Kinship foster care – perceptions and experiences of grandparents regarding fostering their teenage offspring

by

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Submitted in fulfilment of the requirements for the degree of

Master in Child and Family Studies

in the

Department of Social Work at the University of Western Cape

Supervised by

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October 2020

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ACKNOWLEDGEMENTS

I would like to express my sincere appreciation and deepest gratitude to the following:

- The Almighty God that I serve, who protected and strengthened me during the study. It is indeed true that nothing is impossible with God (Matthew 19 verse 26).

- To my supervisor Dr Shernaaz Carelse, who guided me throughout the study with her expertise, knowledge and experience. I really appreciate her constructive criticism and I will forever be grateful.

- To my family (Happy, Celia, Thabo, Tebogo, Tinyiko, Thando and Praise) who gave me unconditional support throughout my study.

- To my life partner Mafolo Nthwadi and Adirans Kurhula Divine my daughter for the love and support that they have shared with me.

- To my friends Madire Dannyboy, Sekgala Israel, Seloana Paul, Mohlala Veina, Mokomane Melisa, Makhudu Joyce and Moshoeu Prisca, for their support and encouragement throughout the study

- To my colleagues Nkoana Moeketsi, Kabekwa Mmoledi and Mphahlele Resho for helping me to get participants and assisting with their office space.

- To my participants (Foster grandparents) living at Makhuduthamaga Municipality, I am grateful to you for opening up and sharing your lived experiences, and may the Almighty God richly bless you.

- To the Department of Social Development, Limpopo province for allowing me to conduct this study with their clients

- To Dr Anna-Mart Bonthuys for her excellent work in editing this dissertation.

- To Hillensberg Trust and HWSETA Bursary, thank you for funding me to ensure that the study is executed without any financial constraints.

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ABSTRACT

Kinship foster care in South Africa, whereby orphaned and vulnerable children (OVC) are being cared for by their biological relatives, is increasing. The significant increase in kinship foster care has a strong correlation to the high rates of HIV/AIDS-related deaths, resulting in a high prevalence of children who are vulnerable and orphaned. Social workers are mandated to seek alternative care placements for such OVC, prioritising kinship care as opposed to foster care with non-biological families. However, such kinship foster care, in which children are likely to be placed in the care of their grandparents, as common practice in South Africa, is not without challenges relating to family dynamics, especially when foster children become teenagers. The family dynamics associated with kinship foster care is the focus of this study. The aim of this study was to understand the essence of grandparents' perceptions and lived experiences of fostering their teenage offspring. To this end, a qualitative approach using a phenomenological research design was employed. The population of the study was grandparents living in Makhuduthamaga municipality in Limpopo Province, South Africa. Purposive sampling was used to select 10 grandparents who were fostering their orphaned teenage grandchildren. Unstructured, in-depth individual interviews were used to gauge participants' perceptions and experiences of kinship care. Interpretative phenomenological analysis was used to analyse the data, while family systems theory was used as lens to the phenomenon. Ethics approval was issued by the Humanities and Social Sciences Research Ethics Committee of the University of the Western Cape. The study revealed that the grandparents fostering their teenage offspring were facing health, emotional and psychological challenges, even though they did not perceive it as a burden. Participants in this study relied on their spiritual system, family, neighbours and community members for support.

Keywords: foster care, foster grandparents, kinship foster care, offspring, orphan, teenage

DEFINITION OF KEYWORDS

Foster care: The placement of a child via an order of the Children's Court, in the custody of a suitable person, willing to act as a caregiver to the child (Children's Act 38 of 2005).

Foster grandparent(s): A biological parent(s) of the child's parent deemed suitable by Children's Court to foster their grandchildren (Children's Act 38 of 2005).

Kinship foster care: Alternative living arrangements in which a child is placed in the care of biological relatives (Children's Act 38 of 2005).

Offspring: Any of the descendants of a person (a child or children) (Pam, 2013).

Orphan: A child who has no surviving parent caring for him or her (Children's Act 38 of 2005).

Teenage: A transition stage during adolescence from childhood to adulthood, between 13 and 19 years of age (Erikson, 1972; Macleod, 2003).

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CHAPTER ONE: OVERVIEW OF THE RESEARCH STUDY

1.1 INTRODUCTION

In a study by Mersky and Janczewski (2012), it was found that foster grandparents indicated that their children had presented fewer problematic behaviours than their foster grandchildren. However, foster grandchildren cannot be compared to any other children as they have been emotionally affected either by the conditions which they lived in or by the passing of their parent(s), this makes them to fall short of developmental and functional risk (Mersky & Janczewski, 2012). Böning and Ferreira (2013) shared similar sentiments, namely that children placed in foster care tend to display higher levels of emotional and behavioural challenges, because they usually come from a deprived economic background and have experienced trauma. Such emotional and psychological stressors which teenage offspring exhibit in kinship care are for instance teenage mood swings; oppositional and defiant behaviour; not to mention the dangers of drug use; and aggressive antisocial behaviour that is often associated with teenagers experiencing life stressors.

The demand for foster care in South Africa is in crisis (Fortune, 2016). Coupled with this crisis is the need for children to remain in the care of adults that are known to them such as their biological relatives. This is particularly important in the South African context where culture, language and identity are enshrined in the Bill of Rights and the Children's Act, not to mention the Convention on the Rights of a Child (The United Nations, 1989). This study aimed to provide an understanding of the essence of grandparents' perceptions and lived experiences of fostering their teenage offspring. The study's objectives were to explore and describe the perceptions and lived experience

of grandparents regarding fostering their teenage offspring; to interpret the perceptions and lived experiences of grandparents fostering their teenage offspring; and to make recommendations for social work practice and policy relating to kinship care. The research question was: What are the perceptions and experiences of grandparents regarding fostering their teenage offspring? Internationally organisations are struggling to meet the needs of escalating numbers of orphans (Whetten, Ostermann, Whetten, O'Donnell & Thielman, 2011), leaving communities to rely on relatives to take care of them (Maundeni & Malinga-Musamba, 2013), known as kinship foster care (South Africa, 2010).

The global statistics of orphaned children in kinship foster care is unavailable, unlike orphans in general, because different countries use different terms for kinship care (United Nations Children's Fund [UNICEF], 2014). It is estimated that there are 140 million orphans globally. Most orphans globally are living with their biological grandparents or a biological family member (UNICEF, 2014). South Africa has approximately 13 million orphans and close to half of this number are children who have lost their parents due to HIV/AIDS-related illnesses (UNICEF, 2014; Statistics South Africa [Stats SA], 2019).

1.2 BACKGROUND AND CONTEXT

In 2016 the global adult mortality rate was 142 per 1000 population, which left many children orphaned (WHO, 2020). In 2013 there were approximately 140 million orphans in the whole world, with 15.1 million having lost both parents (UNICEF, 2014). In 2017 the death toll related to HIV and AIDS was 940 000 (670 000–1.3 million) worldwide; 380 000 in Eastern and Southern

Africa, leaving many children orphaned in Africa (UNAIDS, 2018; Stimela, 2013). Internationally, organisations are struggling to meet the needs of orphaned children and are calling for governments to assist in caring for such children (Whetten *et al.*, 2011). While governments and welfare organisations have an obligation to care for orphaned and vulnerable children (OVC), relatives too can play a role in providing a safety net that the community can rely on to address the rapid increase in caring for orphaned children (Maundeni & Malinga-Musamba, 2013).

1.2.1 Kinship foster care

The Convention on the Rights of the Child (CRC) (The United Nations, 1989) and the 1999 African Charter on the Rights and Welfare of Children (ACRWC) (Organization of African Unity, 1990) advocate for children to be placed in alternative care with their relative families as priority, with the intention to reduce the disruptions in the children's education and social and cultural life (The United Nations, 1989; Organization of African Unity, 1990). These treaties provide direction for children who are without parents to be cared for in alternative care placements, with kinship care as a priority. In 2009 the United Nations adopted guidelines for the alternative care of children, which aimed to strengthen the implementation of the Convention on the Rights of the Child (CRC) (The United Nations, 1989).

South Africa has aligned its legislation concerning children with the international treaties, reaffirming their commitment for protecting children in alternative care as described in the Children's Act 38 of 2005 (South Africa, 2010). According to the Children's Act, children who are placed in foster care are those who were found by the Children's Court to be in need of care and protection in terms of section 150 of the Act (South Africa, 2010). As such, several orders in

terms of section 156 of the Act may be issued, placing a child in an alternative care placement such as foster care (kinship care or non-kinship care) or a child and youth care centre (CYCC). A child in need of care and protection is placed in foster care in terms of section 156 (1)(e)(i) with a suitable foster parent who is found fit in terms of section 156 of the same Act, and placement is issued by the Children's Court (South Africa, 2010).

The Children's Act distinguishes between two forms of foster care, namely kinship care and non-kinship care. Kinship care refers to a child being placed in the care of a relative, meaning biological family members who are close to the child, such as extended family members (Mnisi & Botha, 2016). Non-kinship care refers to a child being placed in the care of a suitable person(s) who is a non-relative, meaning not a biological family member (Forber-Pratt, Loo, Price & Archarya, 2013). There is no statistical data on children placed in kinship vs children in non-kinship care in South Africa, because there is no distinction made in practice between kinship and non-kinship foster care (Fortune, 2016).

1.2.1.1 Grandparents of teenagers in kinship foster care

According to a study by Kgomo (2009), it is mostly grandparents or uncles and aunts that are kinship caregivers in South Africa. Grandparents seem to be the preferred caregivers when choosing who to care for orphaned grandchildren, because they have a sense of an obligation to care for their teenage offspring (Helton, Boutwell & DiBernardo, 2017). Also, grandparents often desire to maintain the child's stability and there is often a pre-existing bond between the child and the grandparent(s); they share a history, culture and tradition (Font, 2015). However, the challenges of fostering a teenage offspring are a lack of parenting skills in raising millennials, lack

of social support, and limited resources such as accommodation and finance (Maundeni & Malinga-Musamba, 2013; Ge & Adesman, 2017). In South Africa in particular, kinship care is associated with challenges relating to inadequate housing, economic hardship, difficulty in dealing with loss, illiteracy, fear of the unknown, and stigmatisation (Perumal, 2011; Mosimege, 2017). Hence this study aimed to understand the essence of grandparents' perceptions and lived experiences of fostering their teenage offspring.

1.3 OVERVIEW OF THE THEORETICAL FRAMEWORK

The family system theory was coined by Dr Murray Bowen in the late 1950s to the early 1960s, when he was conducting research at the US National Institute of Mental Health (Gurman & Kniskern, 1981). This theory is based on a notion that a family is a system which constitutes an emotional unit, whereby there are subsystems that interact with one another within the system (Gurman & Kniskern, 1981). Hall and Fagen (1956), cited in Broderick (1993), support Bowen's views by defining family system theory as a set of subjects within a system whereby there is a relationship and attributes between the subjects.

The principles of family system theory are firstly, that a change in one part of the system affects the whole system. Secondly, it is only through studying the whole family's cultural values, norms and structures that one will better understand an individual family member's behaviour. Lastly, the interaction between the system and its environment is a two-way process whereby they influence one another (Pratt & Skelton, 2018). As such, a family as a social system can function adequately or inadequately through its members' behaviour and communication patterns.

Therefore, inadequate functioning can lead to dissatisfaction of the system's integrity (Almagor & Ben-Porath, 2013). Hepworth, Rooney, Rooney, Strom-Gottfried and Larsen (2010) explain that family context, family strengths, boundaries and boundary maintenance, family power structure, family decision-making processes, family goals, family myths and cognitive patterns, family roles, communication styles of family members, and family life cycle are all important factors to consider when one wants to understand a family's functioning. Therefore, in terms of the current study, these concepts in family system theory were critical to consider in gaining an understanding of the perceptions and experiences of grandparents who are fostering their orphaned teenage offspring. Family system theory was relevant to the study, because foster children as a system are brought into another system (a kinship care context), which could potentially influence how decisions are made, and determine the communication styles as well as the roles and functioning of the family.

1.4 PROBLEM STATEMENT

The number of foster children in South Africa continues to rise (Rochat, Mokomane & Mitchell, 2016), resulting in a crisis in the field of foster care as more and more children are left without parental care (Fortune, 2016). Added to the high prevalence of foster care, is the challenge of ageing grandparents having to care for their teenage grandchildren. According to Erik Erikson's theory of psychosocial development, children entering the adolescence stage, which is the age between 12 and 18 years, seek to identify who they are and during this process they encounter role confusion (Erikson, 1972). It can therefore be concluded that orphaned teenagers in foster care could be at greater risk to encounter psychosocial challenges, because of the absence of their biological parents, which could result in insecurities and lack of a sense of belonging and self-identity, according to Erikson's (1972) theory.

In Africa, many orphans are cared for by their relatives such as grandparents or aunts and uncles (Kgomo, 2009), because this form of care is embedded in African culture of patrilineal kinship systems (Maundeni & Malinga-Musamba, 2013). Grandparents who foster their offspring experience challenges relating to a lack of social support systems, emotional and health-related issues, social and legal problems, inadequate housing, economic hardship, difficulty in dealing with loss, illiteracy and stigmatisation associated with HIV/AIDS – to name only a few (Perumal, 2011; Maundeni & Malinga-Musamba, 2013; Fortune, 2016; Ge & Adesman, 2017; Mosimege, 2017). There is a wealth of research internationally on foster care, but little has been researched about the perceptions and experiences of grandparent(s) whose orphaned teenage offspring is in their foster care (Poitras, Tarabulsy, Valliamée, Lapierre & Provost, 2017; Perumal, 2011).

1.5 RESEARCH QUESTION, AIM AND OBJECTIVES

The research question in this study was: What are grandparents' perceptions and experiences of fostering their teenage offspring? As such the aim of the study was to understand the essence of grandparents' perceptions and lived experiences of fostering their teenage offspring.

The objectives of the study therefore were the following:

- To explore and describe the perceptions and lived experience of grandparents regarding fostering their teenage offspring

- To interpret the perceptions and lived experiences of grandparents fostering their teenage offspring

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- To make recommendations for social work practice and policy relating to kinship care

1.6 OVERVIEW OF THE RESEARCH METHODOLOGY

This study employed a qualitative approach, because according to Wagner, Kawulich and Garner (2012), qualitative research is used when a researcher wants to create a coherent story seen from the storyteller's frame of reference, to understand and represent his/her experiences and actions as he/she encounters, engages with, and lives through situations. This study employed a phenomenological research design (Creswell, 2013). Phenomenology is a philosophy and a qualitative research method which seeks to gain a deeper understanding of an experience as explained by the person who experienced the phenomenon (Creswell, Hanson, Plano Clark & Morales, 2007). Leedy and Ormrod (2005) define phenomenology as a person's perception of the meaning of an event. This phenomenological study is an attempt to understand the perceptions and lived experiences of grandparents fostering their teenage offspring. To provide a description of the essence of the phenomenon, multiple participants were recruited to obtain in-depth descriptions of their perceptions and common lived experiences (Creswell *et al.*, 2007). The lived experiences of the individuals are used to uncover the meaning of what it holds for them (Creswell, 2013; Nieuwenhuis, 2016). In the current study the lived experiences of grandparents who were fostering their teenage offspring were studied to understand the meaning it held for them as primary caregivers.

1.6.1 Population and sampling

Asiamah, Mensah and Oteng-Abayie (2017) emphasise that specifying the research population in the documentation of qualitative studies is a requirement. The research population is the whole group of individuals from which sampling units are drawn (Blanche, Durrheim & Painter, 2014). The population of this study was grandparents who are clients at the Department of Social Development in the Makhuduthamaga municipality, and who are fostering their orphaned teenage offspring. The selected sampling method for the study is non-probability sampling, which is based on the judgement of a researcher regarding the characteristics of a representative sample (Bless, Higson-Smith & Sithole, 2013). Ten participants were purposively selected from the population, based on their lived experiences as grandparents of teenage offspring in a selected municipality in Limpopo Province in South Africa. The sampling criteria were as follows: (1) grandparents who are fostering their orphaned teenage offspring; (2) residing in the selected municipality; (3) who have an active court order whereby the teenager(s) was placed in his/her permanent kinship care; (4) in whose care the teenager has been for more than 12 months. A grandparent in the selected municipality who was a temporary caregiver and who was taking care of their teenage offspring without a formal Children's Court decision was not selected to be part of the study.

1.6.2 Data collection

Wagner *et al.* (2012) define data collection as a tool used by a researcher to gather information which will assist in answering the research questions.

1.6.2.1 Recruitment procedures

Permission was requested from the Department of Social Development in the selected district in Limpopo to select clients who met the sampling criteria. The researcher did not approach the clients directly, but the social work manager requested that the social workers inform their clients about the research and those who were interested, their names were forwarded by those social workers as prospective participants. Upon receiving positive responses, individual unstructured, in-depth, face-to-face interviews were conducted with the selected foster parents.

1.5.2.2 Data collection process

Upon receiving positive responses, individual unstructured, in-depth, face-to-face interviews were conducted with the foster grandparents. An unstructured, in-depth, face-to-face interview allows the researcher to gather detailed and rich information (Rabionet, 2011). The unstructured interview schedule entailed one open-ended question and probing themes, commonly used in a phenomenological design. The question that was facilitated by the researcher during the interviews with participants was: Tell me about your experiences of fostering your teenage grandchild(ren).

Further clarity and exploration of the participant's everyday life, thoughts, feelings and meaning making were sought by probing deeper within the context of this question.

The question and themes were based on the literature reviewed and the theoretical framework. The interviews were conducted in English and Sepedi as these are the main languages spoken by people in Limpopo Province (Stats SA, 2011). The interviews were conducted at the Department of Social Development offices near the participants' homes, in the selected district. The duration of the interviews was approximately one hour. With the permission of the participants, the interviews

were audio recorded (Appendix B1 & 2). The researcher transcribed each interview and kept the audio recorded interviews and the transcriptions on his laptop, which is password protected.

1.6.3 Data analysis

The researcher used the eight steps of phenomenological analysis as suggested by Moustakas (1994). The researcher read through the transcripts several times, which helped him to understand what participants' lived experiences meant to them. After reading through the transcripts several times, making notes and keeping memos, the researcher embarked on the data analysis procedures proposed by Moustakas (1994).

1.6.4 Data verification and trustworthiness

Data verification and trustworthiness are important components in qualitative research because it assists the researcher in checking, confirming, making sure, and being certain that the mechanisms used during the process of research actually contribute to ensuring reliability, validity, confirmability and credibility (Morse, Barrett, Mayan, Olson & Spiers, 2002). Trustworthiness was ensured through confirmability, credibility and trasnferability (Connelly, 2016).

1.6.5 Reflectivity

Qualitative research intends to approach the world in order to explain, describe and understand a specific social phenomenon (Kvale, 2007). Conducting this type of research requires the researcher to be aware of his/her own perceptions, experiences and bias to avoid compromising the neutrality

of the research (Krefting, 1991). The researcher is a social worker employed by the Limpopo Department of Social Development, Sekhukhune District, Fetakgomo Municipality, specialising in childcare and protection services (foster care). This work experience has motivated the researcher to undertake this study which is of the researcher's personal interest (Creswell, 2003). The researcher used a reflective journal to record his personal feelings, thoughts and possible bias.

1.7 ETHICAL CONSIDERATIONS

Ethics approval to conduct the study was requested and obtianed from the Humanities and Social Sciences Ethics Committee (HSSREC) at University of the Western Cape. Upon receiving ethics approval form the HSSREC (see Appendix D), the researcher requested permission from the

Department of Social Development office in the selected district in Limpopo Province to recruit participants in the district. Participants were provided with an *information letter* (see Appendix A1 & 2), explaining the purpose of the study and what is expected from them in the study. The researcher explained that participation is *voluntary* and that they can withdraw from the study at any time. *Confidentiality* regarding the participants' personal information was ensured. Due to the sensitive nature of the study, the researcher conducted interviews in a sensitive manner and was cognisant of potential emotional *risk* to the participant. Participants were asked to sign a *consent letter* (see Appendix B1 & 2), in which they could choose to be *audio recorded* or not (see Appendix B1 & 2). All audio recordings and transcribed data was filed under pseudonyms on the researcher's computer, which is password protected, and were stored in the researcher's office at his place of employment to which only the researcher has access. Only the researcher and the research supervisor have *access to the transcripts*. All the research files will be stored for a period

of five years and will then be deleted. All hardcopy data will be shredded after five years. Any publications emanating from the study will not use the personal identifying details of the participants.

1.8 SIGNIFICANCE OF THE STUDY

The study is a small-scale study which may be useful to the Department of Social Development in Limpopo in the planning and implementation of social work interventions and policies regarding kinship care by grandparents fostering their teenage offspring. The study may also be useful in other provinces in respect of persons with similar characteristics as the clients in the Limpopo Province.

1.9 OVERVIEW OF THE DISSERTATION: CHAPTER OUTLINE

Chapter one presents an overview and background of the study. The information gathered provided the motivation and rationale for the study. The aims and objectives that have been identified describe the overall goal of the study, which was to explore and describe the lived experiences of grandparents fostering their teenage grandchildren. The chapter also briefly outlines the theoretical framework and research methodology that was employed.

Chapter two presents the theoretical framework, namely, family systems theory. Thus, the research problem is contextualised and investigated from a family systems perspective. The suitability and application of this theory for this particular study is presented in Chapter two.

Chapter three provides a descriptive literature review on foster care and kinship care. It provides an in depth understanding of the key challenges relating to foster care in general and kinship care in particular as it is the focus of the study.

Chapter four outlines the research methodology that was employed. This chapter outlines the aspects of the methodology that was required to address the research question in a qualitative study. The research design, population and sampling techniques, data collection and analysis, and trustworthiness strategies are discussed to show the scientific rigor and the implementation in the study. In particular, this chapter describes the application of phenomenology as the study design and its application in the analysis of the findings is a key feature in this chapter.

Chapter five presents the research findings that emanated from the indepth individual interviews with grandparents who are fostering their teenage grandchildren. Four main themes with several subthemes and categories emerged which are centred around the challenges experienced by grandparents in this study, ranging from health challenges to managing defiant teengage behaviour.

Chapter six is the final chapter of the study and is presented in two parts. The first part of this chapter presents the conclusions relating to the theoretical framework, the research methodology and the research findings. The second part presents the recommendations for social work practice relating to kinship foster care, social work practice relating to support services to grandparents fostering their teen offspring, social welfare policy and for future research.

The next chapter presents the theoretical framework of the study.

CHAPTER TWO: THEORETICAL FRAMEWORK

2.1 INTRODUCTION

In this chapter the focus will be on the theoretical framework that underpins this study. It is in this chapter where the family system theory by Dr Murray Bowen (1913–1990) will be explored to gain an understanding of the perceptions and experiences of grandparent(s) fostering their orphaned teenage offspring. According to family system theory, a kinship foster family as a system is complex in a sense that, although a teenage foster child, foster grandparent and the kinship foster family members are interdependent, there is a continuous reciprocal influence between them through constant feedback (Kantor & Lehr 1975; Cox, 2010; Thompson, Wojciak & Cooley, 2019).

2.2 ORIGINS OF THE FAMILY SYSTEM THEORY

Family system theory developed out of ecological systems theory (EST), which was developed by Urie Bronfenbrenner (1917–2005). The foundation of EST is that there is an interdependent reliance between the organism and its environment, and that an organism can only be understood fully in relation to its environment (Bronfenbrenner, 1979). In human and social sciences, the concept of ecology is used metaphorically and builds on the foundation that a person can only be understood in relation to his/her environment. The main assumption is that people interact with one another and with their environments on multiple levels. EST consists of five systems, namely the (1) micro-system, (2) meso-system, (3) exo-system, (4) macro-system, and (5) chrono-system (Hong, Algood, Chiu & Lee, 2011). Figure 2.1 presents the various systems within EST.

Bronfenbrenner's Ecological Systems Theory
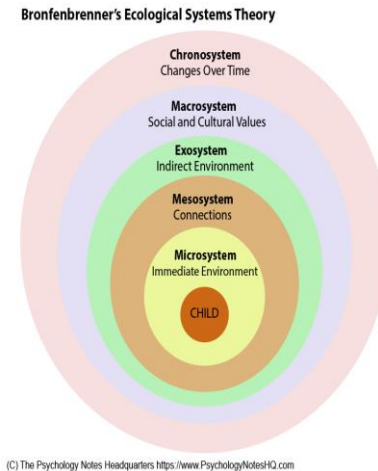
FIGURE 2.1: Bronfenbrenner's Ecological Systems Theory

Source: The Psychology Notes Headquarters (2019).

The concentric circles described in Figure 2.1 indicate that there is an interlink and an interaction between the different systems. The main assumption of EST is that there is an interactive interdependent relationship between the person and his/her environment. Similar assumptions exist in family system theory.

2.3 ASSUMPTIONS IN FAMILY SYSTEMS THEORY

Family system theory was coined by Dr Murray Bowen during the late 1950s to the early 1960s when he was conducting research at United States of America's National Institute of Mental Health (USANIMH) based on whole families (Gurman & Kniskern, 1981). Recent developments in family system theory has identified four basic assumptions, namely (1) the elements of a system are interconnected; (2) systems are best viewed as a whole; (3) the environment interacts with the system in a feedback loop: and (4) the concept *system* is a heuristic model used for understanding, and is not the reality (Pratt & Skelton, 2018).

- The elements of a system are interconnected: The interaction between family members brings about the circle of interaction which indicates the circular pattern that the family systems theory operates from.

- Systems are best viewed as a whole: The family as a system is complex in a sense that family members are interdependent, having continuous reciprocal influence through constant feedback (Kantor & Lehr, 1975; Cox, 2010; Thompson, Wojciak & Cooley, 2019). This complex family exists in space and time where there is interaction between family members, the immediate environment and the external environment.

- The environment interacts with the system in a feedback loop: The feedback loops which the family experiences when the parts of the system interact with one another (contributing to a problem or solution) can either be positive or negative. They are positive in a sense that there is change that is brought about in the system, not that it is being good; and they are negative in a sense that the status quo is maintained, not that it is bad (Winek, 2010; Thompson, Wojciak & Cooley, 2019). The internal or external environment in which the family lives can influence them, which makes these systems open (Minuchin, 1985; Broderick, 1993).

These systems are adaptive in a sense that they have the ability to meet the demands resulting from changes that impact on them. This adaptation of the family system varies from one environment to another and to best understand this environmental context, the society provides the adaptation framework (Wedemeyer & Grotevant, 1982).

- The concept *system* is a heuristic model used for understanding and is not the reality: There is a negative correlation between anxiety and adjustment resulting from the changes in the physical environment and the impact of social support systems, according to Alston and Nieuwoudt (1992), cited in Rosenbusch and Cseh (2012).

Bowen developed the following eight concepts for his theory, namely triangles, differentiation of self, nuclear family emotional system, family projection process, multigenerational transmission process, emotional cut off, sibling position, and societal emotional (Broderick, 1993). Table 2.1 describes the eight concepts developed by Bowen to explain family system theory.

Table 2.1 Bowen's eight concepts of family system theory

Concept	Definition
Triangles	It is an emotional system which involves three persons whereby the third person is considered as the outsider who constantly tries to win favour from the two persons inside. The outside member is involved when tension increases between the two insiders, creating an interlocking of emotional triangles.
Differentiation of self	It is the highest functioning of a person which is inborn, and/or has been shaped by family relationships during childhood.
Nuclear family emotional system	It is the description of four basic relationship patterns, namely marital conflict, dysfunction in one spouse, impairment of one or more children, and emotional distance, which are all regarded as the root causes of family problems.

Family projection process	It is the description of how parents' emotional problems are transmitted to their children within the family system.
Multigenerational transmission process	This means there is a repetition of family patterns such as roles and triangles through generations.
Emotional cut off	It describes how family members manage their issues emanating from unresolved emotional issues with other family members such as parents, siblings, aunts, uncles, children etc, whereby they reduce or totally cut off emotional contact with them.
Sibling position	It is the different positions of children within a family whereby they have characteristics that are complementary.
Societal emotional	Describes the governing behaviour by the emotional system at societal level, promoting both progressive and society's regressive periods.

Source: Broderick (1993)

The definitions of the eight concepts indicate that family system theory is based on the notion that a family is a system which constitutes an emotional unit and that there are subsystems within the system that interact with one another (Gurman & Kniskern, 1981).

Hall and Fagen (1956), cited in Broderick (1993), supported Bowen's views by defining family system theory as a set of objects within a system, with a relationship and attributes between the objects. The principles of family system theory firstly are that a change in one part of the system affects the whole system. Secondly, it is only through studying the whole family's cultural values, norms, structures that one will better understand an individual's behaviour. Figure 2.2 illustrates the interactive relationship and attributes between the objects.
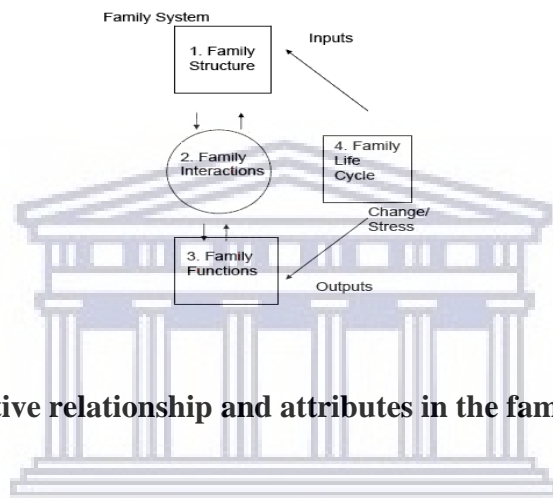
FIGURE 2.2: The interactive relationship and attributes in the family system

Source: Weebly (2015).

Figure 2.2 indicates that the interaction between the system and its environment is a two-way process whereby they influence each other (Pratt & Skelton, 2018).

According to Pratt and Skelton (2018), the following six principles form the foundation of family system theory: (1) families determine membership; (2) subsystems exist; (3) families strive to maintain an equilibrium; (4) resources are needed for adaptation and change; (5) family rules exist; and (6) there is first- and second-order change. Additionally, communication feedback (negative or positive) is received by the system during the interaction with the environment whereby certain behaviours will be reinforced or abandoned.

2.4 FAMILY SYSTEMS THEORY IN THE CONTEXT OF THE CURRENT STUDY

The teenage foster child and foster grandparent cannot be fully understood if they are treated independently outside the context of the kinship family system in which they are inseparably embedded (Cox, 2010; Rosenbusch & Cseh, 2012). A kinship foster family as a social system which performs certain functions and responsibilities for its members, should be viewed from its experiences, culture, socioeconomic status, sexual orientation, race and family forms in order to understand them. There are a variety of family forms and the functioning of these forms is influenced by the dominant culture. The cultural component of family forms influences help-seeking behaviour and determines how problems are defined by the kinship foster family (Hepworth, Rooney, Rooney, Strom-Gottfried & Larsen, 2010).

Bitter and Carlson (2017) refer to the act of appreciation of the connectedness between the individuals, the family and society at large as the best choice. They elaborate that this choice is aimed towards a positive connectedness of the kinship foster family members, between the kinship foster family and the society, including the environment itself. Researchers found that there is a decline in family bonds because of modernisation although there is a bond that exists outside the family to extended families such as kinship (Bengtson, 2001; Kohli, Künemund & Lüdicke, 2005).

2.4.1 Family strengths

A family's role is to maintain an equilibrium, which is termed *homeostasis* which refers to the resistance capabilities that are used to meet the family's demands (Kim & Rose, 2014). Kinship foster families just like any other families go through difficult times during their life cycle, yet they are still able to continue with their roles and functions. They do so because they have the

ability to change and grow by creating supportive networks from the environment that they find themselves in. After stressful life events, they bounce back to normality and adapt to the society which differs from their values or norms and policies, and judges them accordingly.

These kinship foster families have the ability to create an environment for its members to have a sense of belonging and mutual aid. This family strength helps the kinship foster families to resolve the problems that they encounter on a daily basis as they interact with one another or with the immediate environment (Hepworth *et al.*, 2010). The kinship foster families have strength of doing activities together and gain a sense of solidarity and training (Weisner, 1994; Mesch, 2006).

2.4.2 Boundaries and boundary maintenance

Boundaries are the abstract dividers that function between and among systems or subsystems within the kinship foster family and between the kinship foster family and the environment. Boundaries are not static, but they change over time as the kinship foster family members interact with one another, making the kinship foster family system to be open. Boundaries are flexible and can allow influences from outside to enter, making the kinship foster family to negotiate new boundaries in and out of it (Akyil, Prouty, Blanchard & Lyness, 2015).

These boundaries are closely monitored by foster grandparents who have the authority in ensuring that a discrete kinship foster family space is created which differs from the larger environmental space. Although there are flexible boundaries, thick boundaries also exist which restrict transactions from the outside systems into the kinship foster family, and vice versa. For example, in kinship foster families which disengage from the external social environment and live according

to their own distinct principles (Hepworth *et al.*, 2010), family boundaries are challenged by technology and the cultural value transmission becomes difficult to transfer to teenage foster children. Thus, the technological illiteracy of many foster grandparents positions them in a difficult situation to be able to monitor their teenage foster children.

The tendency that teenage foster children is believed to be more computer or smartphone literate than their foster grandparents can contribute to teenage foster children being more vulnerable to the influence of social media and peer values (Mesch, 2003; Mesch, 2006; Akyil *et al.*, 2015), and this makes it difficult for the kinship foster family to control family boundaries. The generational gap is formed by this technological and peer influence contributing to the alienation of traditional values, causing an intergenerational disconnect (Kohli, 2004; Akyil *et al.*, 2015). This causes psychological distress for the foster grandparents and the children within the kinship foster family (Akyil *et al.*, 2015).

Additionally, the gender and generational hierarchy in traditional families is threatened by the ever-changing society, which weakens the family's boundaries and creates more intense emotionality between the foster grandparent subsystem and the teenage foster children subsystem. As a result of this deteriorating hierarchy, the foster grandparent then is forced to negotiate boundaries with these children (Akyil *et al.*, 2015), and those who do not have the necessary negotiation skills may cause family conflict (Fisek & Scherler, 1996). Failure in resolving the boundary issues during adolescence will result in a spill-over to adulthood, destabilising the next developmental stage of the kinship foster family.

Kinship foster families that are not ready to become democratic and are expecting their teenage foster children to adopt the existing family values, find it disrespectful when the teenage foster child challenges their parenting styles (Akyil *et al.*, 2015). The need for autonomy and relatedness is balanced concurrently with the adaption of the evolving context of their immediate environment (Akyil *et al.*, 2015). Kinship foster family boundaries help in protecting the family's backstage life, which is usually private from scrutiny and criticism. The front-stage life of the kinship foster family is usually fulfilling the societal roles, expectations and norms; although some kinship foster families have found difficulties in fulfilling such role, because most adolescents spend their time on social media during family time instead of spending time with the family, which contributes to boundary construction and preservation (Mesch, 2006). The private family time is hindered by different forces, making this ideal cultural realisation goal difficult to attain (Mesch, 2006).

2.4.3 Family power structure

Hepworth *et al.* (2010) define power within a family as a dynamic process within and/or outside the family system where family dimensions are influenced by it. Kinship foster families develop their own power structure which has control over the family member's (the teenage foster child's) behaviours and the exercising of leadership roles. The parental subsystem (the grandparent) is the one who has power and authority to instil family values and norms, regulate behaviours, socialise and establish rules for the teenage foster child. This power varies from one kinship foster family to another due to factors such as culture, the economic status of family members and of course family preferences. This simply means that the power structure is not monolithic. Every family member is given a measure of power and limitations thereto perform certain roles within the kinship foster family and in the external environment (Hepworth *et al.*, 2010).

There is a two-way power struggle of gender which is influenced by society's expectations and the kinship family's values (Glover, 2014). The power distance concerns attitude toward and acceptance of power, inequality, and hierarchy (Guan & Li, 2017). The role and number of foster grandparents have an impact on the teenage foster children's outcomes from a family structure perspective. Guan and Li (2017) argue that married foster grandparents experiences fewer difficulties in parenting teenage foster children's behaviour than single foster grandparents. The teenage foster children raised by single foster grandparents are more likely to exhibit adverse behaviour than those raised by both the foster grandparents (Ajayi & Somefun, 2019).

Gender determines the family structure and power, but power is complicated by other several things such as race, class, age, status and so forth (Few-Demo, Lloyd & Allen, 2014). Some grandfathers have delegated the power and authority role to the grandmothers because of the inherent emotional connection that exists between the grandmother and the teenage foster child (Akyil *et al.*, 2015). Although the grandfathers delegated the authority role to the grandmothers, they still maintain their role as the family provider; therefore, the traditional role remains constant (Dedotsi & Paraskevopoulou-Kollia, 2015). Research reveals that the traditional stereotype of males being the breadwinner is slowly getting destroyed, with fathers starting to participate in the socialisation of children (Dedotsi & Paraskevopoulou-Kollia, 2015).

2.4.4 Family decision-making process

There is a correlation between the family power dimension and the family's decision-making styles. The decision-making approaches change during the kinship family life cycle whereby the powers of decision making are passed from one individual member to the other. The decision making in some kinship families is not limited to the immediate family, but can be extended to other relatives, organisations or professionals depending on the culture, tradition, race or policies. The wellbeing of the kinship family is maintained by the effective deliberation and decision making of the family (Hepworth *et al.*, 2010). Foster grandparents as decision makers use constructive or destructive approaches to resolve kinship family conflicts. On the one hand, constructive conflict resolution includes finding communalities, showing empathy and accepting responsibility; on the other, destructive conflict resolution approaches apply avoidance and one-sided behaviour (Qin, Chang, Han & Chee, 2012).

2.4.5 Family goals

A kinship foster family is an information processing system which constantly informs the teenage foster child and the kinship family members with proper information which assists them to achieve the kinship foster family's specific goals (Kantor & Lehr, 1975). The goals of a kinship foster family as a social group are attained through the cooperation of family members and their coordinated efforts. These goals may be established in two ways. Firstly, the common goals that are adopted or developed inconsistent with societal expectations; and secondly, individual goals which are based on the family's belief, culture or preferences (Hepworth *et al.*, 2010). Hepworth *et al.* (2010:261) assert that "goals that families adopt and support, may be openly recognised or embraced by its members or they may be covert and beyond the family's awareness".

The kinship family's control strategies determine the success of the family in reaching their set goals (Hoppmann & Klumb, 2012). Kinship foster families are sometimes forced to choose between the competing goals and values when they are in crisis. Kinship foster family goals and their execution are not always in contrast with the societal or professional expectations, causing conflict between the kinship foster family and the external environment (Hepworth *et al.*, 2010).

Value transmission is easily done when there is secure attachment and warmth between foster grandparents and their teenage foster child (Akyil *et al.*, 2015). The absence of attachment and warth between foster grandparents and their teenage foster child leads to difficulties in correcting behaviour that threatens the family values, especially in this rapid changing society experiencing challenges which are unique (Akyil *et al.*, 2015). Kinship foster families have the responsibility to reconstruct their ideologies and allowing new generational values to evolve. Grandfathers who usually are not the foster parents, perceive providing for their teenage foster children as an expression of their love or care, while keeping a distance and being authoritative (Akyil *et al.*, 2015). This makes most foster grandmothers to spend more time in child rearing than in the labour market (Hoppmann & Klumb, 2012).

2.4.6 Family myths and cognitive patterns

A family myth may provide a guideline to understanding the kinship foster family's beliefs, which are well integrated concerning each family member and their positioning within the family life cycle. Understanding this family myth gives a broader view on how the kinship foster family members have been accustomed to viewing certain areas of their experiences (Zeig & Gilligan, 2013).

Even though myths have distorted reality they go unchallenged because they specify kinship family members' roles, values and attributes during the family life cycle (Nicoll & Hawes, 2013). There is a family myth, that certain individuals or groups have the capabilities of doing certain things better than others (Hepworth *et al.*, 2010).

A kinship foster family member who stays calm during stressful events experiences what is known as differentiation. This gives the family member time to think clearly through controlling his/her emotional reactivity, on how to overcome the situation (Bitter & Carlson, 2017). Problems arise during the interaction between the individual and the environment, which makes people with feelings of inferiority to react emotionally towards the situation. Adolescents with such a problem should not be micro-parented but should be given an opportunity to grow autonomously just like any other children. Emotional illness of the adolescent may also present as physical illness or social dysfunction (Bowen, 1966).

2.4.7 Family roles

Kinship foster family roles are complementary and reciprocal, whereby family members are differentiated into the social roles within the family. Gender has always been at the centre of family roles in many families, even though some kinship foster families assign such roles according to culture, social, legal or chronological status scripts.

There are roles and role expectations that are learned as family members interact with each other and with the extended environment. Gender and status are used to determine who does what or should do what within the kinship foster family. These roles and expectations come with certain

expected behaviour and attitude that a teenage foster child should portray. The role behaviour can refer to engaging in an actual behaviour that people expect one to display when executing one's role (enacted role); or portraying a behaviour which is influenced by significant others or the society (prescribed role); and/or the expectation that people have of a family member who is filling the role that he/she was assigned (perceived role) (Hepworth *et al.*, 2010).

Roles are learned throughout the kinship foster family life cycle, as the family members including the teenage foster children interact with one another and with other systems within the society. Intra-role can be caused by contradictions between family members in executing their roles; so, it is important to clearly understand how the roles should be distributed/assigned to avoid such situations even though this is sometimes inevitable. Role transition may result in this intra-role conflict as the family tries to adjust to the new role because of life transition and conflicts. Inter-role conflict also exists where a family member is expected to execute two incompatible roles (Hepworth *et al.*, 2010).

2.4.8 Communication styles of family members

Open expression of feelings has been or still is a problem in many cultures which are deeply rooted in its norms and values, especially in the African cultures unlike the Western cultures. It should be noted that the communication patterns of families are influenced by their culture even though some are influenced by the society, depending on the openness of that kinship foster family. Congruency in family communication happens when there is a correspondence between the message conveyed verbally and the message expressed in non-verbal language. In communication an obstacle can be

presented by the non-verbal behaviours where there are discrepancies between the meanings in the verbal and in the non-verbal levels of communications (Hepworth *et al.*, 2010).

A kinship foster family member is motivated by the force (emotional) and the ways in which a communication is expressed (relationship) (Bowen, 1966). Communication is formed by and based in the relationship where the family members interact with one another (Few-Demo, Lloyd & Allen, 2014). There is a higher frequency of interaction in a kinship foster family that has open communication (verbal and non-verbal), where exchanging of ideas, opinions, beliefs, and emotions takes place, than in a close family (Platsidou & Tsirogiannidou, 2016; Guan & Li, 2017). This makes family members skilled in expressing emotions (Halberstadt, 1986) and able to solve problems during difficult times (Platsidou & Tsirogiannidou, 2016). It is also observed that cultural kinship foster families shy away from open communication (Guan & Li, 2017).

Collectivistic cultures unlike individualistic cultures prefer indirect and more contextual communication with adolescents, and challenges arise when this communication carried out by foster grandparents becomes indirect to adolescents, as they prefer direct communication (Akyil *et al.*, 2015). The introduction of the Children's Act 38 of 2005, the constitution of the Republic of South Africa and other international treaties have prevented parents from abusing children by shaming and scolding. Foster grandparents resorted to distancing themselves in trying to make adolescents guilty, but some of these adolescents do not get the intended message. The reason is that they are more influenced by media and school where verbal communication is used, which is more direct (Akyil *et al.*, 2015).

Foster grandparents use their learned non-verbal communication such as frowning and freezing off in reacting to unwanted behaviour exhibited by adolescents. This non-verbal communication is usually not understood by the adolescents, making them continue with the behaviour or getting irritated by the perceived meaningless attitude, resulting in them being oppositional (Akyil *et al.*, 2015). There is a connection between kinship foster family communication patterns and family members' conflict handling style such as avoidance. Such conflict handling style is used by adolescents towards their foster grandparents (Guan & Li, 2017).

2.4.9 Family life cycle

Kinship foster families are expected to go through developmental stages such as death, birth, marriage, divorce or chronic illness, which are all encompassed in a family life cycle. These developmental stages have tasks which the kinship foster family should complete successfully, and it is unfortunate that completing these tasks often comes with interruptions or dislocations, causing difficulties in transitioning from one stage to the next. This variation comes with culture and its expectation for kinship foster family members' roles, behaviour, power, decision making, among others. Culture plays a more significant role in the developmental stages of a kinship foster family life cycle than any other thing (Hepworth *et al.*, 2010). The transmission of values from one generation to another is one of the goals of families; unfortunately this process sometimes takes place in a time of rapid change bringing confusion to grandparents having to choose the new values or continuing with the values of their family (Akyil *et al.*, 2015).

The rapid changing society due to industrialisation, urbanisation, and women liberation into education and employment has an impact on the family values and structure (Akyil *et al.*, 2015). The teenage foster child's developmental stage also has a bearing on this problem. It is important to note that kinship foster families need to know that change in behaviour and ways of living compels them to lose their traditional values. It is not only the values which are transmitted from one generation to another, but also the family problems and processes (Bitter & Carlson, 2017). This means that the stories of our lives can only be understood by connecting our history which was formulated through the sequence of events as they were unfolding. The family problems are reproduced becoming unjust to those who do not have the privilege of choice (Few-Demo, Lloyd & Allen, 2014).

2.5 CONCLUSION

The perceptions and lived experiences of the foster grandparents in fostering their orphaned teenage offspring are better viewed using family system theory as theoretical framework. This is because the foster grandparents and the orphaned teenage offspring are inseparable and interdependent on each other and other systems surrounding them. This makes this theory relevant and of paramount importance in exploring with the intention to gain an understanding of the perceptions and experiences of grandparent(s) fostering their orphaned teenage offspring from a phenomenological perspective.

The next chapter presents the literature review of the study.

CHAPTER THREE: THE FUNDAMENTALS OF KINSHIP FOSTER CARE

3.1 INTRODUCTION

The total population of South Africa was estimated to be 53.7 million people in mid-2014, with 18.5 million of these people being children under the age of 18 years (Hall & Sambu, 2016). These children amounted to 44.2% of the South African population (Hall & Sambu, 2016; Fortune, 2016). South Africa has approximately 13 million orphans and close to half of this number are children who had lost their parents due to HIV/AIDS-related illnesses (UNICEF, 2014). According to Statistics South Africa [Stats SA] (2011), in the year 2011, 12.5% of children in South Africa were orphaned either maternally, paternally or both parents dying. The percentage of orphaned children has increased to 20% according to the social services profession policy (DSD, 2017). The number of foster children in South Africa continues to rise (Rochat, Mokomane & Mitchell, 2016), making the country to be a home of orphans resulting from the HIV/AIDS pandemic (Manukuza, 2013). This condition has led many South African children to be in need of care and protection (Dunn & Keet, 2012).

3.2 CHILDREN IN NEED OF CARE AND PROTECTION

According to the Children's Act 38 of 2005, section 150(1), a child is in need of care and protection if the child:

• "has been abandoned or orphaned and does not have the ability to support himself or herself and such inability is readily apparent

• displays behaviour which cannot be controlled by the parent or caregiver

• lives or works on the streets or begs for a living

• is addicted to a dependence-producing substance and is without any support to obtain treatment for such dependency

• has been exploited or lives in circumstances that expose the child to exploitation

• lives in or is exposed to circumstances which may seriously harm that child's physical, mental or social well-being

• may be at risk if returned to the custody of the parent, guardian or care-giver of the child as there is reason to believe that he or she will live in or be exposed to circumstances which may seriously harm the physical, mental or social well-being of the child

• 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 of the child or by a person under whose control the child is".

Subsection 2(a) and (b) of section 150 of the above-mentioned Act explains that a child who is found to be a victim of child labour and a child-headed household may be a child in need of care and protection.

3.3 ORPHANS

According to Hall and Sambu (2016:108), an orphan is "a child under the age of 18 years whose mother, father or both biological parents have died (including those whose living status is reported as unknown but excluding those whose living status is unspecified)". The adult mortality rate in

2016 was 142 per 1000 globally where many children were orphaned (UNICEF, 2014 WHO, 2020). In 2017 the death toll of people with HIV and AIDS was 940 000 worldwide, and 40,4% of this death toll happened in Eastern and Southern Africa (UNAIDS, 2018; Stimela, 2013). In South Africa there is approximately 13 million orphans and orphaned children who have lost their parents due to HIV/AIDS-related illnesses are estimated to be close to half of this number (UNICEF, 2014; Statistics South Africa [Stats SA], 2019).

The increasing number of orphans have put foster care practice within the country under severe pressure, because of the social challenges that children find themselves in. These social challenges include but are not limited to living in unhealthy and unsafe communities characterised by violence, unemployment, poverty, sexual abuse, malnutrition, substance abuse, being abandoned or neglected by parents, or parents just disappearing and leaving them with family or friends (Böning & Ferreira, 2013). Usually, orphaned children are cared for by their maternal grandmothers when their parents pass away (Manukuza, 2013). In the absence of their grandmothers they often find themselves heading households themselves, thus contributing to child prostitution, criminal activities and children making a living on streets (South African Society for Prevention of Child Abuse and Neglect, 2003). These children then develop high levels of emotional and behavioural disturbance resulting from their living conditions, which are economically deprived, being victims of trauma and possible being HIV-positive (Böning & Ferreira, 2013). In intervening into the children's conditions, the South African government, through the Department of Social Development and in partnership with child protection organisations, has developed a system in place called foster care to protect and nurture these children in a safe environment.

In South Africa, the Children's Act 38 of 2005 is the overarching legislation used when working with children in need of care and protection, in conjunction with the Criminal Law (Sexual Offences and Related Matters) Amendment Act 32 of 2007, the Child Justice Act 75 of 2008, the White Paper on Social Welfare, 1997, the Social Assistance Act 13 of 2004, and guidelines for the effective management of foster care. These Acts were developed in line with the supreme law of the country which is the Constitution of the Republic of South Africa, 1996. Several legislations such as the Children's Act 38 of 2005 were also aligned with the international legislations such as the Convention on the Rights of the Child (CRC) (The United Nations, 1989) and the African Charter on the Rights and Welfare of the Child (ACRWC) (Organization of African Unity, 1990), which both address matters relating to children in need of care and protection.

3.4 FOSTER CARE AND CHILDREN'S RIGHTS LEGISLATION

3.4.1 The Constitution of the Republic of South Africa, 1996

The Constitution of the Republic of South Africa came into effect in 1996. South Africa's policies and legislation implementations are guided by the constitution as an overarching institutional framework. It is regarded as the supreme law of the country, with all other policies and legislations being subject to it. The rights of all South Africans are enshrined in Chapter 2 (the Bills of Rights) of the Constitution of South Africa, 1996. This includes children's rights which are stipulated in section 28, such as the right to family care or parental care, or to appropriate alternative care when removed from the family environment (RSA, 1996). This section forms the basis of the Children's Act 38 of 2005 and thus provides for the protection of children including those in alternative care (i.e., foster care).

3.4.2 The Children's Act 38 of 2005

The Children's Act 38 of 2005 advocates for the best interest of the child as of paramount importance in all matters concerning the child. Section 7(1)(f)(ii) of the Act outlines the standards that should be applied when considering the best interests of the child. The protection of the child comes first, even though his/her right to participate depends on the child's age, maturity and stage of development (South Africa, 2010; Roose & Bouverne-de Bie, 2007). Such child should be protected from being subjected to social, cultural and religious practices which are detrimental to his/her wellbeing (South Africa, 2010). This is not a privilege, but a right that the Act provides for the child and is also a constitutional right according to section 2 of the Bill of Rights (RSA, 1996). This Act further explains that the presiding officer may make certain orders to place a child in alternative care in terms of section 156, if the child is in need of care and protection in terms of section 150.
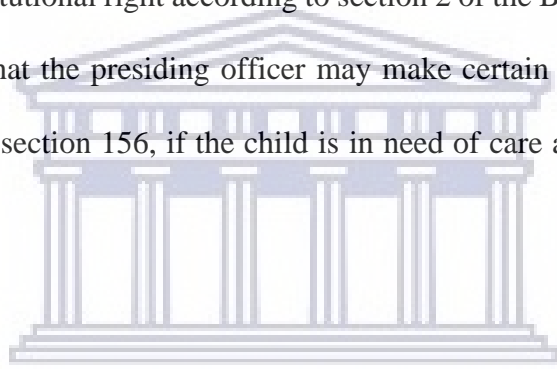
3.4.3 The White Paper on Social Welfare, 1997

The White Paper on Social Welfare (Department of Social Development, 1997), which the Department of Social Development has drafted, adopted a developmental approach to welfare. It further provided a framework for the transformation of social welfare services. The economic development has been incorporated into the developmental approach to welfare, which intends to address inequity and poverty, and to promote social development issues (Lombard, 2007). The Policy Framework for Orphans and other Children made vulnerable by HIV and AIDS (2005) advocates for families to be the primary source of children's care, which concurs with the constitution of the Republic of South Africa, 1996, the Children's Act 38 of 2005, the African Charter on the Rights and Welfare of the Child (ACRWC) (Organization of African Unity, 1990), and the Convention on the Rights of the Child (The United Nations, 1989).

3.4.4 The Social Assistance Act 13 of 2004

This Act regulates the social grants that are provided by government through the Department of Social Development. This department has established an agency named the South African Social Security Agency (SASSA), to administer and provide these grants to eligible beneficiaries of the country. There are many social grants and among them there are two which are applicable to this study, namely the foster child grant and the care dependency grant. The foster child grant, according to section 8 of the Social Aassistance Aact 13 of 2004, is for all children who are in need of care and satisfy the requirements of the Children's Act 38 of 2005. It is the only grant in South Africa that is administered through a court order issued by a presiding officer of the Children's Court in terms of section 180(1)(a) and (3)(a) and (b) of said Act. The court order is issued after a report has been presented by a designated social worker together with the child in question and the prospective foster parent. According to the Social Assistance Act 13 of 2004, section 7, a care dependency grant is provided to a foster parent who cares for a child requiring and receiving permanent care or support services due to his/her physical or mental disability.

3.5 FOSTER CARE

The Convention on the Rights of the Child (CRC) (The United Nations, 1989) and the 1999 African Charter on the Rights and Welfare of Children (ACRWC) (Organization of African Unity, 1990) advocate for children to be placed in alternative care with their relative families as a priority, with the intention to reduce the disruptions in the children's education, social and cultural life (Perumal, 2011). The above-mentioned documents provide a direction for the care of orphans in alternative care, taking relative (kinship) placements as priority. They further explain that in the absence of relatives, the state must provide for the care of the children. In 2009 November, the

20th United Nations Guidelines adopted for the Alternate Care of Children in alternative care was reissued, which aimed to strengthen the implementation of the Convention on the Rights of the Child (CRC) (Perumal, 2011).

South Africa has aligned its legislation concerning children with the international treaties, reaffirming its commitment to protect children in alternative care by replacing the Child care Act 74 of 1983 with the Children's Act 38 of 2005, which came into effect as from the 1st of April 2010. Foster care is considered a substitute care which provides care within a family setting to children who are not available for adoption and whose parents cannot care for them (De Jager, 2011). It is the only care outside the home that is necessary and desirable, especially for children in need of care and protection (Durand, 2007).

The literature explains that foster care placement that occurs through a court order is called formal foster care, and that which is arranged outside court is informal foster care. These types of foster care placement can be non-related or kinship (i.e., related) (De Jager, 2011). Formal foster care placement is made through a court order in terms of section 180(1)(a) and (3)(a) and (b) of Children's Act 38 of 2005, whereby a child is placed with a person who is not a family member of the child, or with a family member who is not the parent or guardian of the child (South Africa, 2010). These children should be cared for in a safe, healthy, positive and supportive environment, that has the same environmental characteristics as the children's previous one (De Jager, 2011).

The prospective foster parents are provided with foster care information by the designated social worker and it is up to them to decide whether or not to foster the children (De Jager, 2011). This phase is known as the preparation phase which acts as a self-selection procedure for the prospective foster parent. This phase is normally conducted informally in the office of the designated social worker (De Jager, 2011). The pre-placement training is important as it prepares the prospective foster parent with the necessary information regarding caring for children in foster care (De Jager, 2011).

The foster care system which was designed for 55 000 children is currently dealing with more than 500 000 children, which is nine times more (DSD, 2019). This system, designed for children in need of care and protection is finding difficulties in absorbing such children, because of those children who are not regarded as being in need of care and protection overburdening the system. Therefore, the cases reported to the Department of Social Development does not represent the exact number of children who are in need of care and protection in South Africa, as many cases are not reported (Du Toit, Van Der Westhuizen & Alpaslan, 2016). The abandoned and abused children are not responded to in an appropriate time because of those in kinship care (Blackie, 2014). It is acknowledged that most of these children are in kinship care and not in need of care and protection services, but more in need of social assistance which they receive in the form of a foster child grant (DSD, 2019). Many children who are in foster care are not given up for adoption because of the foster child grant which comes as a benefit with such care, resulting in adoption levels to be low (Blackie, 2014). HIV/AIDS which caused the enormous increase in the number of orphans has led the foster care system to be completely overburdened and an insufficient number of social workers employed to manage it (Blackie, 2014). Although foster care is best considered

when children are in need of care and protection, a blind eye should not be turned to the serious deficiencies which the relevant systems are facing, in South Africa and globally (Böning & Ferreira, 2013).

The death of parents has led to household economic shocks, unemployment, and increasing poverty (Kuo & Operario, 2010). This has overwhelmed alternative services, especially foster care, because of an increase of 325 348 children between the period of 1994 and 2012. The foster care system had 537 150 children by the end of June 2014, and 378 718 foster parents receiving the grant on their behalf (South African Social Security Agency, 2014; DSD, 2019). These grants are the only grants in South Africa which are provided through a court order issued by the presiding officer after the social worker has made necessary investigations, and the child is declared in need of care and protection (DSD, 2019). Children's safety and protection are commonly provided in a family context, most often in foster care. Foster care is perceived as the best and most widely applied method of placing children in alternative care (Böning & Ferreira, 2013). It is not surprising to find that in August 2014 approximately 80% of the children in the foster care system receiving a foster child grant, were in kinship care (DSD, 2019).

It has been observed by researchers that the foster care system in South Africa is seriously under great pressure (Centre for Child Law, 2013; Böning & Ferreira, 2013). The quality of foster care services is hampered by the shortage of social workers in the field, and again the professional responsibility of all the children in the statutory system cannot be borne by social workers (Böning & Ferreira, 2013). Social justice is therefore not provided to foster children if one takes into

account the overburdened practice where there are difficulties to meet the legal and policy obligation regarding such children (Böning & Ferreira, 2013).

Based on the literature, foster care is worldwide seen as the best form of alternative care for children in need of care and protection, because it occurs within a family structure. Despite the advantages of foster care, the status of the practice in South Africa is currently overburdened with several challenges. In 2011 the Department of Social Development had a crisis where more than half a million orphaned children had not received their foster child grants because of social workers being overburdened by foster care cases and facing a severe backlog of cases (Centre for Child Law, 2013).

HIV/AIDS, unemployment, poverty, substance abuse, inequality, family and gender violence, as well as crime impact negatively on family life (De Jager, 2011). Children who are brought into foster care have grown up in impoverished circumstances where meeting their basic needs was prioritised above their development. It is important that children in such placement be empowered and protected while striving to normalise, socialise and internalise them into the society (Böning & Ferreira, 2013). Mokomane and Rochatt (2011) criticise foster care for not providing legal protection and permanence for children in need of care and protection like adoption, although foster care is mostly the preferred alternative care, serving as a temporary solution for children in need of care and protection.

Challenges in foster care include organisational factors such as inadequate assistance, support, and information (Cooley & Petron, 2011), causing tension and stress in kinship families (Buehler, Rhodes, Orme & Cuddeback, 2006). Therefore, a high-quality in-service training is urgently needed for foster parents to help them better understand how to deal with serious behaviour problems displayed by foster children, which often cause stress to grandparents (Pacifici, Delaney, White, Nelson & Cummings, 2006; Whitley & Kelley, 2007). It should be noted that foster care cannot solely be blamed for adding stress to the families, because it is in their very nature that such families are exposed to stressful situations (Fuentes-Peláez, Balsells, Fernández, Vaquero & Amorós, 2016). It is expected that foster parents be provided with pre-preparation phase before placement, and parenting programmes which will help them to understand foster care and enable them to care for the teenage foster children. This was not the case in the study of Durand (2007), where it was found that foster parents were not given such training.

Böning and Ferreira (2013) added that the process of placing children in foster care through the Children's Court requires expensive and time-consuming investigations by designated social workers. Permanency plans which are actualised and the absence of unneeded or unplanned changes in foster care placements are an indication of successful care (Buehler *et al.*, 2006).

3.5.1 Purposes of foster care

Foster care is regarded as alternative care which is temporary care, whereby a child who is found to be in need of care and protection is placed with suitable foster parent in a family setting that has similar characteristics as that of the child. The purpose is to prevent disruption in the child's child education, social and cultural life by placing him/her in a safe, healthy and supportive environment.

There are three purposes of foster care according to section 181 of the Children's Act 38 of 2005 (South Africa, 2010:171), namely:

"To protect and nurture children by providing a safe, healthy environment with positive support;

To promote the goals of permanency planning, first towards family reunification, or by connecting children to other safe and nurturing family relationships intended to last a lifetime; and

To respect the individual and family by demonstrating a respect for cultural, ethnic and community diversity."

In cases such as orphaned children in kinship foster care, the family reunification is rarely rendered, because these children are mostly placed with their biological grandparents. This can contribute positively to the permanency planning of the children in foster care to ensure stability and security in their lives.

3.5.2 Procedure

In South Africa the constitution of the republic serves as the supreme law of the country, and the Children's Act is based on it. Social work is the only profession that the Children's Act has provided to champion the foster care placements in conjunction with other professions. The practice policy of Social Work clearly set out foster care practice in the White Paper for Social Welfare. There are also practising guidelines and protocols developed to help social workers in implementing foster care (Böning & Ferreira, 2013).

Procedures of placing a child in foster care is in accordance with section 180(1) and (3) of the Children's Act 38 of 2005, where a child can be placed in foster care with a person who is not a family member of the child or who is a family member but not a parent or guardian, or in a

registered cluster foster care scheme through an order made by the Children's Court or an order made by the provincial head of Social Development, in writing, transferring a child in alternative care from any form of alternative care to another form of alternative care (South Africa, 2010; De Jager, 2011).

According to section 180(1) and (2) of the Children's Act 38 of 2005, a written report by a designated social worker will serve as a basis on which the court shall make a decision to place a child in foster care or not. This detailed report provides the cultural and religious background of the child and the availability of an adult person having a similar background to that of the child, who is willing and has the ability to provide foster care to the child. A child may be placed with a person whose background is different to that of the child, only if there is an existing bond between the person and the child. This also applies in a case where a suitable and willing person with the same background as that of the child is not readily available to provide for the foster care of the child. Then the child is placed in foster care in terms of section 156(1)(e)(i) with a suitable foster parent who was found fit by the Children's Court in terms of section 156 of the Children's Act 38 of 2005. This foster care placement is considered to be an alternative care placement, substituting for the parenting of vulnerable children (Carter & Van Breda, 2016).

3.5.3 Suitable foster parent

A suitable foster parent is one of the possible foster care placement options of alternative care listed in section 156(1)(e) (De Jager, 2011). A suitable foster parent is any person found by the Children's Court to be fit and proper to be entrusted with the foster care of the child, and this person cannot be the child's parent or guardian (Böning & Ferreira, 2013). Assessments of foster

care varies from one case to another, even in kinship care and non-related care where some require in-depth investigation (De Jager, 2011).

There are no standard criteria which are clear for assessing prospective foster parents and social workers have to rely on the way it is outlined in the Children's Act 38 of 2005, which is regarded as a good starting point. This gives social workers an opportunity to use a wide range of interpretation in conducting their assessment for screening prospective foster parents (Carter & Van Breda, 2016). Many family members and caregivers, regardless whether suitable or not but by virtue of having cared for orphans over a period of time, apply for foster care placement with an intention of getting the grants, which defeats the purpose of foster care (Böning & Ferreira, 2013).

Some South African researchers have raised concerns about the use of foster care as a kind of poverty alleviation programme, which is greatly different from what it was intended for. This dependency on government grants has been created by the effects of poverty and HIV/AIDS (Böning & Ferreira, 2013; Carter & Van Breda, 2016; Fortune, 2016).

The traditional roles of foster parents include nurturing the foster child, providing guidance and discipline to the child, and promoting his/her development (De Jager, 2011). The Children's Act 38 of 2005 provides the rights and responsibilities of foster parents in detail in terms of regulations 65 and 66.

3.6 TEENAGE FOSTER CHILDREN

Teenage foster children are children who were not available for adoption and their biological families were unable to care for them. They have been emotionally affected either by the conditions which they lived in or by the passing of their parent(s). This places them at risk as far as their overall development is concerned (Whitley & Kelley, 2007; Kelley, Whitley & Campos, 2010; Mersky & Janczewski, 2012). These are the consequences of their parents' socio-economic circumstances which become a major obstacle (Dunn & Keet, 2012). This means that the consequences of children's poor self-image and identity crisis, truancy and aggressive behaviour come from their background (Böning & Ferreira, 2013). Besides the parents' economic background some of the behaviours that these children display are as a result of the parents' high level of stress and poor parenting such as being unable to discipline and/or negative discipline (Böning & Ferreira, 2013; Greeno, Lee, Uretsky, Moore, Barth & Shaw, 2016). One of the key emotional challenges faced by HIV foster children in South Africa is the inability to cope with the loss of their biological parents dying of AIDS (Petersen, Bhana, Myeza, John, Holst, Alicea, McKay & Mellins, 2010).

Some of these children become rebellious towards their grandparents (Kuo & Operario, 2010). The behaviours of teenage foster children are not the same and cannot be compared, including the level of their difficulties. These challenging behaviours influence the foster parent's ability to care for them in a conducive environment (Koren-Karie & Markman-Gefen, 2016). These emotional and behavioural problems require mental health treatment (Greeno *et al.*, 2016).

Mental health has been observed as the primary area that makes teenage foster children vulnerable, and is manifested by disruptions of their emotional, cognitive and behavioural development (Leve, Harold, Chamberlain, Landsverk, Fisher & Vostanis, 2012). Neuro- cognitive functions have been found to be one of the deficits experienced by teenage foster children in comparison to children reared in low-income, no maltreating biological families (Leve, Harold, Chamberlain, Landsverk, Fisher & Vostanis, 2012). Child trauma may be minimised when teenage foster children are placed in kinship foster care (Bailey, Letiecq & Porterfield, 2009), because they can maintain a connection to their family roots through allowing them to receive family support, which is unavailable or infrequent with non-kinship placements (Whitley & Kelley, 2007).

Foster parent assessment is important in foster care and inadequate assessment increases the likelihood of placement breakdown, putting the child's wellbeing at risk. Various reasons for such breakdown have been identified, for instance the movement of the foster child into adolescence; the incorrect matching of a child to the foster parent; a lack of foster parent support; the complexity of the child's social problems; interference from the biological family; inadequate screening of foster parents; and overburdening of social service systems (Booysen, 2006; Mkhize, 2006; Dickerson & Allen, 2007; Louw & Joubert, 2007; Carter & Van Breda, 2016).

Social workers as case managers of such teenage foster children are mandated by the Children's Act 46(1)(f) to provide supervision services in order to assess teenage foster children's placement (South Africa, 2010). Böning and Ferreira (2013) argue that firstly, social workers are unable to identify the problematic behaviour of the child during home visits as it is done periodically, and

secondly, these foster parents who are dependent on the foster child grant will not necessarily report this behaviour. They further concluded that the problematic behaviour is reported when it has escalated beyond the foster parent's control (Böning & Ferreira, 2013). Although the results do not point to a high occurrence of problems, there is some doubt as to whether the full extent is known. If the high caseloads are considered, the question can be asked whether the supervisory social worker could identify problematic behaviour with only periodic visits, and whether the foster parents who are dependent on the foster care grant for a living would report the behaviour. Usually, the issue is raised only when it has already reached a critical stage (Böning & Ferreira, 2013).

3.7 KINSHIP FOSTER CARE

The local, national and international child protection organisations are struggling to meet the needs of an ever-increasing number of children in need of care and protection, calling for states or government to assist in caring for them (Whetten *et al.*, 2011). Child protection organisations and the state are not the only options that could care for the teenage foster children, but also the relatives become the safety net that the community relies on to address the rapid increase of orphans (Maundeni & Malinga-Musamba, 2013). There are two kinds of foster care, namely the child may be placed with a relative (those who are close to the child such as the extended family members) known as kinship foster care, and then there is the so-called non-relative foster care (Forber-Pratt, Loo, Price & Archarya, 2013; Mnisi & Botha, 2016).

In the last century, child welfare professionals did not prefer kinship foster care placements, because they believed that abusive or neglectful parents' dysfunctional behaviours were learned from their families of origin (Koh, 2010). Today preference is given to kinship family placement before non-related family members or cluster foster care schemes, because family members have an obligation to care for their extended relatives (South Africa, 2010; De Jager, 2011; Böning & Ferreira, 2013; Du Toit, Van Der Westhuizen & Alpaslan, 2016). This type of placement is known as "kinship foster care" (Mnisi & Botha, 2016), although it is not defined in the Children's Act 38 of 2005 (Fortune, 2016) as such. There are three types of kinship foster care, namely public kinship foster care, voluntary kinship care, and informal/private kinship care (Whitley & Kelley, 2007).

Normative social frameworks encompass kinship care of children which is on the increase due to the advantage it has to put the responsibility for such care on the family of dependent children (Campbell & Handy, 2011). Kinship care refers more to the informal or private arrangement of care by extended family members (Fortune, 2016). About 80% of children presently in foster care are in kinship foster care (Fortune, 2016). Many children in South African have been deprived an opportunity of living in families that are safe and secure because of the effects of poverty and burdens of the HIV/AIDS pandemic (Holborn & Eddy, 2011). This means that millions of children are growing up in single-parent families, child-headed households or on the streets (Holborn & Eddy, 2011).

Although "kinship care" as term is popular, it is not a common term used across the world. Some countries such as Ireland use the term "relative care"; the United Kingdom uses "family and friends care"; although "kinship care" is commonly used in Australia, New Zealand, United States of America, India and South Africa, among others (O'Brien, 2012). Research reveals that the term "kinship" is new in India (Forber-Pratt *et al.*, 2013). It is recorded that in Australia, 50% of children placed in foster care were fostered by their grandparents during the period 2017-2018 (Australian Institute of Health and Welfare, 2019). In America there were 30 954 placements of foster children with a home family relative (Children's Bureau, 2016). The United Kingdom had 11 472 children living in informal kinship foster care in 2009 (Nandy, Selwyn, Farmer & Vaisey, 2012). There is no statistical evidence of children placed in kinship and non-kinship foster care in South Africa, because of having uncategorised foster care. Fortune (2016) argues that it would be known who is caring for the children in South Africa if the statistics of kinship and non-kinship foster care were separated.
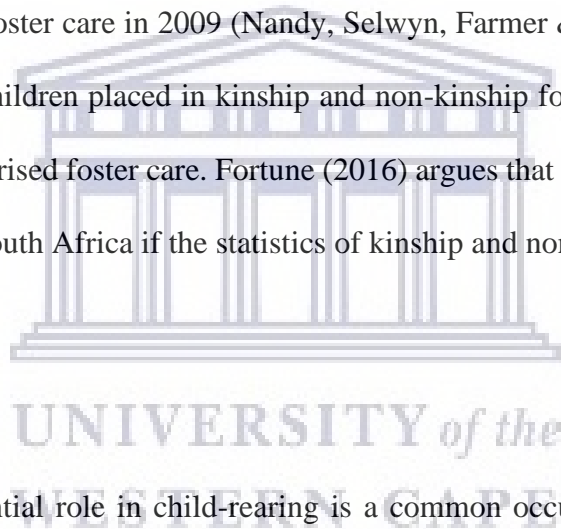
Relatives playing a substantial role in child-rearing is a common occurrence around the world (Hall & Sambu, 2016). This has been common to all South African families as they have never been accurately captured by the concept "nuclear family" as a norm. The concept "family" in South Africa should include extended families, caregivers and guardians (Holborn & Eddy, 2011). Children adjust very well in environments which they are familiar with, hence many foster care placements in South Africa are predominantly with kinship families. However, this does not guarantee that the placements are problem free (Pretorius & Ross, 2010; Böning & Ferreira, 2013).

The advantage of kinship foster care is that it serves as a strategy for family preservation, which is one of the purposes of foster care provided in the Children's Act 38 of 2005, section 181(b). This allows for the protection of the child's family identity and demonstrates respect for the child's cultural, ethnic and community diversity (South Africa, 2010; De Jager, 2011). This also ensures that sibling relationships are protected from breaking apart and extended family relationships are maintained (De Jager, 2011). The successful opportunities for teenage foster children's life-long relationships depend on the planning and preparation of the kinship family and the children (Stott & Gustavsson, 2010). The weakening of family ties, urbanisation and the increasing impact of poverty, places kinship foster care under extreme pressure (UNAIDS, 2001; Blackie, 2014). This is supported by Makiwane, Gumede, Makoae and Vawda (2017), who indicate that social and economic changes have weakened traditional values and networks as a result of development and modernisation.
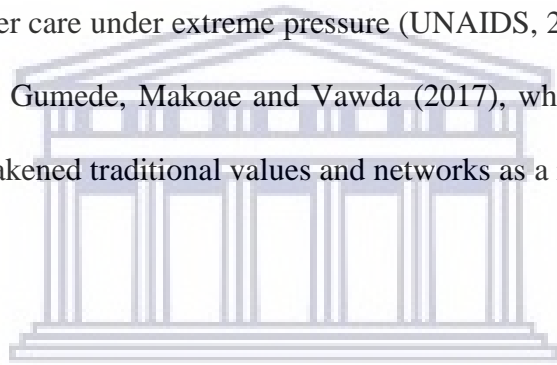
Foster care is criticised for not having a legal claim by foster children to the inheritance of the foster parent when the latter should pass away (Mokomane & Rochatt, 2011). Another criticism is that the family structures of grandparents or related nuclear and single-parent families, are not ideal for children to grow up and develop in, even though they are far better than an institution. The success of such placements relies on the availability of a social worker who renders psychosocial services to teenage foster children; sadly, this has proved to be impossible due to unmanageable workloads, social workers' occupational stress, and the shortage of social workers in the field (Böning & Ferreira, 2013; Manthosi, 2016).

3.8 GRANDPARENTS FOSTERING THEIR OFFSPRING

There has been a dramatic increase in this phenomenon of grandchildren being raised by grandparents over the past several decades (Kelley *et al.*, 2010). There was a steady growth during the early seventies, followed by a larger increase in the nineties (Pinazo-Hernandis & Tompkins, 2009). Grandparents or elderly uncles and aunts are among many kinship caregivers (Kgomo, 2009), and are regarded as safety nets for orphans (Foster, 2000). These foster parents in kinship care are often found to be grandparents who are older and single (Koh, 2010), and who are heavily burdened by the care that is heaped on them instead of on the younger generation (Makiwane, Gumede, Makoae & Vawda, 2017). Grandparents are the main preference when choosing who to care for the children, because they share genetic material which enhances an obligation to care for them (Helton, Boutwell & DiBernardo, 2017), and such arrangement maintains the child's stability; there is a pre-existing bond between the child and grandparent, and they share history, culture and tradition (Font, 2015). Internationally, the challenges of adolescents being fostered by grandparents are associated with child rearing (such as limited resources, knowledge, skills and social support), emotional and health-related (Maundeni & Malinga-Musamba, 2013), and also social and legal (Ge & Adesman, 2017).

Local challenges are inadequate housing, economic hardship, difficulty in dealing with loss, illiteracy, fear of the unknown and stigmatisation (Perumal, 2011; Mosimege, 2017). In South Africa, many children who are not living with their parents, find themselves living with their grandparents, uncles and aunts (Blackie, 2014). These grandparents, uncles and aunts are regarded as family members, as defined by the Children's Act 38 of 2005, because of a significant relationship which the child has developed with them based on psychological or emotional

attachment (South Africa, 2010; Fortune, 2016). This type of living conditions are regarded as having skipped a generation and many children – 8% of 25 million – in the country are cared for by kinship families headed by grandparents (Blackie, 2014; Carter & Van Breda, 2016). Kuo and Operario (2010) observed that elderly females are the ones who care for the AIDS-orphaned children. Grandparents, and particularly grandmothers, serve as substitute caregivers (Campbell & Handy, 2011). This is because they have a strong social, psychological role, and a great commitment to keeping the family lineage safe (Campbell & Handy, 2011). It is required that they provide a home for the child to live in, financial support, promote the wellbeing of the child and the child's rights, and guide and direct the child while in their care (Du Toit, Van Der Westhuizen & Alpaslan, 2016). This requirement is often not met as expected in such "skipped-generational" families. Research has revealed that the poor wellbeing of children stems from the emerging skipped-generational family structure headed by an elderly woman who is unable to meet their developmental and welfare needs (Makiwane *et al.*, 2017).

Foster parents face multiple challenges, including increased financial pressures, limitations in caring for biological children and other household members, disrupted household structure, and deteriorating physical and psychological health due to ageing (Kuo & Operario, 2010). A decline in health status of the foster parents has been associated with stress and fatigue which foster parents' experiences (Greeno, Lee, Uretsky, Moore, Barth, & Shaw, 2016). Some of the financial challenges were exacerbated by the passing of the breadwinner (Kuo & Operario, 2010). Foster caregivers often experience multiple demands in their role as a substitute caregiver and as a result, may be at risk for negative outcomes, such as dissatisfaction with fostering or deciding to stop fostering (Cooley *et al.*, 2015). Foster parents who have parental resilience have reported more

negative child behaviour, proving failure in the training which aimed at reducing the challenges encountered in foster care (Cooley *et al.*, 2015).

Grandparents who are fostering their teenage offspring experience strain in parenting them, which is unusual for them (Fuentes-Peláez, Balsells, Fernández, Vaquero & Amorós, 2016). These challenges have begun long before these children were teenagers, for instance where they were placed in foster care in their early years, and the length of such care implies a long haul (Fuentes-Peláez *et al.*, 2016). Other contributing factors to foster parents' stress is an inability to discipline foster children (Kuo & Operario, 2010). Most foster parents' experience difficulties to meet the foster children's emotional needs such as attention and love as well as helping them to deal with the loss of their parent(s). This is because they themselves are also struggling with the loss or bereavement of the foster children's parent(s) (Kuo & Operario, 2010). Foster parents need to become competent at managing ambiguity and handling loss (Buehler *et al.*, 2006). Foster parents experience discrimination, because of the AIDS stigma related to the passing of the foster children's parents (Kuo & Operario, 2010).

Parenting the second time around may lead to psychological, social, economic, and physical distress (Bailey *et al.*, 2009). In the study of Bailey *et al.* (2009) it was found that grandparents had no plans for parenting for the second time, and that they fostered their grandchildren for the sake of keeping them safe and nurturing their healthy development. Many grandparents seemed to feel caught between two identities, namely on the one hand being regarded as a grandparent, on the other as a parent (Bailey *et al.*, 2009). Some grandparents matched their identities and their

roles as parents, and others did not, because their adolescent foster children already knew them as grandparents (Bailey *et al.*, 2009). This was not the case with those who got into foster care in their early years. Their grandparents made it clear that they are the teenage foster children's parents, and they grew up with that idea (Bailey *et al.*, 2009).

It was found in the study of Koren-Karie & Markman-Gefen (2016) that the emotional attachment of foster parents to the children had no correlation to the foster parents' background such as age, education, length of time fostering, or number of children they fostered. Foster parents' deep emotions were associated with the essences of parenting, especially when they expressed how they wished the foster children could be their own children (Koren-Karie & Markman-Gefen, 2016).

The experience of grandparent caregivers may have both positive and negative aspects. A positive aspect is that grandparents may have a strong spirit of perseverance and willpower to continue with their familial responsibilities (Bailey *et al.*, 2009). There is a tendency of foster parents to show greater acceptance of and commitment to children who are easily controlled than to those who are not (Koren-Karie & Markman-Gefen, 2016).

Second-time parenting requires grandparents to utilise all their resources and coping skills to meet these new demands. This also includes a second chance to bond with and socialise with their foster grandchildren (Bailey, Letiecq & Porterfield, 2009). Issues of loss and bereavement can be dealt with by grandparents' own therapeutic interventions (Whitley & Kelley, 2007). Grandchildren rearing is regarded as a positive event in the lives of foster grandparents (Bailey *et al.*, 2009). It

provides them with emotional rewards, among others (Campbell & Handy, 2011). Foster grandparents often face multiple challenges in their caregiving roles such as an increased risk of health problems, psychological distress, and economic struggles (Kelley *et al.*, 2010). Caring for children with complex needs can be very stressful (Barnett, Jankowski, Meister, Parton & Drake, 2018).

The marital status (single, widowed, or divorced) of grandparents has a bearing on increasing their limited resources (Bailey *et al.*, 2009; Kelley, Whitley & Campos, 2010). Multiple needs of grandchildren affect the grandparents' physical and psychological functioning. These multiple needs exist because of the increased poverty, psychological distress, difficulties with adult children, as well as the special needs of the children in their care (Kelley *et al.*, 2010).

A decline in the health of older grandmothers and great-grandmothers is of concern, given their advanced age (Kelley *et al.*, 2010). Foster parents explained that the transition of a new child into their family has brought disruptions in their family system (Lanigan & Burleson, 2017; Department of Social development, 2017). Low-income grandparents worry about the provision of adequate food for the grandchildren (Whitley & Kelley, 2007). A primary need of custodial grandparents is access to stable and enough financial resources (Whitley & Kelley, 2007). Another consequence of raising grandchildren is the deterioration of the grandparent's physical health (Whitley & Kelley, 2007). Foster care comes with emotional challenges on some foster parents who are experiencing grief and loss during a foster placement (Durand, 2007). Foster parents are unable to use appropriate language in reaching out to assist a foster child who may be emotionally disturbed.

Research has noted a lack of norms and traditions on which grandfamilies might draw to make sense of their circumstances, and a lack of support from the extended kin network to facilitate their family functioning. Rearing grandchildren within a non-normative framework or life stage may conflict with the normative framework expected by the larger society (Bailey *et al.*, 2009). Children's behavioural and mental health needs are the biggest challenge faced by foster and adoptive parents (Barnett *et al.*, 2018). The lack of understanding by community members faced by many grandparents was mentioned (Bailey *et al.*, 2009). Finance (incurring many unexpected expenses) is the most significant resource shift for grandparents (Bailey *et al.*, 2009).

There are high expectations of fostering orphaned children where foster parents should be skilled, competent, and well-trained in parenting skills (Buehler *et al.,* 2006). Additional support helps to reduce foster caregivers' stress levels and decreased stress sensitivity to children's behaviour problems (Leve *et al.*, 2012). Preparation of foster parents to deal with foster care challenges is important considering the fact that they had been faced with other challenges in their lives, which might affect these children directly or indirectly (Cooley *et al.*, 2015).

3.9 CONCLUSION

Foster care in South Africa is guided by several legislations which are linked with the international policies. Teenage foster children who are in foster care display behaviours which need a foster parent who can deal with them. The literature has proved that it is not always the case that these teenage foster children's behaviour can be dealt with, especially when they are fostered by their grandparents. This is still a challenge even though the Children's Act 38 of 2005 mandates that

social workers should provide parenting programmes to foster grandparents and life skills programmes to teenage foster children. The foster care system in South Africa has problems that should be addressed to ensure adherence to the principle of children's best interest in all matters concerning them.

The next chapter presents the research methodology of the study.

CHAPTER FOUR: RESEARCH METHODOLOGY

4.1 INTRODUCTION

It is important to follow a clear methodological process to ensure that there is scientific merit, and practical and educational value, and that the research participants are protected when research is conducted (Creswell, 2009). The aim of this study was to understand the essence of grandparents' perceptions and lived experiences of fostering their teenage offspring. This chapter describes the research methodology that was used during the execution of this study.

4.2 THE RESEARCH QUESTION, AIM AND OBJECTIVES

The research question of this study was: What are the perceptions and experiences of grandparents regarding fostering their teenage offspring? The aim of this study was to understand the essence of grandparents' perceptions and lived experiences of fostering their teenage offspring. As such the objectives were the following:

- To explore and describe the perceptions and lived experience of grandparents regarding fostering their teenage offspring

- To interpret the perceptions and lived experiences of grandparents fostering their teenage offspring

- To make recommendations for social work practice and policy relating to kinship care

The objectives of a research study are a set of guidelines which are related specifically to the outcomes resulting from the formulated research question (Fox, Martin & Green, 2007). Thus, in

this study everyday occurrences and events relating to grandparents fostering their teenage offspring, were scientifically explored and described, and then interpreted. This scientific process seeks to make sense of a phenomenon that affects people's daily lives and to further provide meaning for its occurrence (Fox & Bayat, 2010).

4.3 RESEARCH METHODOLOGY

The research methodology is determined by the research question and how it is formulated as the research question has fundamental value (Fox *et al.*, 2007). This study employed a qualitative research approach, which according to Wagner, Kawulich and Garner (2012) is used when a researcher wants to create a coherent story seen from the storyteller's frame of reference, to understand and represent his/her experiences and actions as he/she encounters, engages with, and lives through situations.
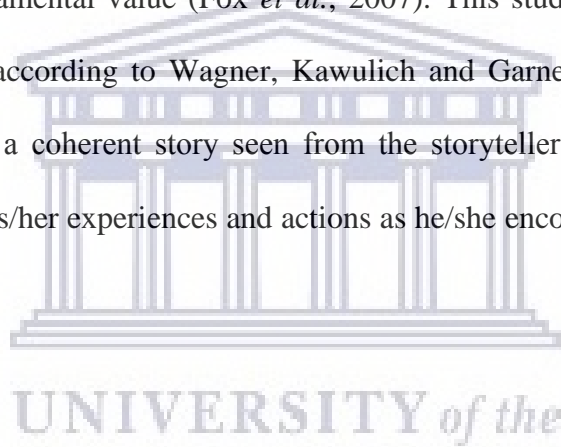
Denzin and Lincoln (1994), as cited by Klencke (2008), suggest that qualitative research is multi-method in focus, involving an interpretative, naturalistic approach to the phenomenon being studied. As such the qualitative researcher studies a phenomenon in its natural setting, attempting to make sense or interpret the phenomenon in terms of the meanings people bring to it. Furthermore, qualitative research involves the collection of a variety of empirical methods of investigation, such as case study, personal experience, introspection, life story, interview, observation, history, interaction, and visual texts that describe routine and problematic moments and meanings in individuals' lives. In this study the personal lived experience of participants was the focus of investigation. A qualitative research method was the appropriate choice, because it is

aimed at obtaining participants' shared observations and experiences through oral descriptions (Leedy, 1997). Therefore, this approach to research is designed to make known the participants' in-depth emotions, thoughts, experiences and perceptions (Rubin & Babbie, 2010). Qualitative researchers thereby seek to capture the richness of people's experiences through illumination, understanding and meaning of data (Klencke, 2008).

There are a wide range of qualitative methods from which the researcher could have chosen, each with new and emerging theoretical methods (Pascal, 2010). However, qualitative methods have key epistemological underpinnings in common; nonetheless there are distinguishing features between key areas of research (Creswell, 2009). For example, action research is participant- and social-action driven; feminist theory explores gendered micro and macro experiences; narrative and biographical research focuses on individual life stories; ethnography focuses on describing cultural and social groups; grounded theory focuses on developing theory from the field; and phenomenology is concerned with the ways in which phenomena are revealed in consciousness and lived experiences (Pascal, 2010). There are of course, overlapping principles in and among these methods, but this is a discussion beyond the scope of the study. For the purpose of the study, one method or design was selected and will be discussed next.

4.3.1 Research design

The research design is a plan or structured framework which describes the research process to be employed to solve the research problem (Babbie & Mouton, 2010). This study employed a phenomenological research design which, according to Creswell (2013), is used when the basic purpose of the study is to reduce individual experience with a phenomenon to a description of the

universal essence. There are two main phenomenological approaches, namely, the descriptive approach and the interpretative approach (Davidsen, 2013). In the current study, interpretative phenomenology was utilised where the focus was on the perceptions and experiences of grandparents who were fostering their teenage offspring. Using this approach to phenomenology is, therefore, in part also concerned with that which is latent, or hidden, as it comes to light. Interpretative phenomenology places the focus on the exploration of the lived experience or the meaning that a person holds in his/her world, and is underpinned by hermeneutics (Flood, 2010). Hermeneutics goes further than mere descriptions of core concepts, and seeks the meaning embedded in experiences and not only in what people know (Flood, 2010). Moustakas (1994) adds that the researcher (interpreter) plays an important role in the process of interpretation as he/she has to understand the text through knowledge of the historical context that was produced, and the psychology of the participant.
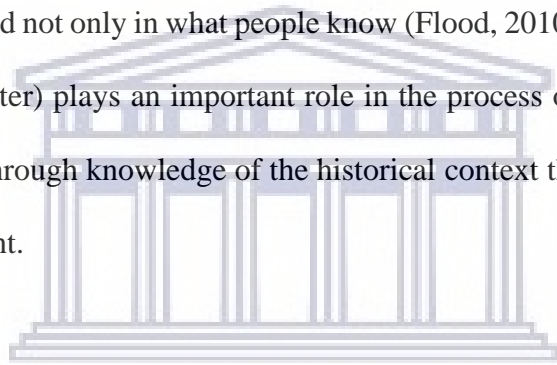
Interpretative phenomenological analysis (IPA) explicitly attends to the hermeneutics (interpretation) as a method of understanding how an experience is given meaning by the individual (Smith, Flowers & Larkin, 2010). In this study the researcher searched for the underlying meaning of the experiences of participants and emphasised the intentionality of consciousness based on memory, image and meaning (Creswell *et al*., 2007). The focus was on the lived experiences of grandparents fostering their teenage offspring and the aim of the phenomenological research was not merely to study the experiences of grandparents regarding foster care and how the world appears to them, but also to ascribe meanings to their perceptions and lived experiences – in essence, making interpretations.

Following an interpretive phenomenological design, the researcher focused on interpreting the meanings of grandparents' perceptions and experiences and how these meanings influence the choices they make, rather than seeking descriptive categories of the real/perceived world in the narratives of grandparents in the study (Flood, 2010). Bradbury-Jones, Irvine and Sambrook (2010) cite Koch (1996), who stated that the researcher draws on particular experiences and frames of reference during the process of understanding. Descriptive phenomenology focuses on the lived world from the vantage point of the researcher, while interpretive phenomenology assumes that separation of the researcher from the world of the participant cannot be achieved. From a social work perspective, such as in this study, interpretative phenomenology was the appropriate choice.

To provide the description of the essence of the phenomenon, multiple participants were recruited to bring about in-depth descriptions of their common lived experiences (Creswell *et al*., 2007). Generally, in phenomenological studies the lived experiences of the individuals are used to uncover the meaning of what it holds for them (Creswell, 2013; Nieuwenhuis, 2016). In the current study the lived experiences of grandparents who were fostering their orphaned teenage offspring was studied to understand the meaning it holds for them as primary caregivers.

4.3.2 Research setting

The geographical area of the study was Makhuduthamaga Municipality situated in the Sekhukhune District in Limpopo Province, South Africa. The population of this municipality is 274 358 people living in 65 217 households (Statistics South Africa [Stats SA], 2011), and this amounts to more than 24% of the District's total of 1169 762 (Statistics South Africa [Stats SA], 2016). The total number of older persons recorded by census 2011 was 29 606 and of children aged 10-19 was

65 479 (Statistics South Africa [Stats SA], 2011). Limpopo Province is one of the most poverty-stricken provinces in South Africa with high unemployment rates. As part of the province, which is regarded as very poor, the municipality is experiencing a weak economic base, poor infrastructure, major service delivery backlogs, dispersed human settlements and high poverty levels (Makhuduthamaga Municipality, 2019). The Makhuduthamaga Municipality is located within the Sekhukhune District Municipality in Limpopo Province. It is regarded as a Category B4 municipality because it is rural with communal tenure and with, at most, one or two small towns in its area (The Municipal Demarcation Board, 2018). The Municipality is completely rural in nature whereby traditional land ownership dominates most parts of the land (Makhuduthamaga Municipality, 2019).

This is also a community in which a large number of the population rely on social assistance from government and in which there is a high prevalence of foster care. For example, in 2019 there were 3167 active foster care cases on the Department of Social Development's baseline for this municipality (Department of Social development, 2020). The researcher is a social worker employed by the Department of Social development and has been working in Sekhukhune district for more than seven years. The researcher was therefore interested in researching the phenomenon of kinship care because it is so prevalent in Makhuduthamaga municipality, like many other areas in South Africa. After conducting the literature review, the researcher's interest in understanding kinship care in this municipality was confirmed as a gap in current local literature.

4.3.3 Research population and sampling

Asiamah *et al.* (2017) emphasised that specifying the research population in the documentation of qualitative studies is important. The research population is the whole group of individuals from which sampling units are drawn (Blanche, Durrheim & Painter, 2014). The population of this study was grandparents who were clients at the Department of Social development in the selected municipality, and who were fostering their orphaned teenage grandchildren.

4.3.4 Sampling

Sampling in research is a process of selecting people or subjects to participate in the research study. A sample is defined as a subgroup of the whole group of individuals from which sampling units are drawn (Wagner *et al.*, 2012). The selected sampling method for the study was non-probability sampling, which is based on the judgement of a researcher regarding the characteristics of a representative sample (Bless *et al.*, 2013). A small number of 10 participants were purposively selected from the population based on their experiences as grandparents fostering their teenage offspring in the selected municipality in Limpopo Province in South Africa. As such the sampling criteria were as follows: (1) grandparents who were fostering their orphaned teenage offspring; (2) residing in the selected municipality; (3) who had an active court order whereby the teenager(s) was placed in his/her permanent kinship care; (4) and in whose care the teenager has been for more than 12 months. Grandparents in the selected municipality who were temporary caregivers and who were taking care of their teenage offspring without formal Children's Court decisions were not selected to be part of the study, because the researcher wanted to understand the perceptions and experiences of those grandparents who had been in the foster care system for more than 12 months and where the foster care placements were permanent, which would provide more in-depth narratives of foster care over a relatively long period and where routine and family norms were

more established. Instead of brief, short-term placements in which children are often not settled in and where routine and family norms have not yet been established.

4.3.3.1 Recruitment procedures
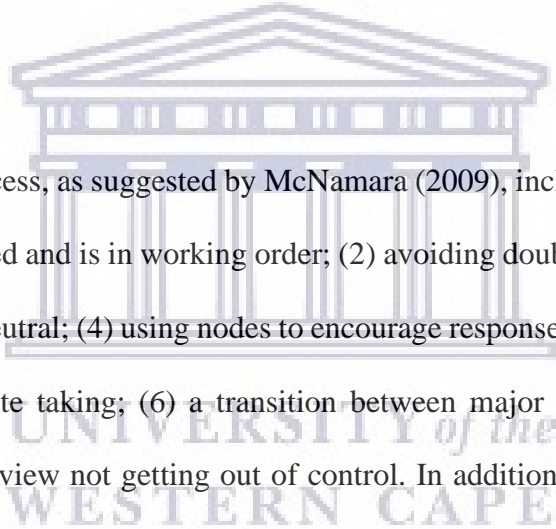
According to Creswell *et al*. (2007), a sampling strategy that works well is the one which is critical based or criterion-based, whereby it allows the researcher to select appropriate candidates to be interviewed. It was important to recruit participants who were open and willing to share their perceptions and lived experiences. Therefore, permission was requested from the Department of Social development in the selected district in Limpopo province to recruit clients who met the sampling criteria. The researcher did not approach the clients directly, but the social work manager requested that the social workers inform their clients about the research and if they indicated interest, the social worker provided the names of the prospective participants. The manager in turn forwarded the names of prospective participants to the researcher. Upon receiving positive responses, individual unstructured, in-depth, face-to-face interviews were conducted with the selected foster parents.

4.3.4 Data collection

Wagner *et al.* (2012) define data collection as methods used by a researcher to gather information which will assist in answering the research questions. There are various methods of data collection that the researcher could have used in this study. The researcher opted for individual unstructured interviews, as it was appropriate given the sensitive nature of the topic.

4.3.4.1 Interview as data collection method

Qualitative interviewing is regarded as a powerful and non-rigid tool that the researcher may use in uncovering the lived experiences of the individuals through their voices and the meaning of what it holds for them (Turner, 2010; Rabionet, 2011; Creswell, 2013; Nieuwenhuis, 2016). During interviews, attitudes, behaviours, opinions, experiences, predictions, or processes are explored to gain insight and understanding of the individual's lived experiences (Jacob & Furgerson, 2012; Rowley, 2012). The desire to expose the human part of a story lies at the heart of qualitative research. Interviews are the primary way of gathering the stories of people's lives (Jacob & Furgerson, 2012).

Generally the interview process, as suggested by McNamara (2009), includes (1) making sure that the tape recorder may be used and is in working order; (2) avoiding double-barrel questioning; (3) trying to remain calm and neutral; (4) using nodes to encourage responses; (5) carefulness in one's facial expression during note taking; (6) a transition between major topics being gradual and conversational; (7) the interview not getting out of control. In addition to these, the elements of creating effective research questions for interviews are: (a) open-ended wording; (b) neutral questions; (c) one question at a time; (d) clearly worded questions; and (e) to avoid asking "why" questions (McNamara, 2009).

There are four types of interviews as identified by Britten (1995), namely in-depth interviews, structured interviews, unstructured interviews, and face-to-face, in-depth, semi-structured interviews. According to Turner (2010), there are three interview designs, namely: (a) informal

conversational interview, (b) general interview guide approach, and (c) standardised open-ended interview.

i.   In-depth interviews

In-depth interviews are greater in detail and may be used to cover one or more issues, although it is less structured than the other types of interviews (Britten, 1995). This kind of interview is intensive and is used to explore an individual's views or opinions on a phenomenon using small, multiple sources of information in gaining a picture that is as complete as possible. The advantage of in-depth interviewing is that it is useful in gathering detailed information in a more conducive atmosphere from the individual's thoughts and behaviours or exploring a new subject in broader detail (Britten, 1995; Boyce & Neale, 2006). This technique poses challenges to a novice researcher, such as in this study, who must always be on the lookout for bias and avoid leading questions. In-depth interviews therefore provide the researcher with rich information and can be used to generalise the findings to a larger population. In-depth interviews are very useful, especially when they are supplementing other data collection methods (Boyce & Neale, 2006). However, Boyce and Neale (2006) caution that in-depth interviews are prone to researcher bias and are time consuming.

ii.   Structured interviews

Structured interviews are similar to questionnaires, except that the researcher is present in a structured interview (which is sometimes not the case in administering questionnaires), asking the participant the questions unlike with a questionnaire where it is often self-administered by the

participant (Rowley, 2012). Some questions are asked to all the participants in structured interviews which are standardised and in a fixed choice (Britten, 1995). Answers to the questions are short because of the nature of the questions asked.

iii. Unstructured interviews

Unstructured interviews encourage participants to talk on a theme which was formulated using specific themes or topics. In addition, there are follow-up questions on what the participant has said, and such interviews require high levels of skill and experience to conduct (Bryman, 2001; Rowley, 2012). Unstructured interviews might be challenging to novice researchers, who might not easily find topics or themes which are related to the topic being investigated, based on the research questions used (Rabionet, 2011).

iv. Face-to-face, in-depth unstructured interviews

Unstructured and in-depth interviews are conducted in a face-to-face manner, and this technique has dominated qualitative research for a long time (Sturges & Hanrahan, 2004; Opdenakker, 2006). Rich data might not be gathered from participants who are shy when expressing their perceptions or experiences on sensitive issues which are embarrassing, because of uncertainty regarding anonymity during face-to-face interviews, even if researchers assure participants of confidentiality and anonymity.

The researcher chose to conduct face-to-face, unstructured interviews with each participant individually. He is of the view that researching sensitive issues which may be emotionally painful should be conducted using face-to-face interviews, a view maintained by Sturges and Hanrahan (2004). Face-to-face interviews allow the researcher to observe cultural differences and physically being there for the interviewee to provide support when the participant explains the emotional painful experiences; social cues such as voice, the nonverbal communications of the interviewee, and termination are easily observed or done (Sturges & Hanrahan, 2004; Opdenakker, 2006). These were important aspects that the researcher took into consideration when he opted for face-to-face, unstructured interviews in this study. As a young African (Tsonga) man, he was cautiously aware of his position in relation to the participants, who were aged and mostly women. This relation in itself has implications for how he was perceived by the participants and how they responded towards him. Fortunately, the researcher is familiar with the culture and traditions in the selected setting and has experience as a social worker, working in the field of foster care, and he managed to engage in a respectful, culturally sensitive manner with participants throughout the data collection phase.

Rabionet (2011:563) posits that there are six stages to be learnt in order for a researcher to conduct unstructured interviews successfully. These are (1) selecting the type of interview; (2) establishing ethical guidelines; (3) crafting the interview protocol; (4) conducting the interview; (5) recording the interview; and (6) reporting the findings.

The phenomenon under investigation here, which is the perceptions and lived experiences of grandparents who are fostering their orphaned teenage offspring, was studied to understand the meaning it holds for them as primary caregivers. According to Labuschagne (2003), such studies are concerned with gathering the in-depth meanings and processes. In order to gather the in-depth meanings and processes, the researcher used face-to-face, unstructured interviews.

The researcher used an interview schedule as a tool commonly used in qualitative research to gather information which would assist in answering the research question (Wagner *et al.*, 2012). A range of insights and understandings of people are reached when interviews are designed correctly and the interviewees selected appropriately, even though these insights and understandings cannot be generalised to the whole population (Krueger, Casey, Donner, Kirsch & Maack, 2001); making generalisations was not the aim of this study anyway.

The unstructured interview schedule was used to gather information from foster grandparents, which entailed one open-ended question and probing themes, as commonly used in phenomenological research designs. The question and themes were based on the literature reviewed and the theoretical framework.

The interviews were conducted in English and Sepedi as these are the main languages spoken by the population group (Statistics South Africa [Stats SA], 2011). The interviews were approximately one hour long, and were conducted at the Department of Social development offices

near the participants' homes. With the permission of the participants the interviews were audio recorded (Appendix B1 & 2) and subsequently transcribed.

4.3.4.2 The interviewing techniques

The competency and interview techniques of the researcher are paramount in gathering rich in-depth data. It is, therefore, important that the researcher displays the personal attributes such as empathy, kindness, listening attentively and showing interest, and being friendly during the interview (Denscombe, 2014). The researcher used some of the interview techniques as suggested by Greeff (2011). These interview techniques included the following:

• Asking single question

The researcher posed one main question during the interview, which was: Tell me about your experience of fostering your grandchild(ren). This was followed by probing questions, asking one question at a time to ensure that the participant was not bombarded with too many questions at once, which could have impacted on their responses. Asking one question at a time allowed the participant to comprehend and if not, to ask questions for clarity. As such they could make sense of the question asked. Some examples used in the interviews are: What made you decide to foster your son/daughter's child(ren) after their passing? What are some of the challenges that you experience as a grandparent fostering your grandchild(ren)? What support services are available to you as a foster parent?

• Allowing for pauses in the conversation

The researcher is a beginner in qualitative research but an experienced social worker, who has conducted hundreds of interviews of a sensitive nature. As such he was not intimidated by pauses or silences during the interview. The researcher noted that at times the participants paused or became silent as they were still thinking about their responses. He allowed such pauses considering the sensitive nature of the topic and allowed the participants to gather their thoughts before responding to the question.

• Asking clear and brief questions

The follow-up questions for the purpose of probing were short questions which were concise to ensure that the meaning and intention were clear, using the Sepedi language which the participants understood best. An example of such a question is: How do you manage deviant teenage behaviour?

• Asking follow-up questions

Optimal responses are obtained through prompts or follow-up questions. The research question and prompts were flexible. Creswell *et al.* (2007) asserts that respondents might not answer the question asked but may rather answer the follow-up question asked later in the interview. Hence follow-up questions proved valuable in this study and came easily as the researcher is an experienced social worker dealing with in-depth interviews of a sensitive nature. Two examples used in this study were: When your grandchild misses a curfew, what do you do? This was a follow-up question that emanated from a previous comment by the participants that the foster child

often comes home late and defies the rule of being at home by 18h00. Another example of a follow-up question that was used is: How does it make you feel when your grandchild disregards the rules in the home?

• Concluding questions with general questions

At the end of a specific research question posed to the participants, the researcher asked the participants some concluding questions to summarise and wrap up the theme at a particular point during the interview. These questions were reflective and gave the participants an opportunity to add on what they think is important. An example used was: How would you describe the relationship that you have with your teenage grandchild, and what do you think will make your relationship with him/her grow/improve/stay strong? This question was posted after a long narrative by the participant about the defiant behaviour, emotional outbursts and of the strenuous relationship with the foster child.

4.3.4.3 Interview protocol

Interview protocol is a significant area of interest which is popular in qualitative research design (Turner, 2010). The effectiveness of an interview process is increased by interview protocol regarding the gathering of information within a given time (Yeong, Ismail, Ismail & Hamzah, 2018). The interview protocol involves providing the interviewee with the statements of confidentiality, informed consent, options to withdraw at any given stage, and being clear about the publication of the findings to ensure transparency (Rabionet, 2011; Harvey, 2011).
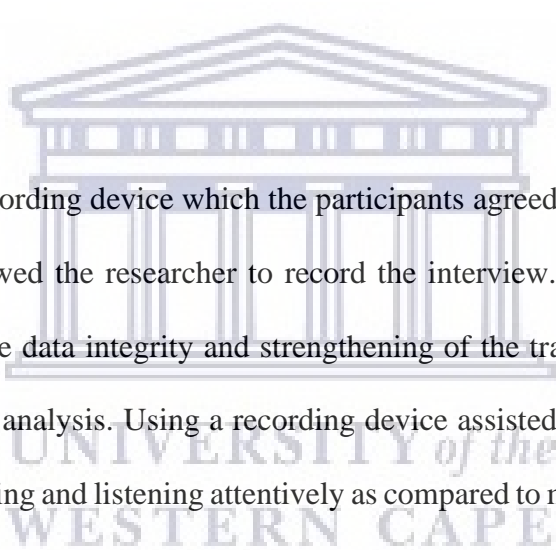
Therefore, the researcher's introduction to the interviewee and explaining the process and questions that will be asked are important components of interview protocol (Rabionet, 2011).

Adding to the above-mentioned, the researcher should avoid jargon during the interviews that the participants might not understand (Rowley, 2012). Remaining open helps the researcher not to be biased and only accept the predicted concepts and variables because they might emerge differently than expected (Britten, 1995). A qualitative researcher should trust his/her instinct in conducting interviews and should be ready for any surprises that might come out during the interview (Jacob & Furgerson, 2012). Still, the meaning of the participants is important to prevent the researcher to rely on his/her own assumptions. This is done through verifying with the participants throughout the interview or after writing the findings report (Britten, 1995). Refining the steps for interview protocol can improve the quality of the data acquired during interviews. Trustworthiness is improved by employing evidence-based strategies for interview protocol (Clark & Creswell, 2014; Yeong *et al.*, 2018).

To ensure appropriate interview protocols, the researcher had a meeting to prepare the participants before being interviewed, where they were provided with the information pertaining the study. To collect data that is of high quality the researcher needed to gain the participants' trust (Harvey, 2011). An information letter with details of the study was read to the participants so that they would understand the reason why the study is being conducted and why they were selected to participate in the study. All the participants were given a copy of the information letter to also read in their own time, and if they wanted to confer with a relative or neighbour about the merits of

participation (Appendix A1 & 2). This meeting contributed toward building trust between the participants and the researcher. This is also where the participants got an opportunity to ask questions for clarification on what they did not understand regarding the study, which the researcher could respond to.

Fortunately, all the participants agreed to take part in the study and were provided with a consent form to sign (Appendix B1 & 2), which included that they agree that the interview may be audio recorded.

The researcher utilised a recording device which the participants agreed to by signing the consent form, stating that they allowed the researcher to record the interview. The recorded interviews served as preservation of the data integrity and strengthening of the transcription process which later took place during data analysis. Using a recording device assisted the researcher to employ interview skills such as probing and listening attentively as compared to making notes, which could be distracting to the participants and the researcher missing out on important issues raised. Using the recording device also increased the researcher's focus on what was being said, asking appropriate follow-up questions and appropriately introducing themes, which allowed participants to be engaged and providing in-depth narratives (Denscombe, 2014).

It is not advisable that the researcher should rely on his/her memory alone; therefore, field notes are important during the interview process (Babbie, 2007). The researcher immediately wrote down the impression of the interview after conducting it. A reflective journal was used to write field notes of the researcher's impressions and interpretation of the interviews. The field notes

were useful during data analysis when the researcher made interpretations of the findings. The field notes also assisted with the process of reflection, allowing the researcher to distance himself from the study to interrogate his own bias.

The environment in which such an interview takes place is of paramount importance and the researcher should ensure that participants feel comfortable and the environment is non-restrictive (Creswell *et al*., 2007). Permission to conduct the interviews at Department of Social development offices was obtained from the social work manager in the selected district where the study was conducted. Those participants who agreed to participate were interviewed at the Department of Social development offices near the participants' homes.
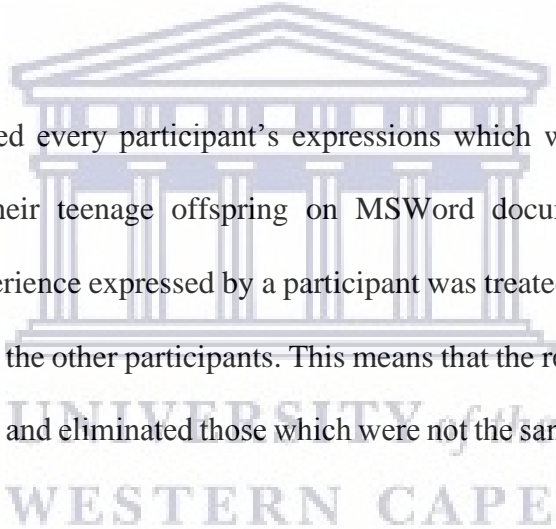
4.3.4.4 Pilot study

Implementing a pilot test is important to determine whether there are weaknesses, limitations or discomfort or any loopholes in the design of the interview schedule before conducting the interviews (Turner, 2010). A pilot test cannot be conducted with participants with different interests from those who will participate in the study. It is therefore recommended that one of the participants be part of the pilot test. The importance of piloting the interview schedule lies in assisting the researcher in refining the research question(s) which the participants (in the pilot) felt uncomfortable with (Turner, 2010). A pilot test with one participant meeting the sampling criteria was conducted. The researcher did not change the main research question which was: Tell me about your experience of fostering your grandchild. The researcher did, however, make extensive field notes after the interview about the types of probing themes and questions (Appendix C1 & 2) that he felt should be more aligned to family system theory (discussed in Chapter 2).

4.3.5 Data analysis

As previously described, the research design in this study was phenomenological; the data analysis was guided by the theory of interpretive phenomenological analysis (IPA), as proposed by Pascal (2010). IPA is phenomenological because it seeks to understand the individual's lived experience, and it is interpretative because it acknowledges the researcher's personal beliefs and opinions while emphasising the view that understanding requires interpretation on the part of the researcher (Smith *et al.*, 2010; Flood, 2010; Moustakas, 1994). While there is no single method in IPA, there are key principles, such as that IPA is aimed at discovering the personal meaning that a phenomenon holds for the participant, the uniqueness of each participant's experience and the essence of that experience. This is key in understanding and making interpretations of the person's lived experiences in relation to a particular phenomenon. Importantly, the researcher must acknowledge his/her personal behaviour and opinions in relation to the participants and their perceptions and lived experiences about the phenomenon. Thus, understanding on the part of the researcher requires interpretation (Smith, 2017). Therefore, the interpretive role of the researcher in his interaction with the participants, the history, environment and the context of the participants were taken into consideration as part of the interpretive process. As such, the researcher did not rely only on the literature that was reviewed in understanding the phenomenon of grandparents fostering their teenage offspring, but he also relied on the narratives of the perceptions and lived experiences of the participants and the meaning it holds for them, making interpretations of such perceptions and lived experiences in relation to the family system theory, which guided the face-to-face unstructured interview by using probing questions.

The researcher used the following steps of phenomenological analysis as suggested by Moustakas (1994), which entails eight steps. The researcher read through the transcripts several times, which helped him to understand what their lived experiences meant to the participants through getting the feeling of what the participants were saying verbally; a better feeling of the participants' state of mind; and how the subject matter which was brought through the research questions has affected their lived experiences. After reading through the transcripts several times, making notes and keeping memos, the researcher embarked on the data analysis procedures proposed by Moustakas (1994).

Step 1: The researcher listed every participant's expressions which were relevant to the lived experiences of fostering their teenage offspring on MSWord document. This is known as horizonalisation. Every experience expressed by a participant was treated as having equal value as that which was expressed by the other participants. This means that the researcher did not compare the participants' expressions and eliminated those which were not the same, as they expressed their lived experiences.

Step 2: The researcher made a duplicate of the original transcripts in MSWord document to proceed with the process of developing a list of expressions which were not overlapping, repetitive, or vague. The idea of working on a new document was to avoid losing the initial data that was transcribed from the participants. These were expressions which stood out as the lived experiences.

Step 3: The researcher went through a line-by-line analysis on each transcript of participants' experiences based on the research questions, to colour-code. This allowed the researcher to find patterns in the transcript text of each participant and to group those pieces of text together in

meaningful categories. On each participant's transcript, a consensus chart of codes was created which included grouped code names and operational definitions under themes. These themes developed from the data stood out as invariant constituents during a reduction and elimination process.

Step 4: The expressions of the participants which stood out and themes which were developed from these expressions were validated against the original participants' transcripts. This was to ensure that the developed themes represent what the participants expressed during the interview.

Step 5: A textual description of their lived experiences of fostering their teenage offspring was constructed using the developed themes which were identified and verified against the original expression of each participant's transcript. This textual description was developed by the research and was a written description of what participants experienced with fostering their teenage offspring, which included the verbatim extracts from the participants' transcripts.

Step 6: The researcher wrote a description of the lived experiences of the participants which included the verbatim extracts and was developed for each participant; this process is known as individual textual-structural description.

Step 7: The researcher examined all the themes' operational definitions with the intention of finding ones that were similar across all the participants, and then combined similar themes under four broad higher-order themes. A textual-structural description was constructed to understand the meaning and essence of the lived experiences shared. This was done on every theme developed which had a textual description and three extracts from three participants' expression.

Step 8: From the textual-structural description constructed for each participant, the researcher applied his understanding of how the participants experienced and perceived fostering their own

teenage offspring. This process is known as composite structural description, which is providing an imagination based on the processes of analysing the data from steps 1 to 7 to interpret and understand the meanings and essence of the lived experiences of the participants as a group. This composite structural description is included at the end of each theme as a conclusion regarding the lived experiences of the participants.

In using IPA, the researcher placed the participants at the centre of the data analysis process. It was important for the researcher to re-read the transcripts several times to gauge the essence of the perceptions and experiences of each participant's narrative. The researcher made notes in memos of the way the participants relayed their stories, in particular the way they understood and thought about their experiences of fostering their offspring. The memos came in handy during this phase of data analysis as the researcher processed and made interpretations about the participants' descriptions of the relationships, processes, events, values, principles, likes and dislikes linked to the meaning and context in which their perceptions and experiences were narrated.

The researcher used questions and self-reflection by drawing on his knowledge and experience as a social worker to guide his interpretation of the findings. From the participants' narratives, the researcher made exploratory notes using memo comments which were later used to develop subthemes. This process resulted in a collaboration between description and interpretation of the findings. As such the search for connections in the subthemes was not a descriptive process but rather a process of drawing together subthemes which could be grouped into main themes.

4.3.6 Data verification and trustworthiness

Data verification and trustworthiness are important components in qualitative research because it assists the researcher in checking, confirming, making sure, and being certain looking at the mechanisms used during the process of research to gradually contribute to ensuring reliability and validity and, thus, the consistency of a study (Morse, Barrett, Mayan, Olson & Spiers, 2002). To enhance the quality and precision of this phenomenological study, distinctiveness, coherence and richness of the data were important factors that the researcher considered in terms of trustworthiness. Trustworthiness was achieved through validity, confirmability, dependability, credibility, transferability and reliability which are all explained below.

- **Validity**

Validity refers to the trustworthiness of the research process and the findings of the study (Smith, 2015). For validity, phenomenological studies rely on the coherence of the interpretation of the data. Findings are valid when they resonate with others who had the same experience. In this study participants shared similar perceptions and experiences; therefore, there was coherence in the interpretation of the findings. The findings indicated that there were general perceptions and experiences shared by the participants in this study, which enhanced its coherence; this means that the extent to which interpretations about the structure of kinship care provided by grandparents to their teenage offspring is congruent, which enhanced the validity of the findings.

- **Confirmability**

Confirmability refers to consistency in the neutrality or the degree in which the findings are true if repeated by another researcher (Connelly, 2016). The establishment of credibility,

transferability, and dependability results in the confirmation of confirmability (Thomas & Magilvy, 2011). An audit trail and a reflective journal were used to achieve confirmability and validity. The researcher used an audit trail to trace his step-by-step process through the decisions that he made, and the procedures described in order to show unbiasedness (Shenton, 2004; Anney, 2014). Having said this there is always a measure of bias in qualitative research, but in this study such potential bias was addressed through keeping a reflective journal, journalling the researcher's reactions, attitudes and behaviour after each interview. The reflective journal was also used to write field notes regarding what happened in the field, and then member checking, in other words, asking participants to read their transcripts for accuracy, and the researcher being cautiously aware of and journalling his personal feelings, biases, insights and interpretations (Anney, 2014; Kornbluh, 2015; Connelly, 2016).

- **Dependability**

Dependability involves consistency of the findings, meaning that if another researcher conducted the same study the results would be the same (Babbie & Mouton, 2010). Dependability was ensured in this study by collecting data from participants who met the inclusion criteria. Participants' responses from the unstructured face-to-face interviews were used to interpret the data and write the final report. Therefore, in this study, dependability was further ensured by providing a detailed summary of assumptions and theory behind the study (De Vos *et al.*, 2011). The current study gives clear indications of the theory of phenomenology and its application, thereby ensuring dependability.

- **Credibility**

Credibility refers to the attempt made by the researcher to demonstrate that a true picture of the phenomenon under investigation is being presented (Shenton, 2004; Thomas & Magilvy, 2011). An informed consent form was provided to the willing participants with an intention to ensure honesty in providing data willingly. The research process and project were scrutinised by the researcher's supervisor and frequent debriefing sessions between the researcher and the supervisor ensured that the research report was credible and authentic. The researcher also read the transcribed interviews and, in some instances, gave the transcribed interviews to the participants to read and comment on the interpretations made by the researcher, and made changes where the participants felt that what was reported and the way the researcher interpreted the narrative was not what they had said.

- **Transferability**

Transferability refers to the applicability of research findings or methods in a different but similar setting (Shenton, 2004; Thomas & Magilvy, 2011). Richness of the data was ensured by describing the phenomenon of kinship care by grandparents for their teenage offspring and using phenomenology to address this particular issue. Using probing to gain insight into this phenomenon assisted the researcher to understand and make interpretations of the data and to clarify understandings between the researcher and the participants. Therefore, in terms of transferability the researcher provided a detailed description of the research topic, findings and research processes, which would be useful for future researchers studying similar contexts, using a qualitative approach and a similar research design.

- **Reliability**

Reliability in phenomenology is the multi-perspective view of the phenomenon in which the sameness of meaning emerges even though the facts and context may be different (Klenke, 2008). To ensure reliability the researcher described the phenomenon of grandparents fostering their teenage offspring by devoting a literature review chapter on this topic and substantiating the findings with available and recent research in this field. The researcher distinguished foster care from kinship care and went further to make distinctions between kinship care and kinship care provided by aged grandparents caring for their teenage offspring. A study of this nature has not been done before in the selected municipality, which makes this study distinctively different to similar studies done before.

4.3.7 Reflectivity

Qualitative research intends to approach the world out there in order to explain, describe and understand a social phenomenon (Kvale, 2007). Conducting this type of research requires the researcher to be aware of his/her own perceptions, experiences and bias to avoid compromising the neutrality of the research (Krefting, 1991). Reflectivity in this study involved self-awareness by the researcher of his own beliefs, values and attitudes, the personal effects on the setting, and being critical about the research methods he chose to employ. As such the researcher kept a reflective journal in addition to field notes.

As a social worker employed by the Limpopo Department of Social development, specialising in childcare and protection services which include foster care, the researcher was motivated to undertake this study which is a personal interest. The reflective journal was invaluable in terms of reflecting on the researcher's personal thoughts, feelings, observations, fears, anticipations and

expectations. Journalling was used to assess, review and reflect on the process of the study. It helped to regularly reflect on every aspect of the study, particularly the researcher's identity as a practising social worker in relation to his self-awareness, personal biography and how this could possibly influence the study (Creswell, 2009). As such the researcher was honest with himself and open to what the participants were sharing, and was prepared to deal with possible emotional outbursts by a participant, at the same time remaining in his role as researcher as opposed to social worker.

Reflectivity was very important in this study because the researcher knew some of the participants as he is a social worker in the community where the study was conducted. The researcher informed participants that, although he is a social worker by profession, the engagement with them during the research process would be in his capacity as a researcher. These were potential risks for participants feeling a sense of power imbalance because of the researcher's position in relation to them as known clients of Department of Social development. However, the researcher took cognisance of these issues and also the sensitive nature of the research topic. Initially the researcher wanted to conduct the interviews at the homes of the participants; however, the interviews were all eventually conducted at the office of the researcher at Department of Social development. This can be interpreted as a power imbalance. In retrospect, the researcher should perhaps have made more effort to conduct the interviews at the homes of the participants, considering the implications for the participants to travel to the Department of Social development offices.

The sincerity and openness displayed by the participants on their experiences of fostering their teenage offspring, and the vulnerability they shared, made the researcher realise that there is a need to develop specific interventions for this cohort of foster parents.

The researcher is not in the same province as the research supervisor and only met the supervisor face to face when he registered and attended orientation. This was a challenge as the option of setting up face-to-face supervision sessions was not available to him. He relied on email correspondence, which at times meant that he waited several days and sometimes weeks for feedback. This was frustrating and time consuming; however, he did manage to use debriefing with the supervisor from time to time. Engaging with the supervisor, albeit only via email, was helpful to discuss challenges and frustrations with a knowledgeable researcher who is also a social worker, to share his own feelings of anxiety and sometimes frustration in regard to the huge amounts of data that needed analysis and interpretation; this helped the researcher to compartmentalise and deal with his own feelings in a constructive manner.

Keeping a reflective journal to record his personal feelings, thoughts and bias was critical in terms of ensuring trustworthiness in this study.
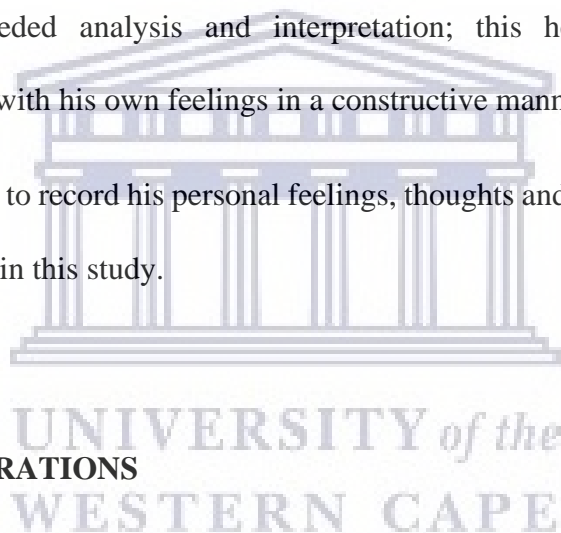
4.4 ETHICAL CONSIDERATIONS

Ethics approval to conduct the study was requested from the Humanities and Social Sciences Ethics Committee (HSSREC) at the University of the Western Cape. Upon receiving approval form the HSSREC (Appendix D), the researcher requested permission from the Department of Social development office in the selected district in Limpopo Province to request recruitment of participants in the district.

There are several ethical issues which should be considered when conducting a research project and for the purpose of this study four have been identified and applied. They are as follows: voluntary participation, confidentiality, avoidance of harm, and competence of the researcher.

- Voluntary participation

Participation in a research project should not be forced or coerced but should be of free will, (Wagner *et al.,* 2012). De Vos *et al.* (2011) contend that at times participants may feel obliged to participate in a research project due to the association or relationship that they have with the researcher. This could easily have been the case in this study, because the researcher is a social worker employed by Department of Social development in the municipality where the study was conducted. He is therefore known by the community and some clients. Therefore, the researcher did not approach the clients directly, but the social work manager requested that the social workers inform their clients about the research and if they indicated interest, the social worker provided the names of the prospective participants. The manager in turn forwarded the names of prospective participants to the researcher. In avoiding participants from feeling obliged to participate in the research project, the researcher made telephonic contact and, in some instances, went to the potential participants' homes (those who did not have cellphones or landline telephones) to explain the purpose and objectives of the research to them and also their rights as participants to withdraw at any time. The researcher allowed at least a week or two after the first contact; he had given the potential participants the information letter so that they would have time to talk to someone in the family or community about participating and if they wanted to opt out they could still do so. Following the two-week period after the initial contact, the researcher went to each participant's home to give them an information letter (Appendix A1 & 2), reiterating that their participation is voluntary, and that they can withdraw at any time. On the day of the interviews, each participant was given an informed consent form, which they had to sign, indicating whether they agreed to participate or not, and also whether they agreed to be audio recorded (Appendix B1 & 2). All the participants agreed to be audio recoded and all signed the consent form.

- Confidentiality

All information that is shared by participants with the researcher should be kept confidential, which is an agreement through informed consent in research, and limits other people to have access to the shared information (De Vos et al., 2011). The information letter (Appendix A 1 & 2) was given to participants which indicated that the participants' identity will not be revealed and that their shared information will be kept confidential. All ten (10) participants were given a unique number from one to ten as a way of protecting their identity. Due to the sensitive nature of the study, the researcher conducted interviews in a sensitive manner and was cognisant of potential emotional risk to the participant. All audio recordings and transcribed data were filed under pseudonyms on the researcher's computer, which is password protected, stored in the researcher's office at his place of employment, and to which only the researcher has access. Only the researcher and the research supervisor have access to the transcripts. All the research files will be stored for a period of five years, after which they will be deleted. All hardcopy data will be shredded after five years. Any publications emanating from the study will not use the personal identifying details of the participants. Thus, the participants' identities are protected and the information they shared therefore remains anonymous.

- Avoidance of harm

In social science research, it is the researcher's ethical obligation to protect participants from any harm that might occur while they participate in the study. This harm includes physical, emotional, psychological and damage of participants' reputation (De Vos et al., 2011; Wagner et al., 2012). Participants in this study shared their lived experiences which involved emotions, and the

researcher's primary responsibility to safeguard them from harm was to thoroughly explain the purpose of the study through a meeting before commencing with the interviews. The participants were given an information sheet (Appendix A1 & 2) whereby they were informed that they can withdraw from the study when they feel discomfort. The researcher arranged with a social worker from Department of Social development to provide debriefing in the event that this would be required, and informed the participants that a counsellor have been arranged in case they feel the need to talk to someone due to emotions that may be stirred during or even after the interviews. Although some of the interviews stirred emotions in some clients, none indicated to meet with the counsellor, when the researcher asked them if they wanted to.

- Competence of the researcher

According to Walliman (2006), cited in De Vos *et al.* (2011), a project investigation should be conducted by a competent, adequately skilled and honest researcher; and this serves as an ethical obligation. The researcher is a qualified registered social worker and therefore subscribes to the professional code of ethics which includes accountability when conducting research. In line with assertions by Creswell *et al.* (2007), the researcher maintains that researchers in caring professions should refrain from judging the views and actions of participants, irrespective of them being in direct conflict with the researcher's own values. The participants in this study were all aged persons and respected for their worth and dignity, and from a cultural perspective, respecting their wisdom as elders was foremost in terms of professional and cultural competence. Also, the researcher has conducted research projects before, during his undergraduate studies and in practice as a social worker, and is therefore skilled and experienced in the process of conducting research. All the

protocols therefore, from planning to conducting the interviews, analysis and writing up of the thesis, were adhered to under the guidance and supervision of the research supervisor.

4.5 CONCLUSION

This chapter presented the research methodology and the ethical considerations that were employed in the study. The phenomenological design was highlighted in terms of its applicability in this qualitative study on the perceptions and experiences of grandparents fostering their teenage offspring.

The next chapter presents the research findings.

5.1 INTRODUCTION

This chapter presents the study's findings which emanated from the interviews conducted with the foster grandparents who were fostering their teenage offspring. The study aimed to understand the essence of grandparents' perceptions and lived experiences of fostering their teenage offspring. This was reached through the following objectives: exploring the perceptions and experiences of grandparents regarding fostering their teenage offspring, and describing the experiences of grandparents fostering their teenage offspring. In line with the phenomenological research design, one question was used to reach these objectives and that was: What are the perceptions and experiences of grandparents regarding fostering their teenage offspring?

5.2 DEMOGRAPHIC PROFILE OF PARTICIPANTS

Table 5.1 presents the demographic profile of the participants.

TABLE 5.1: Demographic profile of participants

Participant	Age	Number of foster children	Income / Social Grant
P1	75	2	Old-age grant and two foster child grants
P2	73	1	Old-age grant and foster child grant

P3	67	2	Old-age grant and two foster child grants
P4	80	1	Old-age grant and foster child grant
P5	77	1	Old-age grant and foster child grant
P6	64	1	Monthly Pension and foster child grant
P7	76	2	Two old-age grants and two foster child grants
P8	84	1	Old-age grant and foster child grant
P9	83	2	Old-age grant and two foster child grants
P10	65	1	Old-age grant and foster child grant

All the participants were biologically related to the foster children in their care. They were between 64 and 84 years old. All were female. All the participants had one or two foster children in their care. Most of the participants (9) were pensioners receiving the old-age grant and only one participant was a retired teacher receiving a monthly pension.

5.3 DISCUSSION OF THE FINDINGS

The main themes, subthemes and categories are presented in Table 5.2.

TABLE 5.2: THEMES, SUBTHEMES AND CATEGORIES

Theme	Subtheme	Category
1. Family crisis	1.1 Death	1.1.1 Dealing with the loss of a loved one 1.1.2 Support and coping with death and dying 1.1.3 The effects of death and dying on participant's health and wellbeing
2. Shifting parental roles	2.1 Second time parenting	2.1.1 Caring for offspring from a young age
	2.2 Identity and role transition	
	2.3 Challenges with discipline	
3. Intergenerational differences posing challenges to parent foster grandchildren	3.1 Uncontrolled behaviour	3.1.1 Category: Child protection professionals as scapegoat 3.1.2 Category: Teenage sexual behaviour
	3.2 Peer pressure	
	3.3 Poor academic performance	
	3.4 Use of technology (smartphones)	
4. Challenges experienced by foster parents	4.1 Interference by significant others	
	4.2 Fear	
	4.3 Poverty	4.3.1 Category: Social grants as source of income
	4.4 Health and psychological problems	

Four main themes and several subthemes and categories emerged from the interviews with the participants. The themes, subthemes and categories are discussed next and substantiated and contrasted with relevant literature.

5.3.1 Theme 1 – Family crisis

Family crises emerged as a main and significant theme. Family crisis was mentioned by all the participants and related to the death of a loved one. There is one subtheme that features under this main theme, namely death. All the participants experienced the death of an adult child, mostly a daughter, which led to their offspring needing care and protection and eventual a foster care placement. One category, dealing with the loss of a loved one, emerged from the experiences shared by the participants.

5.3.1.1 Subtheme: Death

It is important to fully understand the teenage foster child and foster grandparent from the context of the family system in which they are inseparably embedded (Cox, 2010; Rosenbusch & Cseh, 2012). In this study all the teenage foster children came into foster care because of the death of their parent(s). Hepworth *et al.* (2010) concur that death in the family causes disruptions in the kinship family system, leaving families to rely on their culture which influences help-seeking behaviour and determines how they define this family crisis. The participants in this study have shared how kinship family culture has played a role during the passing of their loved ones, the parent(s) of the child they are now fostering. They expressed that:

> *They are my son's children who married their mother. This is a*
> *requirement in Pedi culture in order for a man to remain caring for the*

children. It only happens when a woman dies before being married by the man who has children with her. (ke bana ba morwa wake yo a nyetšego mmago bona morago ga go hlokofala ga gagwe. Se ke seo monna a swanetšego go se dira ka Sepedi gore a kgone go hlokomela bana ba gagwe. Seo se direga feela ge mosadi aka hlokofala pele ga ge a ka nyalwa ke monna woo anago le bana le yena) (Participant 7, Paternal grandmother).

My daughter had two children and the last born was only a few days old [when she died]. She got sick out of the blue and I saw that her condition will not last, so I decided not to take her to the hospital and gave her church concoction [meaning that she gave her daughter traditional medicine]. (Morwedi waka o be aena le bana ba ba bedi, o wa mafelelo o be aena le mengwaga ese e mekae nie. Oile a no babja gona mo sebakabakeng ka no bona gore o yena a ka se tšeye nako a phela, ka napa ka tšea sephetho sa go se moiše sepetlele ka no mo nweša ditaelo tša kereke) (Participant 9, Maternal grandmother).

My granddaughter was born under my care and her mother passed away while she was still young. The death of my daughter was strange, because it all began with her hand which made us to take her to the hospital. The hospital treatment did not work and then she became blind (Setlogolo saka se no belegwa ka mo diatleng tšaka ebile mmagwe o no hlokofala se sa le se se nanana. Lehu la morwediake le bile semaka, ka ge go no thoma ka

letsogo leo le moišitšego sepetlele. A se gwa loka selo kua sepetlele ya ba

ge a tla foufala) (Participant 8, Maternal grandmother).

Grandparents experience devastation after losing a child (Youngblut & Brooten, 2018). This devastation has a negative effect on the physical health of the grieving parent (Youngblut & Brooten, 2018).

(a) Category: Dealing with the loss of a loved one

The participants went through the life cycle stages referred to by Hepworth *et al.* (2010), such as death and or chronic illness which are characteristic of kinship family life cycle in family system theory. Some families struggled to manage these life cycle stages successfully, when they experience interruptions which can lead to difficulties in stage transition (Hepworth *et al.*, 2010; Böning & Ferreira, 2013). With regard to dealing with the loss of a loved one, a participant voiced as follows:
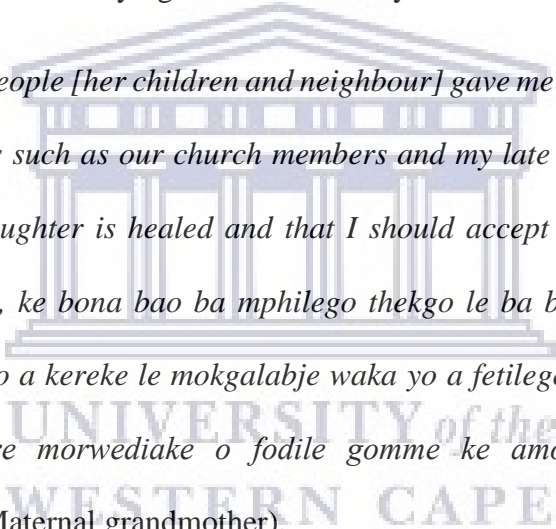
> *Death is painful because I have nursed her [referring to her daughter].*
> *They [referring to the family and friends of the deceased] all saw her*
> *[referring to the deceased daughter] in a skeleton body, and she could not*
> *do anything [for herself]. (Lehu le bohloko ka ge ke mookile. Ba mmone a*
> *fedile go fela, a sa kgone le go dira selo)* (Participant 2, Maternal
> grandmother).

Parents of the deceased experience a feeling of sadness as a result of death (Winther-Lindqvist, 2016; Zajac & Boyatzis, 2020). It is evident that the participant has felt a feeling of sadness as a result of the passing of her daughter and had support from her family and friends. Death is

disrupting relationships in families and some family members need time to accept that they have lost a loved one.

(b) Category: Support and coping with death and dying

During the process of death and bereavement, family members, community members and religious beliefs are the sources of strength that the affected family relies on for support (Aoun, Breen, White, Rumbold & Kellehear, 2018; Zajac & Boyatzis, 2020). Some participants relied on the support of their family, church members and God during this difficult time. This support, they say, helped them to cope with death and dying. This is what they shared:

> *The very same people [her children and neighbour] gave me the same help including others such as our church members and my late husband who said that my daughter is healed and that I should accept the situation. (Batho bona ba, ke bona bao ba mphilego thekgo le ba bangwe ba go swana le maloko a kereke le mokgalabje waka yo a fetilego yo a bego a nkhomotša a re morwediake o fodile gomme ke amogele seemo)* (Participant 2, Maternal grandmother).

All the participants said how they felt supported by their spouse, adult children, fellow community members, religious initiations and drawing on their own inner strength, as well as drawing on their own spirituality as a means of coping with the death and dying of a loved one. These findings are supported by Aoun *et al.* (2018), who found that people who provide care to the grieving family are those who are already involved in the lives of family members such as relatives, friends and community members. These community members are those who had experienced grief before and were able to provide guidance to the grieving family (Aoun *et al.*, 2018). Other researchers found

that religious faith was also a source of support (Zajac & Boyatzis, 2020). Dealing with death is not unilinear and depends on an individual's own strength, the support from significant others, and the belief system of that individual. Grandparents who have a strong support system are able to successfully go through this process of dealing with a loss without as much difficulties as those who have a limited support system.

(c) Category: The effects of death and dying on participants' health and wellbeing

The ways of coping with the loss of a loved one are different among those who have been bereaved; some experience health and psychological challenges during the process (Winther- Lindqvist, 2016; Titlestad, Lindeman, Lund & Dyregrov; 2019; Faronbi, Faronbi, Ayamolowo & Olaogun, 2019; Zajac & Boyatzis, 2020). Participants' responses regarding the effects of the death and dying of a loved one on their health and wellbeing revealed that they experienced physical and psychological ill health. The following quotes describe their experiences:

> *The pain of losing my daughter was too much, [paused] to a point that it gave me sleepless nights whenever I thought about her. (Watseba bohloko bja gore ke lobile morwediake, bo nhlabile pelong moo elego gore le boroko ke be ke sa bopate ge ke gopola ka yena)* (Participant 3, Maternal grandmother).

> *"The death of my daughter in law, her mother and my son caused complications to my body where I ended up being admitted to the hospital. The doctor told me that I am having stress that also affected my heart and*

he offered me medication. (Lehu la ngwetši yaka, mmagwe le morwa waka di ntlišeditše tlhakatlhakano mo mmeleng waka, ka ba ka bona ke amogetšwe sepetlele. Ngaka ya mpotša gore ke ne stress seo se amilego pelo yaka morago ga fao a mpha dihlare", (Participant 7, Paternal grandmother)

All the participants expressed an immense sense of emotional and even psychological ill health during the time of their loved one's illness and death. They described feeling stressed, drawing support from family, and experiencing pain and grief for a while after the passing of their loved ones. Apart from the emotional and psychological effects of death and loss experienced by the participants, some reported that they experienced physical ill health such as physical pain in their body resulting in hospitalisation and having to be medicated. Research indicates that these emotional, psychological and physical effects of death take less than two years before people could get back to their normal daily functioning (Neimeyer, Burke, Mackay & Van Dyke Stringer 2010; Shear, 2015; Badia, 2019). Death brings about immediate and long-term challenges which the family members have to adapt to. Immediate challenges are emotional pain (feelings of sadness), fear and physical exhaustion of the family members who cared for their loved one during illness and death.

Death brings instability in families, whereby family members experience emotional, psychological and health challenges. During this process family members, friends, religion, cultural practices and personal inner strength play a critical role in dealing with the loss of a loved one (Aoun, Breen, White, Rumbold & Kellehear, 2018; Zajac & Boyatzis, 2020). Family structure and relationships

become affected as a result of the passing of a family member who leaves behind a child or children at a tender age.

5.3.2 Theme 2 – Shifting parental roles

The participants indicated that the family crisis which they experienced has brought a shift in parental roles, as the participants had to take the responsibility to parent their teenage grandchildren. This has led to them identifying themselves as the teenager's parents, not as his/her grandparents, and having to include other people (such as uncles) as decision makers in the parenting of these teenagers. Below are the subthemes which emerged from this theme.

5.3.2.1 Subtheme: Second-time parenting

The death of a parent(s) has led to children being raised in households such as grandfamilies (Langosch, 2012; Dunifon, Near & Ziol-Guest, 2018). These grandfamilies are headed by a maternal or paternal grandparent, and generally the grandmothers are the ones responsible for rearing the child(ren) (Lam & Bolano, 2019; Xu, 2019). According to Sherr, Roberts, Hothi and Balchin (2018), grandparents are able to parent for the second time because they have already acquired experience of child rearing when they were raising their own children. Most of the participants in this study began to be legal foster parents for the first time, and this meant they were taking on parental roles for the second time. Some of the participants indicated that parenting for the second time was difficult as they had never thought that they would have the responsibility of caring for a child after their own children had grown up.

Having to think about going back to be a young adult [meaning new mother to an infant] who is going to take care of a few-months-old baby was just unbearable, more especially as it was not by choice. The difficult part was that I never thought about it because, I knew that I have raised mine [referring to her own children] and they are all grown [meaning they are all adults]. (*Watseba ge ke be ke nagana gore ke tlo boela bosweng ka hlokomela lesea la dikgwetšana mola ebile ese ka thato yaka. Taba ye ebile boima ka kudu. Boima bja gona ebile gore a se ka be ka nagana gore nka boela bosweng ka ge ke godišitše baka bana)* (Participant 3, Maternal grandmother).

It [meaning caring for a young child] is not a problem for me, because I was caring for my grandchildren whose parents were at Gauteng. I have not ceased to be a parent since I had children. I once cared for my other grandchild who was 3 years old. (*Ga se bothata go nna ka ge nkile ka godiša ditlogolwana tšaka tšeo batswadi ba tšona ba bego ba dula go la Gauteng. A sa ka ka ba ka ema go ba motswadi ga e sa le ke eba le bana. Nkile ka fepa setlogolwana saka sa three years)* (Participant 1, Maternal grandmother).

All the participants said that their grandchildren were placed in their care at a young age. Most were infants when they were placed in their care. The narratives by the participants show that they have managed well in caring for infants and young children as this was not new to them. Grandparents take on the responsibility of parenting for the second time for various reasons and enter into foster care with many uncertainties and ambivalences (Langosch, 2012).

The participants' responses reveal that they undertook parenting for the second time because of the existing bond between grandparents and grandchildren (Silvey, Bailey & Ponzetti Jr, 2019; Xu, 2019). These responses did not reveal other reasons mentioned by literature, for instance that grandparents assume the role of parenting for the second time because they understand the importance of maintaining family norms; ethnocultural ties; and they avoid seeing their grandchildren being cared for by a stranger (Langosch, 2012; Silvey *et al.*, 2019, Xu, 2019).

However, while participants in this study had had no plans for parenting for the second time, they appear to be managing second-time parenting very well. Some participants have not seen it as a problem, because their grandchildren were born into their care while their mothers were working away from home. Helton *et al.* (2017) and also Font (2015) confirm that biological foster parents often feel a sense of obligation to care for their offspring. Parenting for the second time may be difficult for some grandparents, but that does not prevent them from providing good care for their grandchildren. Grandparents take up this responsibility because they feel a cultural obligation as elders of the family to maintain the family equilibrium and homeostasis in this way.

(a) Category: Caring for offspring from a young age

In South Africa, 25 million children are cared for by their grandparents in the same household, and this type of living condition is known as a skipped generation (Blackie, 2014; Carter & Van Breda, 2016; Ingersoll-Dayton, Punpuing, Tangchonlatip & Yakas, 2018). Most of the participants indicated that they cared for their teenage offspring from a young age.

> *I took her children [meaning her late daughter's children] since their*
>
> *earliest ages [meaning when they were still infants] while their mother*

was still alive. (Ke tšeri bana ba gagwe esale masea mola mmago bona a

sa phela) (Participant 2, Maternal grandmother).

Most of the orphaned teenage offspring came into the care of their grandparents at a tender age and some even before their parents' death. Most grandparents spent more time with their grandchildren during their early age (Bell, Perry & Prichard, 2018).

5.3.2.2 Subtheme: Identity and role transition

Identity and role transition may result from complications arising from the bereavement that coincided with other family developmental transitions causing boundaries to be shifted, and roles and relationships to be redefined (Hepworth *et al.*, 2010; Walsh & McGoldrick, 2013). This was indeed the experience of participants in the study. They mentioned that they were raising their grandchildren as their own children.

> *I treat my own orphaned grandchild as my last-born child, reason being*
> *that if I cannot do so his uncles might mistreat him. (Nna setlogolo saka*
> *sa tšhiwana ke se swara bjalo ka ngwanaka wa mafelelo, lebaka e le gore*
> *bo malomeagwe ba se tlo mo swara gampe ka ge ba bona ka mokgwa woo*
> *ke mo swerego ka gona)* (Participant 4, Paternal grandmother).

> *Their mother passed away, she did not go to work where she will return,*
> *so, when they say mom, they are referring to me in truth. (Mmago bona o*
> *hlokofetši, ga se a ya matogwaneng fao a tlilego go bowa, bjale ge bana*
> *ba ba re mme ba ra nna ka go rereša)* (Participant 3, Maternal
> grandmother).

It is not a problem because I took her as my child not grandchild. Even when I reprimand her, I do not do it as if she is my granddaughter, but as my child. (Ga se bothata le ga tee ka gore ke motšea bjalo ka ngwanaka esego setlogolo saka. Le ge ke mokgala, ga ke mokgale jwalo ka ngwana morwediake feela bjalo ka ngwanaka) (Participant 1, Maternal grandmother).

Participants in this study regard their grandchildren now in their foster care as their own children and do not assert the normative role of grandparents toward their grandchildren who are in their foster care. The role transition which grandparents encounter as they assume the role of a parent to their foster grandchildren comes with many challenges. These challenges include difficulties in matching their identities and their roles as foster grandparents (Bailey et al., 2009). These grandchildren grow up regarding their foster grandmothers as their biological mothers, and some foster grandparents are unable to let these foster grandchildren know their true identity, because they want to protect them from being hurt by the fact that their biological mothers had passed away. The findings do not correlate with the challenges identified in the literature, which include having to change the parenting style that was used by the children's parents, as it is regarded as more permissive and lax (Rogers, Bell & Mehta, 2019). The high level of stress, negative emotions and physical health effects have a role to play during this role transition and may place a strain on the grandchildren and grandparents' wellbeing (Vakalahi, 2019). The participants only mentioned that they treated their foster grandchildren as their own and that they had no problem in caring for them as it was what they were used to way before the passing of their mother.

5.3.2.3 Subtheme: Challenges with discipline

The decision-making approaches and the way in which children are disciplined change during the kinship family life cycle, as the powers of decision making are passed from one individual member to the other. The decision making around discipline especially in some kinship families was reported by participants in this study, as being not limited to the immediate family, but may be extended to other relatives, organisations or professionals depending on the culture, tradition, race or policies (Hepworth *et al.*, 2010). Most of the participants' decisions regarding the care of their teenage offspring are often passed to other family members and the social worker (case manager). With regard to decision making the participants said the following:

> *My sons would visit her [foster child] to let her know that she should not behave as if we are wealthy. They also said that the things that they are doing for her, such as buying clothes, are just to make sure that she looks like other children. (Barwa bake ba be ba fela ba moetela ba mmotša gore a se ka phela nke re bahumi. Bare dilo tšeo ba modirelago tšona tša go swana le go morekela diaparo ke tša go nore a swane le bana ba bangwe)* (Participant 1, Maternal grandmother).

> *I am no longer beating them [meaning spanking the foster children], because our social worker has warned us not to do so. (Ga ke sa ba itia, ka ge modirela leago wa rena a re lemošitše gore re se ka ba itia* (Participant 2, Maternal grandmother).

> *I then called his [referring to foster child] uncles to help me with his behaviour before I take him to the social worker. (Bjalo ka bitša bo*

malomeagwe gore batle ba mokgalele mekgwa ye ya gagwe pele gage ke

tla moiša go social worker) (Participant 3, Maternal grandmother).

Although the decision making often includes family members and professionals such as the social worker, the foster grandparent is still the person who has the power and authority of instilling family values and norms, regulating behaviours, socialising and establishing rules with the foster child. Hepworth *et al.* (2010) concur that the family member and a social worker are given power and limitations by the participants to perform certain roles within the kinship foster family regarding the care of the children. The ageing of grandparents has an impact on disciplining their own orphaned teenage offspring, as they do not have the energy to exercise this role. They opt to use the children's uncles and the social worker to discipline them on their behalf.

5.3.3 Theme 3 – Intergenerational differences posing challenges to parent foster grandchildren

Parenting teenage orphans has not been easy for the participants as it has come with several challenges emanating from the teenager's behaviour and other life challenges. Four subthemes emerged from this theme, namely uncontrolled behaviour, peer pressure, poor academic performance, and use of technology (smartphones).

5.3.3.1 Subtheme: Uncontrolled behaviour

Matlakele and Erasmus (2018) found that adolescents' bad behaviour affects the entire family and may result in family members being hurt, feeling stressed and unable to bear it. Anger, alcohol initiation and risk-taking behaviour (Ryan, Roman & Okwany, 2015; Kader & Roman, 2018) have

been identified as some of the uncontrolled behaviours exhibited by adolescents. The situation created by the adolescents' uncontrolled even went beyond the family boundaries to affect friends and neighbours. This is what family systems theory explains as family systems being nested in one another, where a teenage foster child is nested in a relationship with the foster grandparent, this relationship is nested in the kinship foster family, the kinship foster family is nested within the community in which the kinship foster family and the teenage foster child live (Thompson, Wojciak & Cooley, 2019). The participants indicated that their teenage offspring exhibit uncontrolled behaviour such as refusal to do house chores, spending most of their time on their cellphone, dating, substance use (alcohol), risky sexual behaviour, suicidal tendencies, disregarding the curfew, acting spoilt and backchatting. The following excerpt reflects the participants' views regarding the uncontrolled behaviour exhibited by their teenage offspring.

Upon her arrival she just changed quickly and went to the station without doing her house chores. She came back during Skeem saam soapie [meaning the foster child disregards curfew] when I tell her to stay with me in the house, she refuses… It was last year when I began to encounter a problem with the elder sister. She would not eat at home; bring people's clothes and at times arrive late at home ... what angers me a lot is that she would come with her friend's clothes in my house. (Go fihleng ga gagwe ka gae o no apola tša sekolo a ya station ntle le go dira mešongwana ya gagwe ya ka mo gae. A boye ka nako ya setori sa Skeem Saam…Mathata a, ke thomile go a lemoga ngwagola. Ge kere a dule ka gae o wa gana. Le ka gae a sa ja, a be a tle le diaparo tša batho ebile a tle mola letšatši le

diketši. Seo sa go nkwatiša kudu ke ge a etla le diaparo tša mogweragwe ka lapeng laka (Participant 2, Maternal grandmother).

You can see that he [meaning the teenage foster child] has started dating. He is in the adolescence stage. Eiii!! One day he showed me what I could not believe [shaking her head]. When a child enters this stage it is dangerous, ai!! [expressing her anger] He once talked back at me and I was not alone by that time. I nearly died from that incident. A child should do such things with you alone, and you will just forgive him, but not when you have visitors [meaning being disrespectful]. I was with one of our neighbours in the morning and I asked him to bring me water. He said I am tiring him by saying he should bring this and that. He added by Nxaa!! Ei! [Loss of interest]. (O no mmona gore yo o thomile go jola. O mo staging sa adolescence. Eiii!! Ka letšatši le lengwe oile a mpontšha mohlolo ka se kgolwe maahlo aka. Ge ngwana a tsena moo staging se o kotsi ka kudu ai!! Nkile a re ke bolela a mphetola ebile ke be ke se nnoši ka nako yeo. Ke nyakile go hwa ka lebaka la tiragalo yeo. Ngwana a se a swanela gore a dire dilo tše bjalo esego go ena le baeng. Ke be ke dutši le moagišane waka bjalo ka mo rela gore a ngele meetsi. A no re kea molapiša ke re a tle le se le sela. A pasela ka gore nxaa!! Ke gore ka kwa ntongwe ka mo maleng enyoga e etla mo mogolong. Ka ba ka ipotša gore nkabe ebile a no ntira so ke le nnoši) (Participant 3, Maternal grandmother).

He [meaning the teenage foster child] is one child that you will never tell him to do something and he'd do it, instead he'd rather defy you whenever you try to ask him to do something. He will drink tea and leave the cups right where he was seated. He is always throwing tantrums whenever you try to talk to him. (Ke ngwana yo elego gore o ka se mo rele gore a dire selo a se dira ebile a ka eupya a gana o moroma. O no nwa tee a tlogele le lebikiri gona moo a bego a dutši ntshego. O dula a bogetši ditori tša bo Skeem saam le se sengwe se se monna o dula a sweri lepara mo telebišeneng) (Participant 9, Maternal grandmother).

The participants in this study found it very difficult to deal with the uncontrolled behaviours portrait by their foster grandchildren. Kuo and Operario (2010) concur that the type of defiant behaviour mentioned by the participants in this study, occurs in cases when the teenage foster children are rebellious to their grandparents. Having said this, the behaviours of teenage foster children are not all the same and cannot be generalised because the context of each family is unique. Similarly, each child is unique in his/her own context and development. However, any form of challenging behaviour influences the foster parent's ability to care for them in a conducive environment (Koren-Karie & Markman-Gefen, 2016).

(a) Category: Child protection professionals as scapegoat

The participants' foster children use child protection professionals as their scapegoat in avoiding being disciplined by the participants. This strategy used by orphan teenage children is not being reported to the social worker during supervision visits. Böning and Ferreira (2013) argue that

firstly, social workers are unable to identify the problematic behaviour of the child during home visits as it is displayed only periodically, and secondly these foster parents are dependent on the foster child grant so they will not report this behaviour. The authors further conclude that the problematic behaviour is reported when it has escalated beyond the foster parent's control (Böning & Ferreira, 2013). Despite these challenges, researchers have argued that the grandparents may have a strong spirit of perseverance and willpower to continue with their familial responsibilities (Bailey *et al.*, 2009).

> *Those who show disrespect is because they use social workers and Police officers as their shield. This threat then makes the grandmothers to be afraid and ultimately withdraw from disciplining them. (Bao ba sa tlhomphego ke bao ba šomišago badirela leago le maphodisa bjalo ka sephemo. Matšhošetši a a direla gore bakgekolo ba tšhoge ebile ba feleletše ba tlogela go ba kgalemela)* (Participant 6, Paternal grandmother).

It was found that children's behavioural and mental health needs are the biggest challenge faced by foster and adoptive parents (Barnett *et al.*, 2018). Participants are experiencing dual pressures in terms of disciplining the children and reporting the anti-social behaviour to the social workers, because reporting is associated with losing the grant and not reporting means the orphan teenage foster children will be left unpunished. They then opt for not reporting the behaviour in order to secure the foster child grant, not knowing that the behaviour will escalate and cause more problems for the teenagers in the future.

(b) Category: Teenage sexual behaviour

Most participants voiced their challenges of accepting their teen offspring's sexual behaviour and admitted to finding it difficult to talk to them about sex and their risky sexual behaviour.

> *The experience of fostering a teenager is quite difficult because raising a boy child is not like raising a girl child. With a girl child you get to receive a baby which you did not expect. I for one had a challenge when I found out that my granddaughter was pregnant when she was doing grade 10 … It is unfortunate that we try to advise them, but they do not listen to us. (Maitemogelo aka a go tlhokomela ngwana wa gotšwa mahlalagading a se ao nka re go a bile bonolo nie ka ge go godiša ngwana wa lesogana go sa swane le go godiša wa lekgarebe. Ngwana wa lekgarebe o go tlišetša lesea leo o be o se wa le letela. Nnaena wa mpona iye, ke kopane le bothata ge ke se no hwetša gore ngwanenyana oithwele a sa dira form three…Go hloka mahlatse garena ke gore a ba rekwe bana ba ge re ba kgala)*
> (Participant 5, Maternal grandmother).

Some families which are headed by grandparents do not offer adolescents an opportunity to talk about sexual risk behaviours. Researchers have identified household poverty, age differences between the grandparents and the adolescents, as the contributing factor that hinders implementation of sex education in such families (Anyanwu, Akinsola, Tugli & Obisie-Nmehielle, 2020). This includes the fact that too harsh discipline by grandparents leads to delinquency (Liu, 2019). Sex education in families headed by grandparents whose values are deeply rooted in culture, is not an easy thing to be practised, especially when the grandparent's style of parenting is authoritative. It is also observed that cultural kinship foster families shy away from open

communication, which leads to teenage foster children relying on friends regarding sexuality issues (Guan & Li, 2017). The grandparent may also feel that talking about sex means they are giving their grandchildren a license to go and put it into practice. In the absence of sex education from the grandparents, the orphaned teenage children will turn to their peers and social media for information about sex and sexuality, which is not always ideal. Grandparents become surprised by the grandchildren's pregnancy, whereas they know that they had never taught their grandchildren about sexuality. This is when they start complaining that raising a boy child is easier than raising a girl child.

5.3.3.2 Subtheme: Peer pressure

In the study of De Atouguia (2014) it was found that 85% of the adolescents where influenced by their peers. This influence increases as they get older (Keijsers, Loeber, Branje & Meeus, 2011). Walsh and McGoldrick (2013) indicated that friends provide support for adolescents whenever they need it. Most participants mentioned that their teenage offspring were influenced by their friends. This has made parenting difficult for them and some had to take drastic measures such as trying to end their friendship, refusing to open doors for them when they come late, refusing their friends from entering the house, and preventing them from going to play at their friends' home. This is what the participants had to say regarding their teenage offspring's peer influence.

> *The younger sister will do house chores after school, unlike her sister who*
>
> *is always with her friend. (Monyanana wa gagwe o tla dira mešongwana*
>
> *ya ka gae ge a se no bowa sekolong mara mogolwagwe yena a ka seke, sa*

gagwe ke go phela a ena le mogweragwe) (Participant 2, Maternal grandmother).

This [referring to the teenager's uncontrolled behaviour] was observed when he changed his friends whom he was schooling with since primary. (Seo ke se bone ge a se no thoma go ba le bagwera ba bangwe a hlanamela bale a tsenego na bo ka mo primary) (Participant 3, Maternal grandmother).

You know, these children do not have an ear [meaning they do not respect the rules set by the foster parent, they are disobedient] when an adult is talking to them. They are just influenced by their peers. (Watseba bana ba a bana tsebe ge motho yo mogolo a bolela nabo. Ba gapišwa ke bagwera ba bona mogofe) (Participant 5, Maternal grandmother).

According to the participants, the teenage foster children preferred to spend time with their friends rather than in their foster home and this is normal teen behaviour during adolescence that adolescents prefer their peers more than relatives, and that their behaviour in the foster home mostly is influenced by their friends. This correlates with what Keijsers *et al.* (2011) and De Atouguia, (2014) that most of teenagers' behaviours are influenced by their friends. The narratives by the participants regarding the negative influences by peers are also in line with Erikson's theory of psychosocial development, which holds that children entering the stage of adolescence (the age between 12 and 18 years) seek to identify who they are and during this process they encounter role confusion (Erikson, 1972). They would rather listen to their friends than to their grandparents, and in so doing defy the rules set by their grandparents in kinship families, causing serious dysfunctionalities. Their behaviour might influence that of the young ones at home as they serve

as their role models, and on the other hand, other family members such as uncles will want to instil discipline to them.

5.3.3.3 Subtheme: Poor academic performance

Adolescents who are in foster care encounter many academic difficulties such as grade repetition, delinquency and academic failure (Trout, Hagaman, Casey, Reid & Epstein, 2008; Pears, Kim, Buchanan & Fisher, 2015; Erickson, 2018). Most participants have expressed that their teenage offspring are not doing well at school. They said:

He began to experience learning challenges when he progressed to high school. He told me that he was struggling with mathematics and it's unfortunate that I did not go to school to understand his situation. I encouraged him to study other subjects even though he is struggling with mathematics. (O thomile go palelwa ge a se no ya mo sekolong seo se phagamego. O mpoditše gore ge e le Maths ona wa mo palela ebile ke madimabe a se ka tsena sekolo gore ke kwišiše seemo sa gagwe. Ke no mo tlhohleletša gore a ithute tše dingwe tšeo a di dirago le ge maths o motlaiša) (Participant 4, Paternal grandmother).

What shattered me was his term 4 report, where he failed. The fact that he never asked us to help him made me think he was doing very well in class. He just said, Mama I am a genius, it is just that I did not understand some of the things during the examination. (Sa go nnyamiša kudu ke ge ke bona report ya gagwe ya mafelelo a ngwaga e re a se a atlega. Watseba ke no

etšea gore ge a sa nkgopele thuso ka tša sekolo gora gore di sepela

gabotse. O no re go nna (Mama, ke genius e no ba gore a ka kwišiša dilo

tše dingwe ge ke ngwala ditlhahlobo) (Participant 6, Paternal

grandmother).

The problem which I am facing is with this boy who is not doing well at

school. His sister went to collect his term 4 report, in which he failed

mathematics, and this has been the subject that kept him in grade 9 for the

3rd time. (Bothata bjowe ke lebanego le bjona ka lesogana le ke gore

aowa wa palelwa ka sekolong. Kgaetšedi ya gagwe e latile dipoelo tša

gagwe tša mafelelo a ngwaga ra hwetša gore aowa o šitilwe ke dipalo

ebile se ebile bothata bja tekano ya mengwaga e meraro a dira form two)

(Participant 7, Paternal grandmother).

Most of the participants' teenage offspring are reported to be performing poorly academically, and

because of the poor educational background of these participants they find themselves not knowing

how to help them. The children have to repeat grades, and mathematics was the subject that

troubles them a lot. These findings correlate with other studies that also found that teenage

orphaned foster children have deficits in neuro-cognitive functioning; hence they are usually

reported to be performing poorly academically (Leve, Harold, Chamberlain, Landsverk, Fisher &

Vostanis, 2012). In supporting the above findings, researchers explained that they are behind

developmentally and functionally, which is as a result of their parent's(s') death (Whitley &

Kelley, 2007; Kelley, Whitley & Campos, 2010; Mersky & Janczewski, 2012). The participants'

poor academic background has a bearing on the orphaned teenagers' school performance as they

are unable to stimulate the children's educational needs. They are just able to provide the physical

needs, attend school meetings and buy school necessities. Their inability to attend to the teenagers' educational needs creates more problems for the teenagers, because just encouraging the teenager to focus is not enough.

5.3.3.4 Subtheme: Use of technology (smartphones)

The most important part of adolescents' social life today is played by social media (Marengo, Longobardi, Fabris & Settanni, 2018). These social media are accessed through technological devices such as smartphones. Social media provide support and approval from peers, which are critical for adolescents as they are still developing (Uhls, Ellison & Subrahmanyam, 2017). Sharing aspects of adolescents' lives and pictures on social media platforms is what teenagers do when they log in. Uhls, Ellison and Subrahmanyam (2017) found that use of technology contributes towards adolescents' school problems. The use of technology, particularly a cellphone, to access social media websites has posed a challenge to the participants. All the participants have indicated that they are technologically illiterate and cannot monitor what their teenagers are doing on social media sites such as Facebook, while other participants get to be informed by the family members.

> *The elder sister was always on her phone and I did not know that she has Facebook until my other daughter told me that she saw her there ... My daughter told me that she saw her on Facebook again after her phone got damaged, and I asked myself where she got a phone to get to that Facebook of theirs. I then learned that she was using her friend's phone to login without my knowledge. (Mogolwage o be a phela a le mo*

phounung ebile ke be ke sa tsebe gore o ne facebook go ba go fihlela ke sebotšwa ke morwedi waka a re o mmone fao…morwedi waka o mpoditše gore o mmone facebook gape, morago ga gore phoune ya gagwe e senyege, bjalo ka ipotšiša gore naa o tšeri kae phoune ya go tsenamowe facebook ya bona. Ka thoma go lemoga gore o šomiša ya mogwera wa gagwe go tsena fao ntle le tsebo yaka) (Participant 2, Maternal grandmother).*

My biggest challenge with him is the cellphone, which he uses even during the night when we are asleep. I do not like the cellphone, especially this one which they use to get to internet, hence I only bought this non-smart phone. His uncle and my brother's son give him the smart phones which I do not approve of. (Tlhotlo e kgolo yeo ke nago le yona le yena ke cell phone yeo a dulago a le go yona bošego ge re robetši. A ke rate phoune ye ya go tsena kae kae ka yona, a o bone ke moreketši ye ya lepopotwane. Malomeagwe le morwa kgaetšedi yaka ba mo neela yona yeo ye kgolo ke sa dumelelanego le yona) (Participant 4, Paternal grandmother).*

Most of the participants are challenged by their orphaned teenage offspring who are forever on their smartphones, which prevents them from doing house chores and disturbs their sleep. They mentioned that these teenagers are always logging on to social media such as Facebook, which they become aware of when their own children alert them. The technological illiteracy of the participants prevents them from monitoring the children's social media life. Research shows that teenage foster children are more computer literate and technologically advanced than their foster grandparents, making them vulnerable to be influenced by social media and peer values (Mesch,

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2003; Mesch, 2006; Akyil *et al.*, 2015). It is indeed true that social media today are playing an important part in adolescents' lives (Marengo *et al.*, 2018). Parenting for the participants is challenged by technology and this makes it difficult to monitor the children's social life as they are unable to use technology. Teenagers are able to meet strangers on social media and be influenced by them without the knowledge of the participants, and some of the influences might be against the rules that have been established by the participants in their homes.

5.3.4 Theme 4 – Psychosocial challenges experienced by foster grandparents

Challenging adolescents poses a challenge to parenting, and grandparents who are experiencing psychological distress will cause these adolescents to engage in risk behaviour activities (Ryan *et al.*, 2015). While facing the challenges posed by challenging adolescents, grandparents also face their own multiple challenges which include increased financial pressures, limitations in caring for biological children and other household members, disrupted household structure, as well as deteriorating physical and psychological health due to ageing (Kuo & Operario, 2010). There are several challenges that emerged under this theme which participants encountered, and those challenges are not emanating from their teenage offspring. They are challenges which are related to the participants' health and psychological aspects, economic status, personal fears and the interference of significant others. The subthemes under this theme are as follows: significant others' interference, fear, poverty, health and psychological problems.

5.3.4.1 Subtheme: Significant others' interference

The significant others of the teenage offspring such as friends, extended family members and community members, play a role in the parenting of these children. It is unfortunate that the participants have indicated that their role sometimes makes it difficult to parent these children as they influence their behaviour negatively. This is what the participants expressed:

My neighbours say I abuse them when I tell my grandchildren not to go to their houses. When she is in their house, she does not answer me when I call her, and what surprises me is that even my neighbours would say nothing. I will call with a loud voice until I get tired – without any response … People do not love an orphan, and when one tries to give him guidance, they will say you are abusing him or her. (Ba agelwane baka ba re ke hlakiša ditlogolo tšaka ge ke re di seke tša ya ka ga bona. Ge a le ka ga bona ga a nkarabele ge ke goeletša leina la gagwe ebile ke makatšwa ke gore le bona baagelwane ba no nkhomolela. Ke tla goeletša kaba ka re thwi ntle le phetolo…batho ba ga ba rate tšhiwana ebile ge motho a re wa mokgala bona ba re wa mo hlokofatša) (Participant 2, Maternal grandmother).

These children do not just act out this way without having someone at the back feeding them with negativity. Such negativity comes from their friends, aunts and uncles. In my case I have observed that friends and uncles are influencing my grandchild. (Bana ba a ba ke ba no tšwa tseleng ka ntle le go goketšwa ke motho. Wa bona go foraforetša mo go tlišwa ke bagwera, bommangwane le bomalome. Wa bona waka ke no mmona gore

wo yena o gapišwa ke bagwera le bomalomeagwe mogofe) (Participant 6, Paternal grandmother).

They [referring to the uncles] will tell him to leave his grandparents, promising to care for him. Pity the poor child does not know the consequences of such influence. (Ba tla moforaforetša gore a tlogele bomakgolwagwe, ba motshephiša gore ba tla mo fepa. Aowi selo sa Modimo a se tsebe ditla morago tša maradiana ao) (Participant 6, Paternal grandmother).

The above excerpts show that the decline in family bonds as a result of modernisation which has provided an opportunity for the bond that exists outside the family to extended families such as kinship, to have a stronger influence over the teenage offspring (Bengtson, 2001; Kohli, Künemund & Lüdicke, 2005). This made boundaries which are abstract dividers that function between and among systems, or subsystems within the kinship foster family and between the kinship foster family and the environment, to be weakened. The weakening of the boundaries makes them to change over time as the kinship foster family or kinship foster family members interact with one another, making the kinship foster family system to be open. It can be concluded that the participants' boundaries allow influences from outside which the participants are unable to handle (Akyil *et al.*, 2015). Significant others such as friends, extended family members (uncles and aunts) and community members can be a source of support and can also be a source of negative influence on the participants' orphaned teenage offspring. Their negative influence forms a challenge in the parenting of these teenagers and cause the participants to experience psychological and emotional stress.

5.3.4.2 Subtheme: Concerns for the future welfare of foster children

Some of the South African researchers found that foster parents are facing a challenge of fear of the unknown (Perumal, 2011; Mosimege, 2017). This was also revealed by most of the participants who face this challenge when parenting their teenage offspring. Some of the participants fear to die before imparting wisdom to them; or they fear that other family members might maltreat them; or that they might commit suicide when they are disciplined, and then resort to not disciplining them; or they fear that the use of technology might make them porn addicts, which might turn them into rapists; and that these teenage offspring might think that their parents have left them to be abused. They shared as follows:

> *I just said I do not want to die before guiding her about life, otherwise the enemies will laugh at them as we have some differences with her paternal family. (ke no ipotša gore ga ke nyake go hlokofala ke se ya mo ruta tša bophelo, esego fao manaba a tla ba sega ka ge re sa nwešane meetsi gabotse le babo rragwe)* (Participant 1, Maternal grandmother).

> *I treat my own orphaned teenage grandchild as my last-born child, reason being that if I cannot do so his uncles might mistreat him. (Nna setlogolo saka sa tšhiwana ke se swara jwalo ka ngwanaka wa mafelelo lebaka e le gore bo malomeagwe ba se ka mo swara gampe)* (Participant 4, Paternal grandmother).

> *They would even think that their parents left them to be abused. (Ba tlaba ba gopola gore batswadi ba bona ba ba tlogeletši gore ba tlhokofatšiwe)* (Participant 7, Paternal grandmother).

5.3.4.3 Subtheme: Poverty

Most of the participants are living in poverty and depend solely on the social grants such as the old-age grant and the foster child grant for survival. It has been noted that most of the parents of the teenage orphaned foster children were unemployed and left no estate for their children. This has led to household economic shocks and increasing poverty, leaving the participants' family structures dysfunctional (Kuo & Operario, 2010; De Jager, 2011; Böning & Ferreira, 2013), and has put extreme pressure on the participants' family (UNAIDS, 2001; Blackie, 2014). The participants' financial problems were explained as follows:

After the passing of my daughter I experienced financial problems where my grant and the children's child support grants stopped, and I went to the SASSA office to explain my situation. (Morago ga go tloga ga morwediake ke bone ke goga boima ka thoko ya mašeleng, moo elego gore ke hweditše pheyi yaka le ya bana di emi, ka ba kaya SASSA go hlalosa seemo saka) (Participant 2, Maternal grandmother).

By that time, I was in absolute poverty where I was without a husband and a source of income. (Ka nako yeo, ke be ke le bošuwaneng bja go šiiša moo ke bego ke se na monna le letseno) (Participant 4, Paternal grandmother).

Parenting orphaned teenagers is not an easy thing as they are without parents, and one needs finance to do so, of which I do not have enough. We solely rely on social grants to care for them and we are not having any relatives contributing towards their care. (Go hlokomela bana ba go tšwa mahlalagading ba ditšhiwana ase taba e nnyane nie, ka ge ba se na le

batswadi ebile go nyakega mašeleng gore o kgone go ba tlhokomela mola ke hlaetša. Re no lebelela yona ye ya mphiwafeela gore ka yona re kgone go ba fepa mola re se ne metswalo yeo e re thušago) (Participant 7, Paternal grandmother).

Brody, Yu, Nusslock, Barton, Miller, Chen, Holmes, McCormick and Sweet (2019) indicated that the vulnerability of children growing up in poverty results in negative changes in the children's developing brain. Poverty was not the only cause of the behavioural problems in adolescence, as was revealed by the literature. Ponnet (2014) mentioned negative parenting where parents are experiencing mental problems and financial stress also cause the behavioural problems in adolescence. The living environment of the participants have an impact on the development of their orphaned teenage offspring, and this has a bearing on the children's wellbeing. They are mostly raised in families that face poverty, which puts a strain on the participants as their only source of income is normally social grants. Meeting the basic needs of these teenagers is not easy for many participants, hence some rely on their children for assistance.

(a) Category: Social grants as source of income

The effects of poverty and HIV/AIDS have been regarded as the root cause of this dependency on government grants (Böning & Ferreira, 2013; Carter & Van Breda, 2016; Fortune, 2016). Most of the participants mentioned that their family's source of income is the social grants as they are experiencing financial distress resulting from poverty. One participant shared that:

The hardest thing was on my family finances, where we relied on the social grants. (Sa boima ka kudu e be e le mo mašeleng, moo re bego re no lebelela motente feela) (Participant 10, Maternal grandmother).

The participants relied on social grants for the survival of the family. The effects of poverty have an impact on the development of the orphaned grandchildren that are fostered by the participants. The study of Matlakele and Erasmus (2018) revealed that there is some correlation between children's bad behaviour and poverty. This is supported by other researchers who indicate that children who are exposed to prolonged poverty at an early stage puts these children at a higher level of behavioural problems as they enter into the early stage of adolescence (Mazza, Lambert, Zunzunegui, Tremblay, Boivin & Côté, 2017). Raising grandchildren with social grants is an indication that the family is experiencing poverty and that the participants need to know the impact it has on the development of these grandchildren. As much as the participants are trying to make end meets, they need to also ensure that they take care of their grandchildren's wellbeing, including their own wellbeing.

5.3.4.4 Subtheme 4.4: Challenges relating to foster parents' health and psychological wellbeing

Research reveals that some foster parents in kinship care are found to be participants who are older and who are heavily burdened by the care that is heaped on them unlike the younger generation (Koh, 2010; Makiwane, Gumede, Makoae & Vawda, 2017). This was supported by what the participants have shared:

I even began to experience lots of stress that was caused by him. I would even have problems with my sleeping patterns. I consulted the local clinic many times, where they referred me to the hospital, and I did not go. (Ke ile ka thoma go balabala ka kudu ka lebaka la gagwe. Bošego ke be ke sa bopate boroko. Ke ile ka ya gona mo cliniking makga a mantšhi ba ba ba nromela sepetlele feela ka se ye) (Participant 3, Maternal grandmother).

I took everything on my shoulders. (Tše ka moka ke no di bea magetleng aka) (Participant 1, Maternal grandmother).

Most participants experienced stress and physical health problems as they continued caring for their orphaned teenage offspring. Despite all the psychological distress and health problems, they have not regarded caring for their grandchildren as a burden. Grandparents experience health deterioration due to ageing (Whitley & Kelley, 2007; Kuo & Operario, 2010; Kelley *et al.*, 2010). The findings in the study of Xu (2019) revealed that there was no significant health disadvantage suffered by grandparents caring for their grandchildren; instead they experienced emotional reward. This finding is supported by other researchers, who argued that caregiving is emotionally rewarding rather than stressful, even though lack of resources limited some of these rewards (Etaugh, 2018; Luo, Pan & Zhang, 2019). Caring for grandchildren is more emotionally rewarding than distressful, as the participants know that they are fulfilling their cultural values and that they are doing it willingly without being forced. They are able to do this even when they are experiencing health problems which may pose a danger to their lives.

5.4 REFLECTIVITY

Reflectivity in phenomenological studies is important because it requires the researcher to be aware of his/her own perceptions, experiences and bias to avoid compromising the neutrality of the research (Krefting, 1991). It is important for the researcher to consider the relationship to the study population and the phenomenon under investigation in order to maintain transparency during the data analysis process and in avoiding any undue bias (Aparicio, Shpiegel, Grinnell-Davis, King, 2019). As was mentioned above, the researcher is a social worker in the field of childcare and protection services (Foster care), and therefore it was important to distance himself from the study by keeping a reflective journal. The researcher used the reflective journal after every interview, reflecting on his own emotions and skills, and checking whether he appropriately switched from social worker to researcher during the interviews, because the participants could easily confuse the interview as a therapy session, which it was not.

The researcher's younger sister was once in the foster care of her elder brother. The researcher interviewed grandparents of the Bapedi culture, some of whom took part in the interviews. Their cultural practices prohibit talking about the deceased. It was explained to them about the aim of the study, the implications of undertaking the study, whereby the consent form and information sheet were read to them. They signed voluntarily, understanding that they could withdraw whenever they felt discomfort.

5.5 CONCLUSION

Four main themes emerged from the data analysis and were presented and discussed in this chapter. Family system theory as theoretical framework and the relevant literature on the subject were used to interpret, compare and contrast the findings in this chapter. It is clear that the kinship foster care where grandparents foster their biological teenage offspring is perceived as preferred care, despite the challenges encountered in such care.

The next chapter presents the conclusions and recommendations of the study.

CHAPTER SIX: CONCLUSIONS AND RECOMMENDATIONS

6.1 INTRODUCTION

The research question in this study was: What are the perceptions and experiences of grandparents regarding fostering their teenage offspring? As such the aim of the study was to understand the essence of grandparents' perceptions and experiences of fostering their teenage offspring. The research objectives were to explore the perceptions and experiences of grandparents regarding fostering their teenage offspring, and describe the experiences of grandparents fostering their teenage offspring.

Further clarity and exploration of their everyday life, thoughts, feelings and meaning making was sought by probing deeper within the context of this one question.

The family systems theory (family system theory) was used as a lens to contextualise this phenomenon. Therefore Chapter 1 provided a contextual overview of the study, while Chapter 2 presented the theoretical framework. Chapter 3 reviewed literature on kinship foster care, focusing on grandparents who are fostering their teenage offspring. In Chapter 4, the research methodology was discussed, while Chapter 5 presented the findings of the study. In the present chapter, the main conclusions and recommendations for this study are presented.

In line with the aim of the study, the following objectives were achieved and presented in Chapters 2 to 6:

- To explore and describe the perceptions and lived experience of grandparents regarding fostering their teenage offspring

- To interpret the perceptions and lived experiences of grandparents fostering their teenage offspring

- To make recommendations for social work practice and policy relating to kinship care

This chapter is presented in two parts. The first part presents the conclusions as follows:

- the theoretical framework

- the research methodology

- the research findings

The second part presents the recommendations for:

- social work practice relating to kinship foster care

- social work practice relating to support services to grandparents fostering their teen offspring

- social welfare policy

- future research

6.2 CONCLUSIONS

The following conclusions are made based on the literature reviews and the empirical study conducted with grandparents fostering their teen offspring.

6.2.1 Conclusions relating to the theoretical framework

The family system theory was used as a lens to gain an understanding of the perceptions and experiences of grandparents whose teenage offspring were in their kinship foster care. This theory was relevant as it helped the researcher to understand the lived experiences of the grandparents fostering their teenage offspring. According to this theory, the family is an emotional unit, and there are subsystems that interact with one another within the system. The three principles of this theory were identified as the lived experiences of grandparents were explored. These principles are the following: a change in one part of the system affects the whole system; secondly, it is only through studying the whole family's cultural values, norms and structures that one will better understand an individual family member's behaviour; thirdly, the interaction between the system and its environment is a two-way process whereby they influence one another.

The teenage foster child and foster grandparent cannot be fully understood if they are treated independently outside the context of the kinship family system, in which they are inseparably embedded. A kinship foster family as a social system which performs certain functions and responsibilities to and for its members, should be viewed from its experiences, culture, socioeconomic status, sexual orientation, race and family forms in order to understand them. There are a variety of family forms, and the functioning of these forms is influenced by the dominant culture. The cultural component of family influences help-seeking behaviour and determines how problems are defined by the kinship foster family.

Understanding the family context, family strengths, boundaries and boundary maintenance, family power structure, family decision-making process, family goals, family myths and cognitive

patterns, family roles, communication styles of family members, and family life cycle enabled the researcher to interpret the findings in the context of family system theory.

6.2.2 Conclusions relating to the research methodology

This study employed a qualitative research approach which helped the researcher to create a coherent story as seen from the grandparents' frame of reference. The grandparents' experiences and actions were represented by them to better understand how they encountered, engaged with, and lived through situations of fostering their teenage offspring.

A phenomenological research design was employed to reduce grandparents' experience with a phenomenon to a description of the universal essence, where multiple participants (10) were recruited to bring about an in-depth description of their common lived experiences. The lived experiences of grandparents who foster their teenage offspring were studied to understand the meaning it holds for them as primary caregivers. A phenomenological analysis as suggested by Moustakas (1994) was employed to interpret the findings and to develop themes. The unstructured interview entailed one question, as commonly done in phenomenological studies, and was used in conjunction with probing questions based on family system theory.

6.2.3 Conclusions relating to the research findings

Theme 1: Family crisis

All kinship families which are headed by grandparents had experienced a death of a parent(s), leaving orphans under the grandparents' care. Most of the grandparents are still struggling with

dealing with the loss of the orphaned teenage offspring's parent(s). During the time of death and grief they experienced health, emotional and psychological problems. Friends, church members, community members and family members such as sons, daughters and husbands were sources of strength for the grandparents.

Theme 2: **Shifting parental roles**

The death of the parent(s) of the orphaned teenage foster children has brought family structural and role changes within the kinship families. Grandparents assumed the new role of parenting their grandchildren, which is known as "parenting for the second time". Almost all grandchildren were left with their grandmothers at a tender age, so this made them grow up knowing their grandmothers as their own mother, as the grandmother regarded them as their own children. For some, this role transition was not perceived as a challenge as they had previously parented their grandchildren and/or their grandchildren were born into their care. For those who were parenting for the second time it was viewed as a strain. Most grandparents viewed caring for their orphaned teenage offspring as a cultural obligation which is emotionally fulfilling rather than being a burden. The only challenge that grandparents experienced was with disciplining their orphaned teenage offspring, for which they often used uncles and social workers to do it on their behalf.

Theme 3: **Teen behaviour and associated challenges**

Most of the grandparents were challenged by the teenager's uncontrolled behaviour, and had to deal with behaviours influenced by peer pressure, poor academic performance and technology (smartphones). The behaviour exhibited was reported as being very difficult to discipline. This

type of behaviour displayed by the foster children was different to what grandmothers experienced when raising their own children (i.e. parents of the foster children). The teenager would use the social workers and police officers as scapegoats to threaten their grandmother in avoiding being disciplined. Some of these female orphans fell pregnant, because their grandmothers did not talk about sex education due to cultural practices which do not permit elderly people to talk about sex with children.

All the grandmothers complained about the influences which the friends of their orphaned offspring and the use of technology (smartphones) had on them. They associated all the negative behaviours portrayed by the teenagers as being influenced by their friends, including those which they accessed on social media. The technological illiteracy of the grandparent makes it difficult to monitor their orphaned teenage offspring's life on social media. Most of the grandmothers reported that their orphaned teenage offspring are performing poorly at school. This is because of the limited education of the grandmothers which makes them unable to stimulate the children's educational needs, even though they did go to school and have all the necessities. The other problems were that these children spent more time on their smartphones than with their books, and may have deficits in neuro-cognitive functioning due to losing their parent(s) and living in poverty.

Theme 4: **Challenges experienced by foster parents**

Firstly, the grandmothers experienced interferences from significant others in parenting their own orphaned offspring. These significant others include friends, extended family members (uncles and aunts) and community members who caused the grandmothers to experience psychological

and emotional distress. Secondly, they were afraid of what would happen to their orphaned teenage offspring when they were no longer alive. Thirdly, they were living in poverty where their main source of income was social grants. Lastly, they experienced stress and physical health problems as they continued to care for their orphaned teenage offspring, although they did not regard it as a problem. Most of the grandmothers drew their strength from God.

6.3 RECOMMENDATIONS

6.3.1 Recommendations for social work practice relating to kinship foster care

- Kinship foster care should be included in the literature for social work practice when referring to children placed in foster care with their relatives.
- A standard criterion for assessing (screening) prospective foster grandparents be developed which is to be used by Social workers when conducting their assessment for screening these prospective foster parents.

6.3.2 Recommendations for social work practice aimed at support services to grandparents fostering their teen offspring

- Social workers should render a pre-training and parenting programme which deals specifically with grandparents who are fostering their orphaned teenage offspring, taking into consideration their age, level of educational literacy, family background and kind of children they are fostering.
- Social workers should render supervision services which are not limited to the grandparents and the teenage foster children, but also include the significant others such as extended family members, neighbours, school and church members.

- Social workers should provide life skills programmes which aim to equip teenage foster children with knowledge regarding their selves and their immediate environment, including the social media.

- A data base of children in kinship foster care should be established in order to guide social work practice of the number of children who are in such care.

- The Department of social development should develop specific programmes that focus on grand families

6.3.3 Recommendations for social welfare policy

- Kinship foster care should be formally included in the Children's Act 38 of 2005.

- Kinship foster care should be a specialised field that will require social workers with expertise to manage cases within this field without being interrupted by any other social work services.

- All grandparents should attend mandatory training before they can be regarded as suitable prospective foster parents.

6.3.4 Recommendations for future research

- To conduct research on adolescents' experiences of being fostered by their grandparents.

- To develop an evidence-based programme for grandparents on how to raise (discipline etc) their foster grandchildren.

- To develop a programme for a multi-disciplinary team to support foster grandparents in how to deal with intergenerational challenges within a grand family.

6.4 CONCLUSION

The aim of this study was to understand the essence of grandparents' perceptions and lived experiences of fostering their teenage offspring. family system theory was the lens used to contextualise this phenomenon. In addition to family system theory, a comprehensive literature review on foster care, and kinship care in particular, assisted the researcher gaining an understanding of this phenomenon. Employing a qualitative approach and a phenomenological research design, the study aim and objectives were achieved.

The study highlighted the enormous challenges faced by grandparents fostering their teenage offspring. The findings show that fostering their teenage offspring causes health, emotional and psychological challenges for grandparents. Recommendations are made for social work practice and policy relating to kinship care.
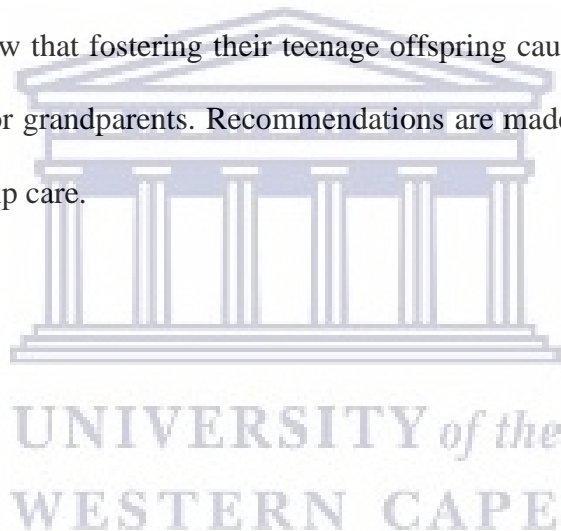
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INFORMATION SHEET

Title: Kinship foster care – perceptions and experiences of grandparents regarding fostering their teenage offspring

What is this study about?
The research project will be conducted by Frans Lesetja Manthosi, a Master's student in Child and Family Studies at the University of the Western Cape. We are inviting you to participate in this research project because you have been identified as a relevant information source on the topic of **kinship foster care**. The purpose of this research project is to gain an understanding of this topic by asking you about your perceptions and experiences of the issue. The study will help to create knowledge on this topic that can be used when planning and implementing appropriate interventions or policies.

What will I be asked to do if I agree to participate?
The researcher will conduct a one (1) hour interview with you on the topic. The interview can take place at your home or at the offices of Social Development where the researcher is employed, for privacy purposes. You will be asked to answer two questions about your own perspective and experiences of fostering your teenage grandchild(ren). There are no right or wrong answers; we merely want your views on the topic. The interview will be audio recorded only so that we do not lose all that you have discussed.

Would my participation in this study be kept confidential?
Information will be handled in a professional and confidential manner. The information obtained in the audio recording will be stored securely. Information will only be accessible to the researcher and supervisor of this study, and you, if you want to see it. Your names or identifying details will not be used; we will only use identification codes, such as male or female. All information will be stored on a computer and will be password protected. When writing up a report, your identity will be protected at all times.

There are however limits of confidentiality which is in accordance with legal requirements and professional standards, where information must be made available to appropriate individuals and/or authorities, for example, when it comes to information about child abuse or neglect or potential harm to you or others.

What are the risks of this research?
There may not be physical risks, but some risks can include discomfort, emotional distress, or embarrassment during our discussion. However, arrangements will be made should you need debriefing by seeing a counsellor which has been arranged for this purpose.

What are the benefits of this research?
The benefits to you may include a deeper understanding on the topic. The research study will also help produce information on **grandparents fostering their teenage grandchildren** in the selected municipality in Limpopo. The information from the study can also be used to help plan and implement appropriate services in the area as well as inform policies.

Do I have to be in this research, and may I stop participating at any time?
Participation in the research is completely voluntary. This means that no one can force you and you can decide if you want to take part in the study. If you take part in the study and wish not to continue anymore, you may stop participating at any time. You will not be penalised in any way.

Is any assistance available if I am negatively affected by participating in this study?
If you experience emotional distress during or after participating in the study, you will be referred to a counsellor, Ms Nkoana Moeketsi, for counselling if you feel the need for it.

What if I have questions?
This research study will be conducted by Frans Lesetja Manthosi of the Child and Family Studies Unit at the University of the Western Cape. Should you have further questions about the research study itself, contact Frans Lesetja Manthosi at: 071 322 2040 or email at 3912809@myuwc.ac.za. If you have any questions regarding this research study or your rights as a participant or want to report any problems, please contact:

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LETLAKALA LA DITABA (Sepedi)

Hlogo ya nyakišišo: Meloko yeo e hlokometšego bana ba ditšhiwana ka semolao: Maikutlo le maitemogelo a bo Makgolo mabapi le go hlokomela ditlogolo tša mengwaga ye lesome tharo goiša go ye lesome senyane.

Naa di mabapile eng?
Protjeke ye ya dinyakišišo e tlo dirwa ke Frans Lesetja Manthosi, moithuti wa Masters' in Child and Family Studies Unibesithing ya Western Cape. Re le mema go tšea karolo moo protjekeng ya dinyakišišo ka lebaka la gore le kgethilwe go ba motho wa maleba yoo a swerego ditaba tša **meloko yeo e hlokometšego bana ba ditšhiwana ka se molao.** Nepo ya protjeke ye ya dinyakišišo ke go hwetša kwišišo mo sehloogo seo re šetšego re se botšišitše ka mo godimo mabapi le maikutlo le maitemogelo a gago moo go hlokomeleng ga ditlogolo tša ditšhiwana tša mengwaga ye lesome tharo goiša go ye lesome senyane. Thutwana ye e tlo thusa go hlola tsebo godimo ga hlogo poledišano yeo e ka šomišwago ge go logwa maano le go tšea kgato ya maleba le go direng melawana.

Naa ke eng se ke tla se kgopelwago go se dira gen ka dumela go tšea karolo?
Monyakišiši o tla tšea iri moo poledišanong mabapi le sehloogo sa dinyakišišo. Poledišano ye e tla direlwa ka lapeng la gago goba kantorong ya monyakišiši moo a šomago gona kgorong ya Social Development gore go be le sephiri. O tla kgopelwa go araba dipotšišo tše pedi mabapi le maikutlo le maitemogelo a gago mo go hlokomeleng di/setlogolo tša/sa di/tšhiwana tša mengwaga ye lesome tharo goiša go ye lesome senyane. Ga go Karabo ya maleba goba yeo e phošagetšego, re no nyaka maikutlo a gago mabapi le sehloogo sa dinyakišišo. Poledišano ye e tlo gatišwa lebaka e le gore, re se lahlegelwe ke ditaba ka moka tšeo o di athlaahlilego.

Naa go tšeyeng karolo gaka go tla ba sephiri?
Tlhagišoleseding e tla swarwa wa botsibi le sephiri. Tlhagišoleseding yeo e gatišitšwego e tla beiwa fao go sa fihlelelego motho. E tla ba moithuti le mothlahli wa gagwe wa dinyakišišo gomme le wena, feela ge o nyaka go e bona. Maina goba boitsibišo bja gago di ka se šomišwe; re tlo šomiša dinomoro tša go šupetša, go swana le monna goba mosadi. Ka moka Tlhagišoleseding e tla lotwa ka gare ga khomputara yeo e notleletšwego ka lentšwana la sephira. Ge go ngwadiwa repoto boitsibišo bja gago bo tla šireletšwa ka dinako ka moka.

Le ge go le jwalo feela go ne magomo a sephiri go ya ka molao le leemo la mokgwa wa go šoma moo elego gore tlhagišoleseding e tla dula e letetši batho ba maleba le/goba bao banago le maatla go swana le moo go ka hwetšwago tlhagišoleseding ya ngwana yoo a hlokofaditšwego goba go hlokomollogwa goba go kgwetša e ka go gobatša goba ya gobatša ba bangwe.

Dinyakišišo tše di hlola kotsi efe?
Go ka no se be le dikgobadi tša mmele feela goka ba le tša gosedudišege, go hlophega maikutlong goba go jewa ke hlong ge re le gare re boledišana. Feela peekanyo e tla rulaganywa ge o nyaka go boledišana le moeletši wa tša maikutlo yoo a dutšego komana madula a bapile go ntšha sa mafahleng.

Naa meputso wa dinyakišišo tše ke efe?
Meputso yeo o ka e hwetšago ke kwišišo yeo e tseneletšego mabapi le sehloogo sa dinyakišišo. Sengwalwa se sa dinyakišišo se tlo thusa go tšweletša tlhagišoleseding mabapi le **bo makgolo bao ba hlokomešego ditlogolo tša mengwaga ye lesome tharo goiša go ye lesome senyane ka se molao**, moo masepaleng woo o kethilwego profenseng ya Limpopo.

Naa Ke ya hlokagala go ba ka gare ga dinyakišišo le gona nka tlogela go tšea karolo ka nako engwe le engwe?
Go tšea karolo go dinyakišišo tše ke ka boithaopo feela. Se se ra gore ga go yo a go gapeletšago le gona o ka no kgetha go tšea karolo ge o nyaka.Ge e le gore o kgetha go tšea karolo wa ikwa o se sa nyaka go tšwela pele o ka dira jwalo nako engwe le engwe. O ka se otlwe ka tsela efe kapa efe.

A naa gona le thuso yeo nka e hwetšago ge nka swarega gampe moo go tšeyeng karolo go dinyakišišo?
Ge o ka ikhwetša o sea swarega gabotse maikutlong ka nako ya dinyakišišo goba kamorago ga dinyakišišo, o tla romelwa go moeletši wa tša maikutlo go fa tlhahlo ya maikutlo ge o ikwa o e hloka, Ms Nkoana Moeketsi.

Ge e le gore ke ne dipotšišo?
Dinyakišišo tše di tla diragatšwa ke Frans Lesetja Manthosi go la Child and Family Studies Unit kua Unibesithing ya Western Cape. Ge o ka ba le dipotšišo tše dingwe mabapi le dinyakišitšo ka bo tšona o ikgokaganye le Frans Lesetja Manthosi go: 071 322 2040 goba email go 3912809@myuwc.ac.za. Ge o ka ba le dipotšišo tše dingwe mabapi le dinyakišitšo goba ditokelo tša gago bjalo ka motšea karolo goba ge o nyaka go bega mathata afe kapa afe, hle ikgokaganye le:

Dr Shernaaz Carelse Department of Social Work Faculty of Community and Health Sciences University of the Western Cape Tel: 021 9592849 Email: scarelse@uwc.ac.za	Prof Anthea Rhoda Dean of the Faculty of Community and Health Sciences University of the Western Cape Private Bag X17 Bellville 7535 chs-deansoffice@uwc.ac.za

Humanities and Social Sciences Research Ethics Administration
Research Office
New Arts Building,
C-Block, Top Floor, Room 28
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Bellville 7535
Email: research-ethics@uwc.ac.za
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Appendix B (1)

UNIVERSITY OF THE WESTERN CAPE

Private Bag X 17, Bellville 7535, South Africa

Tel: +27 21- 021 959 2849 Fax: 27 21-959 2845

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CONSENT FORM (English)

The research project focuses on kinship foster care – perceptions and experiences of grandparents regarding fostering their teenage offspring

The study has been described to me in language that I understand. My questions about the study have been answered. I understand what my participation will involve, and I agree to participate of my own choice and free will. I understand that my identity will not be disclosed to anyone by the researcher and my information will be handled confidentially. I understand that I may withdraw from the study at any time without giving a reason and without fear of negative consequences or loss of benefits.

I agree to be audio taped.	Yes	No

Participant's name   :   ……………………………………………

Participant's signature   :   ……………………………….

Date   :   ………………………………….....

Appendix B (2)

UNIVERSITY OF THE WESTERN CAPE

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FOROMO YA GO FA TUMELELO (Sepedi)

Protjeke ye ya dinyakišišo elebeletše lehlakore la meloko yeo e hlokometšego bana ba ditšhiwana ka semolao: Maikutlo le maitemogelo a bo Makgolo mabapi le go hlokomela ditlogolo tša mengwaga ye lesome tharo goiša go ye lesome senyane.

Ke hlaloseditšwe sengwala se ka leleme leo ke le kwišišago. Dipotšišo ka moka tšeo ke bego ke ena le tšona mabapi le sengwalwa se di arabilwe. Ke kwišiša seo karolo yaka ese amago le gona le gore kea dumela gore ke kgetho yaka go tšea karolo ebile ke ka ntle le kgapeletšo. Kea kwišiša gore monyakišiši a ka se botše motho boitsibiši bjaka ebile ditaba tšeo ke di boletšego di tla swarwa jwalo ka sephiri. Ke ya dumela gore ge nka nyaka go tlogela go tšea karolo gosengwalwana se nka lesa neng kapa neng le go fa lebaka, ntle le letšhogo la ditlamorago tše dimpe goba go loba meputso.

Ke dumela go gatišwa mantšu	Ee	Aowa

Leina la motšea karolo :……………………………………………

Mosaeno wa motšea karolo : ……………………………….

Letšatšikgwedi : ………………………………………...

Appendix C (1)

UNSTRUCTURED INTERVIEW GUIDE FOR FOSTER GRANDPARENTS (English)

Title of the study: **Kinship foster care – perceptions and experiences of grandparents regarding fostering their teenage offspring**

1. What are your perceptions and experiences of fostering your teenage offspring?

    Themes to be explored (based on family system theory):

    Family context
    Family strengths
    Boundaries and boundary maintenance
    Family power structure
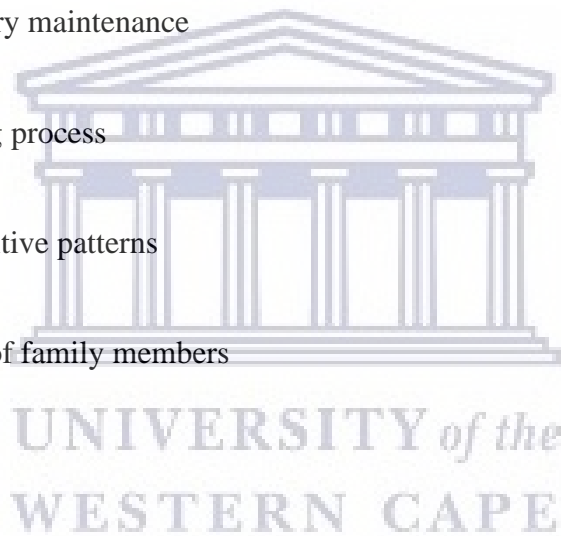   Family decision-making process
    Family goals
    Family myths and cognitive patterns
    Family roles
    Communication styles of family members
    Family life cycle

Appendix C (2)

TLHAHLO YA POLEDIŠANO LE MAKGOLO WO A HLOKOMETŠEGO NGWANA

WA TŠHIWANA SE MMUŠO (Sepedi)

Hlogo ya nyakišišo: **Meloko yeo e hlokometšego bana ba ditšhiwana ka semolao: Maikutlo le maitemogelo a bo Makgolo mabapi le go hlokomela ditlogolo tša mengwaga ye lesome tharo goiša go ye lesome senyane**.

1. Naa maikutlo le maitemogelo a lena mabapi le go hlokomeleng setlogolo sa lena sa tšhiwana sa mengwaga ye lesome tharo goiša go ye lesome senyane ke a mohuta mang?

Merero yeo e tlogo thlahlojwa (go lebantšwe family system theory):

Go ya ka fao malapa a lego ka gona

Maatla a lelapa

Magomo le hlokomelo ya magomo

Sebopego sa maatla a lelapa

Tshipidišo ya mokgwa wa go tšea sephetho sa lapa

Diphegelelo tša lelapa

Dinonwane tša lelapa le mekgwanakgwana ya tšhumišo ya go nagana

Dikarolo tša lelapa

Mekgwa ya poledišano ya maloko a ka lapeng

Bophelo ba bophelo ba lelapa

Appendix D

OFFICE OF THE DIRECTOR: RESEARCH
RESEARCH AND INNOVATION DIVISION

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UNIVERSITY *of the*
WESTERN CAPE

07 October 2019

Mr FL Manthosi
Social Work
Faculty of Community and Health Sciences

Ethics Reference Number: HS19/8/2

Project Title: Kinship foster care perceptions and experiences of grandparents regarding fostering their teenage offspring.

Approval Period: 19 September 2019 – 19 September 2020

I hereby certify that the Humanities and Social Science Research Ethics Committee of the University of the Western Cape approved the methodology and ethics of the above mentioned research project.

Any amendments, extension or other modifications to the protocol must be submitted to the Ethics Committee for approval.

Please remember to submit a progress report in good time for annual renewal.

The Committee must be informed of any serious adverse event and/or termination of the study.

Ms Patricia Josias
Research Ethics Committee Officer
University of the Western Cape

HSSREC REGISTRATION NUMBER - 130416-049

FROM HOPE TO ACTION THROUGH KNOWLEDGE.

Appendix E

LIMPOPO
PROVINCIAL GOVERNMENT
REPUBLIC OF SOUTH AFRICA

DEPARTMENT OF

SOCIAL DEVELOPMENT

TO: PARTICIPANTS

APPROVAL TO USE DEPARTMENT OF SOCIAL DEVELOPMENT'S FACILITIES

This certifies that **Mr. Manthosi Frans** has been granted approval. His proposal was evaluated and approved by Research and Ethics committees which sit at Office of the Premier, *titled: Kinship foster care - perceptions and experiences of grandparents regarding fostering their teenage offspring".*

The study will be useful to DSD in Limpopo to plan and implement social work interventions and policies for kinship care where grandparents are fostering their teenage offspring. The study may be useful in other provinces with the similar characteristics as clients in the Limpopo Province.

TARGETED POPULATION

The study will require 10 participants who are grandparents fostering their teenage offspring in Makhuduthamaga municipality, Sekhukhune district in Limpopo province in South Africa.

In view of the above, this letter grants **Mr. Manthosi Frans** permission to use the Department's facilities **in Sekhukhune District.**

Dr. Mokobane R.

D.Director: Statistics and Research

26/08/2020

Date

Facility Letter Manthosi 26 Aug 2020

Appendix F

TRANSLATING • WRITING • EDITING • PROOFREADING

Anna-Mart Bonthuys (D Litt et Phil – SA)

Independent Contractor

Email: annamart.bonthuys@gmail.com

Website: www.annamartbonthuys.co.za

Always in excellence mode

DECLARATION: EDITING

TO WHOM IT MAY CONCERN

I, the undersigned Dr Anna-Mart Bonthuys, hereby declare that I am a fully qualified and experienced language practitioner, and that I have thoroughly edited and proofread the masters dissertation of Frans Lesetja Manthosi, titled *"Kinship foster care – perceptions and experiences of grandparents regarding fostering their teenage offspring"* (UP), to the best of my abilities.

Dr Anna-Mart Bonthuys   Date: 28 September 2020