior workers doing statutory services in foster care. The population consisted of 91 foster care social workers.

1.5.3.2 Sampling

Royse (2008:203) states that the notion behind sampling theory is that a small set of observation (sampling) units can tell you something about the larger population; trends within a large population can be discovered. Rubin and Babbie (1993:219) describe sampling as a process of selecting observations.

“Non-probability sampling is the grab or convenience sample and are usually justified by showing the sample fit certain demographic characteristics of the targeted population” (Krahtwohl 2009:186). The researcher used non-probability, purposive sampling in identifying and selecting participants in this study. Purposive sampling is based entirely on the judgement of the researcher, in that a sample is composed of elements that contain the most characteristics, representative or typical attributes of the population (De Vos et al 2002:207). Neuman (2003:211-213) emphasises that the principle of purposive sampling is to get all possible cases that fit particular criteria using various methods as an acceptable kind of sampling for a special situation. The population consisted of 91 foster care social workers and 30 participants were selected. In view of the fact that the researcher wanted to explore and describe the factors contributing to the backlog and generate suggestions to address this problem, she used purposive sampling and only included social workers who were working in the field of foster care at the Department of Health and Social Development’s office in Johannesburg, as they are information rich sources and were best suited to answer the research questions.

1.6 METHOD OF DATA COLLECTION

According to De Vos et al (2002:314), a focus group interview can be described as a purposeful discussion of a specific subject which takes place between eight to ten people in the same circumstances and with the same interest. Padgett (1998:63-64) explains that group interviews can also be useful because they draw on a form of synergy between group members. Unlike personal interviews, a focus group generates interaction amongst participants which may then result in valuable suggestions or a recommendation as different perspectives are exchanged. Focus groups tap the thinking of participants and elicit their ideas, attitudes, reaction, advice and

insight (Royse 2008:283). The researcher creates a permissive environment in the focus group that nurtures different perceptions and points of view, without pressurising participants to vote, plan, or reach consensus. The discussion is comfortable and often enjoyable for participants as they share their ideas and perceptions. They influence each other by responding to ideas and comments in the discussion (Krueger 1994:6).

Focus group interviews with each group were used for the process of data collection. An interview guide containing open-ended qualitative questions was utilised to guide the interviews and provide participants with the opportunity to express their subjective views and experiences.

To contribute to validity, pilot testing of questions was necessary. A pilot study is a pre-test of an instrument of measurement (De Vos et al 2002:217). The significance/relevance of a pilot study is to:

- assess whether the research is clear, unambiguous and would facilitate the type of information needed to meet the research purpose
- detect problems that must be solved before the major study is attempted
- check the data collection method and suitability of the sampling frame
- obtain an indication of challenges that would arise during data analysis
- consider the involvement of the researcher, e.g. the researcher might realise that she is either over- or under-involved in the project

The questions included in the interview guide were finalised after a pilot study which was undertaken with eight social workers from the Johannesburg office rendering foster care services. The final questions were as follows:

- What do you perceive as a backlog in foster care services?
- In your opinion what are reasons for the foster care backlog?
- What do you perceive as the consequences of the backlog in social work practice?
- What in your opinion can be done to address the foster care backlog?

The focus groups allowed the participants of this study to share their experiences and perceptions and allowed the researcher to conduct proper observations and recordings of emerging themes.

Foster care social workers doing core work at the decentralised offices were interviewed in focus groups to gain an understanding of the topic. The supervisors from individual offices provided data about the office caseload, new applications and supervision cases, as well as the number of the staff being managed by them. Before the interviews participants were asked about their individual caseloads.

1.7 METHOD OF DATA ANALYSIS

Analysis is the process that facilitates making interpretations from fieldwork, observations and interviewing (Krathwohl 2009:313). De Vos et al (2002:339-340) describe data analysis as the process of bringing order, structure and meaning to the mass of collected data. It is a search for general statements about relationships among categories of data.

Padgett (1998:73) confirms that data analysis in qualitative research is inductive, moving from the specific to the general and systematic. Thus raw data, i.e. tapes and field notes, are coded and categorised to make sense of and meaning from data collected during qualitative interviews.

The researcher followed the steps of data analysis suggested by Padgett (1998:73-74) as a strategy to convert qualitative data into a systematic schema to compare related themes and connect islands:

- Organising and coding information by listening to all recorded sessions to make sense of what is said.
- Identifying themes from different focus groups/sessions, themes relating to each other.
- Coding information, describing and classifying data in categories developed in terms of characteristics, namely experiences, feelings and perceptions.
- Interpreting the data gathered to make a final decision for each category and to draw conclusions from the qualitative data. Producing the data collected into some form of explanation, understanding or interpretation of the people and situation investigated.

The researcher immediately made notes after each session pertaining to non-verbal behaviour, seating arrangements and themes that were striking.

1.8 METHOD OF DATA VERIFICATION

To ensure the trustworthiness of the qualitative data, Guba's model in Krefting (1991:214-222) was applied in this research project. Four aspects which ensured trustworthiness were applied, namely truth value, application, consistency and neutrality.

Truth value refers to how confident the researcher is in the truth of the findings on the research design, participants and the context in which the study was undertaken. It is concerned with whether the findings of the study are true reflections of the experiences of the study participants (Krefting 1991:215).

Applicability is defined as the degree to which the findings can be applied to other contexts and settings or to other groups (Krefting 1991:216).

Consistency, according to Krefting (1991:216), is "whether the findings would be consistent if the enquiry were replicated with the same subject or in a similar context".

Krefting (1991:217) states that neutrality in qualitative research should consider the neutrality of the data rather than of the researcher.

1.9 ETHICAL CONSIDERATIONS

Neuman (2003:116) defines ethics as what is or is not legitimate to do, or what "moral" research procedure involves. Ethical consideration includes full disclosure of the purpose of the investigation, ensuring voluntary participation and respect for confidentiality. Alston and Bowles (2003:21) refer to the principle of autonomy which includes the ethical aspects of informed consent, privacy, anonymity and confidentiality. Obtaining informed consent implies that all possible or adequate information on the goal of the research, the procedures which will be followed and the possible advantages and disadvantages are exposed to participants (De Vos et al 1998:25). Privacy includes the right of participants to withdraw from the process at any stage and

to refuse to answer certain questions if they wish (Alston & Bowles 2003:21). Anonymity means that no one, including the researcher, should be able to identify the subjects afterwards (De Vos et al 1998:28). Confidentiality implies that the information given to the researcher will not be divulged to others, except in reporting results as agreed, and also that information will not be used for any purpose other than the research (Alston & Bowles 2003:21-22). De Vos et al (1998:25) also stress that the researcher should protect the participants against physical or emotional harm.

1.10 LIMITATIONS OF THE RESEARCH

Due to the qualitative approach followed in this research project and the fact that the study was conducted only in the Johannesburg office, the research findings are limited. The researcher might have been given inaccurate numbers with regard to the foster care backlog as the Gauteng head office is not given accurate details pertaining to this backlog. The figures usually fluctuate and data is inconsistent. A major limitation of the research was insufficient literature for the study. The researcher struggled to find literature. This was confirmed by a Unisa librarian, who assisted the researcher to find information from old newspapers. The implication of the insufficient literature is that not all sub-themes identified during data-analysis could be verified through literature control.

1.11 CLARIFICATION OF KEY CONCEPTS

Definitions of concepts which are key to the study are clarified in the next section.

1.11.1 BACKLOG

A backlog is defined as an amount of work that should have been finished but is still waiting to be done (Collins English dictionary 2002 sv “backlog”). In the Department of Health and Social Development, Johannesburg office, the concept of backlog is defined as all the cases not attended to in a six-month period or more. Contrary to management’s definition of backlog, there

are still outstanding cases from 2006 awaiting screening (SA. Department of Social Development 2006)

1.11.2 FOSTER CARE

In terms of the Children's Act (38/2005: Section 91), a child is in foster care if the child has been placed in the care of a person who is not the parent or guardian of the child as a result of:

- (a) an order of the Children's Court, or
- (b) a transfer in terms of section 171.

The White Paper for Social Welfare (SA 1997:63) defines foster care as a child-centred service. It could also be a cost-effective, family-centred and community based way of caring for children whose parents are unable to do so adequately.

Foster care in this study applies to children who are orphaned or abandoned who stay with the maternal or paternal families.

1.11.3 SERVICE DELIVERY

In this research the process of foster care service delivery is understood as placing of children in foster care which includes screening of potential foster parents, finalisation of cases, helping clients to apply for foster care grants and supervision of placements, which includes the extension of court orders.

1.11.4 SERVICE PROVIDERS

Service providers refer to social workers employed in the Department of Health and Social Development in the Johannesburg office who work with foster care. In this study the terms service provider, worker, social worker and field worker are used interchangeably.

1.12 DISSEMINATION OF RESEARCH RESULTS

A copy of the study will be made available to the Johannesburg office and all satellite offices. A copy will also be made available to the Library and Research Unit at the Gauteng Department of Health and Social Development. With the assistance from the staff at the Department of Social Work, an article will be prepared and submitted for publication in a professional journal.

1.13 STRUCTURE/FORMAT OF THE RESEARCH REPORT

The research report is divided into the following chapters:

- Chapter 1 covers the introduction and general orientation to the research report, focusing on the problem formulation, problem statement, motivation for the study, research approach and design, population and sampling, methods of data collection, data analysis, data verification, ethical considerations, limitations of research, the clarification of key concepts and the structure of the research report.
- Chapter 2 focuses on research methodology and the qualitative research process.
- Chapter 3 presents the literature review. The research findings are presented and discussed.
- Chapter 4 provides a summary of the research report and will outline the overall conclusion and recommendations.

CHAPTER TWO

RESEARCH METHODOLOGY

2.1 INTRODUCTION

This chapter focuses on the research methodology followed. The researcher provides a denser description of the population, and explains the sampling and data collection methods, analysis procedures, data verification and ethical considerations adhered to, to reach the goal and objectives formulated in Chapter One.

2.2 RESEARCH METHODOLOGY

The research methodology used in this study is based on a distinct methodological tradition of enquiry that explores a social or a human problem (Creswell 2003:15). Thus the major interest of the study lies in the process of understanding how foster social workers care make sense of their experiences.

2.2.1 RESEARCH APPROACH

In Chapter One under paragraph 1.5.1 the theoretical base and characteristics of the qualitative research approach were described. As indicated, the qualitative research approach emphasises depth of understanding and the deeper meanings of human experience that are used with the aim of generating theoretically richer observations (Rubin & Babbie 1997:272).

The researcher used this approach to understand service providers' perspectives of the foster care backlog, factors contributing to and consequences of this backlog as well as their suggestions about what can be done to improve the foster care situation.

Based on the characteristics of qualitative research described by Royse (2008:279), the qualitative approach was applied as follows:

Exploratory: the researcher explored problems of which little was known. During the interview sessions factors contributing to the foster care backlog were explored. The researcher generated new theory from the observation of a situation. This resulted in the participants making sense of the problem encountered and creating a new perspective on their perceptions and experiences. The plot had a denser description and meaning.

Value-free: The researcher's role in the interviews was that of a learner, not an expert or specialist. She wanted to know "what was going on here". The researcher listened attentively to the emerging themes, perceptions and experiences of the participants and to their experiential world to enable them to create and make sense and meaning of their experiential world.

Journalistic/narrative: Qualitative research is most often narrative and is based on the words used by the participants to describe their life experiences. The researcher quoted and narrated the words used by the participants to describe their experiences of the foster care backlog. This enabled the participants to express their feelings and behaviour towards their everyday life experience.

2.2.2 RESEARCH DESIGN

In Neuman's view (2000:327), the research design serves as a guideline in the study to be conducted for data collection, analysis and interpretation of data. A research design is a plan or blueprint of how the researcher intends to conduct the research (Mouton 2001:74). Based on Neuman's point of view, the research design can be explained as the process or a plan according to which the research study will be conducted.

In view of the above literature and as indicated in Chapter One, the researcher wanted to explore and describe the factors contributing to the foster care backlog as well as suggest possible solutions from the service providers' perspective. She therefore employed an explorative, descriptive and contextual research design.

The researcher employed exploratory research to gain insight into the situation of the foster care backlog. The data was collected through the facilitation of four focus groups that consisted of foster care social workers.

To describe situations and events the researcher undertook observation to understand the essence of experiences within the foster care situation and then described what was observed during the interview sessions. She analysed data and made interpretations from observations and interviewing. As stated in De Vos et al (2002:339-340), the researcher brought order, structure and meaning to the mass of collected data. She searched for general statements about relationships among categories of data. The raw data, i.e. tapes and field notes, were organised, information was coded, and data was described and classified in categories developed in terms of characteristics, namely experiences, feelings and perceptions, to make sense and meaning. The collected data was interpreted to develop conclusions.

The contextual design was employed to avoid the separation of participants from the broader context to which they may be related, as stated in De Vos et al (1998:281). The researcher explored the foster care backlog in the specific context of the Department of Health and Social Development's Johannesburg office, at the decentralised offices in Senoane (Soweto), Alexandra, Midrand and Lenasia. In other words, the phenomenon of the foster care backlog was investigated in a specific context.

2.2.3 RESEARCH PROCESS

In this section the population and sampling procedures, method of data collection, method of data analysis, method of data verification and ethical considerations are described in more detail.

2.2.3.1 Population

Neuman (2000:196) describes population as “an entire set of universe, of the people, objects or events of concern to a research study, from which a sample is drawn”. He sometimes refers to the population as a target population. The target population for this study included 91 social

workers from the Department of Health and Social Development, Johannesburg office, who were in the foster care division, namely production (junior social workers) and advanced production (senior social workers rendering foster care). The Johannesburg office has satellites offices in Midrand with ten social workers, Alexandra with eleven social workers, and Lenasia with 22 social workers and Senaoane (Soweto) with 22 social workers.

2.2.3.2 Sampling

As discussed in Chapter One, paragraph 1.5.3.2, the researcher used non-probability, purposive sampling to select a total of 30 participants to be involved in the research study. The following criteria for inclusion of participants in the sample were used:

- Social workers had to be employed at the Department of Health and Social Development decentralised offices, namely Lenasia, Midrand, Alexander and Senaoane (Soweto).
- Social workers had to be employed in the foster care section, both production and advanced production.

The sampling method enabled the researcher to obtain specialised insight into and perspective on experiences and conditions she wished to understand.

Social workers doing core work at the decentralised offices were interviewed in focus groups to gain an understanding of the topic. Krueger (1994:6) explains that the focus group is repeated several times with different people. Typically a focus group study will consist of a minimum of three focus groups but could involve as many as several dozen groups. The number of focus groups was determined by the principle of data saturation. Gladding (1994:5) states that data saturation refers to the repetitive nature of quality, i.e. experiences, themes, from other groups and responses made by different groups. Responses and related responses are compared to those already received until saturation is reached. The researcher planned to have at least one focus group interview per decentralised office. Data saturation occurred after the interviews with the Lenasia, Midrand and Senaoane (Soweto) offices. A last focus group was held with the Alexander office to confirm data saturation.

Since the ideal size for a focus group is between seven and ten participants (Krueger 1994:6), the researcher tried to include eight social workers in each focus group. However, she struggled to find eight volunteers from the Alexander office. After the fourth attempt she managed to include six participants. Eight social workers each from the Senaoane (Soweto), Midrand and Lenasia offices were included in the other focus groups.

2.3 METHOD OF DATA COLLECTION

In this section different aspects of data collection are further explored, e.g. the pilot study, preparation of participants, focus groups, the interview, the role of the researcher and data preservation.

2.3.1 PILOT STUDY

According to De Vos et al (2002:316), pilot testing focus group questions are difficult. Although doing a pilot study is a cardinal rule of research, it presents special problems with focus groups. The true pilot test is the first focus group with participants. Thus a pilot study as pre-testing the instruments is important for the researcher to have insight into whether the study undertaken provides the information desired by the researcher. Because of the number of social workers, the group of the Soweto office was targeted for a pilot study. These participants did not participate in the focus groups conducted during the study. The pilot study was employed to pre-test the questions which would form part of the interview guide, thus to determine the validity of the research questions before the main study was done.

The phrasing of questions was changed in the main study because during the pilot study the researcher observed that different questions asked for the same content and this confused the participants because they ended up saying “that’s the same question”. The research supervisor and the researcher restructured two questions in preparing for the main study. The first question was initially formulated as “What is your perception of the foster care backlog?” This was changed to “What do you perceive as a backlog in foster care services?” The second question

read “What in your opinion are factors contributing to foster care backlog?” Participants responded better to “In your opinion what are the reasons for the foster care backlog?” The terms “reasons for” and “factors contributing to” are used interchangeably in this study. The pilot study also enabled the researcher to reflect back on her role as researcher when listening to the recorded data and helped her to guard against bias when conducting the main study. The researcher developed confidence to conduct the main study.

2.3.2 PREPARATION OF PARTICIPANTS

The prospective participants were contacted by telephone at their place of work at the decentralised offices of Senaoane (Soweto), Lenasia, Midrand and Alexandra. A meeting was arranged at each office to provide prospective participants with information about the research. They were informed about the purpose of the research and the research procedures, and the researcher ascertained their willingness to participate in the research endeavour. In total, 41 social workers from the different satellite offices attended these meetings. The researcher mentioned that the number of participants needed in a focus group was between seven and ten members. Eight social workers each from the Senaoane (Soweto), Midrand and Lenasia offices and six social workers from the Alexander office were included in focus groups. The number of focus groups was determined by data saturation.

The researcher explained how the data was going to be collected and the questions that would be asked during these interviews were provided to the prospective participants. She explained to them that the requirement of Unisa is that the interviews be recorded in order for the supervisor to understand what was done during the interviews. Social workers who volunteered to participate in the research were requested to sign consent forms (see Appendices A and B). Arrangements were made for the focus group interviews to be conducted in English. Interviews were scheduled to last about 55 minutes.

2.3.3 FOCUS GROUPS

Focus group interviews were utilised for the process of data collection. According to De Vos et al (2002:314), a focus group interview can be described as a purposeful discussion of a specific subject which takes place between eight to ten people in the same circumstances and with the same interest. The focus group is a special type of group in terms of purpose, size, composition and procedures. Krueger (1994:6) refers to a focus group as typically composed of seven to ten participants who are selected because they have certain characteristics in common that relate to the topic of the focus group.

Padgett (1998:63-64) maintains that group interviews can also be useful because they draw on a form of synergy between group members. Focus group interviews bring some clear advantages to a qualitative study. Unlike personal interviews, a focus group generates interaction between participants which may then result in valuable suggestions or a recommendation as different perspectives are exchanged. Focus groups tap the thinking of participants and elicit their ideas, attitudes, reaction, advice and insight (Royse 2008:283). They are a means of better understanding how people feel or think about an issue, product or service (De Vos et al 2005:299). Gladding (1994:1) indicates that a focus group could be meaningful in the case of a new topic, or when one is trying to take a new topic to a population, or if one wants to explore thoughts, feelings and not just behaviour. Krueger (1994:6) confirms that the focus group is repeated several times with different people. Typically a focus group study will consist of a minimum of three focus groups but could involve as many as several dozen groups. Foster care social workers doing core work at the decentralised offices were interviewed in focus groups to gain an understanding of the topic.

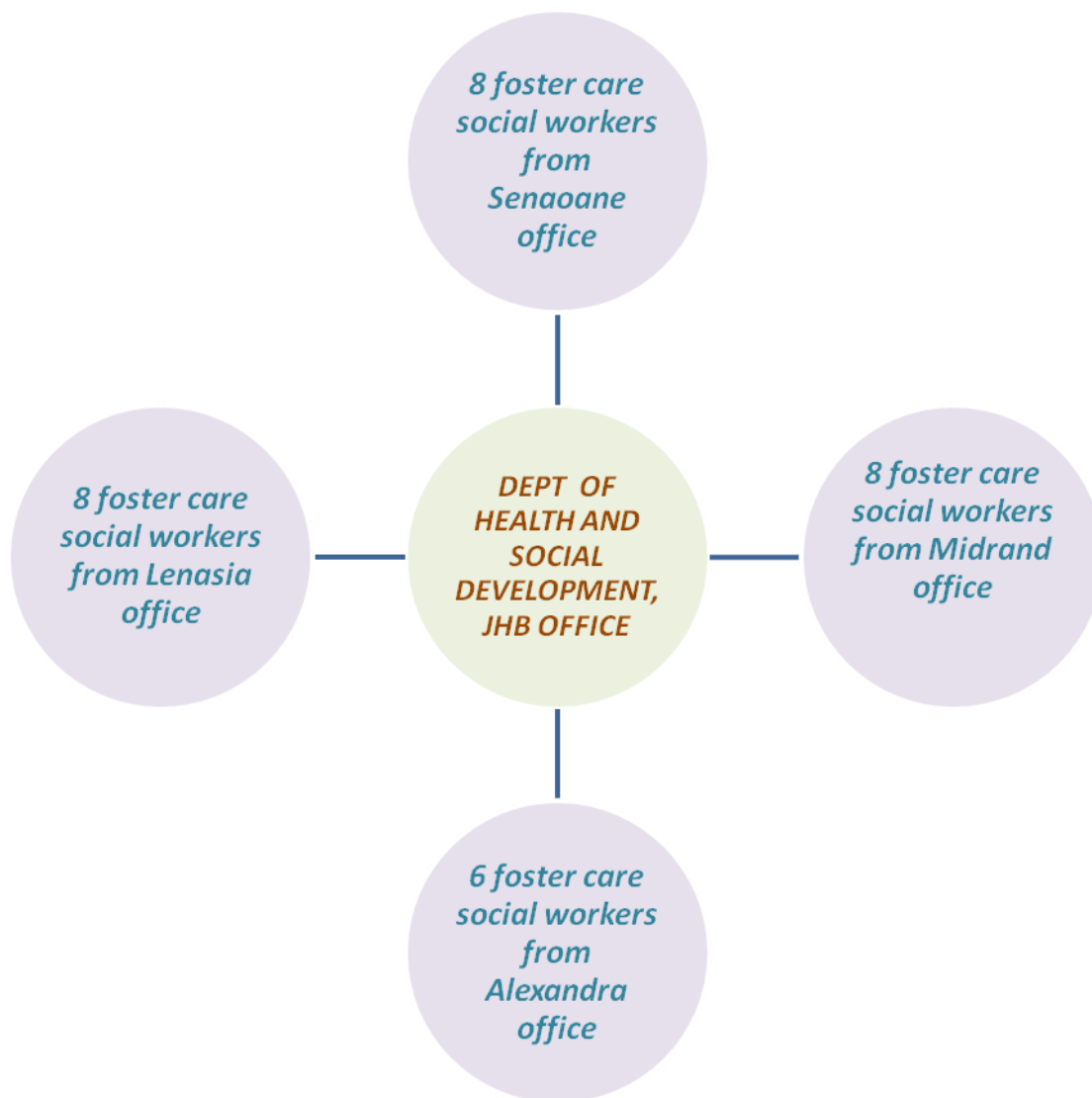
FIGURE 2.1 FOCUS GROUPS

Figure 2.1 illustrates the number of participants from the Department of Health and Social Development, Johannesburg office, who took part in the different focus groups at satellite offices.

An interview guide containing open-ended questions was employed to guide the interviews and provided the participants with the opportunity to express their subjective views.

2.3.4 INTERVIEW ENVIRONMENT

A focus group is a carefully planned discussion designed to obtain perceptions on a defined area of interest in a permissive, non-threatening environment. The discussion is comfortable and often enjoyable for participants as they share their ideas and perceptions. Group members influence each other by responding to ideas and comments in the discussion (Krueger 1994:6).

As Bozarth (1992:5) indicates, a focus group needs to be held in a conducive, non-threatening environment to make the subjects comfortable. The setting is the physical location in which data collection takes place. It could be an area that is natural to those being studied, for example home or workplace. The interviews took place at the various offices where the participants worked. The researcher went to the participants' workplace as a convenient venue. The aim was to promote active participation since the participants were used to the environment. This made them comfortable enough to express their opinions freely.

2.3.5 INTERVIEW QUESTIONS

The interview questions are indicated in Chapter One, paragraph 1.6.

2.3.6 THE INTERVIEW

The researcher held interviews with the supervisors from the four satellite offices to ascertain the size of the caseloads. The interviews were conducted separately at the respective offices. The caseload at Senaoane (Soweto) was 1 039 new and supervision cases. Midrand had \pm 900 new and supervision cases. Both the Alexandra and Lenasia offices had \pm 1 500 new and supervision cases each. Participants were also asked about their individual caseloads during the focus group interviews.

The researcher used the following interviewing techniques, as described in De Vos et al (2002:294):

- Listening attentively by using verbal cues to respond.

- Probing to acknowledge what the client said.
- Clarifying to gain clarity on unclear statements like “you seem to be saying...”
- Encouraging phrases like “could you please tell me more”.

The interviewing process and time were monitored. Participants were made aware of when a session was coming to an end. The environment was conducive for participants to ask questions freely during the process.

2.4 ROLE OF THE RESEARCHER

Rubin and Babbie (1990:284) state that the observer-as-participant is one who identifies himself or herself as a researcher, and interacts with the participants in the social process but makes no pretence of actually being a participant.

The researcher participated in the interviews, observed the participants’ behaviour, listened to their subjective experiences and interacted closely with them, but nevertheless tried to remain objective. This was not easy as the researcher also works at the Department of Health and Social Development with foster care. During the pilot study she realised that she became more of a participant than an observer by sharing her own feelings and views. She avoided this during the other focus group interviews although she remained aware of her dual role. The process of the interview was also observed in that the researcher noticed how the participants talked and acted during the interviews.

2.5 DATA PRESERVATION

Permission was obtained from the participants to record the interviews. This was beneficial for the purpose of the study. The tape recorder was tested during the pilot study in order to identify technical problems that could result in the loss of data. The cassettes used were of high quality.

Holloway and Wheeler (1996:68) state that the best form of recording interview data is tape recording because the tapes contain the exact words used during the interview inclusive of

questions. Recording the interviews safeguards researchers, in the sense that it prevents them from not making the mistake of forgetting important information. It also allows the researcher to maintain eye contact and pay attention to what is said. All focus group interviews were transcribed after each session.

Field notes were taken during the interview session to support the recording. These notes detailed the things that the researcher heard, saw, experienced and thought during the course of data collection and reflected on during the study.

The following was observed:

- The order in which the participants spoke.
- Seating arrangements.
- Non-verbal cues such as posture, eye contact and gestures among the group members.
- Striking themes.

All data collected is kept safe at the researcher's residence and protection of the participants was considered to ensure that no information would be publicly divulged. The precautionary measures to safeguard the data were as follows:

- All audio tapes were labelled per group studied.
- Collected data was placed in a safe place.
- The only person with access to the data collected is the researcher.

2.6 METHOD OF DATA ANALYSIS

Data analysis is the process of bringing order, structure and meaning to the mass of collected data (De Vos et al 2002:339-340). It is a search for general statements about relationships among categories of data. Padgett (1998:73) asserts that data analysis and qualitative research are inductive moving from the specific to the general and systematic. Thus raw data, i.e. tapes and field notes, are coded and categorised to make sense and meaning of the data collected during qualitative interviews.

The researcher followed the steps of data analysis suggested by Padgett (1998:73-74):

- Data was organised and information coded by listening to all recorded sessions to make sense of what was said.
- Themes relating to each other were identified from different focus groups/sessions.
- Information was coded and data was described and classified in categories developed in terms of characteristics, namely experiences, feelings and perceptions.
- Data gathered was interpreted to make a final decision regarding each category and to draw conclusions of explanation, understanding or interpretation concerning the people and situation investigated.

After individual coding was done by the researcher and supervisor, another lecturer acted as an independent coder and mediator in the discussion of the categories and themes identified.

2.7 METHOD OF DATA VERIFICATION

Guba's model in Krefting (1991:214-222) for ensuring the trustworthiness of qualitative data was applied in this research study. The four aspects as mentioned in Chapter One for ensuring trustworthiness were applied as follows:

Truth value refers to how confident the researcher is in the truth of the findings on the research design, participants and the context in which the study was undertaken. The researcher conducted focus group interviews with eight foster care social workers from Soweto, as a pilot study at the Department of Health and Social Development, Johannesburg office. Thirty foster care social workers from different satellite offices were interviewed in four focus groups with the same interviewing guide questions being posed to ascertain the credibility of data. The same interviewing techniques, such as probing, listening and self-disclosure, were utilised to ensure the credibility of the study. Summarising was also employed by the participants to make sense of what was discussed.

Applicability is defined as the degree to which the findings can be applied to other contexts and settings or to other groups (Krefting 1991:216). The researcher provided a dense description of the methodology applied in the research. This will allow future researchers to check

transferability of the findings. The issue of the foster care backlog affects other offices of the Department of Health and Social Development; there would be a possible need to conduct a similar study to enhance quality service delivery.

Consistency, according to Krefting (1991:216), is “whether the findings would be consistent if the enquiry were replicated with the same subject or in a similar context”. As consistency is found through the strategy of dependability, the researcher coded the data and her supervisor also did so independently. A discussion on categories and themes was facilitated by an independent lecturer. The researcher and her supervisor agreed on the categories and themes, although details identified under some themes differed. Full agreement was reached after discussion. The researcher also provided a dense description of the research methods of data collection, analysis and interpretation.

Krefting (1991:217) states that neutrality in qualitative research should consider the neutrality of the data rather than of the researcher. Since the researcher works as a foster care worker at the Department of Health and Social Development, Johannesburg office, she tried to remain aware of her own experience and role within the department. She became aware of her bias by reflexive analysis when she listened to the recorded data of the pilot study, and discovered that she had become involved by giving her own opinion and sharing her feelings. She refrained from bias by employing the method of triangulation and wore the cap of a researcher, not a worker, in all other focus groups. The researcher guarded against bias during the four focus group interviews. Her supervisor also confirmed the research process.

2.8 ETHICAL CONSIDERATIONS

The following ethical considerations were taken:

- Sufficient data about the study was provided to the participants. Informed consent forms were distributed to participants to sign upon volunteering to participate.
- Participants were given the opportunity to decide if they wanted to participate in the study or not.

- The researcher ensured that participants were competent to give informed consent, i.e. were of a sound mental state to make independent decisions.
- Confidentiality was assured, identities of the participants were not revealed, and the researcher undertook not to link them to the information they provided during the study without their permission. Some of the people interviewed preferred to stay anonymous hence in the bibliography their names are not mentioned.
- There was no risk or personal harm to the participants in their professional capacity.
- Identities and interests of the participants were protected. The information gathered was accessible only to the researcher, the study leader and supervisor.
- On completion of data analysis and report writing, all data will be kept for three years and then discarded.
- The copies of the report will be made available to the Johannesburg office, satellite offices and head office of the Gauteng Department of Health and Social Development.

2.9 REFLECTION ON THE RESEARCH PROCESS

The researcher learned a great deal during the research process, especially during the pilot study. As a beginner she was more of a participant than an observer. Upon listening to the audio tape and discussing with the supervisor, the researcher created a new perspective in terms of her role as a researcher. When conducting the main study the researcher was able to guard against bias, remained neutral and listened for themes.

If the researcher had to redo the research project she would know what is expected of her as a researcher. With the experience gained from the research process, she would be confident and aware of her role as a researcher. It was a journey to learn, a journey of discovery.

The limitations were that management might not have given accurate numbers in terms of the backlog. In addition, the social workers who did not participate seemed to fear that something would happen to them if they made themselves available. This was evident when the researcher mentioned the audio taping. It might be difficult to find participants for a similar research project.

2.10 CONCLUSION

The research process employed in this study was outlined in this chapter. The researcher explored the phenomenon under investigation, namely factors contributing to the foster care backlog and service providers' perceptions of possible ways to address this backlog. The research approach used in this study was qualitative with the aim of understanding and interpreting the meaning that the participants gave to everyday life. The research design employed was exploratory to gain insight into a situation and descriptive to describe what was observed by the researcher and identified by the participants to get a denser description of the service providers' perspectives. The research design was also contextual in that the researcher sought to avoid separation of participants from their related context, i.e. the phenomenon of the foster care backlog was investigated in a specific context of social workers doing foster care at the Department of Health and Social Development, Johannesburg office. The focus group interview was the main data collection method. Padgett's steps of data analysis were used to bring order and structure to the mass of data collected and to obtain answers to the research question. Guba's model for ensuring the trustworthiness of qualitative data was applied in this research study. The next chapter focuses on the presentation of the research findings and the literature review.

CHAPTER THREE

RESEARCH FINDINGS AND LITERATURE REVIEW

3.1 INTRODUCTION

In this chapter research results are presented. The discussion focuses on the profile of the participants who were employed by the Department of Health and Social Development, Johannesburg at the satellite offices, namely Senaoane (Soweto), Lenasia, Midrand and Alexandra. Research findings from the study conducted and the literature review are discussed according to categories, themes and subthemes.

3.2 PROFILE OF PARTICIPANTS

The profiles of the participants are presented in the following table to indicate gender, the years of experience in foster care and social work experience in general. Focus group interviews were conducted with four groups and a total of 30 foster care social workers. They were all black and their work experience ranged from 10 months to 23 years. In this study only field workers were interviewed, not supervisors.

TABLE 3.1: PROFILE OF PARTICIPANTS IN FOCUS GROUPS

SERVICE OFFICE	GENDER	OFFICE TERM	EXPERIENCE IN FOSTER CARE	EXPERIENCE AS A SOCIAL WORKER
SENAOANE	Female	5 years	5 years	5 years
	Female	4 years	4 years	4 years
	Female	2 years	4 years	4 years
	Male	3 years	3 years	3 years

OFFICE	Female	2 years	2 years	2 years
	Male	1 year, six months	1 year, six months	1 year, six months
	Female	1 year	1 year	1 year
	Male	10 months	10 months	10 months
LENASIA OFFICE	Male	3 years	4 years	4 years
	Male	1 year	2 years	2 years
	Male	1 year	2 years	2 years
	Female	2 years	2 years	2 years
	Female	1 year	1 year	1 year
	Female	1 year	1 year	1 year
	Female	1 year	1 year	1 year
	Female	1 year	1 year	1 year
MIDRAND OFFICE	Female	23 years	23 years	23 years
	Female	11 years	11 years	11 years
	Female	8 years	8 years	8 years
	Female	4 years	6 years	6 years
	Female	5 years	5 years	5 years
	Female	4 years	4 years	4 years
	Female	4 years	4 years	4 years
	Female	2 years	2 years	2 years
ALEXANDRA OFFICE	Female	4 years	7 years	7 years
	Female	3 years	6 years	6 years
	Female	3 years	4 years	4 years
	Male	3 years	4 years	4 years
	Male	1 year	1 year	1 year
	Female	1 year	1 year	1 year

This table provides a list of the research participants in different satellite offices of the Department of Health and Social Development in the Johannesburg office. The table indicates or compares the experience, ratio of male to female workers in the office and office terms of foster

care social workers at the different satellite offices. Eight males and 22 females were included in the study. The shortest term of office was ten months and the longest was 23 years. Fifteen social workers had been employed by the Department of Health and Social Development for a year or less, which reflects a high level of staff turnover. This was evident in the research study: staff turnover is one of the factors contributing to the foster care backlog. Of the 30 social workers interviewed, only 21 worked with foster care during their office term.

3.3 RESEARCH FINDINGS

From the research analysis the researcher and supervisor agreed on the four categories and a number of themes and subthemes under these categories. The following table gives an overview of these categories, themes and subthemes.

TABLE 3.2: CATEGORIES AND THEMES WHICH EMERGED FROM THE DATA ANALYSIS

	CATEGORIES		THEMES		SUBTHEMES
1	Perceptions of foster care backlog		None		
2	Reasons for/factors contributing to foster care backlog	1	Social workers	1 2 3	High caseload Unequal distribution of files High turnover of staff
		2	Clients	1 2	Poor cooperation of clients Influx of clients from rural areas
		3	Management	1	Lack of support and training from management and supervisors

				2	Insufficient supervisors
				3	Red tape and poor administration
				4	Insufficient consultation and communication with staff
				5	Poor implementation of departmental strategies
				6	Lack of resources
				7	Role of politicians
				8	Inconsistency of Commissioner at the Children's Court
3	Consequences of foster care backlog	1	Social workers	1	Feeling of helplessness
				2	Feeling demoralised
				3	Demotivated
		2	Clients	1	Poor service delivery
		3	Profession	1	Change agents
				2	Decrease in quality of service
4	Suggestions to address foster care backlog	1	Management	1	Specialisation
				2	Appointment of staff
				3	Resources
				4	Education of management/politicians
		2	Social workers	1	Educating clients
				2	Workshops and training
				3	Thorough investigations
		3	Department of Justice	1	Decentralisation of Children's Court

3.4 CATEGORIES AND THEMES

During the data analysis processes the following categories and themes emerged. The findings are discussed according to the categories and themes listed in table 3.2.

3.4.1 CATEGORY 1: PERCEPTIONS OF FOSTER CARE BACKLOG

There were different views on what foster care backlog is. Some workers saw a backlog as all cases not attended to. Others viewed a backlog as cases older than six months or a year. Most of the workers viewed a backlog as any file that had not been attended to, lying in the office, like new applications (39's) and supervision cases with lapsed orders (03's and 16(2)'s):

“What I perceive as backlog in my case load neh, I think is those cases that I have been to court with, that has not been finalised yet, cases that are more than six months, to me they are regarded as backlog.”

“I would say backlog is something that has been in my office for a long time probably a year and unattended. So for me anything, any file that has not been attended to lying in my office is like a backlog to me 'cause if the 39's or 03, you find that ok the order lapsed in 2008 and now we're in 2010 and to me that is the backlog, why is in my office not attended.”

“You know we have been channelled to think in terms of six months backlog but er for me once the application has been lodged and I have the file with me and I have not finalised it's a backlog.”

“Cases not attended to for me this is backlog.”

“For me backlog is like files that are older than six months and are not attended to and again 16(2)'s that has lapsed already that has expired need to be extended. Those are backlog to me.”

The Department of Health and Social Development, however, defines a backlog as any case not finalised within six months. According to Lekgoro (2007:13), “the Department will break the backlog with regard to foster care. We have positioned the Department to avoid the recurrence of backlogs and to finalise each case in no more than six months”.

The researcher is thus of the opinion that there is confusion around the definition of the foster care backlog and that service providers and management define backlog differently. This confusion further contributes to the problem as it is almost impossible to address a problem if there is no consensus about what needs to be addressed.

3.4.2 CATEGORY 2: REASONS FOR/FACTORS CONTRIBUTING TO FOSTER CARE BACKLOG

The themes that emerged from the reasons for the foster care backlog were social workers, clients and management. The participants responded articulately to the question about the reason for foster care backlog. The answers of all groups were similar almost as if they had prepared beforehand.

THEME 1: REASONS/FACTORS RELATING TO SOCIAL WORKERS

Several factors relating to social workers were identified:

SUBTHEME 1: UNEQUAL DISTRIBUTION OF FILES

The participants indicated that high caseloads and the unequal distribution of cases to area workers contribute to the backlog. The social workers' caseloads are unevenly distributed; there are workers who have more cases than others. The supervisors stated that they allocate files to workers according to area. This, according to the researcher's point of view, contributes to the uneven distribution of cases because the supervisors do not monitor or check the size of the worker's caseload, they just allocate to the relevant worker in that area. Social workers also have other responsibilities, e.g. crisis management and adoption, and not only foster care.

SUBTHEME 2: HIGH CASELOAD

On 08 April 2010 the caseload of the Alexandra office was 1 310 supervision cases (cases that have been finalised at the Children's Court), 99 new applications (cases that have not been finalised by court) older than six months and 91 less than six months old, with eleven social workers and five auxiliary social workers. In the Midrand office the caseload was 900 new cases and supervision cases with ten social workers and seven auxiliary social workers. In the Senaoane (Soweto) office the caseload was 1 039 new cases and supervision cases, with thirteen social workers and six auxiliary social workers. The Lenasia office caseload was 1 500, with eleven social workers and five auxiliary social workers. The Lenasia office thus carried the heaviest case load, followed by the Alexandra office. The social workers said the following about their caseloads:

“The ratio of cases per social worker is too high, files are not distributed evenly to area social workers. I have one hundred and seventy something files to attend to what about supervision 16(2), 33's. We're doing many things and uncontrollable cases we're doing adoption.”

“I'm doing opening and finalisation of new applications and supervision and attend to crisis and visit place of safety to conduct interview to children in places of safety. The same social worker is expected to do adoption.”

“The issue of giving like a lot of files in our offices, you can't basically focus on one thing like focusing on backlog but also we had to attend also to the 16(2) and 33's at the same time and also transfers which also requires a lot of attention.”

This is in line with an article in the Cape Argus (Jooste 2009:3): “Social workers are overwhelmed; social workers are battling with heavy work-loads and are handling more than 70 cases each day.” The researcher's opinion based on the above information is that social workers are inundated with high volumes of cases and are expected to manage all of them. Unequal distribution of files to area workers contradicts the Code of Conduct for the Public Service (Public Service Commission 2002:33) that states that the supervisor should guard against

unequal work distribution and should monitor the work of the subordinates to ensure quality service delivery. The researcher feels that the backlog issue is rooted in this multitasking and overloading of social workers.

SUBTHEME 3: HIGH TURNOVER OF THE STAFF

The high turnover of social workers, due to low salaries and migration, contributes to the foster care backlog. Positions are often not filled, allowing the backlog to grow further. When a social worker is finally appointed, he/she is met with a huge backlog, leaving this worker feeling overwhelmed and he/she usually resigns quickly, again contributing to the high turnover cycle:

“The resignation of social workers and not filling the post, maybe they will take three to four months or more to employ another social worker that also cause backlog. The new social worker will struggle because she/he is new from the different place so he will struggle.”

“The shortage of social workers and also basically because of the new Children’s Act adapting to it will also form part of like the reason why we have backlog.”

“Social workers are not paid well they migrate and immigrate to other countries for greener pastures.”

“Social workers leave the profession because they are not well paid.”

A social worker responsible for foster care placement in one of the rural research sites voiced similar concerns: in May 2003 she faced an accumulated caseload of 123 foster care applications for processing. Turnover time for foster placements, from the point of application to the granting of a court order, was said to vary in the urban sites from 6-18 months, depending on the social work backlog (Meintjies, Budlender, Giese & Johnson 2003). According to the Cape Argus article (Jooste 2009:1), social workers are offered better salaries or move to more lucrative posts overseas.

THEME 2: REASONS/FACTORS RELATING TO CLIENTS

The participants identified a few factors relating to clients:

SUBTHEME 1: POOR COOPERATION OF CLIENTS

The participants indicated that the clients are not honest and cooperative; they give false information and don't notify social workers if they move away. They don't bring outstanding documents in time and leave the responsibility of caring for the foster child to other people not appointed to do so.

“Also the addresses, location of addresses where upon, we cannot locate the address given by the clients.”

“And also withholding of information by clients between cooperating and non-cooperating of clients they with hold correct information and it's a problem.”

“Most of the people from the plots don't have identity documents and their children don't have birth certificates so there's no proper documentation.”

“I suppose it is socio-economic factors, I mean as you know that we're in this economics down turn most of the people, I mean who are bread winners are being retrenched and now you find that many of the families are fragile, they find creative means to actually survive to make ends meet. Some of our clients either falsify or fabricate information in order to acquire this financial contribution from the government. I mean you find that most of our cases that are there, that are contributing to this backlog. You find that they know their parents and after you have investigated wasted your own personal time and energy you find that there is a mother and father of that particular child he no longer falls within the ambits of foster care.”

“Clients who are not cooperative it seems like a person applied in 2000 you go to his place and you don’t find that person and maybe the person has moved to another place and you don’t even know and you remain with that file.”

“Is caused by parents who don’t cooperate like when you’re about to submit the report to court the other one come and say that no I can’t continue with this I had to give it to my mother ‘cause I’m always busy , we had to start from scratch and do it. The clients shift responsibility to the social worker.”

“The clients give false information so you need to double check everything whether the foster parent is staying with the child because sometimes you find that the children are not actually staying with the foster parent, they like stay with another foster parent in another province, things like that.”

In assessing the data given by the participants it is evident that poor cooperation of clients contributes to the backlog since the social workers have to wait for documents and waste time trying to locate clients.

SUBTHEME 2: INFLUX OF CLIENTS FROM RURAL AREAS

Clients from rural areas often come to Johannesburg in the hope that they will receive more effective service delivery from the Department of Health and Social Development:

“The immigration because lot of people migrate to Johannesburg, I mean for better resources only if maybe the Government should also look at rural development. I’ve been watching and it has been a pattern, most people leave their homelands come here to apply for foster care and once it is done they go back again and say the child has relocated to Eastern Cape or Mpumalanga ‘cause they know that resources in Johannesburg are better, yet they’ve been striving for a long time in their homelands to apply for foster care, they say “Egoli kuyashesha” meaning in Johannesburg things are done faster.”

“Lack of awareness about foster care from like let’s say Eastern Cape I think it also causes backlog on our side.”

These statements made by participants are confirmed by literature. Mpumalanga has a high poverty level and is predominantly rural. This impacts on service delivery, especially in places which are not easily accessible. People move from rural areas to Johannesburg to seek help because in Johannesburg things are done quicker. This increases the number of foster care applications. At times the clients leave the area without informing the service providers and this creates duplication of services and adds to the backlog (SA. Portfolio Committee on Social Development 2009:2).

It is apparent that the above factors create a burden to service providers since without the cooperation of clients and the proper documentation needed; the case will not be processed in court. The poor infrastructure that hinders the service providers in finding clients in their dwellings also affects quality service delivery and contributes to the backlog. The clients that flock from rural areas disturb the functioning of social workers and create backlogs in the process.

THEME 3: REASONS/FACTORS RELATING TO MANAGEMENT

The participants felt strongly about factors relating to management:

SUBTHEME 1: LACK OF SUPPORT AND TRAINING FROM MANAGEMENT AND SUPERVISORS

The participants indicated that management does not give support or take care of the social workers. There is not enough supervision, and there is no proper training provided to newly employed social workers in terms of policies and legislation regarding foster care. Social workers don’t understand what is required in terms of the work given to them.

The researcher observed that the new social workers are not adequately trained or inducted in terms of foster care. They are just given files to work on without proper supervision and training.

“We are coming in the field you find that again you don’t get necessary support in terms of understanding what is exactly that is required and how, you still to fill in that way, I mean the Department does not help in putting structures in place to prepare those newly appointed workers to actually fit in, I mean the supervisory measures are not of quality in a sense.”

“Department is not training the personnel they must be trained and equipped with abreast information so that you can deal with the issues in a right way.”

In order to achieve the overall objective of the public service, which is to render excellent services to the public, all supervisors/managers in the public service are obliged to see that the personnel under their control have the knowledge and skills to perform their tasks at the required level, are motivated to render such services and are willing and able to do so (Public Service Commission 2002:31).

The lack of support and proper training of personnel by supervisors and management plays a major role in delaying the process and this has resulted in backlogs. It also contradicts the Code of Conduct for the Public Service (Public Service Commission 2002:31), which stipulates that a supervisor must, in consultation with a newly appointed employee, identify his/her in-service training needs which is in line with his/her sheet and procedure.

SUBTHEME 2: INSUFFICIENT SUPERVISORS

“The backlog is not only on social workers, supervisors are bombarded with many social workers, doesn’t meet the ratio level, the supervisor per social workers. They have to canalise many cases.”

“The ratio between supervisors and social workers if I’m not mistaken we’re thirteen or nineteen in our section, so as well that thing detracts her from doing her work accordingly and properly so is the problem as well.”

Supervisors/managers should constantly monitor the workload and level of functioning of utilised personnel in order to ensure that all personnel are utilised optimally. This will avoid a situation where some employees have too much work while others have too little to do (Public Service Commission 2002:33). If there are not enough supervisors, the workload of social workers cannot be monitored effectively.

SUBTHEME 3: RED TAPE AND POOR ADMINISTRATION

The administrative system with its red tape creates more backlogs. It takes up to six months for a file to go through the administrative process before it reaches the social worker. Clients are not informed from the beginning about requirements, e.g. documentation, and are sent from one department to the next, which slows down the process even further. Files are also allocated to vacant posts. The opinion was expressed that keeping record of the backlog takes up further time which could have been used to reduce the backlog. The issue of “Supatsela” that was introduced and expected to be used has also contributed to the backlog. “Supatsela” refers to a system where the files have to be taken to registry for data capturing and electronic processing. Some files have gone missing and fieldworkers are delayed during the process.

“I think the issue of applications where the client applies in January and the file reaches the social worker in July, I think it also causes backlog already because when I receive the file after six months it is already a backlog.”

“The red tape in new applications where the case reaches the social worker after the client has applied six months or a year. When it comes to the social worker it is a backlog already.”

“That thing of Supatsela files are just missing, they don’t even answer you the right way they will just say we have already returned all of your files.”

“The process that they have created, well if I open the case I’m able to tell the client what are the required documents ‘cause there’s always this passing of the bug, like a I’m not saying I’m trying to accuse anybody but even though somebody from intake sees that this document should be needed but ‘cause she/he will not be handling that case she will just leave it there and not tell the client to go and apply for the full birth certificate. The client will wait for six months coming to you again you tell her to go to Home Affairs to apply for the full birth certificate and will wait for another six months.”

“Processes involved in applying for foster care. They should have simplified this ‘cause it has more than one department in it. You get the Department of Education, you’ve got Justice Department your Social Development and then you got Home Affairs. I think before opening the file I’m able to tell the client what are the required documents.”

“The head from Director’s office they always want this things where you have to register the backlog, the reasons why there’s backlog, so it really in itself takes a lot from us as workers.”

“There’s poor implementation of departmental strategies. They allocate files to vacant posts and that creates backlog to the newly employed social workers.”

SUBTHEME 4: INSUFFICIENT CONSULTATION AND COMMUNICATION WITH STAFF

“I think consultation is very important in terms of this new Children’s Act, they must consult us ‘cause we’re the ones who are facing this challenges.”

“They need to come down to us.”

“From Management people need to come down to us and listen to us what are the challenges, so no one , they will send you a paper work, the paper work is flowing from top levels and down to us to try to police us in what we’re doing, but there’re major problems down there. Now you

can hear there's a problem between social workers and social auxiliary workers. The Department itself has created this problem, basically because of the new Act adapting to it."

The participants made the vital point that communication and staff consultation are very important. People need to have dialogue concerning services rendered to clients. Management needs to know and understand the challenges encountered by the personnel.

SUBTHEME 5: POOR IMPLEMENTATION OF DEPARTMENTAL STRATEGIES

Strategies to decrease the backlog seem to have exacerbated the situation instead, since there is supervision files which are not attended to and court orders that lapse after two years. In 2005 and 2006 contract workers were employed to each finalise 20 cases per month. Although this assisted with opening and finalisation of cases, there were not enough social workers to do supervision, which again had a negative impact on the caseloads of foster care workers. The very files which were opened and finalised were taken back to area workers to extend court orders, rather than being done by the contract workers who had opened and finalised them. This increased the number of cases in area social workers' caseloads.

"I can also say the extension of order also cause backlog for the new applications because if you remember between 2005 and 2006 there were many cases which were finalised. There were social workers who were specialising in opening and finalisation. Each social worker was finalising 20 cases per month. Then those cases did not have people to supervise; now we're sitting with all those cases which need supervision and then it takes time for us to attend to new cases, so I would say it is another cause of backlog, supervision. The Department employed contract workers to deal with new applications, each worker was expected to compile 20 reports per month and those cases were not attended for supervision."

In the researcher's opinion, management did not make provision for finalised cases since the contract workers were employed to deal with the backlog of foster care applications, not to render supervision services. The finalised cases were neglected until after two years when they realised that the court orders needed to be extended.

SUBTHEME 6: LACK OF RESOURCES

The participants mentioned the lack of resources, which included the lack of human resources, offices, stationery, cars, computers and telephone and fax facilities. The Senaoane (Soweto) office still experiences problems with phones and electricity; the Alexandra office has similar problems with electricity and shortage of water and cars which are not in good condition. At the Lenasia office three people share one office. The working conditions are not conducive for service delivery. Participants feel frustrated and angry about the lack of resources that hinder their potential to deliver quality service to the clients:

“We don’t have enough space to work; one office is shared by three social workers. If you interview a client the others are busy talking, sometimes they laugh to what the client is saying.”

“They have started the issue of cluster offices, they are not resourced, they don’t have a fax machine, and phones work like twice in a year. So there’s no electricity most of the time, so those are the things that also cause backlog.”

“Ya on the issue of resources we don’t even have stationery, no cars. I’ve been employed here for more than six months I don’t have a computer even an office, I had nothing so that’s also the main thing I cannot work, how will I work without resources.”

“Social workers leave because they are not well paid.”

On the other hand, the Department of Health and Social Development feels that it has made a difference in introducing a retention strategy. “This Department is committed to investing in human capital as a component of this strategy, a revised salary model was introduced for social workers... We believe that the dramatic reduction in the turnover rates compared to past years is as a result of this intervention” (Lekgoro 2007:7). The lack of resources is, however, confirmed by the Report of the Portfolio Committee on Social Development (2009:5): “the challenges of the Department of Social Development are the shortage of office accommodation - the Department in some areas shares offices”.

The participants, being social workers, seemed to experience problems with the lack of resources. It was indicated that the lack of resources had a negative impact on rendering services and that this contributed to the backlog.

SUBTHEME 7: ROLE OF POLITICIANS

Participants highlighted the role of politicians in advocating foster care grants as a solution to poverty, as well as the court system which is not clear about its expectations and keeps on sending reports back to social workers:

“The system is not user friendly from your director to your social worker. Our politicians you must not forget that the system is run by politicians, they give empty promises to our people. People want handovers now they’re no longer empowered to do things for themselves.”

This view is confirmed by Meintjies et al (2003:29), who state that the use of foster care as a poverty alleviation mechanism for orphans and their caregivers detracts from the real purpose that the foster care system serves in the protection of particularly vulnerable children. This results in overburdening not only foster care but also the social welfare system more broadly.

SUBTHEME 8: INCONSISTENCY OF COMMISSIONER AT THE CHILDREN’S COURT

“Coming to the Justice Department I mean they are the one’s who repeatedly returns the cases for unnecessary reasons, for example the child stays in a shack, you get a question mark from the magistrate who would ask you why is the child staying in a shack? So the Justice Department also plays a role. The cultural issues are a problem; you will have a white magistrate who will return the case not understanding how Africans live. For an example the issue of large families there was a case of mine that was returned because there were lot of people staying in one house hold. Sometimes they will tell you that this money is too little, is it true that they are living with an R1 000.00. These are the causes according to me of backlog.”

In view of the above statement it seems that social workers face challenges with inconsistency of the commissioners in the Children's Court. The commissioners appear to have different points of view in terms of the data needed to finalise the case. This also results in and contributes to the existing backlog faced by social workers.

3.4.3 CATEGORY 3: CONSEQUENCES OF FOSTER CARE BACKLOG

The participants felt strongly about the consequences of the foster care backlog. When asked about these consequences, one of the participants even said, "That's the good question." The question evoked pain, frustration and helplessness from the participants; however, it also made them aware of their roles as social workers, that they are the agents of change despite the situation they find themselves in. The themes that emerged were consequences relating to social workers, clients and the profession.

THEME 1: CONSEQUENCES FOR SOCIAL WORKERS

The participants indicated that the backlog has made them lose self-esteem and feel helpless and deskilled, not utilising social work skills. Instead they are "pushing numbers". They said that they felt demotivated, demoralised, threatened and emotionally taxed since they worked under pressure. One member stated that it also affected their social and home life, since they were always tired. The quality of their work was affected. The participants felt disrespected and undermined by other professions and management.

SUBTHEME 1: FEELING OF HELPLESSNESS

"Demoralises me, de-motivates you, you get tired you don't want to do many things eish! You lose your self-esteem; sometimes you come here just to push the day to be out of your work, after you just come to push and at the end of the month you get paid, that's all."

"Some- one is just rendering a spiritual helplessness 'cause you inherited these problems. You get cases from 2004, 2005 that were not finalised, so it really renders the spirit of helplessness"

somehow, it stinks you know. Your ability to be focused and objective from the beginning of the day you plan to do 1, 2, and 3 but because your office is flooded with clients who come to complain when they registered.”

“Sometimes we’re just pushing numbers like we’re not doing the proper investigations, just to push numbers ‘cause in most cases you need to sit down and do thorough investigations. But because you have this backlog, you’re focusing on the number of cases that you’ve not finalised, so you don’t spend much of your time in each of the cases like you are sort of trying to push as many cases as you can. But you’re not giving the quality of the report, that’s how I feel.”

The literature review supports statements made by participants. Social work caseloads have been increased by the number of children in foster care to a point where meaningful professional services have become impossible (Dawes 2003:6).

Working under pressure and in a stressful environment and conditions affects people psychologically. It was apparent that social workers were experiencing loss of self-esteem and confidence in what they were doing. They stated that clients had lost trust in and respect for social workers.

SUBTHEME 2: FEELING DEMORALISED

“I suppose we’re sitting with the lot of workers who are de-motivated, not getting what they deserve, you find that they’re demoralised ‘cause you come here with a lot of expectations, I mean you studied hard for your degree and you get this wrong expectation from school. When you arrive there it is a different story, they politicise the whole situation.”

“I’m busy managing problems to an extent that I’m failing to have contact with the people, to go to the real need because this is not the real need. I want to go to the people, work with the people, hear what the people stories are and help them to change their lives.”

“We’re perceived as social problems out there.”

“Backlog is impacting on us ‘cause is reducing our growth as social workers. You can’t grow and then we’re getting nowhere as social workers.”

“When I came here as a social worker I was a better person but now I’m eroded, I can’t even speak proper English, I can’t even interact with other professionals so ha.”

“Sometimes you might feel discouraged and then you might take the file and put it aside and continue with other clients.”

The negative impact of huge caseloads on the quality of service is confirmed by literature. According to Dawes (2003:6), meaningful investigation and support even of routine family foster care cases become impossible in the context of excessive caseloads. The only service being delivered is that of making a grant available for the support of the child concerned.

“With such a high caseload social workers struggle to render quality services. Social workers feel their work is evaluated according to the number of cases attended to.”

“And it comes back to you they say there’s a term they call ministerial enquiries. They say you have finalised the case in 2009 and you have never been there, clients are aware that we need to supervise the placement and we’re not doing it so when the case comes from the manager or the supervisor they say you did not do your work properly which means I have to face the burden alone and is very sad. Social work side and myself, it is very affecting us really.”

“We’re expected to write reports so we just have to investigate slightly and write reports those six reports, so we no longer have that quality in our reports.”

Dawes (2003:7) states that those concerned (i.e. social workers doing foster care) are in effect performing a “rubber-stamping” function which gets children onto the foster care grant while ignoring the services which are required. It is evident that social workers are not employing the

ethics of social work to empower clients. This results in the community undermining and questioning their work.

SUBTHEME 3: DEMOTIVATED

“They are not given incentives, I don’t think necessarily that they’re actually taking care of the workers because I tend to believe that the workers are the pillars of the work environment, they must be taken care of.”

“Salary structure must be upgraded.”

“We concentrate more on stats than the quality of our work, more on numbers.”

“Our performance is evaluated based on numbers so, if my profession says I must move with the client and my employer expects me to finalise a certain number of case per month then you know as human beings we do get our salaries and money is also important to us, that is why we end up err finalising more, trying to finalise more with the little information we have, so that we can reach the number and that will mean money to me at the end of the day.”

“Helpless, you feel as if there’s somebody behind you with a baton waiting for you to produce the number and we need to run in order not to be hit by that baton.”

“And it decrease the quality of excellence and all the quantities has been provided ‘cause we’re just fighting for the backlog to decrease, while as social workers we had to provide quality service not quantity.”

“In my opinion I think it also makes us to work under pressure at the end of the day we want to speed up the process but at the end we end up doing mistakes by not getting full information like in terms of the client just want to speed up the process, then you do mistakes.”

“Sometimes I can’t sleep thinking about the way we render service in this office, so it is really frustrating and sometimes I feel worthless, I’m pressurised to do what they expect me to do, and it is frustrating.”

The participants were vocal and honest about their situation in relation to the consequences of the backlog. They expressed the feeling of worthlessness in terms of delivering quality service to clients. They seemed aware of their roles as social workers but the increase in and demand for foster care placements made it difficult for them to provide quality service. This is supported by the Cape Argus article (Jooste 2009:3), which expressed the concern that social workers are buckling under enormous caseloads with more than 100 cases each. Many are burning out after just a year despite having studied for four years to become social workers.

THEME 2: CONSEQUENCES FOR CLIENTS

Clients are negatively affected by the foster care backlog:

SUBTHEME 1: POOR SERVICE DELIVERY

The participants in the focus groups agreed that the foster care backlog had a negative impact on service delivery. The clients were reduced to numbers and not empowered. When the cases were finalised the clients were not provided with proper supervision services or family counselling. This also influenced the relationship between social workers and clients.

“We need to be honest here, we’re dealing with our clients here, and we’re dealing with lives here, we are not dealing with numbers now our clients had been reduced to numbers. I mean for me Management is another area of speciality. We social workers we’re doing another area but again I suppose the Department must actually bring this issue of focus areas so that we can make a meaningful contribution to our clients out there.”

“We no longer mediate for our clients or advocate like now I’m having a case of one child, this child was raped but the case is already opened and finalised so I no longer have time to give

counselling or refer the child to other professionals like psychologists because I had to concentrate on the backlog. She goes to court alone, I was supposed to be there sometimes to give support but we don't have time."

"You feel somehow as clients ask you how you work and you can't even answer that clients lose trust and don't trust you anymore."

"I mean this backlog makes us to be actually reactive instead of being pro-active we're not necessary adding value that is actually sustainable to our clients. I mean we're not empowering our clients I tend to think, is this what I had studied for all these years. All this information that I'm sitting with has been reduced to foster care. Even I, my potential and capability has been reduced to foster care. What will happen then when you turn 18, we're not been given that space to actually contribute meaningfully and actually impart information and skills that we actually have."

"I mean even a person comes to your office saying my mother has passed away, in my case two weeks ago, you suppose to comfort that person but you know what you start like you're a journalist. So you are dealing with numbers as you said, they've killed that."

"You don't have time to investigate to move with that person and find out if there's real or genuine care for the child, you are looking at finalising and having the person getting money because that is where the Department pushing us to numbers."

"And it's no longer worker and client relationship because we just meet our clients once or twice and that's all and we no longer know them and they don't know us."

"You just look at the numbers like they demand us to get numbers and the poor service delivery."

"You know I believe as social workers we need to empower our community, we need to have community projects which will empower people so that they may be self reliant. They mustn't

depend on the State for everything 'cause even the State doesn't cope and doesn't satisfy all the needs of our communities. I remember before we had this huge backlog we used to conduct groups with foster parents, we no longer does that. Now we're chasing numbers of backlog."

The consequences relating to the clients are also confirmed by Dawes (2003:7), who points out that social work caseloads have been increased by the numbers of children in foster care to a point where meaningful professional service has become impossible. The participants shared their perception of failing clients because they indicated that as social workers they needed to empower clients and attend to their needs, not to create dependency as the system drove them to do. They felt that they were pushing numbers; once the case had been finalised they forgot about the client and did not render supervision services and concentrated on the next file.

THEME 3: CONSEQUENCES FOR THE PROFESSION

The participants indicated that the foster care backlog is killing the profession. Social workers are no longer the agents of change but emergency workers. The Department of Health and Social Development has forced social workers to "push numbers", which contradicts the Code of Ethics for Social Workers; since the social workers are evaluated on numbers, they no longer render quality services. Clients and people from other professions lose trust in and respect for social work.

According to the literature, the role of the social worker is affected. "The idea of a social worker is that they do some case work, some group work, and some community work. But our social workers are bogged down in foster care case work and so for example; the therapeutic interventions are very minimal unfortunately" (Meintjies et al 2003:23-24).

SUBTHEME 1: CHANGE AGENTS

"I think with my experience in working in the social work field, it has changed my concept of what social workers are supposed to do. I don't see myself as a social worker but an emergency worker now. To an extent that I don't even enjoy the profession. If you try to be honest we're

contradicting the code of ethics of social work. Even though I don't blame social workers but the Department is guilty of doing that. They have left this thing to proceed to this extent."

"I think another thing is in terms of the impact the case load has on us and the profession. This thing is sending out the bad name to us as social workers you understand because even the clients outside don't respect you as a social worker. So I think is also ruining the profession 'cause where ever you go they will tell you social workers are doing nothing they're just sitting in the offices doing nothing We're not been given that space to actually contribute meaningfully and actually impart information and skills that we actually have. I suppose we've been reduced again and again it actually undermines the profession."

"We are no longer practicing social work, we're focusing on the client to get money and that's all."

"One other consequence is that our role as social workers in the community and some of the other roles have been abandoned, we concentrate mostly on finalising the case."

"When you look at the social work profession when you're learning at university you're being taught community development, group work you see, those things you're not doing here in our job description."

"I think the consequence is that we're now looking at err profession in terms of numbers, the quantity instead of quality."

"I can say we no longer use our principles as we learn that you have to move with the client, you just push the client to say what you want 'cause you want to finish. So we're no longer using them at the end they're killing our profession. We're really killing our profession unlike educating whoever the politicians to know what we stand for."

"I feel my profession is been undermined even by people who are managing me or leading me in the profession, 'cause their demands are saying to me "Don't bother about empowering that

particular client who came to your office in the name of foster care, just produce a number, write a report, finalise the thing so that the person can get money” and I end up not doing what I’m supposed to do as a social worker.”

“I can say that also is damaging social work because social workers are experiencing some problems with the files that were not attended correctly because of we end up having the lawyers, other social workers are sent to the council so it’s a problem.”

The urgency of this consequence is also stressed in the literature: “We have a very limited supply of social workers in relation to the needs of the country. We cannot afford to be using a large percentage of these professionals in what has been reduced to a mechanical, rubber-stamping role. This results in a situation where practitioners will not have the opportunity to develop as professionals. Every social service...is a central ethical responsibility of employer bodies” (Dawes 2003:8).

“We’re sharing offices two to three people in one office, really I think social work as a profession is one of those professions that highly regards the issue of confidentiality, how am I suppose to start counselling the client in my office which is over-crowded ‘cause I believe when you’re dealing with a client you need a space so that you can explore issues but here we don’t even have privacy. I’m speaking here; she is just sitting next to me listening to what the client is saying. Sometimes you find that the client is saying something; someone will laugh because they can over hear you know and what that says to our profession. I feel our environment is just too, I can’t find word to explain.”

The South African Council for Social Service Professionals in the Code of Ethics (2005:8) stipulate that social workers must accord appropriate respect to the fundamental rights of individuals to privacy and confidentiality. It is apparent that the values of social work are contradicted and not practised in an appropriate manner due to the backlog. The clients’ needs are compromised.

“It’s an insult guys it brings us down together with our profession.”

“So I suppose it is our ethical responsibility as we know it but we get reactive. Some of the people may see us as professionals who are not dedicated in doing their work so we’re being undermined by other professions.”

SUBTHEME 2: DECREASE IN QUALITY OF SERVICE

“Let’s go to the fact that most social workers are taken as people who are incompetent in terms of doing their work, in terms of delivering service to the people.”

“Our clients don’t take us seriously because they thought we’re just like them because of backlog. You’ll find that the client will phone you, I applied in 2006 and nothing has been done you’re doing nothing.”

“You feel undermined, demoralised and disrespected, I think they undermine the profession because they don’t take us seriously like other professions, they take us like nothing.”

“The consequences of backlog in our practice, we end up err actually that’s my opinion err it changes the profession, it changes what you’ve learned from school, it changes the way you’re going to deal with clients. I feel we’ve been turned into machines that are manufacturing tickets to want money ‘cause we’re no longer dealing with children in need of care but children in need of cash. Any orphaned child is an opportunity for somebody in the family to get money so it changes our profession drastically and we don’t offer that counselling anymore. What we are looking for is the information that will fit into what the Department of Justice want to declare children as children in need of care and you even end up err how can I put it ‘raping the Children’s Act’ to force it to look at the situation the way I want it to be looked at. I want this case to be finalised so that I can deal with other cases which are behind.”

It was apparent from the interviews that the social work profession is being negatively affected and that social workers even behave unethically in an effort to reach the numbers prescribed by the authorities. However, the resilience shown by the social workers interviewed, despite the

conditions and pressure they were working under, indicates that they were strong and passionate, and still wanted to continue practising social work under these unbearable conditions. The rest of the social workers stated that the demand for numbers damaged and threatened them because they were taken to the Council lawyers and ministerial enquiries were conducted.

3.4.4 CATEGORY 4: SUGGESTIONS TO ADDRESS THE FOSTER CARE BACKLOG

The aim of this study was to explore and describe the factors contributing to the foster care backlog and to make suggestions to resolve this from the service providers' perspective. The above section focused on the participants' perceptions and experiences regarding the foster care backlog.

The participants demonstrated the ability to come up with solutions/suggestions for the foster care backlog. The suggestions made by the participants related to the themes of management, social workers and the Department of Justice.

THEME 1: SUGGESTIONS RELATING TO MANAGEMENT

The participants were of the opinion that management has a lot to contribute to the solution of the backlog:

SUBTHEME 1: SPECIALISATION

All four groups interviewed came up with the suggestion of specialisation/division of labour in terms of curbing the foster care backlog. Management should adopt a structure of specialisation or division of labour, that is, have people who focus on opening and finalisation, those who attend to crises and people who will specifically focus on supervision services. This will enable the social workers to render services using other social work methods like group work, community development and research.

“I mean the Department must bring on board the issue of restructuring/specialisation, must focus in certain areas like she has noted earlier on to finalise and someone supervise and in that way I suppose you will contribute meaningfully to our clients, ‘cause the moment you supervise the file you will apply. I mean basically you also utilise other two methods of social work such as group work and community work where you are doing meaningful work that is productive in nature so that you raise responsible and productive citizens at the end of the day not necessarily giving this grant and dependency, after the provision of the Child Care Act they’re stuck.”

Participants from the Midrand office stated that they had a huge backlog in their office but due to specialisation of services, working closely with their supervisor, they were able to combat the backlog:

“In our office we no more have backlog, we have people who focus on first applications, people doing intake and other crisis intervention. So I think other offices can do that to resolve backlog.”

“Maybe if they can get social workers to do supervision only and other social workers to do opening and finalisation only.”

SUBTHEME 2: APPOINTMENT OF STAFF

It is evident that the vacant posts need be filled as soon as possible to combat the backlog. The participants indicated that the ratio of supervisor to social worker should be feasible. They felt strongly that more social workers and supervisors should be appointed so that caseloads could be distributed more equally. They felt that a retention strategy should be put in place. However, the researcher is of the opinion that better remuneration is needed and that communication between management and social workers is vital. Clarification of roles and training of new personnel can also promote a sense of belonging among the staff and enable them to render quality service effectively. Participants were also of the opinion that people appointed in management should understand the dynamics of the backlog. Auxiliary workers should do more to assist with the backlog:

“Probably I think like they should actually employ more social workers so that the ratio is actually a manageable one and also like they always talk about the retention strategy they had to give us everything yet we feel like they’re not giving us anything like remuneration that is probably according to our salary.”

“They must weigh case load according to salary.”

“If they say the case load is too much they say two is better than one. Then get more personnel to deal with it.”

“I think maybe if they can increase social workers the number of social workers that each and every social worker should have 60 files to be able to do counselling and also they should do something about the salaries.”

“I think the Department from top management they must hire people who know social work because if you talk about social work he/ she would know what backlog is ‘cause if you hire somebody within our department he doesn’t know what backlog is’ cause we got lot of pressure from the top to the person you’re dealing with.”

“I think we must have a limited number of cases for example somebody is having 300 cases and other 100 cases, you must have balance in terms of caseload.”

“I will say they need to employ not only social workers ‘cause social workers also need supervision from Management so the Department need to create vacancies so that they can have more staff, ‘cause if they only look at employing social workers who’s going to supervise those social workers to make sure that they’re doing the correct thing which they supposed to do.”

“Basically since we are having auxiliary workers and they are not allowed to sign this forms of 16(2) and 33’s I think also to avoid backlog they can be utilised to collect information and write those reports.”

An article in the Sunday Times (28 October 2007:13) stated that South African social workers have to cope with caseloads ranging from 600-3 000 in extreme cases, compared with 13-20 cases per social worker in Britain.

SUBTHEME 3: RESOURCES

Participants suggested that satellite offices should have enough resources like office space and work equipment. One participant suggested that improved working relationships could make up for a lack of resources:

“We need resources, more computers ‘cause three social workers on one computer also causes backlog. We need more resources.”

“Even cars, they’re not giving their clients good cars, they give us old cars so for a social worker driving an old car and find that at the end of the day you had a damaged car you get stuck on the way, it’s very difficult.”

“They need to improve the working relations as well because when you wake up in the morning you thinking of going to the office you think oh there’s no water, sometimes there’s no electricity, as it is now.”

“I think better salary, better resources.”

SUBTHEME 4: EDUCATION OF MANAGEMENT/POLITICIANS

Participants suggested that management and politicians should be educated about social work:

“It is important that Management as well as the politicians have an understanding of what social work entails.”

“Maybe to have people who understand social work above us because if somebody is from Finance, and then she doesn’t understand when I say I have to move with the client. You just look for information ‘cause we promised people to vote and the money must be there. So if you are just dealing with emotions and all those are a waste of time for them, but if you have people who understands social work I think they will understand what’s happening.”

“Education that has to cascade from the top bosses to redefine our profession to politicians and I don’t know how many years it will take. Education to politicians, they need to know what social work is.”

“They don’t have social skill, they don’t have capacity to actually also contribute to reducing backlog.”

The participants strongly agreed and emphasised the need for specialisation/division of labour. Improvement of work relations was also emphasised as well as an increase in social workers in order to ensure feasible caseloads. The literature confirms that social workers in South Africa have to cope with high caseloads compared to other countries.

Based on the above findings the researcher suggests that the new application cases should be attended to by a certain section or particular social workers and that supervision should be done by other social workers to fast-track the process and render quality service to the families or clients. In this way the social functioning of clients could be enhanced and social workers could practise other social work methods. This will also reduce high caseloads to a reasonable level, like 60 to 80 files per social worker, depending on area of operation.

THEME 2: SUGGESTIONS RELATING TO SOCIAL WORKERS

Social workers can contribute to reducing the foster care backlog in the following ways:

SUBTHEME 1: EDUCATING CLIENTS

The participants indicated that clients need to be educated about foster care and be empowered with social skills to reduce dependency and handouts from the government. Clients need to take responsibility for taking care of the orphaned children, as done in previous years to protect the vulnerable children. Clients need to be educated about their rights and the role of social workers. Other social work methods need to be utilised as part of social work intervention to empower the community with skills so as to be self-reliant.

“I think we should go back to the basics, we Africans we should go back to our Africanism, the way that we used to do things. I normally tell people that in the African culture we don’t have orphans. I believe that if we can go back to the basics like we empower our village, like they say it takes a village to raise a child. In urban areas we empower our communities to look after our children. Children should not be raised by a system; they should be raised by families. We need to empower our families. I see foster care as a temporary thing which will not help our communities but in fact it will perpetuate the problem ‘cause dealing I mean with the HIV and AIDS scourge at the moment people who continue to unfortunately die because of HIV, the grant will not be able to address the problem. We need to go back to them, we need to empower them, we need to give those tools, the resources to be able to deal with the problem, not to run after social workers to deal with the problem, should we do that, I’m telling you our case load will go down. I believe if we can do community work properly, case load will disappear.”

SUBTHEME 2: WORKSHOPS AND TRAINING

Social workers need to receive continuous training and need to take responsibility to render quality services:

“We must be given continuous training in terms of legislation issues and policy directives; we should be clear on those issues.”

“Department is not necessarily doing enough in terms of training the personnel. I mean the personnel must be actually subjected to continuous professional development.”

The researcher concurs with the participants that there is no proper training of the personnel in the legislation and understanding of foster care policy. New social workers are not adequately oriented regarding policies. They need to be guided and given direction in terms of foster care. However, training is provided by head office, it is only that the selection criteria of the Johannesburg office is biased, as the same people are repeatedly selected to attend training. The majority of social workers are not informed about the training.

SUBTHEME 3: THOROUGH INVESTIGATIONS

“We need to do thorough investigations before we finalise the case.”

Social workers need to be trained to do thorough investigations. The literature cites that there are so many aspects to be included in an investigation: conducting home visits and interviews with children as well as verification of paternal death or abandonment. Home visits are crucial for checking children’s living circumstances, for verifying caregivers and for ensuring that the children are comfortable with these arrangements (Meintjies et al 2003:22).

This could be achieved if there were social workers focusing on new applications and doing crisis work while other social workers render supervision services and employ other methods of social work.

THEME 3: SUGGESTIONS RELATING TO THE DEPARTMENT OF JUSTICE

The participants suggested the following regarding the Department of Justice:

SUBTHEME 1: DECENTRALISATION OF CHILDREN'S COURT

One of the participants indicated that the court in Johannesburg is inundated with foster care applications. She suggested that the Department of Justice decentralise the services to Soweto courts like the Protea Court or Orlando Court.

“I think the court is bombarded, our socio-economic problem in Johannesburg is huge and complex compared to other regions. So I mean they should decentralise the justice system calling Protea Court maybe they should start there because it's also the magisterial district and also start to finalise your children's court, it's just too much for the justice system. Hence they say the big bug is stuck with them there.”

The researcher also suggests that the Children's Court needs to be decentralised since there are many courts in Soweto, like Protea, Dobsonville and Orlando, that can alleviate the backlog in the Children's Court.

3.5 CONCLUSION

This chapter forms the cornerstone of the research study as it presents the findings of the research project. In this chapter the research findings and literature review were presented, which focused on the service providers' perception of the foster care backlog, their opinion on the reasons for the backlog, the consequences of the backlog in social work practice and suggestions to address the backlog. The participants had different opinions about what a foster care backlog entails. However, they all agreed that the Department of Health and Social Development views a backlog as the files not attended to within six months and longer. The participants stated that to them a backlog is any case that has not been attended to, including 16(2), 33's or instances where the order has lapsed.

Various factors contribute towards the backlog: a high caseload and uneven distribution of cases amongst social workers, a high turnover of social workers and positions left vacant. Clients are dishonest and give false information about the children's parents and do not submit outstanding

documents like death certificates and identification copies. Other clients leave the area without informing social workers of their change of address. Clients from rural areas flock to Johannesburg to receive “quick” services. Most of the participants expressed concern about management, that there is no communication, poor management and a lack of departmental strategy to fill vacant posts.

Social workers joining the department are not trained to understand foster care policy in order to deliver quality service to the clients. They don't understand their roles and responsibilities clearly. Management needs to provide adequate resources for workers to be able to function effectively and deliver quality service to the people, e.g. human capital, offices, phones and electricity. Without adequate resources social workers cannot deliver services properly. Another challenge is the inconsistency of magistrates in the Department of Justice, where reports are sent back for minor documents or information.

The backlog has a negative influence on the social workers, the profession and the clients. Participants felt hopeless and helpless, demotivated and demoralised by working under pressure and not utilising social work skills to meet the target set by management. They blamed management for reducing people to numbers and deskilling them, leaving them unable to provide quality services to clients. They felt disempowered and unable to practise social work skills to empower clients. Their home life was affected since they got home feeling tired and unable to do chores and interact with their family. Social workers indicated that they were threatened and taken to the Council and ministerial enquiries were conducted for not providing quality service to the clients. The participants pointed out that the profession was also affected; the social workers are no longer the agents of change – instead, they are creating dependency since the clients are not empowered with social skills to function effectively. They indicated that clients are disempowered in a sense that the social workers just concentrate on pushing numbers, which results in poor service delivery. Supervision services are not done and clients do not get proper services.

Several suggestions were made as to how the foster care backlog can be addressed. The participants strongly believed that specialisation/division of labour and equal distribution of

cases can curb the backlog. When social workers specialise in one area, e.g. new applications or supervision, they will be able to use all the social work methods like case work, group work, community work and research practice to empower the clients with social skills. Participants mentioned that the ratio of supervisors to social worker should be considered to allow the supervisors to monitor and evaluate the clients' progress. It was also indicated that the supervisor should not allocate files to vacant posts because the social worker who subsequently fills that post has a backlog of files sitting there unattended. They also mentioned that clients need to be educated about their rights and the role of the social workers.

One of the participants mentioned Africanism, that people should remember that they have a responsibility to bring up the children, not that the children should be brought up by the system. It was also indicated that management needs to consult with social workers at grassroots level to open the channel of communication. Participants mentioned that management should provide proper resources like office space, telephones, cars and electricity to enable the workers to function effectively. They indicated that the salary of social workers should be revised to curb staff turnover and also that the government should recognise social workers as experts in their fields. People at top management should be familiar with social work so that they are able to make applicable decisions in terms of foster care issues.

In Chapter Four, limitations of the study as well as the conclusions and recommendations of the study will be discussed.

CHAPTER FOUR

LIMITATIONS, CONCLUSIONS AND RECOMMENDATIONS

4.1 INTRODUCTION

In this last chapter the limitations of the study are given. The researcher also draws conclusions and makes recommendations from the acquired data, with the aim of improving the quality of service delivery within the social work profession.

4.2 LIMITATIONS OF THE STUDY

The research findings are in the form of experiences and perceptions of service providers as exploratory research was conducted. The study was undertaken in the Johannesburg office, only one of the Gauteng Department of Health and Social Development's offices.

Findings have implications for the social work profession, clients, service providers and other people interested in service delivery. In order to reduce the foster care backlog it is imperative to commence with the service providers' subjective perceptions and definition of their experiences and situation.

The researcher might have been furnished with inaccurate figures of the foster care backlog as the Gauteng Department of Health and Social Development is not always provided with accurate details pertaining to this backlog. Figures usually fluctuate, are inconsistent and the data is kept confidential. The researcher is of the opinion that the figures could be even higher than reported.

Another major limitation of the research was insufficient literature for the study. This was confirmed by the Unisa librarian who assisted the researcher to find information from old newspapers.

4.3 CONCLUSIONS

In this section the researcher makes conclusions about the research methodology, process and research findings. The goal of the study was to explore and describe the factors contributing to the foster care backlog and to make suggestions to resolve this from a service provider's perspective.

4.3.1 CONCLUSIONS PERTAINING TO THE RESEARCH METHODOLOGY AND PROCESS

The qualitative research methodology was used appropriately to explore and describe the perceptions of service providers about the foster care backlog, factors contributing to it and suggestions for improvement. The objectives of the study as described under paragraph 1.4.3 were reached.

The data was collected by means of focus groups which included 30 participants. Four focus groups were conducted. This number was determined by the principle of data saturation. The conclusions were made when the data was saturated, meaning that similar responses were yielded from the different groups.

4.3.2 CONCLUSIONS PERTAINING TO THE RESEARCH FINDINGS

The conclusions were drawn from the categories and themes that emerged from the focus group discussions and the observations made by the researcher. These categories include the perceptions of service providers regarding the foster care backlog, the reasons for or the factors contributing to the backlog, consequences of the backlog for the social work profession and suggestions to address the backlog.

4.3.2.1 Perceptions of service providers regarding the foster care backlog

During the focus group interviews social workers expressed different views on what a backlog is. However, they all agreed that the Department of Health and Social Development views a backlog as the files not attended to within six months and longer. Most of the workers viewed a backlog as any file that has not been attended to or lying in the office such as the opening and finalisation reports (39's), supervision cases (03's) and lapsed orders. This is contrary to what the department has defined as a backlog.

4.3.2.2 Reasons for or factors contributing to the foster care backlog

From the response of the participants it is evident that various factors contribute towards the backlog. This includes a high caseload and uneven distribution of cases amongst social workers, high turnover of social workers and positions left vacant. Clients are dishonest and give false information about the children's parents and do not submit outstanding documents like death certificates and copies of identification documents. Other clients leave the area without informing the social workers of their change of address. Clients from rural areas flock to Johannesburg to receive "quick" service. Most of the participants expressed concern about management - that there is no communication, poor management and a lack of departmental strategies to fill vacant posts. Social workers joining the department are not trained to understand foster care policy in order to deliver and render quality service to the clients.

The participants were of the opinion that management needs to provide adequate resources for workers to be able to function effectively and efficiently in order to deliver quality service to the people, e.g. human capital, offices, phones and electricity. Without adequate resources social workers cannot deliver services properly. Another challenge is the inconsistency of magistrates in the Department of Justice where reports are sent back for minor reasons, e.g. missing documents or information. It was evident from the response of the participants that the commissioners in court are inconsistent with regard to the requirements of the court. This also creates problems for the social workers in opening and finalising cases.

4.3.2.3 Consequences of the foster care backlog for the social work profession

It is evident from the participants' response that the backlog has a negative impact and influence on the social workers, the profession and the clients. Participants felt hopeless, helpless, had poor self-esteem and were demotivated and demoralised by working under pressure and not utilising their social work skills to meet the target set by management. The research findings have clearly shown that social workers are now doing administrative work rather than counselling to empower clients to function effectively in their environment. The participants blamed management for reducing people to numbers and deskilling them, leaving them unable to render quality service to the clients. They felt disempowered and unable to practise social work skills to empower clients. The participants said that they were "eroded" and did not experience any professional growth. They felt disrespected and undermined by other professions, community and management. Management views social workers as incompetent and not dedicated. Participants' home life was affected since they got home feeling tired and unable to do chores and interact with their family. Social workers were threatened, taken to the Council and ministerial enquiries were conducted for not providing quality service to the clients. The participants indicated that the profession is also affected; the social workers are no longer agents of change; instead, they are creating dependency. Participants felt that they have abandoned the principles and values of social work. They indicated that clients are disempowered in a sense that social workers only concentrate on pushing numbers, which results in poor service delivery. Supervision services are not done and clients do not receive the services they are entitled to.

4.3.2.4 Suggestions to address the foster care backlog

Participants came up with several suggestions for addressing the foster care backlog. The suggestions made by the participants related to the themes of management, social workers and the Department of Justice. They strongly believed that specialisation/division of labour and equal distribution of cases can curb the backlog. When social workers specialise in one area, e.g. new applications or supervision, they will be able to use other social work methods like case work, group work, community work and research practice to empower clients with social skills. The

participants suggested that at intake level the only applications to be considered should be those with all relevant documents so that the fieldworker does not waste time waiting for outstanding documents like birth certificates or affidavits. Participants mentioned that the ratio of supervisor to social worker should also be considered to allow the supervisors to monitor and evaluate the clients' progress. They mentioned that more social workers and supervisors should be appointed and that a retention strategy should be put in place. The issue of filling vacant posts immediately to avoid backlogs was raised. It was also said that the supervisors should not allocate files to a vacant post because the newly appointed social worker will have a backlog of files already waiting.

Participants mentioned that clients need to be educated about their rights and the role of the social workers. One of the participants mentioned Africanism and that the community should remember that they have a responsibility to bring up the children and that the children should not be brought up by the "system". It was also indicated that management needs to consult with social workers at grassroots level to open the channel of communication. Participants mentioned that management should improve work relations and provide proper resources like office space, telephones, cars and electricity to enable the workers to function effectively and efficiently. They suggested induction, i.e. training of new staff, in the foster care policy. They indicated that the salary of social workers should be revised to curb staff turnover and also that the government should recognise social workers as experts in their field. Politicians should be educated about foster care or about children in need of care. Top management should be familiar with social work so that they can make applicable decisions in terms of foster care issues. This confusion can be ironed out by management by requesting meetings with the magistrates and inviting social workers to debate the issues with them so that they can all be on the same page with what is expected by the court. This will enable the commissioners to listen and understand the social workers as professionals. With regard to the Department of Justice, it was suggested that it consider decentralisation so that Soweto courts and other courts can attend to enquiries regarding children to alleviate the backlog. The development of services in rural areas could prevent clients from rural areas from coming to Johannesburg to seek help.

4.4 RECOMMENDATIONS

In the light of the findings of the study the recommendations are given regarding the research process, practice and further research.

4.4.1 RECOMMENDATIONS PERTAINING TO THE RESEARCH PROCESS

The qualitative research method using focus groups can be applied for future research since the goals and objectives of the study were met. It is recommended that the number of participants in the focus groups be increased to ten or twelve to have a denser description of the participants' experiential worlds. Other methods of data collection, e.g. questionnaires, can also be used to gain different views of the topic.

4.4.2 RECOMMENDATIONS FOR PRACTICE BASED ON THE RESEARCH FINDINGS

Several recommendations were made for practice based on what was found:

- **INDUCTION OF NEWLY APPOINTED SOCIAL WORKERS**

The profile of the participants reflected that 80% of social workers were employed at the Johannesburg office with little or no experience of foster care. The majority come straight from university. In any organisation the newly employed staff undergo intensive training to equip them with working skills to ensure effectiveness and efficiency in terms of the job required. It is recommended that newly appointed social workers be trained in foster care before they are put in the “backlog dungeon” with no proper knowledge and skills.

- **DIVISION OF FOSTER CARE SERVICES**

If one social worker is responsible for opening and finalising cases, conducting investigations and doing supervision at the same time, it could result in poor service delivery and low productivity. It could also kill the profession; as indicated by the participants, they are no longer providing quality social work service to clients. The clients are therefore not receiving the proper

quality service required by them. Based on the study conducted and the observations of the participants and the researcher, it is recommended that foster care services be divided. Some social workers need to focus on new applications and all the necessary procedures. Other social workers need to focus on supervision cases and all related procedures. This will work, since the extensions of orders are done by the court, as are the new applications. This will alleviate the stress and frustration that the service providers experience. Social workers will then render quality service to the clients.

- **ESTABLISHMENT OF A SOCIAL WORKERS' FORUM**

It is evident from the findings that the social workers are burnt out, frustrated and demotivated. It appears that they don't have a platform to air their concerns, views and frustration. It would be desirable to establish an informal forum in the office that would be a platform to tackle and discuss challenges at the workplace and come up with solutions to their needs as social workers. Despite the fact that social workers have limited time, this would help to resolve stress. The forum would also enable beginners to have a sense of belonging and feel part of the organisation. The participants displayed the ability and potential to identify problems and come up with suggestions that will remedy the situation. This can also happen if a forum is established.

- **VACANT POSTS TO BE FILLED AS SOON AS POSSIBLE**

A vacant post should be filled as soon as possible, at least within six weeks of the resignation of a social worker, to enhance effective quality service to the clients. This process can be implemented by advertising posts as soon as the resignation letter is handed over to the human resource department. Alternatively, previous applicants who went for interviews and did exceptionally well but were not appointed owing to the number of position available could also be contacted. This could save resources and speed up the process.

- **EMPLOYMENT OF MORE SUPERVISORS**

It was evident from the study that the supervisors are unable to properly fulfil their monitoring and evaluation tasks as required. Social workers do not get the supervision they need from their supervisors. They are just left to fend for themselves, which results in poor quality of work and adds to the backlog. It is also recommended that new social workers be trained properly. If

feasible, more supervisors could be appointed, so that social workers could receive the training and support they need.

- **EQUAL DISTRIBUTION OF FILES**

During the study discrepancies were identified in that some social workers have high caseloads while others have small caseloads. Some social workers mentioned 120 cases, others 200 cases and some 80 cases. The unequal distribution of cases indicates that the supervisors are not monitoring and evaluating work done by social workers; they thus do not know each worker's file or caseload. This is detrimental to people waiting to be helped because social workers with high caseloads will not be able to attend to all those clients. The principle of Batho Pele which refers to acceleration of quality service delivery to people is thus compromised. It is important to look at the caseloads of the different areas when social workers are appointed within the different offices to be able to equally distribute cases to the social workers.

- **REGULAR SECTION MEETINGS**

It was evident that the social workers need to have meetings as a section or unit to discuss the challenges they experience in the workplace. An organisation that functions optimally usually has monthly meetings to identify and discuss the challenges that may hinder the progress and targets set. It is therefore recommended that supervisors put time aside, maybe on a monthly or six-weekly basis, depending on regional needs, to meet with their section in order to discuss issues pertaining to their work environment and other challenges.

- **MANAGEMENT VISIBILITY TO SOCIAL WORKERS AT GRASSROOTS LEVEL**

Based on the findings from the study it seems that management is not aware of or concerned about the frustrations and challenges that the workers are facing. All four groups commented on the lack of communication between management and the subordinates. It is strongly recommended that management visits or arranges meetings with the staff to enhance efficiency and effectiveness at the workplace.

- **ADEQUATE RESOURCES AND INFRASTRUCTURE**

It is imperative to have the necessary tools in order to execute one's duties as it is impossible to function effectively in an environment that lacks proper resources. It is recommended that adequate resources and infrastructure be provided by the department to satellite offices in order to allow people to work in a user-friendly environment. It must be considered that social work is a profession that values client self-determination, confidentiality and the principle of respect for the clients.

- **MEETING BETWEEN THE COMMISSIONER OF THE CHILDREN'S COURT AND SOCIAL WORKERS**

In view of the findings from the study these two parties need to have a meeting and debate issues and requirements of the court to enable the social workers to iron out the confusion created by the court to deliver quality service. In order to open the channel of communication it is important to involve grassroots social workers, management and the Commissioner of the Children's Court.

4.4.3 RECOMMENDATIONS FOR FURTHER RESEARCH

It is recommended for further research that the number of focus group participants be increased to ten to twelve to have a denser description of the participants' experiential worlds. Questionnaires as method of data collection could also be employed to gain different views of the subject matter studied. It will also be meaningful to include the perspectives of service-users and management in the field of foster care during future research to better understand their challenges and views. It is also recommended that future research include more regions in South Africa.

4.5 CONCLUSION

The problem of the foster care backlog requires vigorous intervention where management and service providers identify the challenges pertaining to the backlog and work on resolving them. This study focused on the factors contributing to the foster care backlog from the service

providers' perspectives and perceptions. The results of the study clearly indicate that attention should be paid to the overburdened and frustrated service providers at the office in order to achieve the vision of fast, quality service delivery to the people. In particular, the findings regarding high caseloads and unequal distribution of cases to area workers should be of concern to management, since clients are not given proper social work services like counselling. The future prospect of a nation with vast numbers of children who are emotionally and psychologically vulnerable is not promising. Through open communication between social workers and management challenges can be detected early. Clients' well-being should be put first. Most importantly, it should be remembered that people cannot be reduced to numbers in order to meet some targeted goal.

BIBLIOGRAPHY

Alston M. & Bowles W. 2003. Research for social workers. An introduction to methods. Second edition. London: Routledge.

Assistant Director of the Department of Health and Social Development, Johannesburg Regional Office. June 2009. Personal interview. Johannesburg.

Bell J. 1993. Doing your research project: A guide for first time researchers, in education and social science. Buckingham: Open University Press.

Bozarth JD. 1992. Person-centred international: The basic encounter group. <http://personcentered.com/group1.htm> (access gained 11 January 2011).

Child Care Act, 74 of 1983. Pretoria: Government Printer.

Children's Act, 38 of 2005. Pretoria: Government Printer.

Collins English dictionary for South African schools. 2002. Sv "backlog". London: Benton.

Creswell JW. 2003. Research design: Qualitative approaches. London: Sage.

Dawes A. 2003. The state of children in Gauteng: A report for the Office of the Premier, Gauteng Provincial Government. Pretoria: Human Sciences Research Council.

Denzin N. & Lincoln YS. 2003. Strategies of qualitative inquiry. London: Sage.

De Vos AS. 1998. Research at grassroots. A primer for caring professions. Pretoria: Van Schaik.

De Vos AS. & Strydom H. 2000. Research at grassroots. Pretoria: Van Schaik.

De Vos AS., Strydom H., Fouche CB. & Delpont CSL. 2002. Research at grassroots. Pretoria: Van Schaik.

Gladding ST. 1994. Effective group counselling. <http://www.ericdigests.org/1994/group.htm> (access gained 11 January 2011).

Gudbrandsson B. 2004. Working group on children at risk in care. http://www.europa.eu/hearings/20070417/libe/sos_en.pdf (accesses gained August 2009).

Holloway I. & Wheeler S. 1996. Qualitative research for nurses. London: Sage.

Jooste B. 2009. Cape Argus, 16 June :1.

Krathwohl DR. 2009. Methods of educational and social science research. The logic of methods Third edition. Long Groove: Waveland Press.

Krefting L. 1991. Rigor in qualitative research: The assessment of trustworthiness. The American Journal of Occupational Therapy, 45(3):214-222.

Krueger RA. 1994. Focus groups. A practical guide for applied research. London: Sage.

Lekgoro K. 2007. Gauteng Social Development provincial budget vote 2007/2008. Paper presented on 19 April 2007.

Meintjies H., Budlender D., Giese S. & Johnson L. 2003. Children in “need of care” or in need of cash? Questioning social security provisions for orphans in the context of the South African AIDS pandemic. Joint Working Paper of the Children’s Institute and Centre for Actuarial Research. Cape Town: University of Cape Town.

Mokgosi AS. 1997. Kinship foster care in Vosloorus. RAU: Johannesburg.

Mouton J. 2001. Basic concepts in the methodology of social science. Pretoria: Human Sciences Research Council.

Neuman WL. 2000. Social research methods: Qualitative and quantitative approach. Boston: Allyn & Bacon.

Neuman WL. 2003. Social research methods: Qualitative and quantitative approaches: Thousand Oaks: Sage.

Padgett DK. 1998. Qualitative methods in social work research, challenges and rewards. Thousand Oaks: Sage.

Public Service Commission. 2002. Explanatory manual on the code of conduct for the public service. A practical guide to ethical dilemmas in the work place. Pretoria: Creda Communications.

Royse D. 2008. Research methods in social work. California: Thomson Brooks/Cole.

Rubin A. & Babbie E. 1990. Research for social work practice. Pacific Grove: Brooks/Cole.

Rubin A. & Babbie E. 1993. Research methods for social work. New York: Brookes/Cole.

Rubin A. & Babbie E. 1997. The practice of social research. California: Wadsworth.

Secretary of the Department of Health and Social Development, Johannesburg Office. 8 June 2009. Personal interview. Johannesburg.

Social security for children in the context of AIDS. 2004. <http://www.mrc.ac.za/june2004/security.html> (access gained June 2008).

South Africa. 2007. HIV & AIDS statistics. <http://www.avert.org/saafricastats.html> (access gained 5 August 2010).

South Africa. 1997. White Paper for Social Welfare. Principles, guidelines, recommendations, proposed policies and programmes for development social welfare. Pretoria: Government Printer.

South Africa. Department of Social Development. 2006. Annual report, 2005/2006. Pretoria: Government Printer.

South Africa. Portfolio Committee on Social Development. 2009. Report of the Portfolio Committee on Social Development: Oversight visit at Mpumalanga Province. Pretoria: Government Printer.

South African Council for Social Service Professions. 2005. Policy guidelines for course of conduct, code of ethics and the rules for social workers. Pretoria: SACSSP.

Strauss A. & Corbin J. 1998. Basics of qualitative research techniques and procedures for developing grounded theory. London: Sage.

Sunday Times, 28 October 2007:13.

APPENDIX A**A PREAMBLE TO INFORMATION****LETTER ASKING PARTICIPANTS TO PARTICIPATE IN THE RESEARCH PROJECT**

Dear colleague

I am Phindile Ngwenya, a social worker in service of the Department of Health and Social Development, Johannesburg and also a part-time Masters student in the Department of Social Work at the University of South Africa. In the fulfilment of requirements for the Masters degree, I have to undertake a research project and have consequently decided to focus on the foster care backlog: service providers' perspective and solutions.

As you are well informed about the topic, I request you to participate in the study. I will provide you with information that will help you to understand the study and decide whether or not to participate in the study.

Aims and need for the study

The aim of the study is to explore and describe the factors contributing to the foster care backlog and solutions to resolve this from the service providers' perspective. Should you agree to participate, you could be requested to participate in focus group interviews that will be conducted at the convenient place (i.e. your office), the duration will be 45 minutes. During the interview the following questions will be asked:

- What are your perceptions of foster care backlog?
- In your opinion what are the reasons for or factors contributing to foster care backlog?
- What do you perceive as the consequences of the backlog in social work practice?
- What in your opinion can be done to address this foster care backlog?

Confidentiality will be kept and you will remain anonymous. The information gathered will not be shared with anyone except my supervisor at the University of South Africa. I request permission to audio tape the interviews, the recorded interviews will be transcribed word for word. Your response to the interviews will be both recorded and notes will be kept strictly confidential. The audio tape will be coded to disguise any identifying information and locked in my cabinet. My supervisor will sign an undertaking to treat the information in strict confidentiality.

Participation in the research is voluntary, should you agree to participate and sign the consent form, please be informed that if you want to participate you have a right to terminate at anytime during the study. However, you will be requested to engage with me in informal discussion so as to terminate in good faith. You have the right to ask questions at anytime concerning the study. Should you have queries, not adequately addressed by me as a researcher, you are free to contact the Chairperson of the Research and Ethics Committee of the Department of Social Work, UNISA: Dr. A.H. Alpaslan, **telephone no.:** (012) 429 6739 or **e-mail:** alpasah@unisa.ac.za.

In view of the above information and being aware of your rights, you are requested to give your written consent in case you want to participate in this research project by signing and dating the information and consent form provided and initialising each section that you understand and agree to the conditions.

Thank you for your participation.

Kind regards

P.M. Ngwenya

Contact details: (011) 983 3800

©: 082 415 5895

APPENDIX B

INFORMATION AND INFORMED CONSENT DOCUMENT

TITLE OF THE RESEARCH PROJECT:

FACTORS CONTRIBUTING TO THE FOSTER CARE BACKLOG: SERVICE PROVIDERS' PERSPECTIVES AND SOLUTIONS

REFERENCE NUMBER: **802 221-6**

PRINCIPAL INVESTIGATOR/RESEARCHER: **PHINDILE NGWENYA**

ADDRESS: **453 EDWIN MAKHETHA STREET
MMESI PARK
DOBSONVILLE NORTH
1863**

CONTACT TELEPHONE NUMBER:

(w): (011) 983 – 3800

©: 084 486 8642

<p>DECLARATION BY OR ON BEHALF OF THE PARTICIPANT:</p> <p>I, THE UNDERSIGNED, _____ (name), [ID No: _____] the participant or in my capacity as _____ of the participant [ID No _____] of _____ _____ _____ _____ (address)</p> <p>A. HEREBY CONFIRM AS FOLLOWS:</p> <p>1. I/the participant was invited to participate in the above research project which is being undertaken by (name) _____ of the Department of Social Work in the School of Social Science and Humanities at the University of South Africa, Pretoria, South Africa.</p>	<p style="text-align: center;"><u>Initial</u></p>
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------

<p>2. The following aspects have been explained to me/the participant:</p> <p>2.1 Aim: The investigator(s)/researcher(s) are studying</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>The information will be used to/for</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<u>Initial</u>
<p>2.2 I understand that</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<u>Initial</u>
<p>2.3 Risks:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<u>Initial</u>
<p>Possible benefits: As a result of my participation in this study</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<u>Initial</u>
<p>Confidentiality: My identity will not be revealed in any discussion,</p>	<u>Initial</u>

description or scientific publications by the investigators/researchers.	
Access to findings: Any new information/benefit that develops during the course of the study will be shared with me.	<u>Initial</u>
Voluntary participation/refusal/discontinuation: My participation is voluntary. My decision whether or not to participate will in no way affect me now or in the future.	<u>Initial</u>
3. The information above was explained to me/the participant by _____ (name of relevant person) in Afrikaans/English/Sotho/Xhosa/Zulu/other _____ (indicate other language) and I am in command of this language/it was translated to me satisfactorily by _____ (name of the translator). I was given the opportunity to ask questions and all these questions were answered satisfactorily.	<u>Initial</u>
4. No pressure was exerted on me to consent to participate and I understand that I may withdraw at any stage from the study without any penalty.	<u>Initial</u>
5. Participation in this study will not result in any additional cost to me.	<u>Initial</u>
<p>B. I HEREBY CONSENT VOLUNTARILY TO PARTICIPATE IN THE ABOVE PROJECT.</p> <p>Signed/confirmed at _____ on _____ 20__</p> <p>_____</p> <p>Signature or right thumbprint of participant Signature of witness</p>	