

**A QUALITATIVE EXPLORATION OF THE DRIVERS FOR THE TRANSFER OF
FOSTER CHILDREN FROM ONE POSITION OF CARE TO ANOTHER**

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Mini-dissertation submitted in fulfilment of the degree *Magister Artium* in Medical Sociology
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DECLARATION

I Nomlinda Mashiloane hereby declare that the work contained in this dissertation is my own and all sources I have drawn on have been acknowledged by means of complete references.

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Nomlinda Mashiloane

Date:

REMARKS

The reader is kindly requested to take note that this mini-dissertation has been written in the NWU approved article format, which consists of an introductory chapter, one research article containing the main findings of the study, and a final chapter outlining the conclusions, limitations, and recommendations pertaining to the study.

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SUMMARY

Topic: A qualitative exploration of the drivers for the transfer of foster children from one position of care to another

Key terms: Transfer, foster children, care, social work, designated social workers

This mini-dissertation presents a discussion of the qualitative exploration of the drivers for the transfer of foster children from one position of care to another. Non-probability purposive and quota sampling were used to obtain 20 participants from various parts of the Gauteng Province of South Africa, including Sebokeng, Evaton and Lakeside. These participants were identified and recruited from the database of the Department of Social Development (DSD) because foster care placement is in their domain of practice nationwide. In total, ten foster parents, and ten designated social workers (DSWs) participated in the study. Data were collected by means of semi-structured interviews. The interviews took place over a one-month period from the 1st of August until the 4th of September 2016.

Five main themes were derived from the data, suggesting that the main drivers for the repeated transfer of foster children centre on foster children's behavioural problems, a shortage of resources such as vehicles, telephones, and the availability of DSWs, a lack of parenting skills and training, problematic relationships between foster parents and foster children, and finally, traumatic events that negatively affect foster children. Among these drivers, the findings of the study reveal that behavioural problems in foster children happen to be the major reason for the transfer of foster children from one position of care to another. Frequently this was compounded by the concurrent inability of foster parents to adequately manage such problems. These participants pointed out that most of the foster children who have been transferred from one position of care to another were reported to display uncontrollable behaviour when they reach adolescence, and foster parents are often unable to manage the associated rebellious behaviours which consequently lead to the breakdown of the placement. This seems to be a problem as DSWs felt the need to conduct parenting training of which is difficult due to the high caseload that they experience within their work environment.

The mini-dissertation is concluded with a chapter which outlines the conclusions, limitations, implications and recommendations as well as obstacles obtained during the process of the study. It is the researcher's suggestion that further research should be conducted in relation

to the development, implementation and evaluation of appropriate training programs that DSWs should provide to foster parents in order to strengthen their knowledge in managing the behaviour of foster children. It was also suggested that future studies could explore the drivers for the transfer of foster children among people with different socio-economic characteristics. A need also exists for more in-depth exploration of how various life cycle stages of foster children affect their placement, based on the finding that adolescent foster children were often experienced as problematic. Finally, the current study did not explore the perception of foster children to get their experiences for being in multiple placements. This aspect should be included in future studies.

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CHAPTER 1

INTRODUCTION, PROBLEM STATEMENT AND OBJECTIVES

This chapter present the general orientation of the mini-dissertation. The central intention of the study is to explore the perception and experiences of fosters parents and DSWs pertaining to the frequent transfer of foster children from one placement to another. A brief overview of the research study will be presented in the introduction below. The research problem, main research questions and the objectives of the study, research methodology and ethical matters will be discussed. The researcher will conclude the chapter by outlining the different chapters of the mini-dissertation.

1.1 Introduction

Foster care in South Africa is considered the main source of alternative care for vulnerable children (Brown, 2014:1). It is a service for children who are unable to remain in the care of their primary caregivers (mostly biological families) generally because of either abuse, neglect, abandonment, death of caregivers, and/or the temporary inability of the family to take care of their children (Craft, 2015:1). According to Craft (2015:1) South Africa has thousands of children who are in need of care, protection and a stable environment. These children have a need to belong to a family where they can be loved and nurtured. The main purpose of foster care is to protect and nurture such children. This is done by providing a safe and healthy environment with positive support that meets the child's needs (Brown, 2014:1).

Children entering foster care present far higher than average levels of attention deficit hyperactivity disorder (ADHD), depression, mania, and post-traumatic stress disorder (PTSD) due to negative parenting behaviour that they experienced (Fallesen & Wildeman, 2015:2). These problems intensify for children who still undergo multiple and frequent foster care placements (i.e. placement instability). A common standard is that three or more moves constitute placement instability (Children & Research Center, 2004:1). The researcher herein seeks to investigate the drivers for the transfer of foster children from one place of alternative care to another.

South Africa has developed one of the most advanced legislative frameworks in relation to the protection of children. The Children's Act (38 of 2005) was promulgated in order to give

effect to the full constitutional and international rights of children which include, among others: family care or appropriate alternative care and protection from maltreatment, neglect, abuse or degradation. This includes recourse to foster care when necessary. According to Section 180(1) of the Children's Act (38 of 2005), a child is in foster care when placed in the care of a person who is not the parent or guardian of the child, under specific circumstances further detailed in this section of the Children's Act (38 of 2005). Foster care placement is therefore defined as the impermanent placement of children (i.e. anyone below the age of 18 years) who are in need of care and protection (Children's Act, 38 of 2005). These placements involve children of all ages and from all cultural, religious and socio-economic backgrounds (Child & Adolescent Specialist Programs & Accommodation, 2015:1).

1.1.1 Foster care placement process

The process of foster care placement starts with the DSW identifying a child who is in need of care and protection and also finding a suitable alternative care option, such as a foster family. This is followed by the DSW conducting a comprehensive assessment of the prospective foster parents. During the assessment (which is also called screening) several factors about the potential foster parents are taken into consideration: age and holistic health of the prospective foster parents, previous conviction on sexual offences and criminal record, family composition, capacity of prospective foster parents for co-operative caregiving, home environment, religious and cultural profile of prospective foster parents, housing and income (Brown, 2014:33). The process of screening is serious, and should always be conducted in a manner that serves the best interests of the child/ren concerned. After the screening process, the DSW will compile and submit a report to the Children's court in which he/she will conclude with a recommendation that the child/ren concerned be placed with suitable and qualified (i.e. screened) foster parents or not (Child & Adolescent Specialist Programs & Accommodation, 2015:1). These prospective foster parents will be requested by the DSW to appear before the Children's court for the finalization the foster care placement.

Brown (2014:17) asserts that foster care provides children with reparatory family life and that it can make a difference to children's physical, emotional and educational development and ultimately their life opportunities. Children are removed from the care of their primary caregivers and placed in foster care as a way of protecting them from immediate harm (Berrick, 1998:2). It may be regarded as a system of accommodation for the children in need

of care and an intervention in the life of children that can possibly contribute to an improved life (Brown, 2014:2).

However, researchers estimate that 30% to 80% of children in foster care display emotional and/or behavioural problems, either from their experiences before being placed in foster care or from the foster care experience itself (Bent-Goodley & Chipungu, 2013:1). These children also face emotional and psychological challenges or loss of relationship with their primary caregivers (often biological parents) as they try to adjust to new and often different environments (Van Holen *et al.*, 2008:2). Although matching foster children with prospective foster parents who have similar cultural, linguistic and religious backgrounds are essential, it is not always possible given the great number of foster children and the death of prospective foster parents (Van Holen, *et al.*, 2008:2). Thus, these children are sometimes placed in foster care with adults who have different backgrounds from their own, and these children are then often (unintentionally) denied the right to enjoy their original culture, practice their religion or to use their native language (Van Holen *et al.*, 2008:2). This can lead to a disturbance in the placement and the subsequent transfer of a foster child to another place of alternative care.

Professionals dealing with foster care have to follow legislation that governs foster care, in order to ensure that the needs of the foster children are met (Rosenwald & Riley, 2010:35). However, some foster parents not only fail to meet the needs of the children in their care, but actively harm children entrusted to them (Rosenwald & Riley, 2010:35).

Foster parents also sometimes fail to deal with the special needs (such as Antiretroviral (ARV) treatment) of children due to lack of training or supervision hence the transfer of the child to another foster home (Berrick, 1998:73). According to Van Holen *et al.* (2008:1) foster parents need more support and training in managing the behaviour of children placed in their care. It has been discovered that foster parents do not usually get support from DSWs; hence they often feel dissatisfied and quit fostering which leads to the transfer of the foster child to another placement (Van Holen *et al.*, 2008:1).

According to Section 171 and 173 of the Children's Act 38 of 2005, children have the right to be transferred from one alternative care to another placement if the existent placement is not in their best interest. Child development theory posits that repeated movements of foster

children jeopardize the opportunity of these children to develop secure attachments with caregivers and trusting relations with adults (Bowlby cited by Children and Research Center, 2004:3). Foster children, who have traumatic pasts, are further confronted with more traumas, when transferred on more than one occasion. Since the protection of children is a priority emphasized by the Children's Act (38 of 2005) and Section 28(1) (d) of the South African Constitution 1996, it is important for us as social scientists and practitioners to address this problem of foster care transfers which seems to be a frequent occurrence that harm children. This task is challenged, among other, because these statutes fail to address the needs of children during the period in which they are emancipated from the foster care system.

Continuous transfers of foster children result in multiple placements. Multiple placements are associated with disruptive behaviour with poor outcomes in foster children, whether from kinship care to foster care, or from foster care to the birth home and back into care (Berrick, 1998:73). Research shows that some children in foster care suffer from Post-Traumatic Stress Disorder (PTSD) due to challenges stemming from the trauma they have experienced (Craft, 2015:1). According to Phagan-Hansel (2012:259) children who display symptoms of learned helplessness, anxiety, aggression, explosive and other challenging behaviours can be difficult for the foster parents to manage. As a result, a vicious cycle ensues as these children have a high risk of multiple placements which include the transfer from one foster home to another (Phagan-Hansel, 2012:259).

The road to repeated transfers is likely to happen when foster parents lack knowledge and understanding about the child's needs, the child's development, and the placement process; and also due to a lack of individualized services with the right support at the right time by the DSW before foster care placement commences (Skoog & Khoo, 2013:2). A placement breakdown is a complex process that starts in the discrepancy between the statutory obligations of the DSW towards the foster home and the foster parent's perceptions (Skoog & Khoo, 2013:1).

1.2 Problem Statement

According to the researcher's review of existing literature there have been very few studies conducted in terms of foster care breakdowns that result in the repetitive placement of foster

children. Notably, there are a few researchers who have conducted quantitative studies on foster care placement breakdowns. Botes (2008:16) found that foster care transfers are associated with the DSWs having little knowledge in the application of attachment therapy during foster care placement. Van der Westhuizen (2011:59) focused on the needs of adolescents orphans in foster care affected by HIV/AIDS. He found that social group work should be used as a valuable method whereby adolescents and foster parents should come together and develop ideas and ways of dealing with the illness in their lives. Dugan (2013:1) found that the shortage of social workers place vulnerable children at an increased risk because the available social workers spend most of their time doing administration work than foster care supervision. Foster care supervision only takes the form of annual house visits unless there is a difficulty related to the placement therefore an urgent home visit will be made (Democratic Alliance, 2015:1)

However, no studies could be located that investigated the reasons for multiple foster care placement from a qualitative perspective. Given that the reasons for such placements are likely to be complex and involve personal subjective experiences and perceptions of the parties involved, a significant need exists to conduct this qualitative study so as to analyse the perceptions of DSWs dealing specifically with foster care supervision and foster parents who have personal experience of children being transferred from their care, to explore the reasons for these transfers.

1.3 Research Questions

In light of the above discussion, the following research questions are proposed for the present study:

1.3.1 Main research question

What are the reasons that lead to the transfer of foster children from one placement of alternative care to another?

1.3.2 Secondary questions

- Why do foster parents request the transfer of foster children from their care to another?

- Why do DSWs request or ensure the transfer of foster children from one placement of care to another?

1.4 Research objectives

1.4.1 Main research objective

The main objective of the study is to explore the reasons that lead to the transfer of foster children from one placement of alternative care to another.

In order to achieve the aim of the study the following specific objectives were formulated:

1.4.2 Secondary research objectives

- To explore the reasons that cause foster parents to request the transfer of foster children from one placement of care to another.
- To explore the reasons that cause DSWs to request or affect the transfer of foster children from one placement of care to another.

1.5 Methodology

1.5.1 Literature review

As part of the study, a comprehensive literature review has been carried out. This review provided guidance to the researcher with knowledge on the research study. This literature review provided a theoretical background in relation to this research study and allowed the researcher to contextualise the findings that emerge from the research. Internet databases such as Google scholar, SABINET and EBSCOHOST has been used to gather information applicable to the study. The keywords applicable to the study such as transfer, foster children, foster parents, social workers, and care were used to guide the literature selection.

1.5.2 Empirical design

Research design

“The scientific method includes a variety of research approaches, tools, and techniques, such as qualitative and quantitative data, statistical analysis, experiments, field surveys, case research, and so forth” (Bhattacharjee, 2012:14). Given the aims of the present study, which focussed on obtaining an in-depth and nuanced understanding of the reasons for the transfer

of foster children from one placement of alternative care to another, a qualitative approach was adopted. Collins *et al.* (2013:239) define qualitative research as a process of collecting and analysing data aimed at understanding clients in the context of their environmental systems. Qualitative research allows the researcher to promote self-awareness, to develop a working relationship with participants, observe their non-verbal cues, fully understand their experiences or impressions and to get full range and depth of information from them, rather than focusing on numerical data (Savin-Baden & Major, 2010:20). This accord with the aim of this study where the researcher aimed to gain an understanding of the mentioned topic as subjectively experienced and perceived by DSWs and foster parents.

Participants

The researcher used the non-probability purposive sampling method to identify research participants (De Vos *et al.*, 2005:202). This sampling method is rooted completely in the judgement of the researcher, as he or she selects participants who have a particular expertise that will advance the researcher's interest for the purpose of the study (De Vos *et al.*, 2005:202; Given, 2008:1). In the context of the present study, purposive sampling entails choosing participants who have knowledge and experience in relation to foster care placement and supervision. In the current study, the researcher set criteria for the participants because purposive sampling involves the formation of sampling criteria (De Vos *et al.* 2005:202). According to the criteria that guide this study, participants (foster parents) had to be:

- foster parents who have (at some time or another) requested the re-placement of a foster child in their care;

The inclusion criteria for DSWs required that they had to be:

- registered with the South African Council of Social Service Profession (SACSSP).
- permanently employed by the DSD
- have at least 3 years' experience dealing with foster care placements and supervision

The initial sample involved twenty participants made up of ten DSWs working for the DSD, and ten foster parents who complied with the selection criteria. Participants (DSWs and foster parents) came from various parts of Gauteng Province in South Africa including Sebokeng, Evaton and Lakeside. These participants were deemed suitable to participate in this study as they (DSWs) worked directly with foster care in their daily practice and had (foster parents)

experiences of foster children being transferred to and from their care. The interviews took place over a month from the 1st of August 2016 until the 4th of September 2016.

Data Collection

This study utilized a semi-structured interview guided by an interview schedule to collect data from the selected participants. Interviews were conducted on a one-on-one basis so as to provide the researcher with a deeper understanding of the social phenomena under study. Quantitative methods such as questionnaires may not be able to offer the same benefit to the researcher herein (Atkins & Wallace, 2012:1). Interviews as a method of collecting data were suitable as the researcher was interested in getting first-hand information from the participants (De Vos *et al.* 2005:297). Furthermore, interviews enabled the researcher to understand the world from the participants' point of view and to uncover their lived experiences and beliefs (Savin-Baden & Major, 2010:177). Before data was collected by the researcher, prior arrangements for the date and time of the interviews were made with each participant for individual interviews. The interview process involved two groups of participants (DSWs and foster parents), and as such, two sets of questions guided the interviews. The following questions were posed to the DSWs:

- In your opinion what are the reasons for the transfer of foster children from one place of care to another? This question allowed participants to express their views and to provide detailed and valuable information to the researcher.
- Based on your experience, what problems come to the fore in the foster family systems necessitating that foster children be moved to another placement?
- If foster children are moved from one foster care placement to another, on what basis are these decisions made?
- What steps (if any) do you take to prevent the transfer of foster children from one place of care to another?
- What are your views regarding the repetitive transfer of foster children?
- What form of training (if any) did you provide to the foster parents to prevent placements from breaking down?
- What exactly your screening of foster parents include/involve?

The second group of participants (foster parents) were asked the following questions:

- In your opinion what are the reasons for the transfer of foster children from one place of care to another?
- Based on your experience, what problems come to the fore in the foster families necessitating that foster children be moved from one placement to another?
- What training with regard to your role as foster parent have you received from social workers? Do you think this might in any way have affected your decision to request a transfer? If so, how?
- What do you think are the developmental needs of children? (This question was aimed at assessing the extent to which foster parents understand the developmental needs of children, which plays a significant role in the success or failure of foster care placements).
- What sort of supervision and support services did you receive from the social workers?
- How do you deal with the behaviour problems that you experience with foster children before a transfer is made?

Interviews were audio recorded with the permission of the participants and verbatim transcriptions of these recordings were made by the researcher.

Research Procedure

The researcher obtained permission from the DSD (Gauteng Provincial office) to interview participants (DSWs and the foster parents). Ethical clearance to conduct the study was also obtained from the Ethics Committee of North-West University, Vaal Triangle Campus.

Participants (DSWs and the foster parents) were identified by Assistant Social Work Managers in the data base of the DSD. Mediator ensured that participants understood and agreed to their participation before signing the informed consent forms. The research assistant facilitated the process of obtaining informed consent from all participants before data collection commenced. Both DSWs and foster parents signed the consent forms. Once the consent forms were signed, the researcher made contact with participants telephonically. An appointment for each interview was scheduled with each participant. The interview took place on a date and time that was agreed upon by the researcher and the participants. The interviews were conducted in private offices within the DSD and in the homes of the foster parents during home visits, as both these locations were free from distractions. The researcher

explained the reasons for conducting the interview. Twenty interviews were conducted in twenty days. The duration of the interviews were between 13- 28 minutes each. After the researcher transcribed interviews, she analysed the data by means of thematic content analysis (Braun & Clarke, 2006:6).

Data Analysis

According to De Vos (2005:339) data analysis is the process of bringing order, structure and meaning to the mass of data collected. It is a process of evaluating data found during the data collection process. Data analysis in qualitative research involves a researcher with creativity in reducing raw information, sifting the significant from the insignificant, keen perception of unclear patterns, and constructing a framework for communicating the essence of what the data reveal (De Vos, 2005:333). Data analyses started at the research site and continued throughout the duration of the proposed study. In qualitative research, data collection and analysis normally go hand in hand, in order to build a rational interpretation of the data (De Vos, 2005:333).

The researcher first organised the data, after which she coded the data (a process of arranging interrelated themes and categorised into systematic order) and generated final categories answering the different research questions (De Vos, 2005:333). The researcher utilized thematic content analysis to analyse the data gathered from the participants (Guest *et al.*, 2012:10). Thematic content analysis is an interpretive process that allows the researcher to organise and group similarly coded data into categories or groups because they share the same characteristics (Hesse-Biber, 2010:8). Thematic analysis was appropriate for the current study because the study was explorative in nature. The researcher evaluated the collected data according to the research questions asked during the interviews. The researcher used the first step of coding and divided data into units of meanings where descriptive code labels were provided. Data from the DSWs and foster parents were analysed separately to explore their different perceptions regarding repetitive transfers of foster children. Codes were identified in the first stage in order to reduce raw information and sift the significant from insignificant. These codes were then sorted into potential categories and be grouped together based on conceptual similarities and then be integrated into overarching themes by means of memos and visual graphs.

Quality Assurance

For the researcher to ensure trustworthiness, essential criteria of trustworthiness were followed: credibility, transferability, dependability and confirmability (Shenton, 2004:1). Credibility refers to the extent to which the findings reflect the phenomenon under study (Shenton, 2004:63). The researcher believes that using different participants in different settings, who have all been purposively selected on the basis of their knowledge of the topic of the study, will enhance the trustworthiness of the findings (Jangu, 2012:3). Participants were asked by the researcher to review the transcripts of the interviews as well as the initial findings of the study in order to ensure credibility. This process is known as member checking, and contributes to enhanced credibility of findings (Shenton, 2004:68).

Transferability refers to the degree to which the outcome of the research study can apply or transfer beyond the limits of the project (Shenton, 2004:63). Transferability in qualitative research is determined by the readers of the study. A detailed description of the research context, methodology, and participants is provided to enable other researchers to determine whether the findings would be transferable to given contexts other than that of the present study. For the same reason, the contexts of the DSWs and the foster parents were considered and comprehensively discussed. This was done in order to achieve transferability in the study.

1.6 Ethical Considerations

Ethical matters were given primary consideration in this study because people were involved. According to Section 3 of the Social Service Profession Act 110 of 1978, social workers who are involved in conducting scientific research are expected to adhere to ethical codes that guide their professional practice in order to protect the dignity and the welfare of the research participants. The researcher requested permission from the DSD in order to interview their DSWs (during office hours) dealing with foster care placements and supervision and clients who were foster parents to children who have been transferred from one placement to another. Ethical permission was also obtained from the Ethics Committee of North-West University, Vaal Triangle Campus.

The aim of ethics is to ensure that no person is harmed as a result of the research activities (Botes, 2008:12). The following ethical considerations were taken into account whilst conducting of the proposed research study:

According to Atkins and Wallace (2012:42) research participants should not be manipulated to participate in the research study. The mediator ensured that participants understand and agree to their participation without any duress prior to the research commencement. To this end the selected research participants were informed that there would be no penalty for refusal to participate or for withdrawal from the proposed study as participation is voluntary, and that they also have the right to refuse to respond to particular questions if they feel uncomfortable (World Health Organization, 2011:14). Furthermore, they were informed that their identities will remain confidential (De Vos *et al.*, 2005:61).

Participants were informed about the nature of the research, the process in which they were to be engaged, to whom the information would be revealed, why their participation was necessary, and how it would be used, in order that they could make an informed decision as to whether they would participate in the study or not (Atkins & Wallace, 2012:42). They were informed that the information would be accessed by the researcher and the supervisors in a private setting (Collins *et al.*, 2013:201). Interview transcripts and records of informed consent are kept in a safe place in keeping with the norm of conducting scientific research (De Vos *et al.*, 2005:59).

Participants were requested to respond honestly and to the best of their knowledge throughout their interaction with the researcher. If they agreed and understood the process of the study they were invited to provide their signature on the consent form before they continue to participate in the research (Savin-Baden & Major, 2010:21).

1.7 Chapter Division of the Mini-dissertation

The mini-dissertation will be written according to the article method and will be divided into three different chapters which are outlined as follows:

Chapter 1: Introduction, problem statement and objectives

Chapter 2: Article: A qualitative exploration of the reasons for the transfer of foster children from one position of care to another

Chapter 3: Conclusions, limitations and recommendations

1.8 Summary

The purpose of this chapter was to provide background information pertinent of the mini-dissertation. This chapter began with the review of the literature relevant to the reasons for the transfer of foster children from one position of care to another. This involves the exploration of the perception and experiences of the DSWs and foster parents from various parts of Gauteng Province which includes Lakeside, Sebokeng and Evaton. The findings derived from the study are presented in article format. This article includes aim and objectives of the study, research methodology and limitations of the study.

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CHAPTER 2

RESEARCH ARTICLE

A QUALITATIVE EXPLORATION OF THE DRIVERS FOR THE TRANSFER OF FOSTER CHILDREN FROM ONE POSITION OF CARE TO ANOTHER

ABSTRACT

The main aim of this qualitative study was to explore the drivers for the repeated transfer of foster children from one position of care to another by means of 20 semi-structured interviews with foster parents and DSWs, which were subsequently analysed by means of thematic content analysis.

Non-probability purposive and quota sampling methods were used to obtain participants for the study. Participants had to have knowledge and experience in relation to foster care placement and supervision and had to have requested the transfer of a foster child. Participants were mainly black females residing in various parts of South Africa, in Gauteng Province including Sebokeng, Evaton and Lakeside. These participants were drawn from the database of the DSD. The interviews took place over a period of a month from the 1st of August 2016 until the 4th of September 2016.

Overall five themes were derived from the data, which suggest that the main drivers for the repeated transfer of some foster children stem from foster children's behavioural problems, a shortage of resources which put vulnerable children at risk, a lack of parental skills and training, problematic relationships between foster parents and foster children, and finally, traumatic events that negatively foster children. The article ends with a recommendation that further research should be conducted in relation to the development, implementation and evaluation of appropriate training programs that DSWs should provide to foster parents in order to strengthen their knowledge in managing the behaviour of foster children.

Keywords: *Transfer, foster children, foster care, multiple placements, qualitative research*

INTRODUCTION

Foster care placement is defined as the impermanent placement of children who are in need of care and protection (Children's Act 38 of 2005). The main purpose of foster care is to protect and nurture children who find themselves in situations where adequate care is not available. The Children's Act (38 of 2005) was established in South Africa to give effect to the full Constitutional rights of children which include, among others: family care or appropriate alternative care, protection from maltreatment, neglect, abuse or degradation, and to provide care and protection for children who are in need of care. This includes recourse to foster care, which can involve children of all ages and from all cultural, religious and socio-economic backgrounds (Child & Adolescents Specialist Programs & Accommodation, 2015:1).

Children in foster care present far higher than average levels of attention deficit hyperactivity disorder (ADHD), depression, mania, and post-traumatic stress disorder (PTSD) due to the negative parenting behaviour that most of these children went through (Fallessen & Wildeman, 2015:2). These problems are even more pronounced among children who underwent multiple foster care placements. However, the reasons for such multiple placements are under-researched, and as such the main aim of the present study was to address the following research question: What are the drivers of repeated transfers of foster children from one place of care to another? And more specifically, what are the reasons that foster parents have for requesting these transfers and what are the reasons that DSWs have for effecting these transfers?

The process of foster care placement

The process of foster care placement starts with the DSWs conducting a comprehensive assessment of the prospective foster parents. There are several factors that are taken into consideration during assessment, such as the age of the prospective foster parent, the health of the prospective foster parent, previous convictions on sexual offences, whether family composition and the home environment is conducive for human development, as well as housing accommodation and income. (Brown, 2014:33). This assessment process is conducted with the best interests of the child in mind. When the assessment process is complete, the social worker compiles a report to the court recommending that the child be placed with the suitable foster parent who has undergone such an assessment process

(CASPA, 2015:1). The prospective foster parent is then requested by the designated social worker (DSW) to appear before the Children's court for the finalization of the foster care placement.

Even though foster care placement involves removing children from their homes to protect them from immediate harm (Berrick, 1998:2), foster care placement is deemed to be a beneficial strategy as Brown (2014:17) asserts that it provides children with reparatory family life, and that as such, it can make a difference to children's physical, emotional and educational development and ultimately their life opportunities. It may therefore be regarded as a system of accommodation for children in need of care and an intervention in their life situation.

However, researchers estimate that 30% to 80% of children in foster care display emotional and/or behavioural problems, either resulting from their experiences before being placed in foster care, or from the foster care experience itself (Bent-Goodley & Chipungu, 2013:1). These children also face emotional and psychological challenges or loss of relationships with their natural parents as they try to adjust to new and often changeable environments (Van Holen *et al.*, 2008:2). Moreover, Van Holen *et al.* (2008:2) further argued that foster children placed with foster parents with different backgrounds from their own may be unintentionally denied the rights to enjoy their culture or use their native language. Due to reasons such as these, foster care placements often break down.

According to Barber 2001 (cited by National Resource for Permanency and Family Connections, 2009:1) multiple placements of children are linked with behavioural and emotional problems, education difficulties and juvenile delinquency. Repeated transfers of foster children have been seen as exacerbating the pain and trauma that children have already experienced (National Resource for Permanency and Family Connections, 2009:1).

Another international quantitative study investigated factors associated with disruption in long-term kinship and non-kinship foster care, and found that placement instability can result in lowered self-esteem, increased feelings of distrust, fears about forming healthy relationships with others, as well as drug use (Holtan *et al.*, 2013:1). It was further found that children who have experienced multiple placements have to repeatedly learn new family values and rules and get accustomed to a new environment with every placement, which is a

stressful experience (Holtan *et al.*, 2013:1). According to Phagan-Hansel (2012:259) children who display symptoms of learned helplessness, anxiety, aggression, explosive and other challenging behaviours can be difficult for the foster parents to engage and motivate. As a result, a vicious cycle ensues as these children have a high risk of multiple placements which include the transfer from one foster home to another (Phagan-Hansel, 2012:259). Research shows that some children in foster care suffer Post Traumatic Stress Disorder (PTSD) due to the challenges stemming from the trauma they have experienced. The above-mentioned factors are not only outcomes of repeated placements, but also often contribute to a perpetuation of the cycle as they tend to contribute to the termination of foster care placement which results in the movement of a foster child to another foster family (Holtan *et al.*, 2013:1).

Findings of previous studies such as that by Botes (2008:16) which was conducted with social workers of Tshwane Metropolitan in South Africa further revealed that foster care transfers are associated with social workers having little knowledge in the application of attachment therapy during foster care placement. It was further found that the shortage of social workers as well as the high caseloads that social workers typically experience place vulnerable children at additional risk because the available social workers are overburdened, have to divide their time between many cases, and spend much of their time doing administration work rather than foster care supervision (Dugan, 2013:1). In many instances, foster care supervision only takes the form of annual house visits unless there is a difficulty related to the placement, in which case an urgent home visit will be made (Democratic Alliance, 2015:1). These factors all contribute to the breakdown of foster care placements, which very often lead to the transfer of a foster child to another place of care.

The studies noted above were all quantitative in nature. According to the researcher's review of existing literature there are no qualitative studies that investigated the reasons for multiple foster care placements in a South African context. Furthermore, the studies that have been conducted on the topic involved interviews with foster children and social workers who have dealt with foster care placement and supervision, but did not explore the reasons why foster children are being transferred from one position of care to another. Moreover, these studies did not explore the views and perceptions of foster parents, who play an important role in the repeated transfers of foster children as they often initiate requests for such transfers. Given that, the reasons for such repeated placements are likely to be complex and involve personal

subjective experiences and perceptions of the social workers and foster parents, a significant need existed to conduct this present qualitative study in order to explore the perceptions of social workers and foster parents of the reasons that lead to the transfer of foster children from one placement to another. As such, the main aim of the present study was to gain an understanding of the reasons for the transfer of foster children from one placement to another as subjectively experienced and perceived by DSWs and foster parents. Findings emanating from this study might be of use to DSWs in creating a heightened awareness of the reasons behind such transfers, which might form the basis for the development of more effective strategies on their part to prevent unnecessary transfers of foster children.

METHODOLOGY

The researcher adopted a qualitative methodology for this study, with the aim of obtaining an in-depth and nuanced understanding of the reasons for the transfer of foster children from one placement to another. Collins *et al.* (2013:239) define qualitative research as a process of collecting and analysing data aimed at understanding participants in the context of their environmental systems. The researcher used this approach in order to gain an emic understanding of the reasons for the transfer of foster children from one placement to another as subjectively experienced and perceived by DSWs and foster parents. More specifically, the researcher made use of an exploratory research design as basis for approaching the research question. This design entails the exploration of social phenomena in order to describe and understand them with greater levels of depth (De Vos *et al.*, 2005:106).

Participants and sampling

Permission to conduct this study was obtained from the DSD to interview 20 participants (ten social workers and ten foster parents). These participants were identified and recruited from the data base of the Department of Social Development (DSD) because foster care placement is in their domain of practice and as it is the biggest welfare organization nationwide. The researcher used non-probability purposive sampling to select participants who have knowledge and experience in relation to foster care placement and supervision (De Vos *et al.*, 2005:202; Given, 2008:1). To achieve this aim, the sampling process was guided by the following inclusion criteria: The DSWs chosen as participants had to be employed by the DSD; be registered with the SACSSP, and have had at least 3 years' experience in dealing with foster care placement and supervision. Foster parents chosen as participants were

required to have at some time or another requested the re-placement of a foster child under their care. Quota sampling was employed in order to ensure that both DSWs as well as foster parents who were involved with the transfers of foster children were included in the sample (Dudovskiy, 2016:1). Quota sampling is a type of non-probability sampling which involves getting participants who have certain common characteristics wherever the researcher found them (Crossman, 2016:1). The researcher chose DSWs and foster parents precisely because she believes that they are well-suited to provide the researcher with information relevant to achieving the stated research objectives. Participants were mainly black females residing in various parts of South Africa, including Sebokeng, Evaton and Lakeside. In total, ten DSWs and ten foster parents participated in the study.

Table 1: Profile of the Designated Social Workers

Participant	Race	Gender	Age	Marital Status	Registered with SACSSP?	Work experience as DSW
P1	Black	Female	41 years	Married	Yes	4 years
P2	Black	Female	34 years	Married	Yes	5 years
P3	Black	Female	37 years	Married	Yes	7 years
P4	Black	Female	44 years	Married	Yes	4 years
P5	Black	Female	48 years	Single	Yes	4 years
P6	Black	Female	28 years	Single	Yes	3 years
P7	Black	Female	49 years	Single	Yes	9 years
P8	Black	Female	36 years	Married	Yes	4 years
P9	Black	Female	29 years	Married	Yes	6 years
P10	Black	Female	29 years	Single	Yes	3 years

Table 2: Profile of the Foster parents

Participant	Race	Gender	Age	Relationship	Marital Status	Occupation	Has biological children?
P1	Black	Female	51 years	Non-related	Married	Unemployed	Yes
P2	Black	Female	44 years	Non-related	Married	Unemployed	Yes
P3	Black	Female	45 years	Non-related	Widow	Unemployed	Yes
P4	Black	Female	56 years	Maternal grandmother	Married	Unemployed	Yes
P5	Black	Female	59 years	Maternal grandmother	Married	Unemployed	Yes
P6	Black	Female	56 years	Non-related	Widow	Unemployed	Yes
P7	Black	Female	65 years	Maternal grandmother	Widow	Pensioner	Yes

Participant	Race	Gender	Age	Relationship	Marital Status	Occupation	Has biological children?
P8	Black	Female	51 years	Non-related	Widow	Unemployed	Yes
P9	Black	Female	46 years	Maternal grandmother	Married	Unemployed	Yes
P10	Black	Female	47 years	Paternal aunt	Married	Employed	Yes

Data collection

The researcher used semi-structured interviews to collect data from the selected participants. The interviews were conducted on a one- on- one basis to provide the researcher with a deeper understanding of the social phenomena under study. The use of semi-structured interviews as a method of collecting data was deemed appropriate because the researcher was interested in getting first-hand information from the participants in relation to their personal subjective views and experiences in relation to the topic (De Vos *et al.*, 2005:297). The interviews were conducted in the private offices of the DSWs and in the homes of the foster parents, as these venues were both convenient for the participants and generally free from distractions. The interview process was guided by the following questions:

- In your opinion what are the reasons for the transfer of foster children from one place of care to another? This question will allow participants to express their views and to provide detailed and valuable information to the researcher.
- Based on your experience, what problems come to the fore in the foster family systems necessitating that foster children be moved to another placement?
- If foster children are moved from one foster care placement to another, on what basis are these decisions made (question posed only to DSWs)?
- What steps (if any) do you take to prevent the transfer of foster children from one place of care to another (question posed to DSWs)?
- What are your views regarding the repetitive transfer of foster children (question posed to DSWs)?
- What form of training (if any) did you provide to the foster parents to prevent placements from breaking down (question posed to DSWs)?
- What training with regard to your role as foster parent have you received from social workers? Do you think this might in any way have affected your decision to request a transfer? If so, how (question posed to foster parents)?
- What do you think are the developmental needs of children? (This question is aimed at assessing the extent to which foster parents understand the developmental needs

of children, which plays a significant role in the success or failure of foster care placements) (question posed to foster parents)?

- What sort of supervision and support services did you receive from the social workers (question posed to foster parents)?
- How do you deal with the behaviour problems that you experience with foster children before a transfer is made (question posed to foster parents)?

Interviews were digitally recorded with the permission of the participants.

Data analysis

The audio-recorded interviews were transcribed verbatim, and the resulting interview transcripts were analysed using thematic content analysis. Thematic content analysis is an interpretive process that allows the researcher to organise and group similarly coded data into categories because they share the same characteristics (Hesse-Biber, 2010:8). This method of analysis was appropriate to the current study because the study is explorative and qualitative in nature. The researcher evaluated the information achieved from the data collection process guided by the research questions used to construct the interviews. During this process the researcher used the first stage of open coding and divided data into units of meaning, and assigned descriptive code labels to each such segment. Data from the DSWs and foster parents were analysed separately to explore their perceptions regarding the transfer of foster children. The first stage of coding enables the researcher to reduce raw information and sift significant from non-significant data. The codes were then sorted into categories and grouped together based on conceptual similarities and then integrated into overarching themes.

Ethical considerations

Ethical matters have been given primary consideration in this study to guide the researcher's professional practice in order to protect the dignity and the welfare of the research participants as urged by the World Health Organisation (2015:1). Ethical clearance to conduct the study was obtained from the Human Health Research Ethics Committee of the North-West University, and from the DSD to interview DSWs dealing with foster care placement and supervision and foster parents who had foster children in their care. Participants were recruited from the database of the DSD because foster care placement is in their domain of practice. An independent recruiter was used to minimize the possibility of undue influence affecting potential participants' decision to take part in the study. The researcher took care to fully explain all aspects pertaining to the study, and ensured that

participants understood and agreed to their participation without any duress prior to the research commencement. Participants were also informed that participation in the study was entirely voluntary and that they were free to withdraw their participation without any penalty. They were further informed that their identities will remain confidential (De Vos *et al.*, 2005:59). The researcher obtained signed informed consent from all participants.

Participants were requested to respond honestly and to the best of their knowledge throughout the interview process. They were informed that they have the right to refuse to respond to particular questions if they felt uncomfortable, as recommended by the World Health Organisation (2011:14). Participants were also informed that the information they provided would be accessed by the researcher and supervisor in a private setting (Collins *et al.*, 2013:201). To further ensure confidentiality, copies of data are secured with a password known only by the researcher and the supervisor.

FINDINGS

The findings of the current study, which explored the drivers for the transfer of foster children from one position of care to another, are evaluated and described in this section. Overall five themes were derived from the data, which suggest that the main drivers for the repeated transfer of some foster children stem from foster children's behavioural problems, a shortage of resources which put vulnerable children at risk, a lack of parental skills and training, problematic relationships between foster parents and foster children, and finally, traumatic events that negatively affect foster children.

Foster children's behavioural problems

One of the primary reasons given for the transfer of foster children centered on behavioural problems exhibited by foster children. Frequently this was compounded by the concurrent inability of foster parents to adequately manage such problems. Findings of this study reveal that this appeared to be the most frequent and commonly cited problem in the foster family system that necessitated the transfer of children from one position of care to another. One participant indicated that "*behavioural problems is one of the major reasons for the transfer of foster children*" (Participant 9, interview, 25 August 2016). Another DSW mentioned that "*You find that the child has got problem behaviour and foster parent like I have just mentioned they are not trained, they cannot handle the child*" (Social worker 7, interview, 8

August 2016). Foster children's behavioural problems which prompted placement changes were classified into four sub-themes, which include behavioural problems associated with the adolescent developmental stage, truancy, stealing money, and disobedience.

Adolescent developmental stage

Most of the foster children who have been transferred from one position of care to another were reported to display uncontrollable behaviour when they reach adolescence, and foster parents are often unable to manage the associated rebellious behaviours which consequently lead to the breakdown of the placement. One DSW illustrated this theme when she stated that: *"A lot of them [transfers] happen during adolescents; you will find that the foster child will be unhappy staying where they are"* (Social worker 10, interview, 25 August 2016). One foster parent indicated that *"Ha a kena bo kgarebeng, a qala ho ratana"* (when he or she enters puberty and begin intimate relationship) (Foster parent 7, interview, 30 August 2016). Another social worker mentioned that: *"When puberty starts, foster parents start to experience problems with the children"* (Social worker 4, interview, 4 August 2016), and another echoed this sentiment by stating: *"because of the adolescent stage, the relationship usually breaks down"* (Social worker 10, interview, 25 August 2016). As such, it appears that both foster children and foster parents are often grappling to manage this developmental stage, which is accompanied by behavioural patterns that often exacerbate any other challenges that might exist, thereby creating a tipping-point effect whereby foster parents request the transfer of such children.

Truancy

Truancy was reported as one of the challenges that foster parents faced with the foster children under their care, and it most commonly took the form of skipping school or running away from home. One DSW mentioned that *"like the child comes home late, may be the child does not sleep in the house"* (Social worker 1, interview, 1 August 2016). Another DSW indicated that *"the child will be absconding from school....."* (Social worker 9, interview, 25 August 2016). Most foster parents appeared to be unequipped to deal with this behaviour pattern due to lack of knowledge and the requisite specialized parenting skills, resulting in them requesting a transfer.

Foster child steals money

Another commonly reported behavioural problem was that foster children often took money without the permission of the foster parent. One DSW mentioned that “*Foster parents will come, this child steals money*” (social worker 4, interview, 4 August 2016). Both foster girls and boys were reported to steal because they wanted something that they could not afford. Most of the foster children steal because foster parents do not utilize the grant for their basic needs. Another DSW pointed out that “*another problem is when it comes to money; they feel that they [the foster parents] do not spend money on their basic needs...*” (Social worker 6, interview, August 2016). Since most of the foster parents are unemployed and rely on the foster grant which is not enough to maintain both foster child and the foster parents without supplementary funds, this was reported to often contribute to the foster children stealing money.

Foster child is disobedient

This subtheme emerged from the frequent mention of the participants that foster children are sometimes disobedient when given certain instructions, and refuse to obey requests from their foster parents. To illustrate this, one foster parent indicated that “*Ke hobane ha ba sa hlola bare mamela, le ha o ba kgalemela (it is because foster children do not listen when reprimanded)*” (Foster parent 10, 4 September 2016). Another foster parent mentioned that “*Ngwanana ha a sa mmamela hohang ha a rabale ka tlung (A girl does not listen and do not sleep in the house at all)*” (Foster parent 10, interview, 4 September 2016). One participant stated that “*Hei bana ba dikgutsana ba setoutu (foster children are naughty)*” (Foster parent 2, interview, 15 August 2016). Another foster parent mentioned that “*Ha o mo roma kapa o mojwetsa hore a konomake, ha ba batle ho di etsa ntho tseo (When you ask her to do something or to clean, she refuses to do it)*” (Foster parent 10, interview, 4 September 2016).

Shortage of resources put vulnerable children at risk

Another reason pointed out for the transfer of foster children focused on limited resources, which were regarded as a major problem by most DSWs who were interviewed. These resources include tools like telephones, vehicles to conduct foster care supervision, as well as resources such as availability of sufficient numbers of DSWs and the amount of time available to each. DSWs dealing with foster care placement and supervision generally cannot do therapy either with the foster parent or foster child due to high case load and limited resources, and as a consequence they refer therapeutic cases to other stakeholders.

Commonly, this happens because the available DSWs spend most of their time doing administration work rather than foster care supervision. Foster care supervision is typically only conducted annually unless there is a difficulty linked to the placement. One DSW mentioned that *“we do visit once in a year, it is impossible to do it properly because of the high caseloads”* (Social worker 1, interview, 1 August 2016). Another DSWs reveals that *“you don’t have time to sit down and have proper counselling sessions between the foster child and foster mother where you will do follow ups and have ten sessions that we had at school, reality is that you cannot afford it here, foster care numbers are quite high “*(Social worker 10, Interview, 25 August 2016).

The shortage of DSWs constitutes a huge difficulty for the foster care system of South Africa. Owing to the great shortage of social workers, those social workers working in the foster care system, at present, are overburdened with enormous caseloads as well as inadequate tools of traits. To illustrate this, one DSW pointed out that *“The biggest challenge with DSD is limited time social worker get to spend with the client because of the caseloads”* (Social worker 10, interview, 25 August 2016). Another DSW mentioned that...*“sometimes there are no cars for us to go out”* (DSW 1, interview, 1 August 2016). Yet another indicated that *“sometime the phones, there are limitations, only R100 a month”* (DSW 1, interview, 1 August 2016). Taken together, these multiple forms of resource shortages conspire to exacerbate the likelihood that foster children will be transferred from one foster home to another.

Lack of parenting skill and training

Multiple placements of foster children have also been found in the present study to be associated with lack of parenting skill on the side of the foster parents. DSWs who have experienced the transfer of foster children express similar concerns over the placement breakdowns due to this reason and often indicated that having adequate skills and knowledge regarding foster care placement may assist in managing the behaviour of foster children and thereby stabilize future foster placements. One DSW mentioned that *“if the child is a teenager, you find that most of the foster parents cannot handle teenagers”* (DSW 3, interview, 1 August 2016). Foster parents sometimes fail to deal with the special needs of children due to lack of appropriate support and appropriate training in managing the behaviour of children placed in their care. Participants further reported that this situation was especially common in cases where a significant age or generational gap existed between the foster child and parent. As one DSW pointed out: *“when a child has uncontrollable*

behaviour, especially the grannies are unable to control them, and then we remove them to Child and Youth Care Centre” (DSW 1, interview, 1 August 2016). Another DSW mentioned that *“you find that some of the foster parent is 70 years old and unable to deal with a child of 15 years”* (DSW 9, interview, 25 August 2016).

A main reason for the lack of foster parenting skill was reported to be the lack of adequate training of foster parents in the specialized skills needed to ensure a stable and successful placement. Participants suggested that retention rate of parents in foster care could be increased by providing foster parents with enhanced training and support services. Findings indicate that there are generally inadequate training provided to prospective foster parent before and after the placement hence the movement of the foster child to another placement. One DSW stated that *“there is no training provided, besides the group, no training at all”* (DSW 6, interview, 8 August 2016), while another stated that *“myself really to tell the truth, I have never been to foster parent training”* (DSW 7, interview, 8 August 2016). One foster parent mentioned that *“Atjhe! bona haba reso re fe training... (No, we never receive training)”* (Foster parent 1, interview, (15 August 2016). Another DSW indicated that *“we are supposed to do training but we do not have time”* (DSW 7, interview, 8 August 2016).

The salience of this theme was also echoed by the foster parents, who also frequently stated that a lack of foster parent training seems to be a barrier for foster parents to perform their role in nurturing of foster children. Some of the foster parents in this study acknowledged that they are not able to take good care of the foster children due to little knowledge that they have. They feel that if they receive proper training and adequate support from the social workers they may acquire more knowledge and become suitable foster parents. This notion was well illustrated in the words of the following participant who said that *“ha ke tsebe tsebo ya hore ke ka ba hlokomela jwang, mare ha ke le training ke tlo thola more ho nna e tsa tjena (I do not have knowledge on how to care for them, but if I can receive more to say do like this)”* (Foster parent 2, interview, 15 August 2016). In particular, many of the foster parents who have experienced the transfer of foster children have inadequate understanding about how to deal with situations associated with the child’s developmental stage (most especially adolescence, as noted earlier) due to lack of training by the social workers. As a result they refer these children to community members [community policing forum] for assistance on how to deal with these children. One participant stated that *“ Ma ra bothata ba hae ke ho*

tsamaya bosiu, ke llile, ka ba ka moisa ho maCPF (But her problem is to go out at night, I cried and end up reported her to the CPF)” (Foster parent 7, interview, 30 August 2016).

Misuse of foster grants and lack of financial support

Misuse of foster care grant seems to be another reason for the transfer of foster children. Since many foster parents are unemployed, they were reported to often misuse the foster care grant, utilizing it for their own benefit rather than in the best interest of the foster children. One DSW indicated that *“they do not spend money on their [the foster child’s] basic needs”* (Social worker 6, interview, 8 August 2016). While another DSW mentioned that *“If foster parent is not doing anything for me (foster parent not providing the needs of the child), they utilize the grant for themselves and it becomes a problem”* (DSW 10, interview, 25 August 2016). More than just the misuse of grants, foster children were reported to be particularly vulnerable to situations where they do not receive adequate financial support in general, because most of the foster parents are unemployed and they rely on foster care grant for survival. Often, cash-strapped foster parents neglect the responsibility of caring for the children which consequently creates problems in the foster family which ultimately contribute to the transfer of the foster child.

Problematic relationship between foster parent and foster children

In a small number of instances, participants expressed that an unhealthy relationship between a foster child and foster parent could lead to the breakdown of placement. To demonstrate this, one DSW stated that *“Because if the relationship is not good between the child and the foster parent I don’t think we can leave the child to stay with the foster parent”* (Social worker 4, interview, 4 August 2016). Some participants felt that misunderstandings between the two parties often caused or exacerbated these problems. In the words of one DSW *“some are due to misunderstanding between the foster parent and the foster child”* (DSW 6, interview, 8 August 2016). Such a relational breakdown was also often accompanied by a breakdown of healthy communication between the foster parent and child, and also by the concurrent presence of behavioural problems on the part of the foster child, as outlined in an earlier theme.

Traumatic events affecting foster children

A fairly common reason that was cited for the repeated transfer of foster children was the occurrence of events that the foster child experienced as traumatic. An array of different

examples were provided, which included maltreatment and/or abuse of the foster child by the foster parent or others, death of a foster or biological parent, and conflict between the foster parents or other individuals in the foster home.

Death of a foster or biological parent/s

The findings disclose that many of the DSW execute the transfer of foster children due to the death of a foster parent, which results in a disrupted relationship which necessitates the transfer of the foster child to an alternative position of care. One DSW illustrated this theme when she stated that *“Normally in most of the cases other reasons might be the initial foster parent passed on”* (DSW 8, interview, 16 August 2016). Another DSW indicated that *“Umm! According to my caseload, most of the transfers are caused by death”* (Social worker 6, interview, 8 August).

Another reason for foster placement breakdown was reported to stem from the traumatic discovery of foster children that their biological parents have died. Several participants indicated that foster parents often refrained from telling foster children under their care about the death of their biological parents. When the foster children then eventually do discover this in one way or another, they were reported to be extremely angry. One DSW mentioned that *“Foster parents don’t say anything about the passing of the parents and I think that make them (foster children) very angry”* (DSW 4, interview, 4 August 2016). A variation on this theme occurred in cases where foster parents did not disclose that they were not the foster children’s biological parents, leading the foster child to be overwhelmed and extremely disillusioned and angry when they eventually learnt the truth. Asked how this could occur, participants indicated that foster children often found out the truth about their foster parents (who were often maternal or paternal grandmothers) from a DSW.

Mistreatment

In explaining what types of traumatic events could prompt the eventual transfer of foster children, one DSW mentioned that *“If the child is experiencing social challenges like abuse; it may be physical abuse, sexual abuse even emotional abuse”* (Social worker 1, interview, 1 August 2016), while another stated that *“when the foster parent beats the child”* (Social worker 7, interview, 30 August 2016). Another foster parent echoed the notion that some form of abuse or maltreatment contributed to transfers when she stated that the cause of many such transfers was *“Ho shapa bana (to beat children)”* (Foster parent 5, interview, 26 August

2016). While another DSW pointed out that “*Foster parents physically abuse her own grandchildren*” (DSW 9, interview, 25 August 2016).

Other traumatic events involving maltreatment that lead to the transfer of foster children were linked to children’s past relationships. These events involved a history of unstable placements early in life, or the experience of abusive events when they were younger. One foster parent illustrates this by indicating that “*Ya hore re ba kwalla ka jareteng, ha re battle ba tsamaye, re ba utlwisa bohloko*” (because we locked them in our yards, we do not want them to go out, we hurt them,)” (foster parent 1, interview, 15 August 2016).

Conflict between foster parents and biological parents

Foster parents were reported to sometimes quit foster parenting due to conflict between foster parents and biological parents, resulting in the eventual transfer of the child from the foster home. One DSW indicated that “*I have placed the child where the parents are alive; mom and dad will go and want to take their child from that home basically attacking the foster parent*” (DSW 9, interview, 25 August 2016).

DISCUSSION

The aim of the study was to explore the drivers for the transfer of foster children from one position of care to another in the Gauteng province. An exploratory qualitative methodology was adopted for this study and twenty semi-structured interviews were conducted with twenty participants (ten social workers and ten foster parents). The data were analysed by means of thematic content analysis (Braun & Clarke, 2006:6). Five main themes were derived from the data, and suggest that the main drivers for the repeated transfer of foster children are: foster children’s behavioural problems, a shortage of resources, a lack of parenting skills and training, problematic relationships between foster parents and foster children, and finally, traumatic events that negatively affect foster children.

The findings of the study revealed that truancy among foster children represents a common and significant problem faced by foster parents which often lead to the multiple transfers of foster children. DSWs and foster parents who were interviewed in the current study mentioned that when foster children enter puberty they engaged in truant acts such as skipping school or running away from home. This finding concurs with that made by Barber

2001 (cited by National Resource Center for Permanency and Family Connections, 2009:1) who found that multiple placements in children is linked with behavioural and emotional problems, education difficulties and juvenile delinquency. According to Section 150(1) of the Children's Act (38 of 2005), a child is need of care and protection if the child displays behaviour which cannot be controlled by a caregiver or a parent, and social workers often fulfil this mandate by transferring foster children in such instances.

According to the researcher's findings a lack of parental care and/or skill on the side of the foster parents is an issue that leads the transfer of foster children from one position of care to another. Foster parents who were interviewed acknowledged that they are unable to perform their roles as foster parents due to little knowledge that they had. DSWs dealing with child protection system are grappling with the continuous increase of foster care cases and are unable to provide support to foster parents hence the repetitive transfer of foster children. The continuous transfer of foster children is likely to happen when foster parents are unaware about the child's needs, the child's developmental phase and the placement process. This was supported by (Skoog & Khoo, 2013:2) who argued that frequent transfers of foster children relates to a lack of support by the DSWs before foster care placement commences.

Sociologically, poor parenting is one of the most common problems why children experience behavioural problems (Macionis, 2011:1). As children grow up, in many cases they tend to imitate behaviour of their elders, they adopt new behaviours through social interaction and observational learning in their environments (Macionis, 2011:1). According to the sociological theory, socialization refers to lifelong social experiences by which infants develop their human potential and learn behaviours from adults which are reflected as norms and values of their society (Macionis, 2011:1). When children who have had traumatic experiences are transferred from one place of care to another, they lose their identity, sense of belonging and a base of actions for the explorations of emerging adulthood. They are expected to adjust and learn new family values and rules and get accustomed to new social environments due to placement disruptions. The findings of the study suggest that the knowledge of the foster parents should be strengthened through parenting skills in order for them to model acceptable behaviour to children which might support stable foster placements.

It was revealed that foster parents sometimes fail to deal with the special needs of foster children or to manage the behaviour of foster children because of lack of training and support by the DSWs. Foster parents need appropriate support and training in managing the behaviour of children placed in their care. Foster parents who do not get support from the DSWs often feel dissatisfied and quit fostering which leads to the transfer of foster children (Van Holen *et al.*, 2008:1). Phagan-Hansel (2012:259) argued that foster parents struggle to cope with the behaviour of foster children especially those who display symptoms of learned helplessness, aggression and other challenging behaviours. As a result a vicious cycle ensues as these children have high risk of multiple placements which include the transfer from one foster home to another (Phagan-Hansel, 2012:259).

According to Dugan (2013:1) the shortage of DSWs and the high caseloads that DSWs experience also lead to the transfer of foster children because the available DSWs concentrate on administration work than foster care supervision. These findings also emerged in the present study. DSWs who were interviewed often stated that they visit the foster family once in the year, because it is impossible to do foster care supervision properly due to high caseload that they experience. A vicious cycle ensues in that as a result of these high caseloads, DSWs are unable to provide the needed training and support to foster parents, which in turn leads to a greater likelihood of the breakdown of a foster placement due to inadequate skills, which adds to the DSWs already overflowing caseloads.

Research indicates that children in foster care sometimes suffer from Post-Traumatic Stress Disorder (PTSD) due to the challenges stemming from trauma they have experienced (Holtan *et al.*, 2013:1). Themes emerging from the present study echo these findings, as traumatic events experienced by foster children were reported to be associated with emotional and behavioural problems that prompted the transfer of the foster child.

The findings of the study also revealed that a relatively common reason for the transfer of foster children centred on the death of a foster parent, and event which by its very nature necessitates that the foster child be placed in an alternative position of care. Typically the death of a foster parent was experienced as traumatic and might very well contribute to existing emotional and behavioural problems which could jeopardize subsequent placements.

RECOMMENDATIONS

Based on the findings of the study, it is recommended that the DSD should ensure that enough resources are distributed for appropriate and quality services for foster care placement and supervision. DSWs are unable to conduct proper foster care supervision due to shortage of resources such as vehicles and telephones.

Parenting skills or more intense screening should be provided to foster parents before foster care placements commence in order to identify serious risk factors. The results suggest that extra care should be taken when screening older candidates as potential foster parents, given that such individuals were often reported to be unable to deal with and manage especially adolescent foster children. In general, the findings suggest that problems with foster placements tend to be particularly acute among foster children in the adolescent stage, suggesting that stricter screening processes need to be exercised when placing or transferring such foster children. Placing the child in the right place with the right programme may prevent the cycles of trauma and assist foster parents to better manage the behaviour of foster children. It seems as though foster parents do not know or understand their roles and functions; they mostly perform their roles through trial and error which place the foster children at risk of being transferred from one position of care to another. As such, interventions aimed at equipping foster parents with enhanced parenting skills and an awareness of the unique demands and challenges associated with different developmental stages (especially adolescence) could do much to reduce the incidence of repeated transfers of foster children.

The current study should be repeated with a larger sample size and include foster children, so as to explore their experiences of multiple placements, as well as their unique needs and parenting requirements. Doing so might assist those who work closely with foster children to further understand the reasons for the transfer and to be able to address this problem. Future studies could also include DSWs and foster parents of different races and gender of non-government organisation to explore their views regarding multiple placements of foster children.

CONCLUSION

The main aim of this qualitative study was to explore the drivers for the repeated transfer of foster children from one position of care to another by means of 20 semi-structured interviews with foster parents and DSWs, which were subsequently analysed by means of thematic content analysis. The themes derived from the data pointed out that most of the transfers happen due behavioural problems that adolescent foster children display in the foster family. However, a number of destructive experiences such as death foster or biological parent/s, misunderstanding between foster parents and foster children, and traumatic events affecting foster children were found to damage the healthy relationship between foster children and foster parents. Many of the foster parents revealed that they are unable to manage the behaviour of the foster children due to lack of support and appropriate knowledge on parenting. In turn, social workers reported being unable to provide any parenting training or support due to the high caseload that they experience within their work environment. Typically DSWs were only able to perform one visit a year to foster parents, suggesting that a need exists to address this gap.

The findings of the study also revealed that misuse of foster grant seem to be another reason for the transfer of foster children. Since many foster parents are unemployed, they were reported to often misuse the foster care grant, utilizing it for their own benefit rather than in the best interest of the foster children. The findings emerging from the study suggest that the incidence of repeated transfer of foster children could be significantly minimized by considering the training needs of foster parents, and specifically by equipping them with the skills needed to provide adequate care to such children throughout various life cycle stages, in particular adolescence, which was typically experienced as the most problematic and transfer-prone life stage. Given the high caseload experienced by DSWs, there seems to be a need to employ additional DSWs who will concentrate on the training of foster parents as well as the social group work therapy of adolescent foster children. Given that DSWs have the responsibility to train foster parents in order to strengthen their knowledge in managing the behaviour of foster children, it is also important that strategies be implemented to ensure that sufficient resources are allocated to DSWs in order to enable them to perform this vital task.

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- Foster parent 3 (Black female, Sotho speaking) Evaton, 15 August 2016
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- Foster parent 5 (Black female, Sotho speaking) Lakeside, 26 August 2016
- Foster parent 6 (Black female, Sotho speaking, Evaton, 29 August 2016
- Foster parent 7 (Black female, Sotho speaking) Zone 12, Sebokeng, 30 August 2016
- Foster parent 8 (Black female, Sotho speaking) Zone 11, Sebokeng, 30 August 2016
- Foster parent 9 (Black female, Sotho speaking) Zone 12 Sebokeng, 4 September 2016
- Foster parent 10 (Black female, Sotho speaking) Evaton, 4 September 2016

CHAPTER 3

CONCLUSIONS, LIMITATIONS AND RECOMMENDATIONS

The current chapter offers a summary of the findings of the study, draws conclusions from these findings, provides recommendations, and discusses the implications of the findings for social work practice. The limitations or barriers faced during the research study process are discussed and suggestions for future studies are made at the end of the chapter.

3.1 Conclusions

This present study aimed to explore the perceptions and experiences of foster parents and social workers of the reasons for the repetitive transfer of foster children from one position of care to another. Previous studies found that transfers happen due to DSWs having little knowledge in the application of attachment therapy during foster care placement (Botes, 2008:16), as well as due to a shortage of social workers and the high caseloads that DSWs typically experience. This results in a situation where many social workers are overburdened and compelled to spend most of their time doing administration work rather than foster care supervision (Dugan, 2013:1). These factors contribute to the breakdown of foster care placement which very often leads to the transfer of foster child to another placement.

However, very little research on the reasons for multiple foster care placements has been conducted within a South African context. Furthermore, the studies noted previously have all been quantitative nature, thereby failing to adequately explore subjective experiences associated with the decision to transfer a foster child. Moreover, most existing studies involved interviews with foster children and did not specifically target DSWs dealing with foster care placement and supervision. These studies also did not explore the views and perceptions of foster parents who play an important role in the repeated transfer of foster children as they often initiate request for such transfers. Based on these gaps, the main aim that was set for the present study was to explore the drivers for the repeated transfer of foster children from one place of care to another within the context of a qualitative methodological approach.

Non-probability purposive and quota sampling methods were used to obtain participants for the study (Devos *et al.*, 2005:202). Based on the sampling criteria, participants DSWs and

foster parents) had to have knowledge and experience in relation to foster care placement and supervision and had to have requested or been involved in the transfer of a foster child. Participants were mainly black females residing in various parts of South Africa, in Gauteng Province including Sebokeng, Evaton and Lakeside. These participants were drawn from the database of the DSD. In total, ten foster parents and ten DSWs participated in the study. Data were collected by means of semi-structured interviews. The interviews took place over a one-month period from the 1st of August until the 4th of September 2016. Two sets of questions were used because the interview involved DSWs and foster parents. Interviews were digitally recorded and transcribed, and then analysed using thematic content analysis as defined by (Guest *et al.*, 2012:10).

Five main themes emerged from the data in relation to the drivers associated with the repeated transfer of foster children. These include behavioural problems, a shortage of resources, lack of parenting skills and training, problematic relationships between foster parents and foster children, and finally, traumatic events that negatively affect foster children.

Findings of the current study reveal that foster care disruption most commonly happens due to behavioural problems that adolescent foster children display in the foster family. It emerged very clearly from the findings of the study that the occurrence of behavioural problems is the most crucial reason for the transfer of foster children from one position of care to another. It was indicated by the participants of the study that foster children who have been transferred from one position of care to another were reported to be especially prone to display uncontrollable behaviour when they reached puberty and foster parents frequently failed to manage such behaviour which lead to multiple transfers. According to Section 150(1) of the Children's Act (38 of 2005), a child is in need of care and protection if the child displays behaviour which cannot be controlled by a caregiver or a parent, and often the way in which this need is addressed is by transferring the foster child. It was estimated by researchers that 30% to 80% of children in foster care display emotional or behavioural problems, either from their experience before being placed in foster care or from foster care placement itself (Bent-Goodley & Chipungu, 2013:1). In light of the findings of the present study this prevalence of behavioural problems appears to be particularly problematic given the finding made in this study in relation to the important role it plays in prompting the request for the transfer of foster children. These findings also highlight the extreme importance of equipping foster parents with the necessary specialized parenting skills

required when taking on foster children, in order to empower caregivers to manage the behavioural problems that are so typically exhibited by foster children.

Another finding indicates that foster parents lack support from the DSWs before foster care placement commences (Skoog & Khoo, 2013:2). Many of the participants (foster parents) asserted that they do not get support from the DSWs; hence they feel dissatisfied and neglect their responsibilities which often lead to the eventual transfer of foster children. Multiple placements are likely to occur when foster parents are not cognizant of the child's developmental needs, and/or have insufficient understanding about foster care placement processes (Skoog & Khoo, 2013:2). The breakdown of placement is a complex process that begins in the discrepancy between statutory obligations of the social service towards the foster home and foster parents' perceptions (Skoog & Khoo, 2013:1). DSWs dealing with foster care placement and supervision are struggling to deal with the continuous growth of foster care cases, and with managing their already burgeoning caseloads and consequently often fail to provide appropriate support to foster parents contributing to the incidence of the breakdown of foster placements. The severity of this problem was made particularly evident by the challenges that were encountered when conducting the fieldwork for this study. The researcher encountered great difficulties finding the physical addresses of the homes of some of the foster parents as the contact numbers given were not functional. Some of the foster parents have relocated to new location without the knowledge of the DSWs or the DSD. This eventuality is suggestive of the minimal level of contact that exists between social workers and foster parents.

Although the DSWs who participated in the study mentioned that they do not have time to train foster parents due to high caseload that they experience, an additional finding indicates that many of the foster parents interviewed in the current study believe that by considering the training needs of foster parents the multiple placements of foster children might be lessened. Similarly, participants also reported that having adequate skills and knowledge regarding foster care placement may assist in managing the behaviour of foster children and secure stability for future foster placements. Social group work for foster parents and foster children should be designed to assist adolescent foster children improve their lifestyle and for foster parent to gain specialized parenting knowledge and skills. The findings of the study suggest that there is likely a particular need to equip foster parents with the knowledge and skills required to parent foster children who are in adolescent developmental stages, as this

has been reported to be associated with a host of emotional and behavioural problems which most (especially older) foster parents found extremely difficult to deal with. In assisting foster parents in these ways, there is a need for collaboration of services with other professionals who work closely with children in order to complement each other because there is no monopoly of competent practitioners (Kadungure, 2007:25).

Participants (foster parents) in the present study often mentioned that foster children who have experienced multiple placements and/or who are in the adolescent stage are more disobedient than other children in foster care placement, and that they frequently display behaviour that cannot be controlled by foster parents. According to the findings of the study, foster children are sometimes disobedient when given certain instructions and refuse to obey requests and also steal money from their foster parents. According to the social learning theory, children fail to learn law-abiding behaviour if their parents provide antisocial models or fail to respond to their misbehaviour in a correct, consistent and contingent manner (Farrington *et al.*, 2003:216). Disrupted foster families sometimes produce delinquent foster children because of pre-existing differences from previous foster families that they have been placed with. Repeated moves of foster children can add to the pain and trauma that they have already experienced. When children who need care and protection due to abuse and neglect are required to be moved from one foster family to another, their social relationships might be lost (Holtan, 2013:1). They are also required to learn new family values and rules and adjust to new family environments due to placement disruption. Children respond to distressing situations in a different way. Participants in the study asserted that some of the cause of the transfer is physical abuse or maltreatment. All these factors sustain a vicious cycle where foster children who have been transferred multiple times are more likely to exhibit emotional and behavioural problems which significantly increase the probability of yet another transfer. This finding is supported by Berrick (1998:73) who argued that multiple placement is associated with disturbing behaviour among foster children which have an origin in negative past events such as mistreatment.

A common reason that DSWs cited for the repeated transfer of foster children was the occurrence of traumatic events that foster children experience, such as death of the foster or biological parents. In cases where the foster parent died, transfer of the foster child in question became inevitable. Such children were reported to suffer from multiple trauma as

they not only had to cope with the death of the foster parent, but also the change of environment, potential loss of social connections, etc.

Many DSWs who participated in the study revealed that foster care breakdown which contributes to the multiple transfers of foster children is associated with limited resources such as shortage of staff availability of DSWs and the limited time available to each. This finding is supported by Dugan (2013:1) who argued that shortage of social workers and limited resources put orphans and vulnerable children at risk of being transferred from one position of care to another. He further argued that the available DSWs spend most of their time doing administration work than foster care supervision

Furthermore, many of the DSWs participants who have experienced the transfer of foster children asserted that inadequate tools of the trade such as cars and telephones constitute a big challenge for DSWs to conduct foster care supervision. DSWs in the current study stated that limited resources are regarded as a major problem and also have impact on lack of supervision which is one factor that has been reported to lead to the transfer of foster children. A shortage of DSWs is a challenge for the foster care system in South Africa, as the present DSWs dealing with foster care placement and supervision are overburdened with high cases and unable to bring full implementation of the Children's Act (38 of 2005) which include multiple foster placement (Kadungure, 2007:27). More social workers are needed because the number of foster children increases each year and it is difficult to provide for their needs because caseloads are too high. According to section 7 of the White Paper for Social Welfare (1997), the Social Development framework demands that service delivery be inter-sectoral and integrated between different government departments. This collaboration and coordination is possible if it is reflected in attitudes, behaviours and values that promote developmental approach to ensure that a full range of children's needs is met. However, the current lack of resources renders the fulfilling this mandate very challenging. As social workers dealing with foster care placement and supervision normally cannot do therapy either with the foster parent or foster child due to their high case loads, they often referred therapeutic cases to other stakeholders. Section 155(4)(b) of the Children's Act (38 of 2005) supports this strategy by stating when deciding whether a child is in need of care and protection, that a DSW should (where necessary) include recommendations, that the child in need of care and protection be referred to another suitably qualified person or organisation where necessary. It is evident that DSWs should promote a multidisciplinary approach where

different functions and areas of work will require different skills and competencies within the foster care system (Berry *et al.*, 2011:10). However, professional skills on the side of the social workers presently appear to not be utilized due to administrative work within the foster care system.

By outlining these drivers for the transfer of foster children from one position of care to another, the aims that were set at the outset of the study have been fulfilled.

3.2 Limitations of the study

As is usually the case with research, there have been limitations faced during the study. In the current study, all the participants interviewed were female and black, excluding male DSWs and white, coloured and Indian DSWs; as such, the extent to which the findings will be transferable to contexts beyond this, is limited. Additional research is therefore required to explore the reasons for repeated transfers of foster children according to DSWs from multi-racial and multi-cultural backgrounds/contexts..

Another related limitation was that the research was conducted only with DSWs from the DSD, excluding DSWs from non- governmental welfare organisations (NGO's). Transferability of the findings are therefore limited to DSWs from DSD as DSWs from NGO's were not represented in the sample. Further research is therefore necessary to explore the views of the DSWs of other racial groups and non-governmental organisations in South Africa.

Finally, it is likely that social workers and foster parents might not always be fully open and forthcoming about any reasons for the transfer of foster children that might reflect negatively on themselves. However, this possibility was anticipated prior to the study, and was addressed by using quota sampling to include both social workers and foster parents in the sample, so that potentially problematic issues associated with each group could be pointed out by the other.

3.3 Implications

The importance of the relationships that foster children develop with their foster parents, and the extent of the disruption and trauma that children experience when they are subjected to repeated transfers are abundantly evident from existing literature. It is clear that their

relationship with the previous family has been disrupted. A foster care placement disruption destabilizes the child's development. In the new foster family children must learn new family values and rules and get accustomed to a new physical and social environment. It is therefore very important to understand the drivers of such transfers in an attempt to come up with remedial strategies to lessen the incidence of transfers.

Findings arising from this study might be of use to DSWs in creating a heightened awareness of the reasons behind such transfers, which might form the basis for the development of more effective programs on their part to prevent unnecessary transfers of foster children. In particular, the findings imply that there is an overwhelming need for DSWs to develop and evaluate targeted programs that will attend to the training needs of foster parents. An urgent need exists to equip them with specialized parenting skills required to deal with foster children, and most especially so with adolescent foster children, who were reported to display more acute behavioural problems than other children, such as truancy, stealing and disobedience. On the other hand, strategies need to be devised to address the shortage of available DSWs, as well as the high caseloads and shortage of resources such as vehicles and phones that render them incapable of providing the requisite support to foster parents.

3.4 Obstacles encountered

A variety of obstacles were encountered during the course of the study. First of all, administrative errors on the part of the ethics committee meant that the processing of the application was needlessly delayed for many months, which meant that data collection was started later than anticipated. Second, significant difficulties were experienced in tracking down many of the foster parents who were selected for participation in the study. Often addresses were no longer valid and DSWs were unaware of the new location of foster parents. This resulted in a situation where a lot of time was lost and much travel expenses were incurred by the researcher in an attempt to locate the participants. The researcher often had to travel more than once to a certain home because some foster parents could not be found during the first visit, despite an appointment having been made.

3.5 Recommendations for future research

The findings of the study suggest that further research should be conducted to develop and empirically evaluate an appropriate training program that DSWs could provide to foster

parents in order to strengthen their parenting skills and knowledge in relation to managing the behaviour of foster children.

The current study did not explore the perception and experiences of foster children about multiple placements. This aspect should be included in future studies. Understanding their experience of foster placements might be beneficial in informing intervention programs aimed at developing more adequate parenting skills among foster parents.

Future studies could explore the drivers for the transfer of foster care among people with different socio-economic characteristics to determine whether additional drivers exist, and/or whether the salience of each driver is similar or different in other contexts. Additionally, more research on how various life cycle stages of foster care affect their placement need to be conducted, given that this (most especially the adolescent stage of development) was explicitly indicated to be associated with the likelihood of repeated transfers.

Social research should be an on-going process in social work service delivery to foster children and foster parents in order to identify risk factors that lead to the repetitive transfer of foster children.

3.6 Summary

This chapter provided a brief overview of the study, followed by a discussion of the conclusions and implications that emanated from the study. Limitations and obstacles characterising the study were outlined next, and recommendations for future research and social work practice were proposed on the basis of the findings. It is hoped that these recommendations could serve to inform policy and practice in ways that would ultimately translate into a reduction in the number of transfers of foster children from one place of alternative care to another.

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APPENDICES

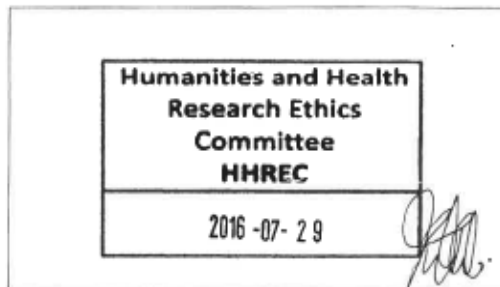
Appendix 1: Informed Consent form for social workers



PO Box 1174, Vanderbijlpark
South Africa, 1900

Web: <http://www.nwu.ac.za>

DATE: 29 July 2016



**PARTICIPANT INFORMATION LEAFLET AND CONSENT
FORM FOR SOCIAL WORKERS.**

TITLE OF THE RESEARCH PROJECT: A qualitative exploration of the drivers for the transfer of foster children from one position of care to another

REFERENCE NUMBERS:

PRINCIPAL INVESTIGATOR: Nomlinda Mashiloane

ADDRESS: No 56 Seymour Road Meyerton

CONTACT NUMBER: 072 269 9054

You are being invited to take part in a research project that forms part of my qualitative research study exploring the drivers for the transfer of foster children from one position of care to another. The researcher has received approval from the (HOD) Ms WR Tshabalala of the DSD to conduct this research study, and permission to interview you at your workplace during office hours, should you agree to participate. Your name was found on the files of the Department of Social Development as a social worker dealing with foster care placement and supervision. Please take some time to read the information presented here, which will explain the details of this project. Please ask the researcher any questions about any part of this project that you do not fully understand. It is very important that you are fully satisfied that you clearly understand what this research is about and how you could be involved. Also, your participation is **entirely voluntary** and you are free to decline to participate. If you say no, this will not affect you negatively in any way whatsoever. You are also free to withdraw

1

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from the study at any point until the work has been published, even if you do agree to take part.

This study has been approved by the **Humanities and Health Research Ethics Committee (HHREC) of the Faculty of Humanities of the North-West University (NWU-HS-2016-0007)** and will be conducted according to the ethical guidelines and principles of the international Declaration of Helsinki and the ethical guidelines of the National Health Research Ethics Council. It might be necessary for the research ethics committee members or relevant authorities to inspect the research records to make sure that I (the researchers) am conducting research in an ethical manner.

What is this research study all about?

- *This study will be conducted in the Sebokeng area in South Africa and will involve a semi-structured interview. The interview process will involve two groups of participants (social workers employed by DSD and registered foster parents), and as such, two sets of questions will be used to guide the interviews. The researcher has been trained to use these research methods.*
- *Approximately 20 participants (10 social workers and 10 foster parents) will be included in this study.*
- *The purpose of the study is to qualitatively investigate the drivers for the transfer of foster children from one place of care to another.*

Why have you been invited to participate?

- *You have been invited to participate because you work directly with foster care placement in your daily practice.*
- *You have also complied with the following inclusion criteria: you have knowledge and experience in relation to foster care placement and supervision.*
- *Your name was not found on the national child protection register (sexual offenses Act).*
- *You will be excluded if you have never worked directly with foster care placement and supervision.*


What will your responsibilities be?

- *You will be expected to participate in the semi-structured interviews (either telephone or face to face) which will be guided by seven main questions. During this process you are expected to respond honestly and to the best of your knowledge throughout the interaction with the researcher. There are no wrong or right answers, what matters are your views. The interview process will be recorded so that I can be able to analyse the data with my supervisor Prof. Nell in the later stage. The interviews should last in the region of 30 minutes to an hour. There would be no penalty for refusal to participate or for withdrawal from the proposed study as participation is voluntary.*

Will you benefit from taking part in this research?

- *There will be no direct benefit for you as a participant.*
- *As the study will analyse the perceptions of foster parents and social workers dealing specifically with foster care supervision to explore the reasons for repeated transfers*

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of such children, the indirect benefits of the study would likely be to inform relevant stakeholders working closely with children of the drivers of the repeated transfer of foster children. In turn, this might hopefully in future inform training and practices aimed at dealing with this situation.

Are there risks involved in your taking part in this research and how will these be managed?

- *The risks in this study, and how these will be managed, are summarised in the table below:*

<i>Probable/possible risks/discomforts</i>	<i>Strategies to minimize risk/discomfort</i>
There may be some distractions during the interview with regard to noise.	The interviews will be conducted in private room which is free from distractions. There will be a signage on the door that indicates that an interview is in progress to avoid distractions.
Since the researcher will need to meet with the participants in order to conduct face to face interviews, transport may be needed for them.	The research will be conducted at the time that is suitable for the participants whereby the researcher will drive to the offices of the participants in order to avoid costs by participants. As such, they will be interviewed at their place of work.
There may be a possibility of emotional distress to the participants following the interview.	The researcher has made arrangements with social workers employed by the Lifeline Organization in Vereeniging for participants with emotional distress and need for debriefing following the interview. This is done in order to minimize risks for participants.

- *However, the benefits of the study (as noted above) outweigh the risks thereof.*

Who will have access to the data?

- *Confidentiality will be ensured as the researcher will not mention the identities of the participants in any of the documents of the research study. Only the researcher, mediator and the supervisor will have access to the data collected during the process of the study. No individuals identifiers will be used in any publications resulting from this study and only the team of researchers will work with the information that you shared. Data will be kept safe and secure by locking hard copies in locked cupboards in the researcher's office and for electronic data it will be password protected.*
- *Audio-recorded data will be transcribed by the researcher. As soon as data has been transcribed it will be deleted from the recorders. The transcripts will be stored on a password-protected computer. All co-coders will sign confidentiality clauses.*
- *Data will be stored for five years in a locked cabinet in the office of the supervisor at the North-West University.*

What will happen to the data?

The data from this study will be reported in the following ways: The findings of the research study will be reported through research article and mini-dissertation. In all of this reporting, you will not be personally identified. This means that the reporting will not include your name or details that will help others to know that you participated (e.g., your name or address).

This will not be a once-off study, as the data may be re-used in the future studies relevant to the same research topic. Future researchers could use the data of the study for comparison.

Will you be paid/compensated to take part in this study and are there any costs involved?

No, you will not be paid or compensated to take part in the study. (There will be no costs involved to you as participant because I will arrange to meet you at your office at a time that is convenient for you).

How will you know about the findings?

- The general findings of the research will be shared with you (in the form of a summary report) via email, if you are interested. You are welcome to contact us regarding the findings of the research or provide your email address below so that it can be shared with you as soon as it is available.

Is there anything else that you should know or do?

- You can contact me, Nomlinda Mashiloane at 072 269 9054 or rhulanimashiloanee@gmail.com if you have any further queries or encounter any problems.
- On the other hand, you can contact my supervisor Prof. Werner Nell at 016 910 3427 or Werner.Nell@nwu.ac.za.
- You can contact the chair of the Humanities and Health Research Ethics Committee (Prof Tumi Khumalo (016 910 3076 or Tumi.Khumalo@nwu.ac.za) if you have any concerns or complaints that have not been adequately addressed by the researcher. You can leave a message for Tumi with Ms Daleen Claasens (016 910 30441).
- You will receive a copy of this information and consent form for your own records.



This document is an adapted version of the one used by HREC, Potchefstroom Campus (HREC General WICF Version 2, August 2014).

CONSENT FORM

PARTICIPATION IN THIS RESEARCH IS VOLUNTARY.

You are free to decline to be in this study, or to withdraw at any point even after you have signed the form to give consent without any consequences.

Should you be willing to participate you are requested to sign below:

I _____ hereby voluntarily consent to participate in the above mentioned study. I am not coerced in any way to participate and I understand that I can withdraw at any time should I feel uncomfortable during the study. I also understand that my name will not be disclosed to anybody who is not part of the study and that the information will be kept confidential and not linked to my name at any stage. I also understand what I might benefit from participation as well as what might be the possible risks and should I need further discussions someone will be available.

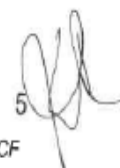
Date

Signature of the participant

Email address of the participant

Date

Signature of the person obtaining consent

A handwritten signature in black ink, consisting of stylized, overlapping loops and lines, positioned in the bottom right corner of the page.

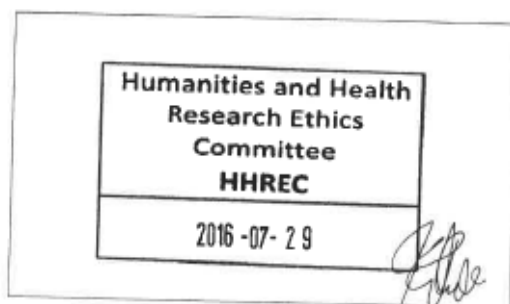
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Appendix 2: Informed Consent form for foster parents



PO Box 1174, Vanderbijlpark
South Africa, 1900

Web: <http://www.nwu.ac.za>



DATE: 29 July 2016

PARTICIPANT INFORMATION LEAFLET AND CONSENT FORM FOR FOSTER PARENTS

TITLE OF THE RESEARCH PROJECT: A qualitative exploration of the drivers for the transfer of foster children from one position of care to another

REFERENCE NUMBERS:

PRINCIPAL INVESTIGATOR: Nomlinda Mashiloane

ADDRESS: No 56 Seymour Road Meyerton

CONTACT NUMBER: 072 269 9054

You are being invited to take part in a research project that forms part of my qualitative research study exploring the drivers for the transfer of foster children from one position of care to another. The researcher has received an approval from the (HOD) Ms WR Tshabalala of the DSD to conduct this research study. Your name was found on the files of the Department of Social Development as a foster parent who had a foster child in your care. The recruitment process is facilitated by the said Department as a relevant gatekeeper for this study. Please take some time to read the information presented here, which will explain the details of this project. Please ask the researcher any questions about any part of this project that you do not fully understand. It is very important that you are fully satisfied that you clearly understand what this research is about and how you could be involved. Also, your participation is **entirely voluntary** and you are free to decline to participate. If you say no, this will not affect you negatively in any way whatsoever. You are also free to withdraw from the study at any point until the work has been published, even if you do agree to take part.

1

This document is an adapted version of the one used by HREC, Potchefstroom Campus (HREC General WICF Version 2, August 2014).

This study has been approved by the **Humanities and Health Research Ethics Committee (HREC) of the Faculty of Humanities of the North-West University (NWU-HS-2016-0007)** and will be conducted according to the ethical guidelines and principles of the international Declaration of Helsinki and the ethical guidelines of the National Health Research Ethics Council. It might be necessary for the research ethics committee members or relevant authorities to inspect the research records to make sure that I (the researchers) am conducting research in an ethical manner.

What is this research study all about?

- *This study will be conducted in the Sebokeng area in Gauteng, South Africa and will involve interviews. The interview process will involve two groups of participants (a) registered social workers employed by DSD and registered foster parents. As such, two sets of questions will be used to guide the interviews. The researcher has been trained to use these research methods.*
- *More or less 20 participants (10 social workers and 10 foster parents) will be included in this study.*
- *The purpose of the study is to qualitatively investigate the reasons for the transfer of foster children from one place of care to another.*

Why have you been invited to participate?

- *You are a registered foster parent approved by the DSD office in Sebokeng.*
- *You have been invited to participate because you have at some point in time requested the re-placement of foster child in your care.*
- *You have also complied with the following inclusion criteria: you have experience in relation to foster care placement.*
- *You will be excluded if: you have never had foster children in your care.*
- *You will be excluded if you requested the transfer of a foster child under your care, and if this child is still currently residing with you.*

What will your responsibilities be?

- *You will be expected to participate in the semi-structured interviews (either by telephone or face to face) which will be guided by seven main questions. During this process you are expected to respond honestly and to the best of your knowledge throughout the interaction with the researcher. There are no wrong or right answers, what matters are your views. The interview process will be audio recorded, with your permission, so that I will be able to analyse the data with my supervisor Prof. Nell at a later stage. The interviews should last in the region of 30 minutes to an hour. There will be no penalty for refusal to participate or for withdrawal from the proposed study as participation is voluntary.*

Will you benefit from taking part in this research?

- *There will be no direct benefit for you as a participant.*
- *As the study will analyse the perceptions of social workers and foster parents dealing specifically with foster care supervision to explore the reasons for repeated transfers of such children, the indirect benefits of the study would likely be to inform relevant stakeholders working closely with children of the drivers of the repeated transfer of*



foster children. In turn, this might hopefully inform training and practices aimed at enhancing the stability of children in need of care and protection.

Are there risks involved in your taking part in this research and how will these be managed?

- The risks in this study, and how these will be managed, are summarised in the table below:

Probable/possible risks/discomforts	Strategies to minimize risk/discomfort
There may be some distractions during the interview with regard to noise.	The interviews will be conducted in the home (private room) of the foster parents which is free from distractions. During the process of the interview, the researcher will avoid distractions.
Since the researcher will need to meet with the participants in order to conduct face to face interviews, transport may be needed for them.	The research will be conducted at the time that is suitable for the participants whereby the researcher will drive to the homes of the participants in order to avoid costs for participants. The researcher will make arrangements with the foster parents prior the interview.
There may be a possibility of emotional distress to the participants following the interview.	The researcher has arranged with social workers employed by Lifeline Vereeniging to provide participants with a single session of debriefing if participants feel the need for debriefing as a result of the research interview. This need for counseling may be communicated to the researcher or the mediator.
There may be a possible risk if the interview is conducted in the home of the foster parents where there are children or other persons within the dwelling who have been in contact with the foster children concerned,	The researcher will consider conducting the interview during school hours in the absence of the children or other person and this potential risk will be communicated to the foster parent so that the interview process should not affect the people within the dwelling. If the foster parent prefers another setting, the researcher will make arrangements that will be convenient to him or her to ensure that no one listens to the conversation.

- However, the benefits (as noted above) outweigh the risk.

Who will have access to the data?

- Confidentiality will be ensured as the researcher will not mention the identities of the participants in any of the documents of the research study. Only the researcher, the mediator and the supervisors will have access to the data collected during the process of the study. No individual identifiers will be used in any publications resulting from

this study and only the team of researchers will work with the information that you shared. Data will be kept safe and secure by locking hard copies in locked cupboards in the researcher's office and for electronic data it will be password protected.

- *Audio-recorded data will be transcribed by the researcher. As soon as data has been transcribed it will be deleted from the recorders. The transcripts will be stored on a password-protected computer. All co-coders will sign confidentiality clauses.*
- *Data will be stored for five years in a locked cabinet in the office of the supervisor at the North-West University.*

What will happen to the data?

The data from this study will be reported in the following ways: The findings of the research study might be reported through the publication of research articles and a mini-dissertation. In all of this reporting, you will not be personally identified. This means that the reporting will not include your name or details that will help others to know that you participated (e.g., your name or address).

This will not be a once-off study, as the data may be re-used in future studies relevant to the same research topic. Future researchers could use the data of this study for comparison.

Will you be paid/compensated to take part in this study and are there any costs involved?

No, you will not be paid or compensated to participate in the study. (There will be no costs involved to you as a prospective participant because I will arrange to meet you in your home at a time that is convenient for you).

How will you know about the findings?

- The general findings of the research will be shared with you via email (in the form of a summary report), if you are interested. You are welcome to contact us regarding the findings of the research or provide your email address below so that it can be shared with you as soon as it is available.
- If you do not have an email address, a hard copy of the findings will be delivered to you by the researcher.

Is there anything else that you should know or do?

- You can contact me, Nomlinda Mashiloane at 072 269 9054 or via email rhulanimashiloane@gmail.com if you have any further queries or encounter any problems.
- You may also contact my supervisor Prof. Werner Nell at 016 910 3427 or email him at Werner.Nell@nwu.ac.za
- You can contact the chair of the Humanities and Health Research Ethics Committee (Prof Tumi Khumalo (016 910 3076 or Tumikhumalo@nwu.ac.za if you have any concerns or complaints that have not been adequately addressed by the researcher. You can leave the message for Tumi with Ms Daleen Claasens (016910 3044).
- You will receive a copy of this information and consent form for your own records.

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CONSENT FORM

Participation in this research is voluntary. You are free to decline to be in this study, or to withdraw at any point even after you have signed the consent form without any consequences for you.

Should you be willing to participate you are requested to sign below:

I _____ hereby voluntarily consent to participate in the above mentioned study. I am not coerced in any way to participate and I understand that I can withdraw at any time should I feel uncomfortable during the study. I also understand that my name will not be disclosed to anybody who is not part of the study and that the information will be kept confidential and not linked to my name at any stage. I also understand what I might benefit from participation as well as what might be the possible risks and should I need further discussions someone will be available.

Date:

Signature of the participant

Email address of participant: _____

Contact number of participant: _____

Residential address of participant: _____

Date

Signature of the person obtaining consent

A handwritten signature in black ink, consisting of stylized initials and a surname, positioned above a small number 6.

This document is an adapted version of the one used by HREC, Potchefstroom Campus (HREC General WICF Version 2, August 2014).

Appendix 3: Transcript of an interview with a DSW

Researcher: In your opinion, what are the reasons for the transfer of foster children from one place of care to another?

Social worker: A lot of them happen during adolescents you will find that the foster child will be unhappy staying wherever they are staying because of the means of control that are put in place so because of the adolescent stage, relationship usually breaks down so you will find that it necessitate the removal or transfer.

Researcher: Is that the only reason

Social worker: A common reason for me is adolescent --- to deal with, sometimes you will find that this child was placed as a child and all along the relationship was okay but they get to a point where probably no enough support is and where a parent is unable to handle an adolescent. A parent who handled an adolescent in the late 90 are parents or in the early 2000 just do not know how to cope with the adolescent, so that becomes a reason, but another common reason is the money issue (foster care grant). Somehow people or the motivation for people to get the foster care grants they have a lot of expectation concerning the grant and neglect the responsibility.

Researcher: Who neglects the responsibility?

Social worker: The foster parent or sometimes the child, or the people in the system. Another reason, they will create expectation because now this children know that they get a grant they tend to demand it. The parent applied for a grant because they thought that with a grant they will be able to take care of the child and the next thing this child is under the impression that this is my money. The taking care of you do it on your own, so it also becomes a serious problem at the later stage.

Researcher: Do you think it is necessary for the children to know that the foster parent is receiving the grant on their behalf?

Social worker: I think it is, they just need to get someone that will explain to them what the grant is for, because you get that they demand, I mean if they know that they are receiving money I do not know how much it is nowadays. If they are receiving R850 per month, they will sit down and count how much the R850 did for them without understanding, I don't think there's something wrong sitting them down and draw a budget for them, they just need to understand that part of the money will go into food, will go into electricity, will go to savings, otherwise they will be demanding cavallas, expensive cell phones ... and if parent is not doing anything for me they utilise the grant for themselves and not for the child, and it becomes a problem and the relationship will break.

Researcher: Based on your experience, what problems come to the fore in the foster family systems necessitating that foster children be moved to another placement?

Social worker: I'll sound like I'm repeating myself but you know when you have 13, 14, 15, 16 old, if this is your child there's no way you can take them. But somehow foster parent because they know that foster care is renewed after two years, it must be looked at, and they don't feel obliged to sticking around. So any sign of trouble they feel they don't have to go through this, and it is easier for them because it is not their biological children to say I don't want this child anymore. If it was your child going through the same thing you will stick it up you know, because you do not have an alternative. But because this is not your child any sign of non-cooperation or less behaviour or they will just be impatient with them.

Researcher: If you have to rate these reasons that you have just mentioned, which one is the most important that necessitate that children be transferred to another placement?

Social worker: I think is adolescent.

Researcher: If foster children are moved from one foster care placement to another, on what basis are these decisions made?

Social worker: Most of the time is because the people in the system which is the foster parent and the child think is not working anymore. You can put measures in place but if one of them or both of them agree that it is not working, you can't force them to stay together. So if it gets to a point where they are not willing to try, they are not willing to work on it anymore you don't have a choice but to transfer a child.

Researcher: What steps (if any) do you take to prevent the transfer of foster children from one place of care to another?

Social worker: You know the biggest challenge with DSD is the limited time social worker get to spend with the client because of the case loads and what not and what not. In the way it becomes unfair because all we do is refer, so you will refer them to counselling if you see things are not working. You will refer foster parent to a parental skill, you don't get time to sit down and have proper counselling session between the foster child and foster mother where you will do follow-ups and have the ten sessions that we had at school, reality is that you cannot afford to do it here. So all you can do is to refer to NICRO for parental skills, child line for counselling for the child and you can only get feedback from those people, and half of the time it does not work.

Researcher: I heard you talking about the case load. What is the problem about the case load?

Social worker: The foster care numbers are quite high. Hey especially, I will give my own experience, I can only compare Sedibeng as I worked in Mpumalanga ... I still don't understand the logic behind not doing 186s.

Researcher: What is 186?

Social worker: Section 186 on the children's act is extending the order until the child turn 18 years, if the placement is going well. So you get that the order still has to be done after two years even if you see that the placement is going well everything is stabilized, you know. Because of that reason they do Section 159 which is extension for only two years, and cases are bound to lapse because if you have a case load of 150 that has to be renewed every two years, how are you going to do it.

Researcher: Oh, there's a section in the children's act that says that you can extend until 18.

Social worker: Yes! I worked in Mpumalanga when you do the first CCE you will recommend that in terms of section 186 because this is the related foster care placement the child have been staying there for ten years, both parents are deceased, there's no reason why the child would want to move. There's no reason that you can give the foster parent the impression that the child can move. You sit them down and make them understand that this is just a formal arrangement, or just a legal arrangement that we are doing that. All along you guys have been a family and there's no way that this child is not gonna be part of the family anymore, it becomes a 186, and so the child is 18 and you do an extension because the child is at school in terms of 176, it can be done I don't understand why Sedibeng is not doing that.

Researcher: Okay!

Social worker: Because they have the bulk of social workers working for supervision who keep on extending orders that are lapsing after two years when there's an alternative in the children act.

Researcher: I heard you talking about the CCE. What 'does it mean?

Social worker: Children's Court Enquiry.

Researcher: What are your views regarding the repetitive transfer of foster children?

Social worker: It destabilizes the child. Any child with a disturbed routine becomes disrupted if it does not affect them now, it will affect them in the future. I don't know what the solution is right now.

Researcher: What form of training (if any) did you provide to the foster parents to prevent placements from breaking down?

Social worker: It wasn't or it is not in the job description and is not a must to be done, but as an individual I used to conduct a parental skill sessions just after court, just to highlight what foster care is, how it is supposed to work all of that. The biggest reason why I thought that was necessary was to drive the fact that you cannot just decide that this child is not mine anymore. Where does the child go, because the child has bonded with you, the child has relatives, the child goes to school, they have friends. Is like saying erase the past, twelve years of your life that you have lived with me and go and find another family where you will start afresh. Is it practical! Is it fair! So I used to do that session. Unfortunately it was just one session and I have to transfer a file to supervision.

Researcher: What exactly does your screening of foster parents include/involve?

Uhhh! More than anything it includes the ability to create and maintain a good relationship with the children. Uhhh... unfortunately our society today everything revolves around money, so the impression that they got with kids can be given because there's money involved. So, so, I don't know. If the foster care should be done in the first three months there's no grant and see how that works and see if they are still wanted because the biggest driver is the money. So we screen that you are able to create or a lot of time if you already have a relationship with the child, we don't look at your finances, but we look at the things like where the child is gonna be staying, how hygienic is the place, how far is it from the school, how far is it from the welfare organisations/resources

END OF INTERVIEW

Appendix 4: Transcript of an interview with a foster parent

Researcher: Ho ya ka wena ke mabaka afe a etsang hore bana ba dikgutsana ba tloswe ho tloha ho mohlakomedi e mong ho ya ho e mong?

Foster parent: Ke hobane ha ba sa hlola bare mamela, le ha o ba kgalemela.

Researcher: Ha ba mamele ka tsela efeng?

Foster parent: Ha o mo roma kapa o mojwetsa hore a konomake, ha ba batle ho di etsa ntho tseo.

Researcher: O itshetlehile ho boiphihlelo ba hao, ke mathata afe a hlahellang haholo/pele ho malapa a hlokometseng bana ba dikgutsana a etsang ba tloswe malepeng ao ba iswe ditulong tse ding?

Foster parent: Mathata a hore ba tloswe hore ba iswe ditulong tse ding hobane ngwanana ha a sa mmamela hohang ha a rabale ka tlung, neng neng o kgutla ka la hosane.

Researcher: Ho ya ka wena ke ona mathata a etsang hore ba tloswe ho wena a iswe ho motho emong?

Foster parent: E! Ke bona hore a tloswe ho nna hobane ha a sa batla ho etsa ntho tseo ke batlang hore a di etse.

Researcher: Ke thupelo le tlhokomediso efe eo o e thotseng ho basebeletsi ba mmuso (ba bophelo ba setjhaba) mabapi le seo o loketseng ho se etsa le ho se hlokomela jwaleka ha o le mohlakomedi wa dikgutsana?

Foster parent: Ee! Ha kena karabo mabapi le thupello.

Researcher: Ke di tlhoko dife tsa bohlokwa mabapi le ho hola ha ngwana tseo o lokelang ho di ela hloko? (jwaleka ha o tlo ba mohlakomedi wa bana)?

Foster parent: Ke hore ke mo hlapise a be motle, a ye sekolong, ke mofe dijo.

Researcher: Ke ditshehetso le bolebedi bofe boo o kileng wa bo fumana ho tswa ho basebeletsi ba mmuso ba setjhaba?

Foster parent: Tshehetso e ke e fumanang ho di social worker ke yona grant e ya bona.

Researcher: Ko pela kwa ke utlwile o bua ka hore ngwana ona sa hlole a mamela a sa hlole a robala mo hae, wa felelletsa wa re a tsamaye. Ha o mo tsamaisa ha o yaya ho di social worker hore ole kopa hore ba o thuse?

Foster parent: E! ke ile ka ya.

Researcher: Ha baya kgona hoo thusa?

Foster parent: Ba ile ba kgona ho nthusa kgetlo la pele. A kgutla a etsa ntho e tswanang le yona eo. O na ntsa etsa yona ntho eo yahore a seka robala ka ntlung. Ke ile ka kgutla le yena, bamo kgalemela maar ae pheta hape ntho e ne ba mo kgalemela for yona.

Researcher: Then ha a e phitile ho etsahetse eng? O kgutlile le yena hae?

Foster parent: Ha a pheta hape ke ile kare bamo nke, ha ke sa hopola hantle hore o ile a khutla kapa jwang.

Researcher: Ke mathata afe a boitshwaro ao o a hlokometseng ho bana ba dikgutsana jwaleka ha o le mohlokomedi wa bana bao (pele ba tloswa ho wena)?

Foster parent: Bana ba dikgutsana ba hlopha, ba bua, o qetella a se a bua ao jwetsa hore o kgola tjhelete ya hae, o etsang. Ke tsona ntho tseo. Yena ha se ngwana mona, jwale e ba mathata jwale.

END OF INTERVIEW

Appendix 5: Approval to conduct research in the DSD



Enquiries: Ms Keitumetse Komane
Tel: +27 (0)11 355 7852
File no: 2/5/27

Nomlinda Mashiloane

Dear Nomlinda Mashiloane

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

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

Your application on the research "A qualitative exploration of the drivers for the transfer of **foster children from one position of care to another**" has been considered and approved for support by the Department as it was found beneficial to the Department's vision and mission. The approval is subject to the Departmental terms and conditions as endorsed by you on the 31/01/2016.

May I take this opportunity to wish you well in the journey that you are about to embark upon.

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

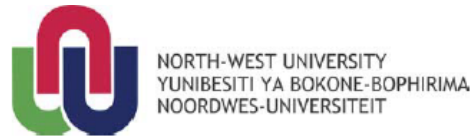
With thanks.

A handwritten signature in black ink, appearing to read "WR Tshabalala".

Ms. WR Tshabalala
Head of Department: Social Development

Date: 10/2/2016.

Appendix 6: Ethical Clearance Certificate



NORTH-WEST UNIVERSITY
YUNIBESITI YA BOKONE-BOPHIRIMA
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Web: <http://www.nwu.ac.za>

Institutional Research Ethics Regulatory Committee

Tel: +27 18 299 4849

Email: Ethics@nwu.ac.za

2016-07-18

ETHICS APPROVAL CERTIFICATE OF PROJECT

Based on approval by the Humanities and Health Research Ethics Committee (HHREC) on 18/07/2016, the North-West University Institutional Research Ethics Regulatory Committee (NWU-IRERC) hereby approves your project as indicated below. This implies that the NWU-IRERC grants its permission that, provided the special conditions specified below are met and pending any other authorisation that may be necessary, the project may be initiated, using the ethics number below.

Project title: A qualitative exploration of the drivers for the transfer of foster children from one position of care to another.																															
Project Leader/Supervisor:	Prof Werner Nell																														
Student:	L Mashiloane																														
Ethics number:	<table border="1"> <tr> <td>N</td><td>W</td><td>U</td><td>-</td><td>HS</td><td>-</td><td>2</td><td>0</td><td>1</td><td>6</td><td>-</td><td>0</td><td>0</td><td>0</td><td>7</td> </tr> <tr> <td colspan="4">Institution</td> <td colspan="4">Project Number</td> <td colspan="2">Year</td> <td colspan="5">Status</td> </tr> </table> <p><small>Status: S = Submission; R = Re-Submission; P = Provisional Authorisation; A = Authorisation</small></p>	N	W	U	-	HS	-	2	0	1	6	-	0	0	0	7	Institution				Project Number				Year		Status				
N	W	U	-	HS	-	2	0	1	6	-	0	0	0	7																	
Institution				Project Number				Year		Status																					
Application Type:	N/A																														
Commencement date:	2016-07-18																														
Expiry date:	2019-07-18																														
Risk:	Medium																														

Special conditions of the approval (if applicable):

- Translation of the informed consent document to the languages applicable to the study participants should be submitted to the HHREC (if applicable).
- Any research at governmental or private institutions, permission must still be obtained from relevant authorities and provided to the HHREC. Ethics approval is required BEFORE approval can be obtained from these authorities.

<p>General conditions:</p> <p>While this ethics approval is subject to all declarations, undertakings and agreements incorporated and signed in the application form, please note the following:</p> <ul style="list-style-type: none"> • The project leader (principle investigator) must report in the prescribed format to the NWU-IRERC via HHREC: <ul style="list-style-type: none"> - annually (or as otherwise requested) on the progress of the project, and upon completion of the project - without any delay in case of any adverse event (or any matter that interrupts sound ethical principles) during the course of the project. - Annually a number of projects may be randomly selected for an external audit. • The approval applies strictly to the protocol as stipulated in the application form. Would any changes to the protocol be deemed necessary during the course of the project, the project leader must apply for approval of these changes at the HHREC. Would there be deviated from the project protocol without the necessary approval of such changes, the ethics approval is immediately and automatically forfeited. • The date of approval indicates the first date that the project may be started. Would the project have to continue after the expiry date, a new application must be made to the NWU-IRERC via HHREC and new approval received before or on the expiry date. • In the interest of ethical responsibility the NWU-IRERC and HHREC retains the right to: <ul style="list-style-type: none"> - request access to any information or data at any time during the course or after completion of the project; - to ask further questions, seek additional information, require further modification or monitor the conduct of your research or the informed consent process. - withdraw or postpone approval if: <ul style="list-style-type: none"> · any unethical principles or practices of the project are revealed or suspected, · it becomes apparent that any relevant information was withheld from the HHREC or that information has been false or misrepresented, · the required annual report and reporting of adverse events was not done timely and accurately, · new institutional rules, national legislation or international conventions deem it necessary. • HHREC can be contacted for further information via Daleen.Claasens@nwu.ac.za or 018 210 3441
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The IRERC would like to remain at your service as scientist and researcher, and wishes you well with your project. Please do not hesitate to contact the IRERC or HHREC for any further enquiries or requests for assistance.

Yours sincerely

Prof LA Du Plessis
 Digitally signed by Prof LA Du Plessis
Date: 2016.07.26 11:55:39 +02'00'

Prof Linda du Plessis
Chair NWU Institutional Research Ethics Regulatory Committee (IRERC)