Identifying risk and protective factors in multi-problem poor families living in Cape Town

A thesis in partial fulfilment of the requirements for

the degree of

Master of Social Work

at

North-West University

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15 November 2011

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DECLARATION

I, Jacqueline Hope, declare that the work contained in this dissertation is my own, original work, and that all the sources I have used or quoted have been indicated and acknowledged by means of references. I also declare that I have not previously submitted this dissertation or any part of it to any university in order to obtain a degree.

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ACKNOWLEDGEMENTS

My sincerest gratitude goes to the following:

- To God – all the glory and praise be to Him for the work undertaken by his servant.

- To my family – this research would not have been possible without your unwavering support.

- To my research supervisor – thank you for your unfailing and knowledgeable guidance throughout this project.

- To all the participants in this research project – by taking part in this study, you have helped to expand the body of knowledge on Social Work and to raise hope that we can improve the lives of others.
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FOREWORD

This dissertation is presented in article format in accordance with the guidelines as set out in the Manual for Postgraduate Studies – 2008 of the North-West University. The technical editing was done within the guidelines and requirements as set out in Chapter 2 of the manual.

The article was edited by Amanda Matthee, professional copywriter, translator and editor.

The article will be submitted to an academic journal for possible publication. Author guidelines for submission to the journal, Maatskaplike Werk / Social Work were followed.
SUMMARY

From the researcher’s personal work experience it was found that there appeared to be a cycle of poverty and welfare dependency in multi-problem poor families. This research was undertaken as a means to lay foundational work in identifying risk and protective factors in multi-problem poor families living in Cape Town. A qualitative research approach was utilised and interviews were conducted with participants that met the selection criteria. The objectives of the research were to gather data in the form of deep, descriptive narrative accounts of multi-problem families’ chronosystems and current life issues, with a focus on the life challenges and difficulties that put the family at risk.

The data was collected by means of interviews utilising a semi-structured interview schedule as well as tools such as genograms, ecomaps, and life lines (see Addendum 4). Analysed data indicated themes of intergenerational risk factors that included substance abuse, domestic violence, teenage pregnancy and early school dropout. It was also found that within the current generation, absent parents was a major risk factor for children. Protective factors and variables that promoted resilience in families were also explored. It was found that religious beliefs, community support systems and personal resources were the major protective factors in these families.

The research findings led to the identification of a number of early-intervention projects and programmes that could be implemented to address the identified risk factors in multi-problem poor families. These interventions include school literacy and support programmes, improved sex education in schools and community support forums.
OPSOMMING

Die navorser het deur persoonlike werkservaring waargeneem dat daar 'n siklus van armoede en afhanklikheid van welsynsdienste by multi-probleem arm gesinnevoorkom. Hierdie navorsing het ten doel gehad om fundamentele werk te die identifisering van risiko en bufferfaktore in multi-probleem arm gesinne wat in Kaapstad woon. 'n Kwalitatiewe navorsingsbenadering is gevolg en onderhoude is gevoer met die deelnemers wat voldoen het aan insluitingskriteria. Die doelwitte van die navorsing was om data in te samel in die vorm van diep, beskrywende narratiewe weergawes van die multi-probleem gesinse se chronosisteme en huidige lewenskwessies, met 'n fokus op die lewensuitdagings en probleme wat die gesin kwesbaar maak.

Die data is ingesamel deur middel van onderhoude met behulp van 'n semi-gestruktureerde onderhoudskedule, sowel as hulpmiddels soos genogramme, eko-kaarte en lewenslyne. Sien Addendum 4). Geanaliseerde data dui temas van intergenerasie risiko faktore aan wat dwelmmisbruik, huishoudelike geweld, tienerwangerskappe en vroeë skoolverlaters insluit. Daar is ook bevind dat afwesige ouers tans 'n groot risiko faktor is vir die hedendaagse kind. Bufferfaktore en veranderlikes wat veerkrag in gesinine bevorder is ook ondersoek. Daar is gevind dat godsdienstige oortuigings, ondersteuning van die gemeenskap en persoonlike hulpbronne van groot belang is as bufferfaktore in hierdie gesinne.

Die navorsingsbevindinge het gelei tot die identifisering van 'n aantal vroeë intervensie projekte en programme wat geïmplementeer kan word om die geïdentifiseerde risiko faktore by multi-probleem arm gesinne aan te spreek. Hierdie programme sluit skool geletterdheid en ondersteuning programme, verbeterde seksvoorligting in skole en gemeenskapsforums in.
SECTION A: ORIENTATION TO THE RESEARCH

1. TITLE
Identifying risk and protective factors in multi-problem poor families living in Cape Town

KEYWORDS: risk factors, protective factors, multi-problem poor families

2. ORIENTATION AND PROBLEM STATEMENT
For many decades, multi-problem poor families have been a hard-to-reach population. In the past, research studies on this phenomenon have been conducted by Sousa, Rebeiro and Rodrigues (2007), Sousa (2005), Sharlin and Sharmia (2000), Bleachman (1991), and Jordan (1978). However, the challenges in terms of assisting these families to break the cycles of poverty and deprivation persist.

The researcher is employed at a welfare organisation in the Cape Peninsula with a case load of over 300 clients presenting with multiple problems. About 30 of these multi-problem families have been receiving social work services over a period of time that spans at least two generations. Sousa (2005: 164, 165) recognises this issue by stating that multi-problem families are characterised by “the presence of a chain of severe problems affecting an indeterminate number of members”.

This research focuses on multi-problem poor families as the element of poverty is present in the 30 cases referred to above. Sousa (2007: 277) views multi-problem poor families as vulnerable client groups “since they often face multiple and severe long term problems in a context of deprived economic resources”. Multi-problem poor families lack resources on object, condition, personal and energy levels (as discussed by Hobfoll, 1998). Oosthuizen and Nieuwoudt (2002) provide a profile of poverty in the Western Cape based on the 1995 Census, which indicates that almost 30% of individuals in the Western Cape live below the poverty line in “absolute poverty” (Serumaga-Zake, Kotze & Madsen, 2005: 143). However, Sousa, Rebeiro and Rodrigues (2007: 54) and Sousa (2005: 165) point out that not all multi-problem families are poor, but that multi-problem poor families are more visible.
The researcher is concerned that these multi-problem poor families seem to be stuck and seemingly find it difficult to break out of the cycle of welfare dependency, deprivation, multiple problems and poverty. Discussions with colleagues (Meintjes, Smit & van Greunen, 2011) confirmed that volumes of files in social worker case loads point out that multi-problem poor families seem to be experiencing the phenomenon of a repetitive cycle whereby generation after generation continue with the battle of social issues: unemployment, substance abuse, domestic violence, child abuse and neglect, and poverty-stricken living circumstances. Questions such as the following arise: Why is it that early intervention programmes and statutory intervention with these families seem to be ineffective? Why do social problems appear to be re-lived through each new generation of these families? Sousa, Ribeiro and Rodriques (2007: 54) acknowledge that multi-problem poor families are “amongst the most needy and difficult populations to work with”.

As far back as 1978, Jordan (1978: 3) talked about this issue of the cycle of poverty moving through generations and states that: “research indicated that ‘problem families’ (distinguishable by their dependence on the welfare system), give rise to children who form a new generation of ‘problem families’”. Jordan (1978: 120) further states that “parents, who were themselves deprived in one or more ways in childhood, become in turn parents of another generation of deprived children”. Sousa (2007: 277-278) recognises that the longer families remain in such circumstances, the greater psychological “wear and tear” they suffer.

The concept of what constitutes a family and the types of families that will form part of this research, namely “multi-problem” poor families, need clarification. A family is a natural social system embedded in society that has its own set of roles, rules, communication structures and ways of problem-solving (Goldenberg & Goldenberg, 2004: 4-5). Goldenberg and Goldenberg (2004: 4-5) state that families have to adapt to changes in the needs and demands of society in order to function successfully. The concept of a continued cycle of poverty and multiple problems suggests that some families have not been able to adapt and as such are not functioning effectively.

The terminology for “multi-problem” families has changed over the years from “disorganised”, “disengaged, isolated, excluded, unsocial families” and “dysfunctional and chaotic” to “pathological” families (Sousa, Ribeiro & Rodriques, 2007: 53; Reder, 1986: 139-142). Various authors (Sousa, Ribeiro & Rodriques, 2007: 54; Sousa, 2005: 164-165;
Bleachman, 1991: 220; Hoffman, 1981) define multi-problem families as those families that present with severe and multiple psychosocial problems for more than a year, and who receive help from a variety of social agencies. Various authors (Sousa, Ribeiro & Rodriques 2007: 54; Sharlin & Shamia, 2000: 5; Bleachman, 1991: 220) outline the characteristics that these multi-problem families present with: unemployment, incarceration, drug or alcohol addiction, child antisocial behaviour and resistance to intervention.

The dynamics of multi-problem families and the intergenerational transmission of deprivation has been described in various theories and models which include the family life cycle stage model of Duvall and Hill (in Goldenberg & Goldenberg, 2004: 29-32), and Bowen’s transgenerational model (in Goldenberg & Goldenberg, 2004: 182-196). Bowen’s model presumes that dysfunction within the family presents itself as “unresolved issues of the family of origin (earlier generations) that show up in symptomatic behaviour in later generations” (Goldenberg & Goldenberg, 2004: 182-196). Sharlin and Sharmia (2000: 5, 12) state that the extreme distress of multi-problem families is transmitted through time and generations. Clearly, multi-problem poor families find it difficult to break the cycle of poverty, welfare dependency and deprivation.

The researcher is also concerned about the input directed at the 30 multi-problem poor families in her caseload which appears to be ineffective in helping these families to break out of the cycles mentioned above. Welfare organisations typically have limited resources and would ideally work with families with brief interventions which lead to adequate problem and need resolution. Multi-problem poor families have been using scarce agency resources for many years without positive outcomes. Interventions have typically focused on the welfare providing services in response to a family’s crisis, as opposed to strengthening the family from within to deal with difficult situations. The researcher takes heed of the observations of Sousa, Ribeiro and Rodrigues (2007: 53) that literature on multi-problem poor families focuses mainly on deficits, and discounts the strengths of these families (Sousa, Ribeiro & Rodrigues, 2007: 53-66). It is also this understanding of multi-problem families as having a deficiency (problems) that directs interventions based on deficits (problem-solving approach) as opposed to directing attention towards their strengths and resources (Minuchen, Colapinto & Minuchen, 2007, in Sousa, Ribeiro & Rodrigues, 2007: 55). This research is
interested in identifying family strengths and resources that assist families to cope with multiple problems.

Goldenberg and Goldenberg (2004: 8) recognise that it is the family’s narratives (stories) that shed light on their interactive patterns. The analysis of the chronosystem of these multi-problem families may be able to provide answers as to why these families are stuck in the cycle of poverty, welfare dependency and deprivation with multiple social problems. Bronfenbrenner’s (in Gauvain & Cole, 1993: 37) delineation of the term chronosystem is therefore relevant (Bronfenbrenner, 1994; Bronfenbrenner, 1989).

According to Härkönen (2007: 13), the chronosystem is the time change between systems; the pattern of events, transitions, change, history and development that occurs over time within these systems (for example, divorce or the death of a parent). The focus of this study will be on identifying risk and protective factors in the chronosystem and current life issues of multi-problem poor families. This shall be done by exploring the deep descriptions (narrative accounts) by family members of their family history and current life issues. The researcher is also interested in exceptions, for example where family members have coped and managed to initiate a break from the cycles of deprivation and welfare dependency. This is viewed as foundational work to guide interventions in practice.

The chronosystem indicates that the participating families of this research are currently living in post-apartheid South Africa. During the apartheid regime between 1948 and 1994, governmental laws caused black South African’s to be marginalised, excluded, and isolated (Morkel, 2011: 486-489). Following the release of Nelson Mandela in 1994, South Africa has attempted to put measures in place to ratify past mistakes. While many efforts have lead to the successful reintegration of society, South Africa still remains a country plagued with crime, poverty, unemployment and other social problems (Morkel, 2011: 486-489). This research is focused on identifying risk factors within multi-problem families, and as such, needs to take cognisance of the past apartheid regime and the role that it has with poverty and inequality in generating cycles of deprivation for multi-problem poor families.

In view of the above, the following research question needs to be answered: **What are the risk and protective factors in multi-problem poor families living in Cape Town?**
3. AIM AND OBJECTIVES

3.1 General aim
Fouché and De Vos (2011) indicate that the aim of a research study refers to what a researcher plans to do. The aim of this research is to conduct an explorative study with multi-problem poor families to identify risk and protective factors in their chronosystem and current life situations.

3.2 Objectives
Fouché and De Vos (2011: 94) define objectives as the practical steps taken to achieve the aim of the research. The objectives of this research are to:

- To investigate the chronosystems of multi-problem poor families living in Cape Town.
- To identify risk factors of multi-problem poor families that perpetuate the cycle of deprivation and poverty.
- To identify protective factors that assist multi-problem families to break free of the cycle of deprivation and poverty.
- To make recommendations on how to better assist multi-problem poor families.

4. CENTRAL THEORETICAL STATEMENT
Life narratives of multi-problem poor families, with a focus on the chronosystem and current life issues, may provide insights into the perpetuating cycle of poverty and deprivation by identifying risk and protective variables. Such insight can guide intervention to this hard-to-reach and vulnerable population.

5. SCIENTIFIC PARADIGM
According to Fouché and De Vos (2011: 40), a paradigm is defined as a model that consists of assumptions for interpreting data. The paradigm refers to the views and theoretical models that are used to understand and make sense of data collected.

Underlying paradigms for this research are Bronfenbrenner’s systems theory (Bronfenbrenner, 1989), Gestalt field theory (Yontef, 1993), Conservation of Resources
theory (COR) as described by Hobfoll (Hobfoll, 1998), and family systems theory (Goldenberg & Goldenberg, 2004).

5.1 Bronfenbrenner’s systems theory

Urie Bronfenbrenner proposes an ecological (later renamed as the bio-ecological) systems theory whereby development is viewed as the result of interactions between the individual and the environment, acknowledging that development is a changing process that takes place over time (Härkönen, 2007: 4). It is a person-environment-interaction model of human development (Härkönen, 2007: 6).

‘Urie Bronfenbrenner argues that in order to understand human development, one must consider the entire ecological system in which one grows. This system is composed of five socially organised subsystems that help support and guide human growth. They range from microsystem, which refers to the relationship between a developing person and the immediate environments such as school and family, to the macrosystem, which refers to institutional patterns of culture, such as the economy, customs, and bodies of knowledge’ (Gauvain & Cole, 1993: 37).

Gauvain and Cole (1993) further their exploration of Bronfenbrenner’s theory by explaining its reconceptualisation of the environment. They describe this reconceptualisation as viewing the environment as made up of a number of different structures that exist within each other, much like a set of Russian dolls. These structures are referred to as the microsystem, mezosystem, exosystem, macrosystem and chronosystem.

The microsystem refers to schools, family, peers and work. It refers to the ‘pattern of activities, social roles, and interpersonal relations experienced by the developing person in a given face to face setting with particular physical, social, and symbolic features that invite, permit or inhibit engagement in sustained, progressively more complex interaction with, and activity in, the immediate environment’ (Härkönen, 2007: 7; Gauvain & Cole, 1993: 39). Härkönen’s article (2007) further acknowledges Bronfenbrenner’s 2002 article which places belief systems within this microsystem and macrosystem.
The mesosystem refers to the connections, links and relationships between elements within the microsystem. For example, the relations or connections between school and home, or between the child’s teacher and parent (Härkönen, 2002: 10; and Gauvain & Cole, 1993: 40).

The exosystem refers to those links and interactions taking place between elements that are not directly linked to the individual but that indirectly influence the individual. For a child, this could be the interaction between the parents’ work and the home (Härkönen, 2002: 11; Gauvain & Cole, 1993: 40; Bronfenbrenner, 1989: 272). The exosystem may also include the neighbourhood or community.

Finally, the macrosystem refers to ‘change or consistency over time in the individual and their environment; changes in family structure, socioeconomic status, employment, and place of residence’ (Gauvain & Cole, 1993: 40). It is the ‘over arching pattern of the other systems with reference to belief systems, resources, hazards, life styles and options, and interchange between these systems’ (Härkönen, 2002: 12).

The chronosystem was added to the model at a later stage and is described by Härkönen (2002: 13) as the time change between the other systems; the pattern of events, transitions, change, history and development that occurs over time within these systems (for example, divorce or death of a parent). It also includes the roles and rules that influence development (Härkönen, 2002: 13).

The empirical investigation undertaken in this research involves participants providing a narrative account of their chronosystem or “life story” as it has occurred across each generation. The interactions between each generation (family changes, roles and relationships, family dynamics) are thus explored as the family system progresses through each life stage. In this way, the risk factors from the past that have hindered a family unit and its members are more easily identified, as well as the protective factors that existed to assist the family in coping with the said risk factors and challenges.

5.2 Field theory
Bronfenbrenner’s systems theory is linked to Gestalt field theory in its understanding of the environment exerting an influence on the individual and the family. Yontef (1993: 297)
referred to the environment or “field” as “a totality of influencing forces that together form a unified interactive whole”. The field is everything that exists: ecology, climate, culture, family, education, work and religion. The field is a whole, made up of parts that are in a relationship to one another, all mutually influencing and affecting the other parts. Similarly to systems theory, field theory does not view the individual as a single entity but rather as a part within a larger system where all the parts (individual, family, school, work, religion, community, etc.) are interacting with one another and exert an influence on one another. Like a set of stacked dominoes, no one part can act without affecting the other systems.

With respect to multi-problem families in field theory terms, the individual is not viewed separately from issues or problems. The individual is part of a family unit, which is part of an extended family, existing within a community. The individual and family cannot be understood in isolation, and in order to understand individuals and their current issues, the relationships and interactions of that individual and family within the large systems or field must be taken into consideration.

As such, the empirical investigation undertakes interviews with family members within the theoretical paradigm of field theory, understanding that the risk factors and protective factors that present themselves will be a part of the family’s field.

5.3 Conservation of Resources (COR)
This research is focused on multi-problem families. Any problem causes a certain level of stress and anxiety for the individual or family trying to manage and cope with it. However, it may be that multi-problem poor families are at greater risk in trying to manage these stressful situations due to their limited resources or risk factors.

Hobfoll (1998) says that those circumstances that prevent individuals from being able to achieve the goals which have been deemed necessary for survival are stressful. Stressful circumstances are those that “remove or threaten obtainment and maintenance of survival of the self, family, tribe, or the knowledge, tools, social structures, and fetish objects (money, diamonds), that either are valued in their own right, or that may be exchanged or utilized to obtain valued objects or states” (Hobfoll, 1998: 28).
According to the Conservation of Resource (COR) theory, “stress is predicted to occur as a result of circumstances that represent a threat” or loss of resources (Hobfoll, 1998: 45-46). Resources are inextricably linked to survival and include object resources (i.e., shelter and food), condition resources (i.e., family membership and employment), personal resources (i.e., self-esteem, social skills and job skills) and energy resources (i.e., money, credit, knowledge). Resources are further divided into primary resources which include food and shelter; secondary resources which refer to a sense of mastery, health insurance and transportation (“tools” to obtain or protect resources); and tertiary resources which include social status, a luxury home and status title (Hobfoll, 1998: 54).

Sharlin and Sharmia (2000: 5 & 12) state that extreme distress of multi-problem families is transmitted through time and generations. It is already clear that multi-problem poor families find it difficult to break the cycle of poverty, welfare dependency and deprivation. This research explored the families resources as they perceive what is available, what has been lost (due to stress, poverty, etc.), and what resources have been gained throughout the chronosystem.

5.4 Family systems theory
The concept of what constitutes a family and the types of families that formed part of this research, namely “multi-problem” poor families, need clarification. A family is a natural social system that has its own set of roles, rules, communication structures and ways of problem-solving that is embedded in society and community which moulds the family over time (Goldenberg & Goldenberg, 2004: 4-5). Goldenberg and Goldenberg (2004: 4-5) state that families need to adapt to changes in the needs and demands of society in order to function successfully. The concept of a continued cycle of poverty and social issues being moved from generation to generation suggests in this light that some families have not been able to adapt and adjust, and as such are not functioning effectively.

The family life cycle stage model of Duvall and Hill is significantly related to the above-mentioned theories (in Goldenberg & Goldenberg, 2004: 29-32). The model proposes that families move through a sequence of developmental life stages. The model also recognises that multiple stressors negatively affect the family’s ability to navigate through the developmental stages, thus affecting the family intergenerationally.
Bowen (1978) proposes the transgenerational model, which is again based on the concepts of systems and field theory. Bowen’s theory recognises the intergenerational transmission of a family’s patterns of behaviour, morals, beliefs and ways of interacting. The model presumes that dysfunction within the family presents itself as “unresolved issues of the family of origin (earlier generations), which show up in symptomatic behaviour in later generations” (in Goldenberg & Goldenberg, 2004: 182-196).

6. DESCRIPTION OF CONCEPTS

6.1 Risk factors
Within the context of this research, risk factors refer to those elements within the family system that cause an individual within the family, and other family members, to become destabilised. Risk factors are those factors that cause stress within the family unit and bring about a sense of chaos and desperate need for support.

6.2 Protective factors
Protective factors are those identified factors that assist a family in coping with risk factors and with life in general. Protective factors are the supportive mechanisms that individuals and the family system utilise in order to cope and manage stressful situations.

6.3 Multi-problem families
While the terminology for “multi-problem” poor families has changed over the years (Sousa, Ribeiro & Rodriques, 2007: 53; Reder, 1986: 139-142), Sousa (2005: 164 & 165) and Hoffman’s (1981) description of multi-problem poor families seems the most holistic in describing them as those families with severe and multiple problems who received help from a variety of social agencies. Sousa, Ribeiro and Rodriques (2007: 54) review the concept of multi-problem poor families and the various other terms used to describe such families since 1962. These terms have included disengaged, isolated, excluded and unsocial families, referring to characteristics of such families. Sousa, Ribeiro and Rodriques (2007: 54) also refer to more recent terminology which incorporates family processes, like multi-stressed or multi-crisis families. In their terminology, these authors also refer to the effects of welfare
involvement by calling such families multi-assisted families, which also imply fragmented and multiple services to such families.

Characteristics of multi-problem families are outlined by various authors (Sousa, Ribeiro & Rodriques 2007: 54; Bleachman, 1991: 220; in Sharlin & Shamia, 2000: 5) as those families that present with:

- Poverty-level income, chronic unemployment or extreme poverty with economic deprivation and grossly inadequate housing
- Marital dissatisfaction and failure in the functioning of the mother, father and siblings
- Depression or other DSM disorders, incarceration, drug or alcohol addiction and child antisocial behaviour, and/or
- Resistance to intervention, inadequate access to resources, and handicapping attitudes (alienation from community, hostility, suspicion of authority).

Families selected for participation in this research are those which have presented with multiple problems across generations.

7. METHOD OF INVESTIGATION

7.1 Literature review
A literature review refers to a whole body of scholarship by various authors as presented in books and articles including definitions, theories and models, and existing data and research (Mouton, 2001: 86). Literature was gathered from various books and journal articles on the relevant topics, together with a presentation of data collected from families. Databases such as EBSCOhost provide 23 journal articles on multi-problem poor families, of which 10 relevant articles are cited. The literature study focused on:

- The family system and an understanding of multi-problem poor families (Sousa, 2005; Sousa, Ribeiro & Rodriques, 2007; Sharlin & Shamia, 2000).
- Different theoretical foundations for understanding families and their development (Goldenberg & Goldenberg, 2004).
- The chronosystem, systems theory and field theory (Härikönen, 2007; Paquette, 2001; Gauvain & Cole, 1993; Yontef, 1993; Bronfenbrenner, 1994).
• An exploration of stressors (Hobfoll, 1998) (poverty, social issues, etc) within the family system and their impact on the family system throughout generations.
• Conservation of Resources theory (Hobfoll, 1998) and the impact on the family system of resource gain and loss.

7.2 Empirical investigation

7.2.1 Design

Mouton (2001) states that a research design is the plan of how the research will be conducted. Terre Blanche and Durrheim (2002: 29) explain that a research design acts as a link between the “research question and the actual implementation of the research”. The proposed research adopted a qualitative research design to understanding and describing phenomena from the participants’ point of view (Fouché & Delport, 2011: 64-65; Leedy & Ormrod, 2005: 94-97). This approach was used for this research as it explores the narrative descriptions from family members of their chronosystem and current life situations in order to analyse risk and protective variables.

There are three underlying paradigms within qualitative research: positivist, interpretative and critical. This research adopts the interpretivist paradigm as it focuses on people’s subjective experiences, and how they interact and construct their social world (Maree, 2007: 4). The interpretive paradigm implies that in order to gain an understanding of people, they need to be placed within their social contexts. Maree (2007) further clarifies the purpose of the interpretivist approach by explaining that this paradigm is based on the assumption that by exploring the richness, depth and complexity of the phenomenon, one can begin to understand the meanings people give to their experiences and phenomenon within their social world.

Applied goals are targeted at solving specific problems and aiding professionals in accomplishing tasks (Fouché & De Vos, 2011: 95; De Vos et al., 2005: 105). This research adopted applied goals in that it aimed at solving the problems experienced in social work practice of multi-problem poor families’ cycles of deprivation and poverty. There are also elements of basic goals which are utilised when there is an aim to advance human knowledge and understanding by supporting or refuting existing theories (Terre Blanche & Durrheim,
The basic goals of this research are a contribution to knowledge and an understanding of multi-problem poor families living in Cape Town.

The objectives of the research are exploratory (Fouché & De Vos, 2011: 95) in that it has been conducted to gain insight into the phenomenon of multi-problem poor families being stuck in the cycle of deprivation. Terre Blanche and Durrheim (2002: 39) state that exploratory studies are used to “investigate unknown areas of research by using an open and flexible approach”. The research also has descriptive objectives (Fouché & De Vos, 2011: 96) as it seeks to uncover this phenomenon in terms of the deeper meanings of multi-problem families.

This research utilised the case study design which is described by Fouché and Schurink (2011) and Nieuwenhuis (2007: 75-76) as the researcher becoming engaged in the activities of the participants in order to “gain intimate familiarity with their social worlds and to look for patterns in the participants’ lives” (Fouché & Schurink, 2011: 320-321). Mouton (2001: 149) further states that case studies provide an in-depth description of a small number of participants, and that case studies are used to answer descriptive and exploratory questions. Case studies were used as the researcher was interested in the subjective meaning the participants gave to their experiences of the cycle of poverty, deprivation and welfare dependency.

7.2.2 Participants

Sampling is defined by Strydom and Delport (2011: 390) and Durrheim (2002: 44) as the means of taking any portion of a population or universe as representative of that population or universe. For the purpose of this research, the universe refers to all multi-problem poor families living in the Western Cape that have a generational history of social issues and welfare dependency. The population within the universe was the selected families who were living in the Maitland, Ysterplaat and Rugby areas of the Western Cape, who were also involved with social service agencies due to their current life issues and problems, and who have been involved with social services for at least three generations.

A concern and limitation of this type of sampling is noted by Durrheim (2002: 44) regarding sampling’s accuracy as being representative of the total population. The investigation in this
study is not aimed at yielding results for the purpose of generalisation, but to obtain rich data which will shed light on the mentioned variables pertaining to the particular participants.

This study uses purposive sampling methods (Strydom, 2011: 232). Criteria for inclusion in the study are the following:

- Families living in the Cape Peninsula area (Maitland, Ysterplaat, Rugby areas)
- Families who are regarded to be living in poverty and are currently dealing with social issues
- Families who are currently involved with social services due to present social issues
- Families who have been involved with social services in the past with previous generations and their social issues
- Families who have been struggling with social issues for at least two or more generations
- Families refer to a group of related individuals who are living together and who are at any stage within the family life cycle (babies, children, youth, adults, grandparents, single-parent households, married, divorced, etc).

The researcher planned on interviewing participants who met the above-mentioned selection criteria. It was assumed that the grandparents, parents and children of the families would all participate in a “family interview” for the research. However, the empirical investigation was only done with the grandparents of each family. It was found that the parents are part of a missing generation as they were out of the house and their whereabouts were unknown. Most of the children of the families had all been statutorily removed and placed into alternative care in foster care or children’s homes. As such, the main family members available for the research were the grandparents.

7.2.3 Method of data collection

Qualitative research makes use of unique methods and procedures to collect data. Interviews were conducted to gather data as they allow for the individual meanings and understandings of each individual to be brought to the fore (Greef, 2011: 342). The interviews were semi-structured which, according to Greef (2011: 351-352), allow the researcher to explore the participants’ views, opinions, attitudes and beliefs about certain events and phenomena.
The interviews include field notes of observations made by the researcher during the interviews (facial expressions, emotions observed during interview, etc.). The interviews were recorded by means of a tape recorder, after permission was obtained from the participants. Strydom and Delport (2011: 379) suggest that official documents may also be used to gather data. Participants were chosen for participation in this research based on criteria of being involved with social services. As such, the participants’ case files were also accessed as a means by which to gather data. This was only possible after the written permission of the participants, as well as the social services agency, had been obtained.

7.2.4 Data analysis
Tape recordings of interviews were transcribed and analysed in conjunction with field notes and document analyses to further assist data analysis. The researcher utilised the data analysis method as proposed by Schurink, Fouché and De Vos (2011: 404), and thematic analysis as described by Whittaker (2009: 91-97). File content was analysed according to guidelines for documentary analysis as set out by Whittaker (2009: 75-87). The following steps were taken with respect to data analysis:

- Interviews were conducted at participants’ homes
- Permission was obtained from participants for the interview to be recorded by means of a tape recorder
- The tape recorder was used and the interviews were typed verbatim
- The verbatim-transcribed interviews were then coded according to themes and categories that were common in all the interviews
- The themes and categories identified were analysed according to their correlation with literature.

7.2.5 Ethics
Ethical considerations were guided by the researcher’s profession as a social worker who adheres to the South African Council for Social Service Professions’ code of ethics. Ethical considerations as set out by Whittaker (2009: 110) and Welman, Kruger and Mitchell (2005: 11) were a core feature from the onset of the research in terms of the research process, selection of participants, interviewing and data analysis. Aspects such as no harm, informed consent and confidentiality were crucial.
The onus rests on the researcher to ensure that no physical or emotional harm comes to the participants during or after the research. Participants needed to disclose intimate details of their past and during the interviews it was found that some of the participants became emotional. The researcher explained to the participants what the research was about, striving to do it in a sensitive manner to prevent causing negative feelings of guilt, shame or degradation to the participants. The researcher was aware of the participants’ emotional responsiveness during interviews as they provided detailed information about their personal histories, and the researcher responded empathetically and respectfully towards such situations. Following each interview, participants were given the opportunity to go for a follow-up session as well as a referral for further emotional assistance by way of therapy, should the participants feel this was necessary.

The information given by the participants was handled as confidential. The researcher ensured that the participants’ details were kept anonymous. As the participants are already clients of social services, their involvement in the research had to remain separate from their current cases being dealt with by social services. Added to this was the need to obtain the participants’ permission to use information from their case files at the welfare agency that they are involved with. The research was conducted in the Maitland, Ysterplaat and Rugby communities. This information about the participants’ specific area of abode will not be mentioned in the research article as a means of protecting the anonymity of the research participants and avoiding any possible stigmatisation of the community.

The participants have a right to see the results of the research. The researcher invited the participants to a feedback meeting after the research was completed. At the feedback meeting, the results of the research were verbally explained and graphically demonstrated to the participants in individual sessions.

The Ethics Committee of North-West University approved the research which ethically deals with the concerns of no harm, informed consent and confidentiality.

8. LIMITATIONS OF THE RESEARCH

The following limitations of the research can be identified:
• The researcher was both researcher and current social worker for some of the participants within the study. This may have inhibited the responses of those participants.

• Only a few of the selected family members who met the selection criteria chosen for participation in the research were willing to participate in the research; others reported that they could not participate due to overwhelming problems that they were dealing with at the time.

• Only seven participants were involved in this research. However, this research only has limited scope, and it was found that after the second interview, data saturation started to occur.

• The initial intention was to interview as many family members as possible in order to gain rich data on the families’ history. However, only the grandparents were interviewed. This was because there is a missing generation of parents, and most of the children in the current generation have been statutorily removed from their families’ homes. It was found that the grandparents were informative narrators of the family histories.

9. REPORT LAYOUT

Section A: Orientation to the research
The first section of this report provides an introduction to the study. The orientation and problem statement, aims and objectives, scientific paradigms, description of concepts, and research methodology are set out within this section.

Section B: Journal article
This section is made up of the journal article titled: “Identifying risk and protective factors in multi-problem poor families living in Cape Town”. This article will be submitted for publication in the *Maatskaplike Werk / Social Work* journal.

Section C
Section C consists of the summary, evaluation and recommendations of the study.

Section D
All the addenda are included in this section.

Section E
This is the consolidated list of references that were used throughout this research study.
10. CONCLUSION

In conclusion, Section A has provided an introduction to the empirical investigation that will be presented in Section B. The underlying reasons and purposes for the research were explained, highlighting the concerns about multi-problem poor families’ perpetuating cycle of poverty and welfare dependency. Various theories – including Gestalt field theory, Bronfenbrenner’s systems theory, and Conservation of Resources theory – were presented as theoretical frameworks for this research. A qualitative research design was undertaken, selected participants were interviewed, and the narrative account of their chronosystem and current life issues was gathered. Risk and protective factors in multi-problem poor families were also investigated as part of the empirical investigation. Further detail on the results and findings of the research will be presented in the following section.
11. REFERENCES


**SECTION B: ARTICLE**

<table>
<thead>
<tr>
<th>ARTICLE</th>
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<tbody>
<tr>
<td><strong>Title:</strong> Identifying risk and protective factors in multi-problem poor families living in Cape Town</td>
</tr>
<tr>
<td><strong>Aim:</strong> The aim of this study is to identify the risk factors and protective factors in multi-problem poor families living in Cape Town by exploring the narrative accounts of their chronosystem and current life issues</td>
</tr>
<tr>
<td><strong>Journal:</strong> Maatskaplike Werk / Social Work</td>
</tr>
</tbody>
</table>
IDENTIFYING RISK AND PROTECTIVE FACTORS IN MULTI-PROBLEM POOR FAMILIES LIVING IN CAPE TOWN

Mrs J Hope, Social Worker, ACVV Maitland, and Dr M Van der Merwe, Senior Lecturer, Centre for Child, Youth and Family Studies, Faculty of Health Sciences, North-West University

Introduction

The first author is employed at a welfare organisation in the Cape Peninsula with a case load of over 300 clients presenting with multiple problems; and about 30 of these multi-problem families have been receiving social work services over at least three generations. The concern is that these multi-problem poor families seem to be immobilised and find it difficult to break the cycle of poverty, welfare dependency and multiple problems.

Sousa, Ribeiro and Rodriques (2007: 54) define multi-problem families as those that present with severe and multiple psychosocial problems for more than a year. Characteristics of these multi-problem families are described by various authors (Sousa, Ribeiro & Rodriques 2007: 54; Possick, 2005: 407; Sharlin & Shamia, 2000: 5) as those families that present with unemployment, incarceration, substance abuse, child antisocial behaviour and resistance to intervention.

This notion of a cycle of poverty has plagued researchers for years. Jordan (1978: 3) talks about this issue of the cycle of poverty moving through generations and states that “research indicated that ‘problem families’ (dependent on the welfare system) give rise to children who
form a new generation of ‘problem families’” and that “parents, who were themselves deprived in one or more ways in childhood, become in turn parents of another generation of deprived children” (Jordan, 1978: 120). Sousa (2005: 164, 165) recognises this issue by stating that multi-problem families are characterised by “the presence of a chain of severe problems affecting an indeterminate number of members”. Sharlin and Sharmia (2000: 5, 12) also note that extreme distress of multi-problem families is transmitted through time and generations.

Sousa and Eusebio (2005: 366) recognise that little is known about the reasons why multi-problem families are involved with social services. Goldenberg and Goldenberg (2004: 8) suggest that it is the family’s narratives that give insights to their interactive patterns. As such, this research was done by exploring the deep descriptions (narrative accounts) by family members of their chronosystem and current life issues, focusing on risk and protective factors. Note was also taken of exceptions, where family members were able to cope and managed to initiate a break from the cycles of deprivation. This is viewed as foundational work to guide interventions in practice.

**Research design and methodology**

**Approach**

A qualitative approach was utilised for this research in order to describe phenomena from the participants’ point of view (Fouché & Delport, 2011: 64-65; Leedy & Ormrod, 2005: 94-97). Applied goals were adopted as the research aimed to solve the problems experienced in social work practice of multi-problem poor families’ cycle of poverty and welfare dependency. Elements of basic goals referred to the research providing further knowledge and understanding into multi-problem poor families living in Cape Town. The research was
exploratory as it aimed at gaining insight into the phenomenon of multi-problem poor families being stuck in the cycles of poverty and deprivation. The research also had descriptive objectives as it sought to uncover this phenomenon in terms of the deeper meanings given by multi-problem families.

**Design**

The case study research design (Nieuwenhuis, 2007: 75-76) was utilised as the researcher became engaged in the activities of the participants in order to “gain intimate familiarity with their social worlds and to look for patterns in the participants’ lives” (Fouché & Schurink, 2011: 320-321). Case studies were used as the researcher was interested in the subjective meaning the participants give to their experiences (Fouché & Schurink, 2011: 320) of the cycle of poverty, deprivation and welfare dependency.

**Data collection method**

Data was gathered by means of in-depth semi-structured interviews with participants that were recorded and then transcribed. Field notes and document analysis of participants’ case files from the local social welfare office was also utilised to gain a rich account of the family’s history and also data for triangulation. A semi-structured questionnaire as well as tools (ecomap, genogram, life line and worry worms) was used during interviews to aid data collection from participants.

**Participants**

Interviews were conducted with participants (purposive sampling method as described by Strydom, 2011: 232) who met the selection criteria: poor families living in the Cape Peninsula area; families that were involved with social services due to current social issues,
and who had been involved with social services in the past; and families who had been
struggling with social issues over at least three or more generations.

Seven participants were involved in the research and early in the empirical investigation it
became clear that themes were repeating, which led to the conclusion that saturation of data
was reached after seven in-depth interviews.

*Profile of participants*

All seven of the participants were involved with social services due to various reasons. Three
of the seven participants had their children removed from their care and placed into children’s
homes. Three of the seven participants were foster parents to their grandchildren as the
middle generation was involved with substance abuse and had neglected their children.
Sexual abuse featured in four of the families, and one family was undertaking a court eviction
against the sexual perpetrator.

<table>
<thead>
<tr>
<th>Participant</th>
<th>Race</th>
<th>Position in family</th>
<th>Reason for current involvement with social services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant A <em>(PA)</em></td>
<td>Coloured</td>
<td>Great aunt</td>
<td>PA is caring for her great niece in foster care. Social workers are involved with the family as a niece of PA was sexually abused. Lawyers are also currently assisting PA in obtaining an eviction order to remove residents at the back of PA’s property who are financially and emotionally abusive.</td>
</tr>
<tr>
<td>Participant B <em>(PB)</em></td>
<td>Coloured</td>
<td>Great niece of PA</td>
<td>PB is currently in foster care with PA as her father is unknown and her mother’s whereabouts are unknown.</td>
</tr>
<tr>
<td>Participant C <em>(PC)</em></td>
<td>White</td>
<td>Great grandmother</td>
<td>PC is currently involved with social workers as PC is the foster mother to her grand children whose mothers are abusing substance.</td>
</tr>
<tr>
<td>Participant D (PD)</td>
<td>Coloured</td>
<td>Great grandmother</td>
<td>PD’s own children were placed in children’s homes. Most of PD’s grandchildren were placed in her foster care. PD’s youngest child is involved with social workers due to substance abuse and neglectful parenting.</td>
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</tr>
<tr>
<td>Participant E (PE)</td>
<td>White</td>
<td>Grandmother</td>
<td>PE’s children were in a children’s home. PE is currently caring for her grandchildren, who may also be removed soon due to PE’s current substance abuse.</td>
</tr>
<tr>
<td>Participant F (PF)</td>
<td>White</td>
<td>Grandmother</td>
<td>PF is fostering her grandchild whose mother is absent and neglectful.</td>
</tr>
<tr>
<td>Participant G (PG)</td>
<td>Coloured</td>
<td>Grandmother</td>
<td>PG’s own child was removed and is in a children’s home. This is due to substance abuse and a negative home environment.</td>
</tr>
</tbody>
</table>

**Ethics**

Ethical considerations were guided by the researcher’s profession as a social worker where she adheres to the South African Council for Social Service Professions’ code of ethics. Ethical considerations, as set out by Whittaker (2009: 110) and Welman, Kruger and Mitchell (2005: 11) including confidentiality, do no harm, and informed consent, were a core feature from the onset of the research in terms of the research process, selection of participants, interviewing and data analysis. All participants voluntarily signed a consent form to participate in the research as well as provided written consent for the researcher to use their files at the social welfare’s office. The researcher was aware of the potential impact on participants of the fact that the researcher is also a known social worker to the participants. The researcher emphasised to participants, the importance of confidentiality with regards to information that they would disclose and the ethical guidelines by which the researcher follows. Participants needed to disclose intimate details of their past and during the
interviews it was found that some of the participants became emotional. Participants were offered further counselling services by the local social worker’s office.

**Results**

Interviews were conducted with participants at their homes, at their request. Interviews were recorded and transcribed for analysis according to data analysis methods as proposed by Schurink, Fouché and De Vos (2011: 404) and thematic analyses as described by Whittaker (2009: 91-97). The interview transcriptions were coded and various themes emerged, which are presented here:

- **Theme 1: Experiences of poverty**
- **Theme 2: Trauma, loss and bereavement**
- **Theme 3: Previous-generation family**
- **Theme 4: Intergenerational risk factors with subthemes including substance abuse, domestic violence, parentification, child abuse / neglect / statutory removal, teenage pregnancy, early school dropout, poor school performance, and loss of resources**
- **Theme 5: New presenting risk factor of current generation with a subtheme of absent parents**
- **Theme 6: Protective factors with subthemes including support from family, religious belief systems and resource gain.**

Following is a discussion of the various themes and subthemes that emerged from the data. Due to the small sample size, the data collected is not generalised to the wider population, but rather to literature that supports the findings.
**Theme 1: Experiences of poverty**

Lewin referred to “the field” as “a totality of mutually influencing forces that together form a unified interactive whole” (Yontef, 1993: 297). The individual is viewed as one part of a field made up of a number of different parts (including culture, family, education, work and religion) which are interconnected and are mutually influencing (Härkönen, 2007; Minuchin, Colapinto & Minuchin, 2007). As such, it was relevant to consider the environmental context within which the research participants find themselves.

This research was conducted in the Western Cape of South Africa. Census 2001 and the Social Profile of South Africa 2002-2009 provided by SATSSA indicated that in South Africa over 40% of all infants live in overcrowded houses with seven or more people; and that a grandparent was the household head in almost 60% of cases. This was found to be true of the research participants as most of them are the grandparents or even great grandparents who are caring for their grandchildren and great grandchildren and who are relying on government grants (child support and pension) to support the family. The mentioned literature sources indicated that only 32% of South African children live with both their biological parents and a quarter of children do not live with either of their biological parents. A theme that emerged in the research was that of a missing generation of the current parents in the families, which seems evident in statistics as well. The statistics also indicate that a large proportion of children fail to pass Grade 7 by the age of 15 years. Lack of money, poor academic performance and teenage pregnancy are cited as reasons for this tendency. Research participants and their families consistently presented with early school dropout and high rates of teenage pregnancy in each generation.

Oosthuizen and Nieuwoudt (2002) provide a profile of poverty based on the 1995 Census, which indicates that almost 30% of individuals in the Western Cape live below the poverty
line in “absolute poverty” (Serumaga-Zake, Kotze & Madsen, 2005: 143). The above-mentioned statistics provide a realistic context within which the research was conducted. The families who participated in the research provided descriptive accounts of their own personal experiences of poverty:

We were battling. We were one of the very lowest, poorest people you can get. We used to go to school with no shoes on our feet, no jersey to cover me, no food to eat. (PE)

There I learnt how to struggle... I was living on the streets with the kids then ... And when the birds come down to eat then you catch the birds; and then I killed them and then the kids helped me slaughter them and pulled off the feathers and then you boil them. (PC)

Sometimes we would go to bed with no food/ (PF)

I had to wash their school clothes in the bucket and then we make a line there in the trees, and hang the washing on the trees. (PC)

I would go to school half hungry. One day I actually fainted at school. Then they took me to the school nurse, and she said no, it’s because this child is hungry. (PF)

[I have] been staying here now for 11 years. No water. Without sanitation. No electricity. It is sometimes a risk with the candle use. No toilet. The environment I am staying in, it is quite unhealthy. (PG)

Document analysis of PA, PB, PC, PD, PF and PG indicated that there is a heavy family reliance on government grants to sustain the family (child support grant, foster care grant and pension grant). This research indicated that the participant families have lived in poverty circumstances for many generations and that the risk factors identified have been transmitted to each new generation. It seems clear that families living in post-apartheid South Africa are still living in poverty-stricken circumstances similar to that of the previous generations of
their grandparents, indicating a serious gap within governmental attempts to ratify social inequalities (Morkel, 2011: 486-489). It was also evident that the living circumstances of poverty meant that the family system struggles to meet its basic needs for food, water and electricity. Barrett (2004) acknowledges that the need to maintain a steady level of income to meet basic needs is the optimal strategy of such poor families (in The World Bank, 2008: 6). Many of the participants indicated that employment would have enabled the family to break free of the cycle of poverty (Theme 6).

**Theme 2: Trauma, loss and bereavement**

Through data collection strategies (lifeline, ecomap, loss and gain spirals) it was found that many of the participants presented with loss, trauma and bereavement in their lives:

*We just lost everything ... I was happy then and now* (participant starts to cry). *Just tjops, he was having relationships with women and unhappiness, and stressful life, and you know what your parents is going through, I sleep with them, I hear them ... but then the relations between my mommy and daddy became, because he started to have affairs. Everything just went down.* (PA)

*We had 7 people die in 7 years. All in the family? That is a lot! Ya, in the family ... my sister-in-law, my sister’s son ... Ya, so he died, and another cousin of mine died in the backyard, my other sister died and her mother ... cancer ... the old man died of cancer, my other brother, the second youngest ... and my brother in law ... I can’t remember who else.* (PA)

*My second baby passed away in a car accident. [She was] 6 years old* (PG)

*I had 7 pregnancies, but 8 children ... because my first was twins ... but she died ... the girl only live for 1 month.* (PD)
He actually died because he got cancer ... We were very heartbroken you know, it was very stressful that time. (PA)

(Participant starts to cry.) He would beat my mother. And we suffered a lot ... but we tried to stop it ... one day he stabbed her with a knife, and I grabbed the blade, and my whole finger was off. (PF)

The doctor said that her heart did stretch. She went in the Thursday and the Saturday she passed away. And we had just come back from my sister-in-law’s funeral. It was terrible. (Participant starts to cry.) If she was here today, she would sit with me and would help me. (PF)

Kaminer and Eagle (2010: 13-14) state that since the 1990s, South Africa has had one of the highest murder rates in the world. According to them, in 2006 it was estimated that there were 50 murders per day in South Africa. Four of the seven participants interviewed had experienced a murder in the family.

My father died 27 years ago ... He got murdered ... by the train station ... And they never caught the people who did it ... They stabbed him. (PG)

My sister’s son, he was retarded, and he got burnt out from the shack from here (points to waist) down. The police said this was murder. (PA)

[My] third (husband), well he died. That was why I am like this. That was drama and a half. That was tough tough time that I went through. I had to go under psychiatric care. He was shot ... he was murdered. (PE)

Harvey (2002: 10) states that bereavement is worsened when there is a loss of a significant person to whom the individual would usually turn for help, as was the case with PF who missed the support of her mother. PC also mentioned that her grandmother would have supported her in many practical ways if she was still alive. The transformative power of loss
(Harvey, 2002: 9) seemed to be mainly absent from the participants as they generally could not report deeper insight and meaning from their loss. Kaminer and Eagle (2010: 45) indicate that survivors of trauma have great difficulty in controlling their feelings, are unable to self-soothe, and struggle to get any comfort from others. It could be that unresolved traumas, loss and bereavement could utilise energy in participants which could negatively affect their general functioning. This is in line with Harvey (2002: 15) and Rando (1993) who recognise that “dealing with loss events may lead to secondary losses of energy and resources”.

It is of concern that the emotional trauma suffered by the participants has apparently rendered them unable to achieve a sense of wholeness and fulfilment in their lives. One participant (PF) indicated that the research interview was the first opportunity in her 63 years that she ever had to talk about her life history. She expressed a sense of relief by saying that it felt as if a burden had been lifted. It is worrying that this participant, who has a long-term welfare involvement, never had the opportunity to talk to a professional person about her traumatic life experiences.

It is clear from the literature and participant responses that these multi-problem poor families are dealing with loss, trauma and bereavement. The concern is how they have, or rather, have not, been able to integrate this loss into deeper insights and meanings for their lives.

**Theme 3: Previous-generation family**

It is clear from Theme 1 that the participant families have had experiences of and are living in poverty. As such, they have few resources available to meet their basic needs. Pryor and Rodgers (2001: 142) note a correlation between poverty and divorce in families, which was found to be true in this research as well. Harvey (2002: 62) recognises that divorce is accompanied by further losses of resources (energy, income), which places these families at
additional risk. Pryor and Rodgers (2001: 167) state that reconstituted/blended families, whereby stepfamilies join to form new families, involve the rearrangement of households, which has the potential to complicate and disrupt any family system. Research studies also indicate that marital tension, conflict and parental separation have negative effects on children’s development, academic achievement, well-being, social and interpersonal relationships (Walper & Beckh, 2006; Pryor & Rodgers, 2001; Hetherington & Stanley-Hagan, 1999; Grych, 1998). The participants presented information on their complicated family situations as follows:

6 boys … from my mother’s and father’s first marriages. We never knew that we were from different parents. (PA)

Were your mom and dad married? Yes. Were they happily married? I would say no … My dad was a fisherman. So he was always out at sea? If we saw him like two months in the whole year, that was a lot. So you never really knew him? No. (PE)

You are one of 7, tell me about growing up? It was tough, it was not nice. I think that is why I am still battling the way I am today. There was no support, no love, no absolutely nothing. (PE)

My mother was a drinker, my stepfather was a drinker … that’s my real father (points to genogram), he was also a drinker. They divorced through the drinking and my mother had a relationship with my stepfather; a “skelm” affair. (PC)

Most of the participants interviewed come from earlier generations of broken families where their parents divorced due to extramarital affairs and marital dissatisfaction. High rates of blended families were also found among participants. Data collected from participants and document analysis indicated that while the participants came from broken and blended families themselves, many of them and even their children are also divorced or have experienced the same type of blended families as the grandparents did. Amato (in Clarke-
Stewart & Dunn, 2006: 179) states that there has been a number of studies which indicates that parental divorce is associated with problematic outcomes in adulthood; including experiencing divorce themselves and conflict in their own marriages. The literature and data gathered from research participants indicate that there is an intergenerational transmission of divorce and marital dissatisfaction in multi-problem poor families.

**Theme 4: Intergenerational risk factors**

The research found evidence of risk factors occurring in earlier and current generations.

4.1 Substance abuse

As indicated in Theme 2 above, all of the participants have loss, trauma and bereavement issues that they have struggled to deal with during their lives. Zuckerman (1994) suggests that individuals abuse substances in order to block out that emotional trauma.

*It was heartbroken, it were hurtful, nerve-wracking, stressful. Then my brothers, they started drinking ... and they all started drinking because of my father and the family split apart.* (PA)

Fisher and Harrison (1997: 223-224), and Straussner and Fewell (2010) note that adult children of alcoholics may become substance abusers themselves, and tend to choose partners who are also substance abusers. This was found to be true for the participants as well:

*My dad was a drinker. A heavy, heavy drinker. And then you got married? Ya, it was a total mess up. Because he was an alcoholic and a drug addict.* (PE)

*My youngest child ... she is also on drugs ... she sold her teeth for TIK ... and she stole pants off washing line ... This boyfriend of hers, he is (also) a drinker.* (PC)

Participant G’s family appeared to have an intergenerational issue of substance abuse as PG’s mother had a drinking problem, PG started to smoke and drink when she was about 22/23
years old, the father of PG’s children had a substance abuse problem, and her son (14 years) started experimenting with drugs. Participant A reflected on the detrimental effects of substance abuse on their family, such as family fights and serious conflict. James and Gilliland (2001) indicate that children exposed to substance abuse in the family experience deleterious effects, including feelings of worthlessness, self-blame, withdrawal and poor academic performance.

Strausser and Fewell (2010), and Gruber and Taylor (2006) indicate that there is a high correlation between parents that abuse substances and domestic violence, as well as between dysfunctional parenting and substance abuse. There is also an increased risk of child abuse and neglect among substance-abusing parents.

Participant D reported that her husband was never home; and that when he was home he was abusive and rude. She said that he died when he was 36 years old due to alcohol-related complications. She indicated a sense of relief when he passed away. Document analysis of PD’s family indicated that PD’s daughter is abusing substances and is unemployed, and that the daughter’s own child is currently in foster care.

It is clear is that there is an association between substance abuse and experiences of violence (domestic violence and child abuse). Data gathered from participants showed that they experienced parental substance abuse and domestic violence, and most of the participants were subjected to child abuse or neglect, as is supported by literature (Strausser & Fewell, 2010; Gruber & Taylor, 2006; James & Gilliland, 2001).

4.2 Domestic violence

Kaminer and Eagle (2010: 17) report that in 2002, the Western Cape presented with the highest rates of gender-based violence in South Africa. This research concurred with the
literature as it indicated that each of the participants experienced some form of domestic violence (from their parents and their partners). Having being subjected to parental domestic violence, participants seemed to choose partners that were also violent towards them. Mattingly and Dugan (in Keeling & Mason, 2008: 197) support this in their sentiment that partner violence is not a one-time occurrence for women; even when a violent relationship ends, previously victimised women often engage in another abusive relationship. As indicated in the previous section, there was a strong link between substance abuse and domestic violence. Flanzer (2000) argues that alcohol abuse is the prominent risk factor contributing towards domestic violence because alcohol lowers the abusers’ inhibitions against becoming violent (in Roleff, 2000: 54-55). Flanzer (2000: 57) outwardly states that abusers and drinkers are one and the same. This research supports this finding in that there is a correlation between those that abuse alcohol and those that are abusive towards others:

When he [father] was coming home [after drinking with friends], we would go and lock ourselves in the room. He used to shout at her [mother] and he pushed her, and she cut her whole head open. I screamed. I still had my younger sister on my arm. And I put her down, and I grabbed towels to stop the blood, but it just came. And I screamed for our neighbour, she was a nurse and she told me to get ice blocks to stop this blood. Then we called the ambulance, but he ran away, and the police was after him. He would hurt my mother, and he was abusive to us. He used to hit us. (PF)

James and Gilliland (2001) and Little (1990) recognise the denial of the seriousness of abuse, as explained by participant F and G below:

My mother drank, but not my father. You know how it is, some fighting and arguing, but nothing bad. (PG)

Even if my father used to beat my mother, he was a loving father. (PF)
Victims of abuse often deny the seriousness of their experiences and express ambivalent feelings about the abuse in an attempt to cope. Only one participant seemed to be an example of “breaking the mould” in her marriage after having been exposed to the domestic violence and substance abuse of her own parents.

38 years we have been married. But my brother said to him, if you are going to drink and hit her, you can forget it! Because she doesn’t want a man to hit her or anything. We knew each other for 2 weeks, and we got married. We got our ups and downs, but he never lifted his hand to me. Because I told him, I came out of an abusive home, and I don’t want to step into an abusive home. (PF)

Field and systems theory (Härkönen, 2007; Minuchin, Colapinto & Minuchin, 2007) prove that the individual cannot exist in isolation. These theories indicate that domestic violence cannot be viewed in isolation, but rather as a result of interacting factors within the system: poverty, substance abuse, marital dissatisfaction, stress and unemployment.

The negative impact on children of parental domestic violence has been documented by research (Rossman, Hughes, & Rosenberg, 2000: 91; Emery, 1999), and indicates that “witnessing violence is a negative and often traumatic experience for children” (Rossman, Hughes, & Rosenberg, 2000: 15). Zuckerman (1994: 53) says that the negative impact on children of domestic violence is that there is poorer functioning at school. This is identified in the subthemes of teenage pregnancy and early school dropout below. Kemp (1998) states that experiences of abuse and neglect also interrupt the attainment of needs, as discussed above.

4.3 Parentification

A further issue which emerged in the research is that of parentification and the major impact this has had on the participants. Participants indicated that they felt responsible for their
parents who did not function well and that they had to care for younger siblings; i.e. doing their hair and taking them to school. Participant F indicated that this impacted on her school education and that it was one of the reasons for early school dropout.

According to Kristen (2010), and Wells and Jones (2000), parentification happens when the child assumes parenting roles: doing household chores, taking care of siblings, and providing emotional support for a needy parent. Emotional parentification (where the child becomes like a friend to the parent, providing emotional support) includes the disclosure to the child of “adult information”. This can include talks about intimate sexual relations which is linked to the child’s own earlier initiation of sexual relationships (i.e. teenage pregnancy), or the disclosure about economic factors (unemployment), which can lead to the child’s increased notion of social responsibility (i.e. early school dropout). Teenage pregnancy and early school dropout were other major themes identified in these multi-problem families.

4.4 Child abuse / neglect / statutory intervention

Research by Algood, Hong, Gourdine and Williams (2011), Jaffee, Caspi, Moffitt, Polo-Tomás and Taylor (2007), and Fujira and Yamaki (2000) indicates that children who live in poverty are at greater risk of being abused than children who do not live in poverty. It is already clear that the participant families come from deprived circumstances (Theme 1); and literature indicates that such families are at risk of child abuse and neglect, which was found to be the case in this research. This is again resonating with systems theory that child abuse and neglect are the result of an interaction of parts within the field (Kemp, 1998: 16). Kemp (1998: 86-87) links with Bronfenbrenner’s conceptualisation of the macrosystem (Härkönen, 2007), indicating that broader systems of social factors such as unemployment, stress and poverty have a direct influence on the subsequent abuse of children by their parents.
Masten and Shaffer (in Clarke-Stewart & Dunn, 2006: 13) show that child abuse and neglect by the parent has a far more detrimental effect on the child than abuse by strangers. They also view such disturbances to the family system as having ruinous outcomes for the development of children. Longitudinal studies have shown that children who are abused and neglected exhibit a number of problems, including school failure and substance use (Lansford, Dodge, Pettit, Bates, Crozier & Kaplow, 2002; Cicchetti & Manly, 2001; Widom & Maxfield, 2001).

Participant D indicated that her husband abused their children and how this led to the removal of the children:

*He would hit the children also, and I said to the welfare, no I cannot handle this. I did take my children, and went to the welfare, and I went to tell them to please put my children in the Catholic home.* (PD)

Theme 3 indicated that all of the participants come from broken homes to some or other extent, and it was also found that many of them experienced some form of child abuse or neglect. This finding appears to be supported by theory as Pryor and Rodgers (2001: 151) indicate that “children of separated families are more likely to experience abuse and neglect than children who do not experience family transitions”.

Data gathered from participants indicated that over half the families had been affected by sexual abuse, and that the children affected by it were often statutorily removed from the family. Document analysis showed that PD’s child was raped, and the child born of that rape, PD’s grandchild, was sodomised. It was also found that PA’s family is currently dealing with the effects of child sexual abuse, which included the child being placed at a children’s home. Participant F described her experience when she and her siblings were placed in different children’s homes due to parental neglect and physical abuse. Although, in general, she found it to be a negative experience, she expressed relief that she was free from the abuse and fear
she had experienced at home. Document analysis also indicated that PC’s children were removed from her care due to her own substance abuse and her neglect of her children. The file content revealed that PC’s grandchildren were also removed and placed into foster care. Participant E described her family as “the very lowest, poorest people you can get”. She explained how she and her siblings were removed to a place of safety and how they were eventually separated. She went to a boarding school which was a positive experience for her as she felt that people cared about her there. Document analysis revealed that PE’s own children have been removed from her care and are currently placed at a children’s home. It became clearly evident in the research that there is a continuous cycle of removing children and placing them in alternative care as a means to deal with the various problems presented in these multi-problem poor families. In view of the family’s perpetuating history, this appears to have been an ineffective form of intervention.

The research further indicates that some of the participants experienced emotional abuse. Emotional abuse is described by Wiehe (1998: 17-18) as “psychological maltreatment whereby an adult attacks a child’s self-esteem and social competence. This form of abuse is seen in comments made with the intent of ridiculing and belittling a child”. Participant C described how she was the target of abuse when her mother was drunk. Apart from physical abuse her mother would also make degrading comments such as “You are stupid”. Participant E described her mother’s attitude of hate towards her and linked it to her problematic relationships with her own children and husbands.

The intergenerational theory of abuse suggests that abused children become abusive parents themselves (Wiehe, 1998). The research reveals that it was most likely that the participants who were abused as children lacked parenting skills as adults, and were therefore not able to improve their parenting of their own children.
By comparing abused and non-abused children, Cerezo and Frias (1994) find that severe academic problems were prominent in abused children. These problems were so severe that there was a high risk of school dropout (subtheme discussed below).

4.5 

Teenage pregnancy

As far back as 1998, it was found that in South Africa 35% of all teenagers had been pregnant before the age of 19 years (National Population Unit, 2000). Clearly, teenage pregnancy is a problem in South Africa, and a number of generations has been experiencing teenage pregnancies as is evident from this research.

I left home when I was 18 years old ... I got married. I allowed myself to fall pregnant ... But it was a mistake, my biggest mistake. (PD)

I was 17 when I had my first child. My granny handled it very nice. When I told her I was pregnant, she opened up to me about when she was pregnant, she also had her first child, my first aunty, when she was 14/16 years old. (PC)

My first child was born in July 1960 ... I was 18 years old. (PD)

How old was your mom when she had her first child? I think she was about 16/17 years. (PF)

Participant B’s mother was around 17 years old when she (Participant B) was born and her mother’s sister had her first baby when she was 13 years old. Participant C’s history shows patterning in terms of teenage parenthood:

The same with my youngest child ... 16 she had her first child. My oldest son got a child when he was 16 years ... And now his child she is 16 years old, and she has a child. Her baby is now 1 month old. And now I am the great granny. (PC)
McLeod (2011: 62) finds that pregnancy limits the capacity of the teenage mother to return to school and complete her education; thus also hindering her future employment opportunities, which is concurred by Sousa and Eusebio (2005: 354) and Gray, Spurway and McClutchey (2001: 648) who state that teenage pregnancy places the teenager at an immediate educational and economic disadvantage. Bezuidenhout (1998) recognises the burden that teenage pregnancies place on government as these young parents fail to complete school and thus often rely on government child support grants to support themselves and their children.

Most of the current research is focused on teenage mothers, and little attention has been given to teenage fathers. Negative consequences of fatherhood for adolescent boys as cited in Swartz and Bhana (2009: 3) include increased poverty and welfare dependency (Mollborn, 2006). Gray et al. (2001) indicate that mothers at high risk in terms of parenting difficulties are those with limited knowledge of pregnancy, birth and care of infants. Participant C’s description of her teenage pregnancy indicates the limited knowledge she had of pregnancy and the need for better sex education.

I was 17 when I had my first child. And she (granny) told me that it would be ok because I felt very bad and I wanted to cut my stomach open to take this child out, and I thought that I was bad. And I just didn’t know how it could come out. (PC)

Two of the participants who had teenage pregnancies put their children up for adoption. One mother experienced an open adoption (where she knew the adopted family) and one experienced a closed adoption (where the adoptive family was not known) (Bezuidenhout, 1998: 43).

There are obvious emotional implications to having a child adopted. McLeod (2011) suggests that the young teenage mother is psychologically immature and unable to comprehend the
long-term consequences of her actions. These adoptions evidently are a further indication of the loss, trauma and bereavement that these participants have experienced. The first mother (PC) still has unresolved issues with her adopted child. She sometimes referred to her during the interview as not being her child, but rather her sister.

A major concern is the impact that these teenage pregnancies had on the lives of the young mothers. The participants reported that many of them left school because they were pregnant. Hence, the cycle of poverty and welfare dependency becoming very evident in these families’ lives across each generation.

4.6 Early school dropout and poor academic performance

The Social Profile of South Africa 2002-2009 provided by SATS SA indicate that in South Africa a large proportion of children fail to pass Grade 7 by the age of 15 years. Children cited reasons for early school dropout as being due to teen pregnancy, education not being seen as “useful”, lack of money, and poor academic performance. These grim statistics were found to be evident in this research as well.

During the participant interviews it was found that PA and PD only went to school up to Grade 7. All of Participant D’s children dropped out before high school, with the youngest not progressing much further than Grade 4. Participants E and F completed Grade 10, after which PF left school to care for her parents. Participant G left school in Grade 11 as she felt out of place in school after her friends had left school to start working. The research found that none of the participants had completed Matric at school, and that many of the family members had not passed Grade 8. This links with Crouch’s (2005) concern about the “disappearing school children” as 40% of children do not reach Grade 12.
Kiernan and Mensah (2009: 570) indicate that the “long hand of childhood poverty persists into adulthood in terms of lower educational attainment”, suggesting that there is an association between poverty and poor academic achievement (Kiernan & Mensah, 2009: 575). A major problem identified in researching the document analysis of PA, PB, PC and PD is that the younger generations of children struggle academically at school and that the grandparents at home cannot assist them with their school work as they did not attain higher levels of education. There are also concerns about the expectations placed on these families by the schools with regard to school projects, demands for magazine pictures on posters, and typed and printed assignments. These multi-problem poor families come from deprived homes and often cannot meet the school’s requirements and expectations. The children seem to be despondent and hopeless in this situation, and eventually just drop out of school. Kannemeyer (2008: 9-10) supports this finding in her observations and says that the capacity of parents of the current generation of youth to assist their children is a function of the education they themselves obtained, and that “there is a problem of parents being unable to provide educational assistance and compensate for the shortfalls in the public schooling system”.

Document analysis found that PC’s children and foster children had and were attending a special school for children with learning disabilities which was named the “Donkey Tech” by the participant. Involvement in special schools appeared to be common with most of the participants’ families.

It is evident from literature and participant interviews that most of the family members in these multi-problem poor families have not completed their schooling. It seems likely that this limited educational achievement has also inhibited their capacity to escape the cycle of poverty. It appears that there is an increased need for skill-based school systems where
education is focused on trade and artesian skills (hairdressing, plumbing, etc.) for these multi-problem families.

4.7 Loss of resources

Any problem causes a certain level of stress for the individual and family trying to cope with it. However, it may be that multi-problem poor families are at greater risk in trying to manage these stressful situations due to their limited resources and higher exposure to risk factors. Hobfoll (1998: 28) says that stressful circumstances are those that “remove or threaten obtainment and maintenance of survival of the self and family”. According to Conservation of Resource (COR) theory, “stress is predicted to occur as a result of circumstances that represent a threat” or loss to resources (Hobfoll, 1998: 45-46). Resources are inextricably linked to survival and include object resources (i.e. house, car, clothing), condition resources (i.e. family membership and employment), personal resources (i.e. self-esteem, social skills, job skills) and energy resources (i.e. food, money, credit, knowledge) (Hobfoll, 1998: 54).

The loss of resources in a family system is experienced as a downward spiral of losses which leaves the family system feeling hopeless and out of control. This study found that the families participating in this research presented with a number of resource losses:

Loss of object resources: Theme 1 of poverty clearly indicates the level of object losses experienced by the participants (living on the streets with children, and going to school without school shoes).

Loss of energy resources: Participants mentioned factors such as not having money or food for their families. Participant G also spoke in detail about living in a shack with no water, electricity or ablution facilities (Theme 1).
Loss of condition resources: Participants indicated that job loss was a significant factor that brought the family down and sustained their cycle of poverty and deprivation (Theme 1).

Document analysis indicated that PE and the daughter of PD were unresponsive towards assistance offered by social workers. The file content indicated that they appeared to lack any motivation towards improving their circumstances, despite the help offered. Various authors refer to this as the multi-problem poor family’s resistance to intervention (Sousa, Ribeiro & Rodrigues 2007: 54; Sharlin & Shamia, 2000: 5; Bleachman, 1991: 220). This indicates that allocating possible gains in terms of services to multi-problem poor families would need a special approach. It is possible that these families might have felt that the risk of accepting assistance from social workers was too high and could lead to resource loss in other areas, i.e. statutory removal of their children.

Loss of personal resources: As mentioned in Theme 2, the participants have suffered loss, trauma and bereavement which are contributing factors to loss of personal resources. Personal relationships within families (condition resource) appear to have deteriorated due to family violence (Theme 4: substance abuse and domestic violence), death and loss (Theme 2), and feelings of abandonment and rejection (Theme 4: child abuse and neglect).

Pryor and Rodgers (2001: 140) note that “multiple risk factors have a cumulative or synergistic effect on children and families”, resulting in an even greater impact than would separate or single risk factors. This leads to the understanding that a multitude of risk factors has an adverse and detrimental effect on the individual and family system – as each of the participants in this research has experienced (Pryor & Rodgers, 2001).
**Theme 5: New presenting risk factors in current generation**

The empirical investigation found that while most of the risk factors could be seen across the generations, there was one risk factor that appeared to only present itself in the current generation of parents and children.

**5.1 Absent parents**

The crisis of masculinity in our society is not a new concept (Kimani, Kombo & University, 2010; Dobson, 2002; Morrell & Richter, 2002). Bradshaw, Stimson, Skinner and Williams (1999: 2) state that the number of absent fathers increased rapidly in the 1980s, and especially in the 1990s, and that it is still increasing today. The *Sunday Independent Newspaper* published on 21 June 2011 stated that according to the Human Sciences Research Council, over 51% of children in South Africa are growing up without a father (not dead) (Van Eeden, 2011). With regard to previous research themes on poverty, Kimani, Kombo and University (2010: 19) find that poverty accounted for 52% of the factors contributing to absent fathers.

Various authors indicate that the negative effects of a father’s absence on the family and children include family tensions, disciplinary problems and poor gender role development of children. These, in turn, affect the emotional, social and academic progress and development of children (Kimani, Kombo & University, 2010; Krohn & Bogan, 2001; the National Centre on Fathers and Families, 2000). Kimani, Kombo and University (2010: 14) further report that in South Africa, 71% of high-school dropouts come from fatherless homes, indicating the link between early school dropout and absent fathers, which is also evident in this research.

Participant A reflected on the absence of the great grandchildren’s father and stated that she and her mother cared for the children. Participant C was pregnant when the father of her child got a life sentence and went to prison. Another participant (PF) raised her granddaughter.
Document analysis of PA, PB, PC, PD and PG’s files indicated that a few of the fathers of the current generation of children were denying paternity of the children. Document analysis also indicated that the daughters of PE and PD have not had contact with their respective children who are currently placed in alternative care, and that a poor relationship existed between these parents and their children. Contact made by social workers with the children revealed that the children miss their absent parents, and that they want contact with them. It seems that this accounts for feelings of loss and abandonment by these children.

Literature acknowledges the absence of fathers, but this research found that there were many mothers that were also absent from their children’s lives. While earlier generations suffered parental substance abuse and domestic violence, it appears that current generations are dealing with a missing generation of parents. Further research on the effect that this missing generation of parents will have on children as they grow up is warranted.

**Theme 6: Protective factors**

Sousa and Eusebio (2005: 356) recognise the value of protective factors as “research has shown that services for multi-problem poor families usually contribute to the disorganisation in these individuals and families. Because services are often fragmented and uncoordinated, they are less effective; and because interventions are focused on individuals and problems, they do not tap the healing possibilities that reside within families and communities”. This is supported by Minuchin, Colapinto and Minuchin (2007: 24) in their argument that while multi-problem families are consumed by concerns of drugs, neglectful parents and violence, the strengths within these families are often overlooked. They argue that the loyalty and affection shown between family members is a strong protective factor that is often hidden or overshadowed by the overwhelming state of negative risk factors. The following protective factors were identified:

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6.1 Support from family, friends and the community

Sousa (2005: 163-164) and Masten and Coatsworth (in Rossman et al., 2000: 101) found that informal personal networks consisting of strong family ties, friends and neighbours provide a sound support system against risk factors in multi-problem poor families. Sousa’s (2005: 165, 173) study also finds that personal networks provide protection to individuals from environmental stressors.

Multi-problem poor families have usually been characterised by isolation, detachment and exclusion from family and the broader community (Sousa, 2005: 166; Eamon, 2001). However, the participants’ responses indicate that the opposite is true in that the family maintained a sense of togetherness and supported one another despite dire circumstances. Jaffee, Caspi, Moffitt, Polo-Tomás and Taylor (2007) support these findings; they refer to family relationships and community support systems as promoters of resiliency against risk factors.

Participants referred to the value of social support. Participant A mentioned that they were a close-knit family and that the elder generation felt responsible towards and cared for the grandchildren and great grandchildren. Participant C referred to the pivotal role of her grandmother in her life. Participant G mentioned gains in the form of favours and odd jobs, and PF mentioned the Women’s Forum who helped her build personal resources in terms of assertiveness.

It is clear that reliance on other family members and friends for support was a major protective factor in combating the struggles of hardship and poverty. Ubuntu is a South African term referring to the idea of being human, that “I am a person through other persons” (Broodryk, 2007: 39). It encompasses values of sharing, being helpful, compassion and
caring for others. The notion of Ubuntu is recognised by Sousa (2005: 177) as a saving grace for multi-problem poor families in her final remarks, mentioning that “a person’s problems are not his or hers alone. This revitalises the sense of community and provides discursive options that centralize our relational engagement”. Two of the participants illustrated this in the following examples:

*You know some people come here and say I haven’t eaten in three days, but then I will share with them ... then we help each other.* (PC)

*One day, I was still a little girl and I did sit on the pavement, and I was crying, I did say ‘oh. these hardships’ and then this man with three children on this big bicycle came past and he got off the bicycle, and he came over to me. And he said, ‘my child, why do you sit here’ and I was crying and crying, and my mommy and daddy were fighting (shows fists punching the air) and I told him that my daddy was having an affair with another woman, and he must pray for me and for my mommy and my daddy. (Participant is crying.) And that morning he started praying for me, and he spoke to God. Something happened there, I don’t know I can’t tell you in words, I just felt this (shakes hands and body) going through me.* (PA)

*There was a nurse there at Woodstock hospital and she said “Come inside, I will help you”. And then we went in there and she started talking to me. She gave me a form and I filled in the form and then I started to work there. And then I put the kids in the crèche and with my first pay, I got a room. And then we start to live better. Because they got porridge at the crèche and I got food at the hospital.* (PC)

This example indicates how a downward spiral of resource loss can be turned around into a spiral of resource gain.

Participant C’s account of how they found food indicates creativity and skill:
Like here sometimes if there’s nothing in the house then I tell them, there’s the pot, it’s empty.

So it’s me, and 5 other people. And we must make a way, we can’t go steal, we must do something. Then my son goes and takes a bucket and will go wash a car ... and then the foster child will go to the shop and will come back with some food that is on the book ... like a packet of Viennas ... and then he will go find beer bottles in the community and will go take it back and get money to buy potatoes ... and then I will go to the Moslem lady and do her washing in my machine because she doesn’t have a machine and then she will pay me for that in rice and things ... and then we bring it all together and then we can make a pot of food ... and then when we eat, then we will share with my daughters. (PC)

The research indicated that the family members do support each other and that there is a strong sense of community that enables the family system to survive the negative poverty-stricken circumstances.

6.2 Religious belief system

Census 2001, provided by STATS SA, indicates that 79.8% of the South African population is Christian. This research found that a belief in God was another strong protective factor that most of the participants recognised as enabling them to cope. Participants A, E and C spoke about the value of being involved in a church and the value of prayer. PG related the positive influence of her grandmother who was a church goer.

It is clear that many of the participants felt that their belief in God was a strong source of support for them and that it enabled them to keep on going.

I go into my room and I just speak to Him (“God”) and it gives me that energy and motivation that I need to carry on. (PE)
6.3 Resource gain

As discussed earlier, the families interviewed portrayed a downward spiral of losses that they had experienced during the course of their lives. The research was also interested in identifying the protective factors of these families. Hence, upward spirals of resource gains were identified. Participants helped to identify those resources that could have supported them to enter gain spirals.

Gains in object resources: Only one participant (PE) indicated that housing would make a difference to the family’s experience of poverty. The benefits of adequate and sufficient housing for these multi-problem families could include stability, basic amenities and less overcrowding.

Gains in energy resources: The participants recognised their families’ need for money. There was a link between having money and living what they referred to as a “luxury” life.

Gains in condition resources: The research indicated that only two individual members within two families managed to complete school and obtain employment.

*I am proud of my second eldest child, he actually finished school through the post. Then he got a job, and now he is working at that new hospital as a pharmacist. (PE)*

*She got Matric, in the post. And she worked as a Girl Friday and she got all these different posts. And she is overseas today in New York. She has two children and she is married to an American! (PF)*

In both of the above-mentioned cases, the children did not grow up with their parents (the participants interviewed), but rather with other family members. Interestingly, the only breaks from poverty in these families came from individuals who did not grow up with their families of origin.
Sustainable employment was an obvious condition resource with positive effects on object, energy and personal resource levels. It added income, food, shelter, feelings of self-worth and a sense of security.

It was evident in the research that employment is a major protective factor for these families. Other condition resources that were considered to be protective factors included the police, social workers, boarding schools, homes for pregnant teenagers, the municipal council and lawyers. Document analysis indicated that all the participant families were obtaining support from social workers by way of foster parent support groups, awareness programmes, holiday programmes and parenting skills workshops. The Red Cross Children’s Hospital Child and Adolescent Unit as well as Legal Aid were organisations identified in document analysis that were providing further assistance and support to families.

However, even though these resources were utilised, it did not succeed in breaking the cycle of poverty.

**Gains in personal resources:** A positive attitude, believing in oneself as well as the ability to solve problems stood out as personal resources that assisted families in coping with multiple problems.

It is clear that condition resources of community support, job opportunities and employment, as well as personal resources and problem-solving skills are major protective factors of these multi-problem poor families.

Theme 6 has identified that religious beliefs, support systems and resource gains have enabled multi-problem poor families to survive. However, it is also clear that these families have remained in the cycles of poverty and welfare dependency despite having these protective factors and resources available to them. It seems that intervention with these
families needs to make use of these strengths in addressing the risk factors presented in the family system.

**Findings**

The following was found based on the data collected from the participants:

- South African multi-problem poor families appear to continue to suffer with the effects of the past apartheid with respect to living in poverty, lack of employment, and low cost housing.

- Living in poverty immediately creates vulnerability in terms of risk factors and multiple problems in families.

- The dominant intergenerational risk factors in multi-problem poor families include parental substance abuse, domestic violence, teenage pregnancy and early school dropout.

- In the past, alcohol abuse was dominant. In today’s family systems, drug abuse appears to be causing problems for families.

- The intervention response of welfare systems to the risk factors presented within multi-problem families has been the statutory removal of children from the family system. As multi-problem families remain battling with the same problems in each new generation, this intervention appears to be ineffective in terms of helping the family system to improve its circumstances.

- Exposure to parental domestic violence and marital dissatisfaction seems to lead to the same issues in each successive generation. This supports the theory that it is a learnt behaviour that makes divorce and violence seem normal.
• Each of these families has trauma, loss and bereavement issues that have not been dealt with in a meaningful way. There is a lack of resources available to properly deal with the loss and grief in multi-problem poor families.

• There is a missing generation of current parents. The grandparents and even some great grandparents have taken responsibility for the grandchildren due to the missing-parent generation. Interestingly, with the children in these families so often being in substitute care, it seems as if young children are currently also evolving into a missing generation.

• The major protective factors across generations have been the sense of community and support that is offered by family, friends and the community.

• Personal resources such as a belief in oneself and problem-solving abilities are also protective factors which seem to have a significant impact on the survival of these multi-problem poor families.

• Families have identified employment and job opportunities as the key to improve their lives and to escape the cycle of poverty.

**Recommendations**

In view of the above, it is recommended that:

• Further research needs to be conducted on the reasons for the heavy reliance on government grants and the major lack of employment in these multi-problem families. Families need to be interviewed on their job-seeking behaviour to determine whether their lack of employment, dependency on government grants and subsequent poverty are due to internal sources, such as their own lack of motivation to find a job, or
external sources, such as a lack of jobs available in South Africa, or a combination of internal and external reasons.

- The majority of teenage pregnancies involved girls between the ages of 13 and 17. Further research is required to determine the level of understanding of learners in primary and high schools of basic human biology, sexual reproduction, safe sex practices and pregnancy prevention. Based on this research, early intervention programmes need to be implemented in schools to address sex education.

- In support of findings by Kaminer and Eagle (2010: 53), it is recommended that further research is needed on the loss, trauma and bereavement issues of multi-problem poor families. While therapeutic services are available to abused children, there appears to be a lack of emotional therapeutic intervention and support for adults. Research can be conducted to determine the level of resources available to such families to effectively deal with bereavement, loss and grief when so much energy resources are utilised to survive day to day.

- Intervention programmes need to be targeted at parental substance abuse. It appears that parents are lacking awareness of the effects that their substance abuse has on the family due to the very nature of denial in substance abusers. Intervention programmes can be implemented to raise parents’ awareness of the effects that their substance abuse has on their children, the family and the community.

- Research is needed to explore the long-term effects of the current absent-parent generation. Longitudinal studies are needed to determine what impact this will have on the lives of those children whose parents are absent.
• Extracurricular support programmes need to be implemented to assist multi-problem poor families to enhance academic performance. It is clear that these families come from generations of early school dropouts. Hence, there is an enormous lack of educational support at home. Homework supervision, extra lessons and curricular support programmes are desperately needed to provide support to the current generation of children who are struggling academically. This seems imperative in order to break the cycle of poverty.

• Most of the participants stated that better employment opportunities would change their lives. The impact of one child being able to finish school and obtain steady employment could dramatically assist these multi-problem families to break the cycle of poverty and deprivation.

• As indicated in the research, the protective factors identified by these families are community support systems. In agreement with Rodrigo, Máiquez, Correa, Martin and Rodriguez (2006) and MacLeod and Nelson (2000), future interventions should be aimed at strengthening these community networks and support systems. Such programmes could include home visiting programmes to high-risk families (e.g. teenage mothers), community forums, community-based small support groups and mentorship programmes for the youth.

• Should programmes as mentioned above be implemented, it is recommended that longitudinal studies are undertaken to evaluate the effectiveness of such interventions in terms of these families.
Conclusion

In conclusion, this empirical investigation explored the dynamics of multi-problem families, focusing on the risk factors that have sustained the families’ perpetuating cycle of poverty and deprivation. Protective factors were also identified which have enabled these families to survive their day-to-day struggles. It is clear that future interventions aimed at these families need to address parental substance abuse and domestic violence, while other programmes need to target teenage pregnancy and early school dropout.

References


SECTION C: SUMMARY, EVALUATION, CONCLUSION AND RECOMMENDATIONS

1. INTRODUCTION

This section of the report contains a summary of the research as well as an evaluation of the aims and objectives achieved. Final conclusions and recommendations are also provided.

2. SUMMARY OF THE RESEARCH

The researcher initiated this study as a result of experiences of overwhelming caseloads and numerous volumes of files of multi-problem families. Despite the implementation of community work projects and awareness programmes within communities, problems persist in each new generation of children. In practice, there appeared to be a post apartheid intergenerational cycle of poverty and welfare dependency as families remained stuck in the system due to multiple problems and a lack of resources. The aim of this research was to identify those risk factors that prevent families from coping effectively with their lives, and to seek out the protective factors that could be used to assist families in bettering their circumstances.

The following research objectives have been reached: doing a literature review, conducting semi-structured interviews with participants, analysing the file contents of participant families for data triangulation, investigating risk and protective factors in the chronosystems and current life situations of multi-problem poor families, transcribing and analysing data in accordance with literature, and describing the findings for interventions that could be implemented in future.

The researcher planned to interview families with numerous family members including the children, parents and grandparents in order to obtain a full, descriptive account from the whole family system of the risk factors and protective factors that they have experienced. However, it was found that there is a generation of missing parents, and a generation of statutorily removed children who have been placed in alternative care, rendering the
possibility of interviewing numerous family members unattainable. Data was therefore mainly gathered from the grandparents and some of the great grandparents of the family systems.

The research found that early generations of the families were affected by marital dissatisfaction, parental alcohol abuse and domestic violence. It was found that, in some cases, this led to the statutory removal of children from their families due to negative home environments created by parental substance abuse and domestic violence.

Teenage pregnancy and early school dropout appear to have characterised the families in each generation. These issues were found to be rampant in the multi-problem families interviewed: one family presented with over five generations of teenage pregnancies and subsequent early school dropouts. This appeared to have left the family system with poor educational achievements and a lack of employment opportunities, resulting in government grant and welfare dependency.

The research also presented concerns in terms of the trauma, loss and bereavement experienced by the participants interviewed. The research findings indicated that three out of seven of the families had experienced a murder in the family. Participants disclosed deep emotional pain with regard to the losses and trauma that they have lived through as a result of exposure to parental domestic violence, emotional abuse, parental substance abuse and child neglect. There is concern about the impact that this loss has on the family system in terms of living in poverty and trying to cope with daily needs while not having sufficient energy, personal and condition resources to deal with the loss itself.

Overall, the research identified that personal resources – such as believing in oneself, the ability to solve problems, religion, a sense of community and the support provided by friends, family and community – are the most valuable protective factors within these multi-problem families.

Findings indicate that there is a need for implementing early intervention programmes targeting sex education in schools, homework support programmes and community support
forums. These recommendations support the findings of identified risk factors, and the need to promote family strengths.

3. EVALUATION OF THE RESEARCH

The empirical investigation appears to have been successful in terms of meeting the identified aims and objectives of the research. The general aim of the research was to conduct an explorative study on multi-problem poor families to identify risk and protective factors in their chronosystem and current life situations. This aim was achieved.

The research objectives to meet the aim of the research were also undertaken effectively. The research provided information on the risk factors (substance abuse, domestic violence, child abuse, child neglect, teenage pregnancy, early school dropout and absent parents) and protective factors (sense of community, personal resources, condition resources and religious factors) of multi-problem poor families. The research also identified areas for further research and recommendations for future programmes and projects to address the risk factors identified.

4. CONCLUSION

In conclusion, the research found that the data from the empirical investigation was supported by literature. It was found that living in poverty immediately creates vulnerability for risk factors and multiple problems in families, which is well documented in literature (McNeil & Herschell, 1998; Bezuidenhout, 1998: 160-162). This research aimed to identify the risk factors present in multi-problem poor families, and this was found to include parental domestic violence and substance abuse, teenage pregnancy, and early school dropout. It was also found that the welfare system dealt with these family issues by means of the statutory removal of children. However, as it was found that the same risk factors have persisted across generations, the statutory intervention appears to have been unsuccessful in terms of trying to assist these families.
Literature on socialisation and learning theory appears to be relevant as the research indicated that exposure to parental domestic violence and marital dissatisfaction seems to lead to the same issues being present in each successive generation. The major concern emanating from this research was that of the considerable amount of trauma to which the families have been exposed and the resulting bereavement and loss in their lives. It was found that the families have had few resources available to them to be able to effectively deal with such losses. It was also found that there is a missing generation of current parents. Grandparents and even some great grandparents appear to have taken responsibility for the grandchildren due to the missing-parent generation. Document analysis clearly indicated that the children of these absent parents are suffering emotionally as a result of this loss. Protective factors identified include the sense of community and support that is offered by family, friends and the community. Recommendations for future research include tapping into this protective factor of community support as it appears to have been the strongest support for multi-problem families.

5. RECOMMENDATIONS

In view of the above research, the following recommendations are put forward:

- It is recommended that further research is conducted on the reasons for the heavy reliance on government grants and the major lack of employment of multi-problem families. Families need to be interviewed on their job-seeking behaviour to determine whether their lack of employment, and subsequent poverty life, is due to internal sources, such as their own lack of motivation to find a job, or due to external sources, such as a lack of jobs available in South Africa.

- The research found that girls between the ages of 13 and 17 years are experiencing the majority of the teenage pregnancies. Further research is needed to determine the level of understanding of learners in primary and high schools of basic human biology, sexual reproduction, safe sex practices and pregnancy prevention. Based on this research, early intervention programmes need to be implemented in schools to address sex education.
In support of findings by Kaminer and Eagle (2010: 53), it is recommended that research is conducted into the unresolved bereavement issues of multi-problem poor families. It would be interesting to determine the level of resources available to such families to effectively deal with bereavement, loss and grief when so much energy resources are utilised for daily survival. While therapeutic services are available to abused children, there appears to be a lack of therapeutic intervention and support for adults. It is further recommended that intervention programmes need to be targeted at parental substance abuse in order to make parents aware of the effects that their substance abuse has on their children, the family and the community.

Further research is needed to explore the long-term effects of the current absent-parent generation. Longitudinal studies are needed to determine what impact absent parents will have on the lives of their children.

Due to the high rates of early school dropout identified in the research, extracurricular support programmes appear to be necessary to assist multi-problem poor families with academic performance. It is clear that these families come from generations of early school dropouts, resulting in a lack of support systems at home for successive generations in need of assistance with school homework, among others. Consequently, homework supervision, extra lessons and curricula support programmes are desperately needed to provide support to current generations of children who are struggling academically. Early childhood development programmes targeting children in preschool and primary school levels could assist in providing a support system and structure for children at risk. A developmental “buddy” support system, which allows for at risk children to be monitored and supported regularly throughout their school careers, could significantly reduce the risk of high school dropout rates. This seems imperative in order to break the cycle of poverty.

As indicated in the research, the protective factors identified by these families are community support systems. In agreement with Rodrigo, Máiquez, Correa, Martin and Rodriguez (2006) and MacLeod and Nelson (2000), future interventions should be aimed at strengthening these community network and support systems. Such
programmes could include home visiting programmes to high-risk families (e.g. teenage mothers), community forums, community-based small support groups and mentorship programmes for the youth.

- It is also suggested that longitudinal studies are undertaken to evaluate the effectiveness of the intervention programmes for these families.

- Finally, a multidisciplinary intervention approach to assist these families can also be investigated. As opposed to multiple agencies being involved at different stages and levels of these families’ lives, a multidisciplinary team could focus on assisting at risk families with various joint interventions. Psychologists and pastoral counsellors can provide counselling for loss, trauma and bereavement; nutritionists can provide family guidance on improved eating habits, health and well-being; nursing professions can assist at risk families with teenage pregnancy prevention measures; nurses can assist at risk families with referral programmes for foetal alcohol syndrome; recreational experts can assist in setting up and implementing after-school programmes for the youth in order to keep them off the streets and off drugs; and so on.

6. GENERAL CONCLUSION

In closing, this research has explored the dynamics of multi-problem poor families that have presented with various social issues over a number of generations. The research indicated that social agencies have tried to assist these families but with limited success, as is evident from the perpetuating cycle of poverty, deprivation and welfare dependency. A strengths-based, multidisciplinary approach is needed to deal more effectively with multi-problem poor families. In addition, interventions need to be targeted at early intervention and preventative services.
REFERENCES


SECTION D: ADDENDA

Please see attached the following documentation:

1. Permission to conduct research
2. Semi-structured questionnaire
3. Consent to participate in research
4. Interview transcription of Participant C
INTRODUCTION

I, Jacqueline Hope, am a registered student at North-West University and I am currently completing my Master’s degree in Social Work. In partial fulfilment of the requirements for the degree, I need to conduct research. My research thesis is the “Exploration of the chronosystem and current life issues in multi-problem poor families living in Cape Town”.

PURPOSE OF THE RESEARCH

The purpose of the research is to gather data from the chronosystem (life history) and current life issues of multi-problem families living in Cape Town to identify protective and risk factors. This research is viewed as foundational to guide interventions in practice with multi-problem families.

PROCEDURES

The researcher plans on interviewing families who present with the considered selection criteria:

- Families living in the Cape Peninsula area (Maitland, Ysterplaat, Rugby areas);

- Families who are regarded to be living in poverty and are currently dealing with social issues;

- Families that are currently involved with social services due to current social issues;
• Families who have been involved with social services in the past with previous generations and their social issues;

• Families who have been struggling with social issues for at least two or more generations.

Families will refer to a group of related individuals who are living together and who are at any stage within the family life cycle (babies, children, youth, adults, grandparents, single parent households, married, divorced, etc.). Family members that will participate in the study will include grandparents, parents and children, where available, as the research is focused on the intergenerational aspect of poverty and social issues. Family members that will be chosen to participate in the research will be those that are verbally and cognitively competent to discuss significant life events and problems that have occurred within the family over the years. Data will be gathered from participants by way of interviews with family members. Once information has been gathered from participants, the interviews will be transcribed and analysed in terms of literature on the relevant topics of poverty, multi-problem families, stressors, and so on. The data will be presented in thesis format.

POTENTIAL RISKS

There are two primary ethical concerns for participants taking part in this research:

• **The need to handle the participants’ information as confidential:** As the participants are social welfare clients, the information they provide in the interviews needs to be considered as confidential. As such, participants will be anonymous. Permission will first be obtained from potential participants to voluntarily participate in the research.

• **The need to take care of participants’ emotional well-being:** The research is also concerned with the families’ histories and the researcher is aware of the potential emotional impact that this research may have on participants. The researcher will ensure that the participants are not in any way harmed emotionally by providing information about their past and current life issues. If necessary, referrals for therapeutic services will be recommended for participants.
POTENTIAL BENEFITS

The research will provide answers to questions such as: Why is it that intervention programmes for multi-problem poor families seem to be ineffective? Why do social problems appear to be re-lived by each successive generation of these families? Why do statutory interventions in these families persist? By conducting this research, the researcher hopes to be able to gain insights into some of the risk and protective factors that may be keeping families trapped in the cycle of poverty, deprivation and welfare dependency. This is considered foundational work in identifying interventions that may assist these families to break free of the cycle of poverty and deprivation.

PERMISSION

In view of the above, the undersigned researcher herewith requests permission from the ACVV to:

- Conduct said research within the Maitland/Ysterplaat/Rugby communities
- Be assisted in locating families that meet the selection criteria for the research
- Gain access to client files to gather information about the selected participants
- Conduct interviews with selected, voluntary participants who have agreed to participate in the research
- Present findings of the research within the said research thesis.

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Nicolette van der Walt  Jackie Hope  Dr Mariette Van der Merwe
ACVV Head Office  Research student  Research supervisor
North-West University  North-West University
Semi-structured questionnaire

To be used as guideline during participant interviews

1. Identify participant as per coding system: Participant A, B, C, etc. within Family 1, 2, 3, etc.

2. Note participant (A) details: Male / Female, Age, Position in family (grandparent, parent, child)

3. Where were you born and where did you grow up?

4. Describe your childhood growing up:
   - Neighbourhood environment
   - Housing, water, electricity
   - Type of school attended, highest grade achieved, experiences of school
   - Reason for leaving school (if left early), work experiences
   - Were your parents employed? Level of income and poverty experienced.

5. What were the challenges/problems/social issues that your family experienced while you were growing up?
   - Racism, discrimination, apartheid
   - Poverty, unemployment, absent parents
   - Substance abuse, physical abuse, neglect, domestic violence, DSM disorders, conflict, illness, criminal activity
   - Traumas, death, loss
   - Relationships between parents, parents and children, siblings.

6. What are the current challenges that your family is trying to deal with?

7. What were/are the resources/strengths/supports that your family used to deal with these difficulties? (Protective factors – resource mapping – spiral upwards.)
- OBJECT – home, car, clothing, household items
- CONDITION – health, relationships, family bonds, social support system, finances, work/employment, housing, food, clothing
- PERSONAL – self-esteem, resilience, skills, sense of mastery, optimism, independence, hope, community pride
- ENERGY – money, food, credit, government finances, time, heating
- PROFESSIONALS – social workers, doctors, clinics, nurses, school, religion

8. What were/are the challenges you faced in dealing with these difficulties? What has made it difficult for you to solve these problems? (risk factors – spiral downwards)

9. What do you think would have helped you and will help you to better deal with these challenges?
   - Intervention that is needed?
   - Resources that are needed?

TECHNIQUES

*Family mapping*

- Draw a picture of yourself and the people in your home
- Genogram – family tree
- Ecomap – diagrammatic representation of relationships between family members (attachment, communication structures)

*Life line* – drawing of life events chronologically – PAST problems

*Life apple with worry worms* – CURRENT problems
CONSENT TO PARTICIPATE IN RESEARCH
NORTH-WEST UNIVERSITY

“Identifying risk and protective factors in multi-problem poor families living in Cape Town”

You are asked to participate in a research study conducted by Jacqueline Hope (BSocSci Hons Clin SW) from the Social Work Department at North-West University. The results of the research will be contributing to a research thesis. You were selected as a possible participant in this study because you and your family meet the selection criteria for participants:

- Families living in the Cape Peninsula area (Maitland, Ysterplaat, Rugby areas);
- Families who are regarded to be living in poverty and are currently dealing with social issues;
- Families that are currently involved with social services due to current social issues;
- Families who have been involved with social services in the past with previous generations and their social issues;
- Families who have been struggling with social issues for at least two or more generations.

PURPOSE OF THE RESEARCH

The reason why this research is being done is to try to identify the risk factors that keep families living in poverty and suffering with multiple social problems across generations, as well as to identify protective factors that help families to cope with social issues. This will help social workers to identify what interventions need to be implemented to assist families to cope with multiple social issues.

PROCEDURES

If you volunteer to participate in this study, we will ask you to have an interview with the researcher.

- The interview will take no longer than two hours of your time. If more time is needed, we will first ask you for your permission.
- The interview may take place at your home or at the office of the ACVV, whichever is more convenient for you and your family.
- The researcher will ask you questions about your family’s history, past difficulties and significant events, and current problems that you may be experiencing.
- The research questions are focused on the challenges and difficulties that your family has gone through over each generation (the grandparents, the parents and the children).
- The researcher will interview you about the resources that you have in your family that have helped you to cope with the difficulties and challenges in life.
- The researcher will also ask you questions about what you think would help your family to better their circumstances and deal with their life challenges.

After the interviews, the researcher will analyse the information from the interviews together with literature from books.

The research findings and results will be written up in a journal article for the University.

POTENTIAL RISKS

If you volunteer to participate in this study, the researcher is aware that you are also currently involved with the social workers and that this may cause you to be worried about giving your personal information. None of your personal information will be included in the research report. The researcher will ensure that your identity will remain anonymous. This means that your name and personal details will not be included in the researcher report. You will be known only as “Participant A”, for example.

During the interviews we will talk about your family’s history and difficulties that you and your family have experienced. This may be emotionally difficult for you to do. The researcher will ensure that you are referred to a therapist if there is a need for you to get more therapeutic help with some of the difficult situations you may have experienced.

POTENTIAL BENEFITS

By conducting this research, the researcher hopes to be able to gain insights into some of the risk and protective factors that may be keeping families in the cycle of poverty, deprivation and welfare dependency. This is considered foundational work in identifying interventions that may assist these families to break free of the cycle of poverty and deprivation.

This research will not have a direct benefit for you as participants. However, you will be able to assist the researcher in laying the foundational work in identifying what interventions need
to be put into place to assist families in moving out of the cycle of poverty, deprivation and welfare dependency.

PAYMENT FOR PARTICIPATION

There will be no monetary or material remuneration for participation in this study.

CONFIDENTIALITY

Any information that is obtained with this study and that can be identified with you will remain confidential and will be disclosed only with your permission or as required by law. Participants will only be referred to as “Participant A / Female/Male / Age / Position in family: Grandmother, mother, child”. No further geographical or identifying details will be given.

A copy of the research report will be given to ACVV Peninsula as the research is being conducted in their community. You will also be able to receive feedback about the results of the research, if you wish.

Interviews will be recorded using a dictaphone and field notes. The dictaphone will be used to transcribe the interview, and interviews will be deleted from the dictaphone once they have been transcribed.

PARTICIPATION AND WITHDRAWAL

You can choose whether to be in this study or not. If you volunteer to be in this study, you may withdraw at any time without consequences of any kind. You may also refuse to answer any questions you do not want to answer and still remain in the study. The researcher may withdraw you from the research if circumstances arise which warrant doing so.

IDENTIFICATION OF RESEARCHER

If you have questions or concerns about the research, please feel free to contact:
Jacqueline Hope – Researcher 021 511 3001
Linda van Zyl – Regional Consultant ACVV 021 511 3001
Dr Mariette Van der Merwe – Research Supervisor 087 802 7621
RIGHTS OF RESEARCH SUBJECTS
You may withdraw your consent at any time and discontinue participation without penalty. You are not waiving any legal claims, rights or remedies because of your participation in this research study.

SIGNATURE
The information above was described to ________________ in English/Afrikaans and I am in command of this language or it was satisfactorily translated to me by ________________. I was given the opportunity to ask questions and these questions were answered to my satisfaction. I hereby consent to voluntarily participate in this study.

_________________  ___________________   ________ _____
Name of participant   Signature of participant  Date

I declare that I explained the information given in this document to ________________ and his/her representative ________________. S/he was encouraged and given ample time to ask me questions. This conversation was conducted in English/Afrikaans and/or was/not translated into ________________ by______________.

_________________  __________________
Signature of researcher     Date
Interview transcription

Participant Family 2

Participant C

NOTE: This family was referred by the social worker as they have been involved with social services over many generations. Currently, the social worker is involved with the family with foster care supervision services.

The interview was conducted on 20-08-2011 at the participant’s home.

PC: I asked them all to go outside because of last time.

R: No that’s fine, it’s their house anyways.

So like I said to you yesterday, it’s just to find out about your story ... because you are the expert on your life! And then just to see how you have managed and coped with things.

PC: And this one downstairs, is making such a, and I didn’t want Jackie to now hear all of this, oh.

R: No that’s fine, today I am not a social worker, so you don’t need to worry about that, today I am a researcher.

Ok, so now I want to find out more about your family.

Researcher draws ecomap with participant in the middle.

R: If this is you, your parents...

PC: My father, he died now, and my mother remarried.

R: And what was their marriage life like? Were they happy? What was it like growing up with them?
PC: My mother was a drinker, my stepfather was a drinker ... that’s my real father (points to ecogram drawing), he was also a drinker. They divorced through the drinking and my mother had a relationship with my stepfather.

R: Like an affair?

PC: Like a “skellem” affair ... when I saw that I was about 14/15 years, and when I saw that I thought that this wasn’t for me, uh uh, and then I went to my granny and my granny reared my further.

R: So your granny reared you?

PC: Yes, but my granny always played a part in my life ... with my mother and father ... we were four children, I am the oldest.

R: So where were you living at this time?

PC: With my mother and father in a flat and my mother was working and my father was working and I go to school, and then I come back and I must clean the house and the there is potatoes and rice and a small piece of meat on the table, and that was supposed to feed 6 people.

R: There was little food for everyone.

PC: There was always little food.

R: Even though your father worked?

PC: Yes. And then, umm, I would put on that rice and then I would go next door, or wherever, and ask them what can I do for you for something more to put in the pot. The aunty next door would tell me to go to shop for her and then she would give me a cabbage, or pumpkin, or something.

R: So you were actually able to see that there was not enough and go and out and get something more.

PC: I would go out and get something to make the pot bigger.

R: Sho.
And then my mother gets home and she says ‘Sho where did you get that’? And I would tell her ‘I did this and this and this to get that’.

Sho, that’s actually very good problem solving!

Mm, and then also on account of my stepfather, uh uh.

Not good?

Not good, no. Up to today my relationship with him is not so …

Ok, so it was a poor relationship? You didn’t like him?

I didn’t like him because I always say that my mother could of pushed through, she could have stuck with my father. She was too quick to divorce. It’s because she had a lover. But if she had of stayed on that side because she was married to my father, she could have said ‘you drink too much’ and ‘we could have separated rooms’, but she didn’t. And she divorced him and she took another man and he took another woman. And then my stepfather tried to be a father to me and uh uh, no. And then I said to myself, no, don’t do the same mistake they did.

So you could reflect on that and learn something from them?

I always do that, I look back and then I said no. Ok and then there is my children, the youngest dropped out of school …

Ok, let’s look at your family now.

Researcher draws time line

When you were 15 years old, so that is over here (makes mark on timeline), you left home?

Ya, I left home and went to my Ma (grandmother).

And then when did you have your first child?

I was 17 when I had my first child.

And were you still schooling?

No, I left school and home and went to work.
R: Where did you work?

PC: At the hospital.

R: And then you had your first child?

PC: And then my mother not being honest with me, she and the social worker, I will never forget that woman’s name, she and my mother without me knowing, she adopted, not even foster care, she adopted my first child. In a way I was glad that she took the child cause of my stepfather and I thought to myself because I must get out and if they hit her I must leave and I went on my own.

I was still 17 when I met the brothers that I married, then I started there with my children, I had three children.

And you know then, my first husband wasn’t an angel; he was “jolling” around with other woman. And my mother said ‘divorce him’, and I thought no man, then I will be sitting with no man, no money, no food, and three children, and where am I going to go to. SO I left it, he can sleep in that room, but we stay together until he died. The same with my second husband, we stay together until he died.

The same with and also my youngest child, when she left home, she was 13 years old and she went to live with them and she was not honest with me and there she also got abused, sexually abused because she didn’t tell me, because money was playing a role there ... 16 she had her first child, and 17 she was out of school, and she is also on drugs. But not anymore, you must see how nice and fat she is now.

This boyfriend of hers, he is a drinker, and I said to her what are you looking for ... and to me it looks like she was looking for a lover, a father, a provider. You see. Because that guy is older than me! And um, she was looking for fatherhood in him and then a provide to feed her that she don’t have to prostitute for something to eat. That is how I can sum up with him. She had no teeth, she sold her teeth for TIK. I mean he gave her more teeth and she had hardly any clothes on her and she stole pants off washing lines. That also stopped with this guy now supporting her.

R: So is she doing ok now?

PC: Yes.
R: I have these feeling faces ... this first part of your life ... was it good or bad for you?

PC: So, so

R: Like this one? *(sad feeling face)*

PC: Yes, like that.

R: And this part of your life with your children?

PC: There I learnt how to struggle. How to keep for myself.

R: What do mean 'how to struggle'?

PC: I didn’t really struggle in Woodstock ... there I had to know how to behave, I had to discipline myself. Like at home, if I was rude my mother would hit me. And there (in Woodstock) I just had to do what I needed to do and keep myself to myself. But there I had to talk to the people, and be nice to the people. Like I can’t go and steal, I had to work and the place I was staying I had to clean it, and things like that.

R: You had to learn new skills to survive?

PC: Yes. And when my husband’s died, I had no income, and I had a piece of a boyfriend. But he didn’t work, also a drinker. I just thought, wait maybe he can give us a room. I thought that he got us a room, but it had no lights and no water. But he was thief, like on a big scale, and when the police locked him up, it was just me and the kids. And I thought no man, I can’t live like this, I was living on the streets with the kids then.

R: Is this where you learnt to catch birds?

PC: Yes.

R: How did you do that?

PC: It’s like this, with a piece of netting in there and then you take a stick and you put it like this with a piece of rope and then you go and hide and wait, and when the birds come down to eat then you pull this thing and then you catch the birds. And then I get the birds and then I killed them and then the kids helped me slaughter them and pulled off the feathers and then you boil them.

R: How old were the kids?
PC: The second youngest was at school, I know because I had to wash their school clothes in the bucket and then we make a line there in the trees, and hang the washing on the trees.

R: Wow.

PC: And then we must walk to school and then there was a nurse there at Woodstock hospital and she umm, asked me what’s wrong with the child’s finger? And he was crying ... and she said come inside, I will help you. And then we went in there and she start talking to me. I said to her where I stay. She gave me a form and said don’t I want to work there. And I filled in the form and then I started to work there.

And then I put the kids in the crèche and with my first pay, I got a room. And then we start to live better. Because they got porridge at the crèche and I got food at the hospital. I liked to work the late shift because then we get supper. So then we all had supper at the hospital, and then what was over, the housekeeper, she knew me, and then she would keep the food over for me. She would say ‘here is dog food for you’ and then I know she keeps it nicely, and give it for the children.

R: So this part of your life where you started to live better was a good part for you?

PC: That was happy, ya.

R: And then this part with the boyfriend.

PC: That was sad part. That was a bad relationship, I shouldn’t have.

*Researcher puts feeling face stickers on lifeline.*

PC: Ok, but today I can sit and I can look back and if I see somebody has that same type of relationship, then I can tell them, because I can listen to them, then I can encourage them, and tell them to rather do this or that.

R: So there have been down things and up things? If you think about that ...

*Researcher starts to draw upward and downward spirals.*

PC: But when you are down, you must come up by yourself. You must, you just go and look for something. Like that lady at the hospital, so I got the job and then I worked myself up from nurse assistant to staff aid.
R: Sho, you worked yourself up. What do you think are some of the things that have brought you down in your life ... from your past and your parents?

PC: Drink.

R: Drink was a big thing.

PC: Mm, the drink.

R: And your parents’ divorce?

PC: Not really. Because then my mother was working and I knew she had a relationship on the quiet, and I just cut me off, I just said no, I will just carry on. And I didn’t say anything. Also through my mother drinking and divorcing. My mother was very calm when she was drunk. But when she was sober, oh hell, she would forget she put something down and she would ask you. And then she would hit me and things like that. But she never said sorry, and she always target me because I was the oldest. Every time I must go through this because I am the oldest and she would say things like “You are stupid” and ... yo ...

Participant starts to cry.

R: Mm, ya.

PC: And today those that went to school and gave her hell, my brothers and sisters, they all left matric, and I was the only one that didn’t, and they were all rude to her, but I wasn’t. I learnt from that also. And now today she will complain to me that they are rude to her and I ask her was I ever rude to you and she says no. And she always says “God will punish me for what I did to you” and I tell her, “no man, I forgave you already for that”. But I sometimes still forget about that and I think why were you so unfair. And when my kids grew up I try to make sure that I don’t do that.

R: You don’t want to be like your mother.

PC: No, and I do it also with my foster kids.

R: And has that been easy for you? Because usually we are the same as our parents. So how have you been able to break away from that? Like you say you are not like your mother.
PC: Ya, where I learned about the soft part of me was when I was living on the streets, catching birds, with my kids and where I went to went to the job in Woodstock.

R: Like a humbling experience?

PC: Yes. I can be soft at times, and I can be hard if you are taking advantage of me.

R: Mm, not soft like letting people walk over you?

PC: No, I won’t allow that.

R: Quite a balance, firm and strong, and soft and kind.

PC: Ya.

R: Any other things that brought you down? Like maybe your mom’s negative words?

PC: I could never understand why.

R: When you are so young you cannot understand things like that.

PC: I think that is why I had my first child at the age of 15/16. I think that well, I am working and here come this man that tells me that he loves me, and that gives me whatever I want, and hugs me, and they (my parents) didn’t do that, and then I think that well this is the man that I want and have a child from him. And just after the child was born he got life sentence. And then all that happiness just fell away. And then from there I thought uh uh.

R: So the father of your first child got a life sentence ... what for?

PC: Theft. I will never forget it. That time there was a drive in and you got a box by the car and there was a big screen to watch the movie on. And we sitting in this car, and I was pregnant with her already, and then the next minute police came all around the car. So they opened my door and asked me about my boyfriend and they took him and they put handcuffs and put him in a black van. And then the police took me home to my granny. And then they spoke to my granny. And then my granny also found out that I was pregnant.

R: That must have been a difficult night.
PC: Ya no, but my granny handled it very nice. When I told her I was pregnant, she opened up to me about when she was pregnant. That she also had her first child, my first aunty, when she was 14/16 years old. And she said that she and my grandpa was not married. And then she told the minister and then they got married, until death part them.

R: This is your mommy’s mom?

PC: Yes, and she told me that it would be ok because I felt very bad and I wanted to cut my stomach open to take this child out, and I thought that I was bad. And I just didn’t know how it could come out. And she explained it all to me, how the baby comes out, because I didn’t know.

When I was three months pregnant, I booked myself into a Home for pregnant children and I stayed there until she was born and then I went back to work. Then the baby went to my mother, she was 10 days old when she went to my mother. Then I went home for about a week. I wasn’t allowed to pick her up, I wasn’t allowed to feed her, I wasn’t allowed to do nothing for this baby. And when I wanted to go out, then she moved. And then I left them and then I went to live in Woodstock.

So then my oldest grandchild came to me to say that she was pregnant, I knew what to tell her and how to help her.

R: Your eldest grandchild?

PC: Yes. She had a baby girl.

R: Ok, so let me understand this.

Researcher draws ecogram.

R: Ok, so there is you, and were married three times. From your first husband, you had...

PC: Two children, and from the next marriage, one, and then the last, one more child.

R: Ok, and then?

Researcher draws on ecogram.
PC: My oldest son got a child when he was 16 years... he just left school then. And now that child she is 16 years old, and she has a child. She also left school. Her baby is now 1 month old. And now I am now the great granny.

PC: And when she came to tell me I went back and then I could tell her. She comes here all the time to show me the baby.

R: And did she leave school?

PC: Ya, she has left school now.

R: And your other children, did they also have children young?

PC: Ya, my other child had her first baby when she was 19 years, and my youngest had her first baby when she was 16 years old. But she has four children now, all from different fathers. She got married to the one with Moslem rights with him, I thought he would stick.

R: Ok, sho ... and other things that have, and other things that help you ... would you say that you grandmother helped you?

PC: Yes, my granny definitely did help me.

R: And the lady at Woodstock?

PC: Yes ... I forgot her name now.

R: And other things that have helped you up? You mentioned a belief in yourself?

PC: Yes you must believe in you.

R: Any other things that have brought you up and out of your difficulties?

PC: My work ... and church. I didn’t go to church, but I listen to the church on the radio. And the ladies at work ... I nursed an old lady at the hospital and she helped me. The doctors told her she had one month to live and she asked me to help care for her at her house. So I went and I got leave and went to work for this lady. I looked after her for 5 weeks, and she didn’t pay me but she gave me food. And there I also learnt a lot about caring for other people. When she died and I went back to work and they said
sho, you have changed. And with that aunty I learnt to work in a team, to work together, and then it gets done. That also brought me up.

R: Sho, that’s excellent.

PC: Like here sometimes if there’s nothing in the house then I tell them, there’s the pot, it’s empty. So it’s me, and 5 other people. And we must make a way, we can’t go steal, we must do something. Then my son goes and takes a bucket and will go wash a car ... and then the foster child will go to the shop and will come back with some food that is on the book ... like a packet of Viennas ... and then he will go find beer bottles in the community and will go take it back and get money to buy potatoes ... and then I will go to the Moslem lady and do her washing in my machine because she doesn’t have a machine and then she will pay me for that in rice and things ... and then we bring it all together and then we can make a pot of food ... and then when we eat, then we will share with my daughters.

R: Sho, so that is the team work that you learnt ... really really good to problem solve like that!

PC: I want to tell you something short ... when it was his (the foster child) birthday ... we didn’t have any food in the house and it was his first birthday and we didn’t have any money. And then my son came running in, I will never forget, he found a little blue candle in the back there. And then it was that morning and I went to kitchen and there I saw a bag of mielie meal and a packet of Bistro ... and I think what can I do ... and I got sugar, what can I do. And then I was making the mielie meal and I made it nice and stiff and I grate the onions and I made the Bistro like a gravy in there. And then I took a round plastic bowl and then I threw the mielie meal in the bowl and then I did throw the Bistro over the mielie meal and it run down the side like so. And then we cut slices and the Bistro was running into the mielie meal like this and then he woke up and we sang happy birthday to him and he was so happy. And we had this mielie meal cake for him! We still talk about it today! And he was so happy because of this mielie meal “pap” cake.

R: Sho, that’s lovely! And very resourceful ... I am going to put that down as another thing that brings you up, that you can make a way.
Any other things that was bringing you down or up? Anything with your husbands, and their losses?

PC: Ya, there loss was also something. And then I also lost a lot when they died.

R: And living on the streets, was that a downer?

PC: Yes, living on the streets was very hard.

R: The school ... not finishing school?

PC: No not really, I just had to finish and get done to leave school to look after myself ... and what was also a downer was the drinking.

R: Yes, ya we did mention that ... so the drinking was a big thing in your life that brought you down?

PC: Ya … but now he (current husband) isn’t drinking now … 20 days … but now he is irritating ... little things irritate him

R: He’s irritable.

PC: Like the kids your kids will make them tea and then the he will get irritated about the sugar being done ... and then he shouts like that.

R: There is one last thing that I wanted to do ... cause we looked at a lot of your past … about your current problems ...

Researcher draws worry worms and life apple.

R: Ok, so if this is you now, what are some of the worms that are eating your apple? What are things that are bugging you or worrying you now? And how much are the worms eating your apple?

PC: Well, at this moment, nothing. If I got a problem, I don’t let that problem eat on me for months. When I get the problem, it must get done, I can’t leave it for the welfare to take care of cause it will take long, and I can’t use violence ... so I ask people for help, and then I get it sorted out.

Like a nappy for the child, when there are no nappies, then I got spare shirts for those moments ... then I went to get all pay for the child ... it’s just R280, but it’s something.
R: Are you happy staying here?

PC: Yes, I am happy here, just upgrade ... but the money is not enough.

R: Is that something that is at the back of your mind?

PC: Yes, at the back of the mind ... I can’t touch the foster care grant cause that is for the children ... so then I think that I must get me a disability grant ... and then I can get me some lino for the bathroom, and then ask the council for a new bathroom door, and then that is sorted out. Just to try and build up the flat the way we want it ... but you got to work for it!

R: And with your other kids ... no worries about them?

PC: No, no worries.

R: So things are fine with you at the moment?

PC: Ya, just he came home now (husband) ... after being gone for over a year ... I said to me do you realise that we have been married for 19 years already?

R: Here was he?

PC: He was living on the streets and now he came home ... but it’s not a worry for me.

R: Ok. And if you could have had something in your past that could of helped you back then. Something that could of helped you back then?

PC: My granny ... if she was here ... I would of had my flat ... I would of lived, I suppose the same, but I wouldn’t worry so much. I would of just gone to her and asked for help and then she would help me. My gran would give me everything that I want. If she was only around.

R: When did she pass away?

PC: About 19 years ago.

R: And it’s left quite a gap?

PC: Yes, until today I still miss her. And she also taught me how to fight for myself.

R: An important person.
PC: Yes.

R: And you mentioned about the drinking, what could of helped with that?

PC: Umm, if they would only believed in themselves.

R: Do you think they drank because they didn’t believed in themselves?

PC: And when hardship hit them, they would run to the bottle … I was also smoking and drinking at a stage … but then the child cries … and then I don’t have enough money for bread for the child and the drink for me … no, I cant take that.

Because I remember crying by my mother asking for money for food, and then she would say no and send me to the shops for a cigarette for her. No man, a crying child, uh uh.

But I know hardship, very very hardship, and I know good times. You know some people come here and say sho I haven’t eaten in three days, but then I will share with them … and then I will ask my friend and ask for food and then she will call me and we can make a plan with food. I share.

R: Mm, you like to help others, because you know what it’s like to be there. Thank you … thank you for sharing your story with me.

PC: Ya, my friend will tell me that she got a tin of beans, and then we share that … and then I got spaghetti and then we divide that and then hi sit and break it into rice … and then we got a borrow some soya mince, in the box, from them over there … and then I write a letter to ask them to borrow me some mice until Friday, and then we make that swell out nice and full, and then we share that also, and then we got a nice pot of food. And then the leftovers we share with the others also. Then we help each other.

R: And that is this community … you all help each other.

PC: Mm, like the Muslims now … when we were young and small, we weren’t allowed to mix with the coloureds because of apartheid. We were not allowed to go on the same bus as the coloureds … and at the shops they had to go outside and eat and drink. And ag shame, that really disturbed me cause my even my mother’s servant had to sit outside. And the coloured people stayed that side of the road and we stayed this side of the road and we weren’t allowed to go and play on that side of the road with them.
and if they catch you, then oh, because then my mother would hit me. And then they did fast and they made the nice food. And we white children can smell it and we are mos poor ... and we have to wait to eat ... and we want to go over there and eat with them ... and some of them put their samoosas and food in a packet and throw it to us! But what we did was we were now friends, but we weren’t allowed to play together, but we didn’t want our parents to know because it was apartheid. Then we went to the river, and they went also to the river and there we would talk and then when we walk back we ignore each other so no one knows we played together. Then there was one Moslem girl who was my friend and she gave me this dress and this scarf to wear over my head so that nobody can see my face, and then I must walk over to the house ... and then hi walked to her house and then she gave me a bag of food. So now I did this and then I first went to the river and got dressed and then went to my friend and then went back to the river and took off the clothes!

R: Wow.

PC: And now today, cause that was back then, and now today, the foster children say that you know what those people have nice food ... and tell them that I also made curry. And they say no, they got a lot of food on the table. And I tell them it is because it’s their “booka” time and then the whole day they didn’t eat. And they tell me that they wish they could go there. I wish I was a Muslim because then I could also have that party. And then I tell them that if you want to go “booka” with them, then you mustn’t eat all day and then you must put a dooka on your head. And then that night they will go over to the Muslims’ house and then get food. And then the Muslim lady will send the leftover food to us and then my kids get it. But then the foster children want to be there when they break the fast, they want to be there for the fast ... but shame, when it comes to 6 o’clock, they are starving, they say that their stomach is burning ... and then I dress them and make them nice and then they put on their dookie, and then they are out there and then they come back here and they bring the food back here for the family. Our table is full and then we call the others to also eat from the table.

R: That is very resourceful ... it is amazing that you can get that all sorted out ... well done!
Father died
15 yrs old
Mother remarried
affair with 
stepparent
Divorced
14/15 yrs

Maternal Granny (reared me)
had first child @ 13 yrs

M+F
Flat
M+F worked
went 2 school

+ cleaned house
+ little food
+ went 2 ask others
+ hear (food)

1 of 4 (oldest)
learn new survival skills

lived - 2 the kids

husbands died - no income

boyfriend - no work - he 1st drank

room - no water/lights

boyfriend - locked up

survived on own - on streets

with kids (3) - caught birds and made traps

Woodstock nurse - helped family

job a mom

first pay - got a room (off streets) "living better"

15 yrs learnt how to struggle

left home + school - went to work

17 yrs: 1st child

M-dishonest (with SW)

- adopted her child

left home - on own

met

had 3 kids - jollying with other women

3rd child's father - with wife

-13 yrs - sex. abuse

left home

-16 yrs - 1st child

- on drugs (till today)

Sold her teeth + Tik

Stole washing off clothes

Humbling experience

learnt to be soft

(not like own mother)
drinking

mom - negative words

loss of husbands
loss of Latitia's father

on streets

resourceful

problem solving

work - old people
in hospital (team work)

Lady at Woodstock

Grandma

must go up by yourself!
believing in yourself
SECTION E: CONSOLIDATED LIST OF REFERENCES


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