

Family and ageing in South Africa: An exploration of family and the position of older people

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Declaration

I hereby declare that this study titled “*Families and ageing in South Africa: An exploration of family and the position of older people*” is my work and that all sources have been fully referenced and acknowledged accurately at the time of publication.

Permission of Supervisor

I, Chrizanne van Eeden, hereby give permission to Sandra E Steyn to submit this document as a thesis for the qualification PhD in Psychology.

Furthermore, I confirm that this thesis has been written in the traditional thesis format that is in line with the 2019 General Academic Rules (5.3.1 and 5.3.2) of the North-West University. In line with Academic Rule 5.3.2, a research article for publication is also included in this thesis.

A handwritten signature in black ink on a light blue grid background. The signature reads "C. van Eeden." and is underlined.

Supervisor: Professor Chrizanne van Eeden

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Summary

Discourses in sub-Saharan Africa (SSA) and South Africa point to the importance of family in the lives of its members. Rapid population ageing has refocused debates about the obligations that family members should fulfil towards each other and their vulnerable members such as children and older people. Explorations of families in SSA and South Africa have until now tended to focus on a dated perspective that does not necessarily reflect the diversity and fluidity of contemporary families. Exploring family is especially vital as governments and family members themselves expect families to fulfil universal and specific functions. In the South African context, these functions and who is responsible for them within families are not clear.

The present study therefore aimed to explore and understand who is regarded as family and why and how older people are positioned within these conceptualisations. As a consequence, the study's broad aim included the following objectives: (a) conducting a critical review of the extant literature on theoretical conceptualisations of families in SSA and South Africa, (b) exploring family conceptualisations of participants across different developmental phases of a South African group and (c) exploring the position of older people within these conceptualisations.

The critical literary review illustrated the different approaches to understanding families in SSA and South Africa and highlighted a gap in research that the present study aimed to address. The review entered scholarly debates by evaluating and critiquing extant views about how families are understood theoretically, highlighting the prevailing practices in family studies and suggesting a way forward based on the reviewed literature.

In its turn, the empirical part of the present study demonstrated that family descriptions are based on different domains and that members position older people as nodes of strength

within their families. In their turn, careful reading of theoretical contributions in this field highlighted the prevalence of the underlying assumptions of a ‘wishful’ or romanticised approach to understanding families in policy and literature discourses. The application of this approach raised some questions about how this popular discourse manifests itself in practice. It was found that the ideologies within literature about what families should be like, point to a deep longing to address emotional and instrumental needs within family contexts. The contributions made by this study are over-arching and has implications on societal-, community- and individual levels. The present study further emphasised the value-relatedness of family membership, suggested alternative connections (such as a sense of belonging) to the family unit and stressed the inclusion of significant others as an extension of families.

The findings of the present study moreover demonstrated that positioning of older people in families was facilitated by family cohesion, flexibility and communication while it further related to families’ affective and instrumental needs. The findings engaged the discourses about the role of older people as primary caretakers of their families and communities, showing potential improvements in these discourses.

Key terms: Families, family conceptualisation; family obligation; family strengths; older people; SSA

Table of Contents

Acknowledgements	i
Declaration	ii
Permission of Supervisor	iii
Summary	iv
List of Acronyms	xiii
CHAPTER 1: An introduction to families and ageing in South Africa	1
Introduction and Rationale	1
Conceptualising Families	2
Current Disciplinary Conceptualisations	2
The societal perspective.	3
Family and community perspective.	5
The individual perspective.	7
Family in the Context of Population Ageing	7
Importance of Family in South Africa	12
Problem Statement	13
The Theoretical Underpinnings of the Study	13
Systems Perspective: General Systems Theory (Gst) and the Ecological Model of Human Development	14
Family Strengths Perspectives	16
Development Across the Lifespan	18
Young adults.	19
Middle adults.	20
Later maturity (older people).	20
Significance of the Study	23

Defining Concepts	26
Adolescent	27
Young Adults	27
Middle Adults	27
Older People	27
Families	27
Personal Values	28
Beliefs and Convictions	28
Family Functions and Obligations	28
Family Roles	28
Population Ageing	29
Conceptualisation of Families	29
Research Questions and Aims	29
Dissertation Overview	31
Conclusion	32
CHAPTER 2: RESEARCH METHODOLOGY	33
Introduction	33
Research Design	33
Interpretive-descriptive Research Questions	36
Philosophical and Foundational Underpinnings of Interpretive Description	37
Theoretical Scaffolding	38
Role of the Researcher	41
Research Context and Participants	42
Research participants.	44
Selection and recruitment of participants.	46
Research Methods Applied in the Present Study	48

Critical Review Methodology	48
Defining the scope of this review.	48
Identifying relevant sources of information.	49
Review of literature.	50
Constructing the review and concluding the review.	51
Empirical Study Data Collection Methods	51
The Mmogo-method®.	51
Individual graphic family sculpting interviews (GFS).	54
Data Collection Procedure	56
Qualitative Analysis	58
Analysis processes and methodological rigour.	59
Data analysis.	61
The Trustworthiness of the Research	62
Researcher Reflections on the Research Process	64
Ethical Considerations	66
Gatekeepers in Communities	66
Research Assistants	67
Transcriptions, Co-coding and Translations	67
Informed Consent/Assent	67
Anonymity and Confidentiality	68
Risk-benefit Analysis	68
Incentives and Reimbursements	71
Data Storage	71
Monitoring of the Research Process	72
Conflict of Interest	72
Re-use of Data	72

Additional Considerations	72
Conclusion	73
CHAPTER 3: A CRITICAL REVIEW OF FAMILY CONCEPTUALISATIONS IN SSA	74
Introduction	74
Conceptual Approaches to Understand Family in Sub-Saharan Africa	74
The Connections Approach	75
The position of older people as viewed from a connections approach.	76
Critique of the connections approach.	77
The Functional Approach	77
The position of older people as viewed from a functional approach.	80
Critique of the functional approach.	81
The Structural Approach	81
Contemporary family structures	85
Collective-family structures	86
Position of older people viewed from a structural approach.	86
Critique of structural approach.	87
Wishful or “Ideal” Family Approach	89
Wishful ideas about inclusion	89
Wishful ideas about family obligations	90
The position of older people as viewed from a wishful family approach.	91
Critique of wishful approach.	91
Discussion of Review Findings	92
Recommendations Based on the Findings	95
Interchangeable Use of Family-Related Terminology	95
Exclusion of Older People in Formal Definitions of Family	97
Rigidity with Reference to Family Forms	98

Dated Conceptualisations around Understanding Contemporary Families in Sub-Saharan Africa	99
Conclusion	100
Author's Note	102
Chapter 4: Who is family and why?	103
Introduction	103
Overview of Findings	103
Theme 1: Valued Relatedness.	104
Theme 3: Emotional relatedness.	116
Theme 4: Family connectedness.	118
Integrated Discussion of Findings	122
Assumptions about Families in Existing Literature	122
Assumptions about family membership	122
Assumptions about family obligations.	124
Assumptions about what families should look like.	126
Emerging Understanding of Family Conceptualisations	128
Conclusion	130
Author's Note	131
Chapter 5: The position of older people within family	132
Introduction	132
Integration of Research Findings	132
Theme 1: Affective Positioning of Older People based on Affective Needs	133
Theme 1.1: Expectations of (reciprocal) care.	133
Theme 1.2: Supportive interactions informing expectations of care	137
Theme 2: Functional Positioning of Older People based on the Fulfilment of Needs	139

Discussion of Findings: The Social Positioning of Older People within Families	141
Conclusion	147
Author's Note	148
Chapter 6: Families of older people in South Africa: conclusion and recommendations	149
Introduction	149
Critical Reflection on Findings	152
Contributions of this Study	152
Contributions on a Societal Level	153
Contributions on Family- and Community Levels	155
Contribution on an Individual (Psychological) Level	156
Conceptual Beliefs about Families: A Challenge	160
Belief 1: Structural Understandings of Families are Inclusive	160
Belief 2: Disciplinary Applications of References to Families can be Applied Interchangeably to Describe and Understand Them	161
Belief 3: Families can Address the Needs of its Vulnerable Members - If They Were Only Strengthened	162
Belief 4: Families Support all Members Reciprocally	163
Belief 5: All Family Members have Distinct Roles and Fulfil Family Obligations	165
Recommendations for Future Research	166
Limitations of this Study	167
Concluding Remarks	167
References	169
APPENDIX A	212
APPENDIX B	232

APPENDIX C	234
APPENDIX D	235
APPENDIX E	243
APPENDIX F	272

List of Acronyms

DSD	Department of Social Development
DoH	Department of Health
GSIA	Global Social Initiative on Ageing
GST	General Systems Theory
IAGG	International Association of Gerontology and Geriatrics
ID	Interpretative description
LGBT families	Lesbian Gay Bisexual and Transgender families
SSA	Sub-Saharan Africa
Statistics South Africa	Statistics South Africa

List of Tables

Table 1:	Level of Family Functioning and Disciplinary Perspectives	3
Table 2:	An integrated model of family strengths	17
Table 3:	Research aims and questions	31
Table 4:	Key terms used in the search strategy	49
Table 5:	Analysis processes and methodological rigour	59
Table 6:	Anticipated risks and precautions	70
Table 7:	Responsibility for care	79
Table 8:	Summary of family structures in SSA literature	83

List of Figures

Figure 1:	Phases of the present study	37
Figure 2:	Map of South Africa	42
Figure 3:	A graphic family sculpting of who is regarded as family	62
Figure 4:	Conceptual approaches to understanding family in SSA	75
Figure 5:	Main domains used to conceptualise families of older people	104
Figure 6:	Visual representation of a heart as a symbol for families	106
Figure 7:	A cross and a heart to represent love embedded within families	107
Figure 8:	Visual representation of a heart and son representing love	108
Figure 9:	Graphic family sculpting that illustrates personal values and beliefs	108
Figure 10:	Religious values embedded within family activities	111
Figure 11:	A cross representing family and religion	112
Figure 12:	Representation of the love of God within family	112
Figure 13:	Religious activities shared with family members	113
Figure 14:	Visual representation of a house (family) built on a strong foundation	116
Figure 15:	A cross and the sun provide love and warmth	117
Figure 16:	People, animals and the community included within the family	120
Figure 17:	A rugby ball with a smile and a rhino with a South African flag	121
Figure 18:	Visual representation of grandson and grandfather walking in nature	134

CHAPTER 1:

AN INTRODUCTION TO FAMILIES AND AGEING IN SOUTH AFRICA

The present study aimed to explore who is regarded as family and how older people are positioned within these families. This Chapter provides an introduction and rationale for this study and highlights its research aims and objectives and its theoretical underpinnings, and defines the relevant concepts used. It concludes with a brief outline and description of thesis Chapters.

Introduction and Rationale

Since families embody core units of society, they have been central terrains of investigation across world regions. Family discourses of Sub-Sahara Africa (henceforth SSA) indicate the importance of family in the lives of its members (Keating & de Jong Gierveld, 2015). Against the background of population ageing, the obligations that families should fulfil towards their vulnerable members such as children and older people become foregrounded and these are fundamental components of family life (see Department of Social Development (DSD), 2013; Harper, 2014a; Keating, 2011; Mokomane, 2018).

Globally, older people (60+ years of age) account for approximately 12.3 % of the total population (about 901 million older people) which is expected to exceed two billion by the year 2050 (Da Silva Francisco, 2017). A similar trend is projected for SSA, albeit the world's youngest region. In 2015 the older population in SSA already totalled 46 million people, which is projected to grow to 161 million in 2050 (United Nations, 2017). Although older people in South Africa account for a small portion of the total population (8%), this number is expected to double by 2050 (Statistics South Africa, 2011, 2016, 2018). The implication of population ageing is clear: more people will be living longer with families and

in communities, related with increasing demands for care associated with ageing (Bloom, Boersch-Supan, McGee & Seike, 2011; Zimmer & McDaniel, 2016).

This situation resulted in debates about the place of family in the lives of older people and became an essential element of global strategies to address population ageing (Bloom et al., 2011; Da Silva Francisco, 2017; Mokomane, 2013; Wouters, Le Roux Booysen, & Masquillier, 2016). The focus on family as a caring resource for these many ageing individuals, however, raises questions around the concept of *who is regarded as family* and whether African families are willing and able to assume the obligation of caring for older people.

Conceptualising Families

The following paragraphs outline the predominant conceptualisations of family in literature. In SSA, societal commentaries and romantic discourses exist about the strengths of large supportive families (see for example, Keating & de Jong Gierveld, 2015). Internationally and in South Africa, such discourses occur on different levels of disciplinary approaches. The aim of the outline below is to provide a broad overview of viewpoints about family as a departure point for motivating the need for the current study.

Current Disciplinary Conceptualisations

A scoping literature search (see Grant & Booth, 2009) was conducted to capture current conceptualisations of family. Following a general systems theory (henceforth GST) approach (see Rousseau, 2015; Rousseau, 2017), disciplines involved in the development and application of policies and interventions for family and family functioning were included. These disciplines use different theoretical perspectives to conceptualise family, as set out in Table 1, where in addition to the disciplinary perspective, reference is made to the level of functioning addressed by said disciplines.

Table 1:
Level of Family Functioning and Disciplinary Perspectives

Level of functioning	Disciplinary Perspective
Societal level	Legal/ Policy
	Demographical
Family and community level	Anthropological
	Sociological
	Social work
	Health sciences
Individual-level	Psychological

The societal perspective. The literature review made it clear that on a societal level, two perspectives of family are significant: a legal- and policy perspective as well as a demographic one.

From a *legal and policy perspective*, various operational conceptualisations define family within the broader social context to assist law- and policy makers in organising and regulating family as community structures within an organised society. For example, the White Paper on family as published by the DSD (2013) (South African legal policy document) regards family as a “*societal group that is related by blood (kinship), adoption, foster care or the ties of marriage (civil, customary or religious), civil union or cohabitation and go beyond a particular physical residence*” (DSD, 2013, p. 3; see also Rabe, 2017, p. 1193).

Another legal perspective is provided by the South African Children’s Amendment Act of 2007 (henceforth the Children’s Amendment Act) and the South African Children’s Act of

2005 (the Children's Act), where family members are only viewed in relation to children. Within this legal context a family member is (a) a parent of the child, (b) any person who has parental rights and responsibilities in respect of the child, (c) a grandparent, brother, sister, uncle, aunt or cousin of the child or (d) any other person with whom the child has established a meaningful relationship based on psychological or emotional attachment, which resembles a family relationship (The Children's Act, no 28 of 2005). This conceptualisation aims to regulate the rights of children, regulate who is responsible for family obligations towards children and describe their responsibilities in disputes involving children.

From a **demographic perspective**, the legal status of family is also essential. Family, according to this perspective, are defined as "a group of two people or more (one of whom is the householder) related by birth, marriage, or adoption and residing together" (Belsey, 2005, p. 11). In this conceptualisation, attention is paid to residing together, and the term household is used as a proxy for family; however, it does not account for the social construction of the multi-generational family or family members who reside outside of the household (Amoateng & Heaton, 2015; Belsey, 2005).

Although the conceptualisations of family from the legal, policy and demographical perspectives show similarities, it is imperative to note that the components of family differ according to the context for which family are defined. For example, the Children's Act provides a broader description of family members to make provisions for the care of children, whereas the White Paper on Families provides a more detailed view of family to regulate family and state obligations on a societal level. These conceptualisations, however, do not necessarily allow for the inclusion of people who are not related by blood, marriage or contract. Additionally, while some legislation provides descriptions of family others that regulate the care of people do not. For example, the Children's Act and the Children's Amendment Act refer to an operational conceptualisation of family in relation to children.

Other legislation, such as the Older Persons' Act 13 of 2006, which aims to regulate society in relation to older people, does not provide a conceptualisation of family in matters concerning older people. Limited conceptualisations of family and conceptualisations that exclude older people is problematic as the protection of vulnerable members is a core function of families, while exclusion of older people amounts to exclusion of some of the most vulnerable family members.

Family and community perspective. The present literature review regarded conceptualisations of family as found in the fields of anthropology, sociology and social work as essential. Scholars in these disciplinary fields use family conceptualisations to develop and apply family and community interventions.

In *anthropology*, different types of conceptualisations of family include structural-, structural-functional- and contemporary ones. Structural perspectives focus on the structure or organisation of family, (for example, in terms of nuclear- or extended family. Family are for instance defined as a “*domestic group of kin (or people in a kin-like relationship) consisting of at least one adult and one dependent*” (Popenoe, 1993, p. 527). This description focuses on the home group but allows for the inclusion of people who are related provided they reside together. The structural-functional conceptualisation of family focuses on how family members are organised to provide the functions of a family such as providing support, care and companionship. In some contrast, the contemporary conceptualisation of family makes provision for the importance of voluntary ties, choice and needs (see Allen, Blieszner, & Roberto, 2000, p. 913; Knijn & Patel, 2018).

There is little consensus regarding the conceptualisation of family when viewed from an international *sociological* perspective, and sociological scholars struggle to find a universal definition that reflects the social norms of the time (Gavriel-Fried & Shilo, 2016). The most commonly used description from a sociological perspective is “*a heterosexual couple living*

with their biological children under the same roof” (Smith, 1993, p. 50; see also Harris, 2008, p. 1408), which is problematic because it is biased towards marriage, children and heterosexual relations and does not reflect the emergence of new family types (Gavriel-Fried & Shilo, 2016). Other views of family include ones that for example focus on “*the individual’s primary social affiliation and the unit by which society reproduces itself and preserves its existence*” (Gavriel-Fried & Shilo, 2016, p. 43).

However, the emergence of new family types allows for family to be defined as “any two or more people who are related to each other by birth, marriage, adoption, or choice, and who share experiences, emotional and social ties, and varying responsibilities” (Holtzman, 2008, p. 169). In these conceptualisations, family function and - structure as well of provision of support are deemed vital.

Although the understanding of family from a sociological and anthropological perspective includes the recognition that unrelated people could form part of families, the focus tends to be on the functions of family units such as socialising children and providing financial support. Some of the abovementioned anthropological and sociological views also require that only people who reside together (related or unrelated) form part of family structures. This conceptualisation is not ideal. Due to migration, not all the members of families necessarily reside together in a South African context (Bennett, Hosegood, Newell, & McGrath, 2015).

From a *social work* perspective, Gavriel-Fried, Shilo and Cohen (2012) believe that personal values, socio-demographic variables and personal acquaintance with non-traditional types of family influence how family are defined. They therefore do not use a specific conceptualisation but support the use of frameworks that include a broader collection of associations, relationships, living arrangements as well as emotional and financial support arrangements (Gavriel-Fried et al., 2012).

The individual perspective. From this perspective the literature relates to the field of psychology that proposes that family are “any group of people related either biologically, emotionally, or legally as well as the group of people that the patient/ client defines as significant for his or her well-being” (McDaniel, Cambell, Hepworth, & Lorenz, 2005, p. 2). Even in social work and psychological perspectives, it is recognised that the conceptualisation of family may be subjective and influenced by various social factors (Harris, 2008).

Thus following Mancini and Bowen (2013), various conceptualisations of family as rooted in multiple contexts and reflecting various community structures and processes at different levels have been considered. Some conceptualisations are used to regulate policies and disputes between parties on a societal level, in particular when it comes to legal and demographical conceptualisations, while others are used to organise and assist people on familial as well as individual, psychological levels, as found in anthropology, sociology and social work. Although these fields are all involved in the development and the application of policies for families, they mostly do not have well described and inclusive conceptual frameworks for families that reflect the daily realities of its members. These views also do not necessarily make provision for changes in family structures or include all generational members, that is, members across different developmental phases, within families.

Family in the Context of Population Ageing

In many world regions, population ageing has brought the concept of families on to centre stage. The family obligations that families are expected to fulfil towards their vulnerable members such as caring for children and older people (Edgar, 2014; Patel, Hochfeld & Englert, 2018) are central to understanding the role of families in addressing societal challenges that arise from a rapidly ageing population (Mokomane, 2018; Togonu-Bickersteth & Akinyemi, 2014). Family conversations have been emerging increasingly

about finding family orientated solutions for the rising needs of dependent older people in need of support (Schatz, Madhavan, Collinson, Gómez-Olivé, & Ralston, 2015; Zimmer & Dayton, 2005). Governments and family scholars assume that family, in its various forms, provide care and support to the growing number of older people as part of social contracts between families and the state (Hall, Richter, Mokomane & Lake, 2018; Leonard, 2013). This expectation of a social contract raises vital questions about family membership boundaries and is increasingly becoming a part of the formal considerations about family obligations (Patel, Hochfeld, Englert, 2018; Van Bavel, Dykstra, Wijckmans & Liefbroer, 2010).

Although families are key stakeholders in addressing family obligations, finding a conceptualisation of family that reflects contemporary realities has remained elusive. Family definitions are often very implicit and embedded within culture and discourses (Keating, 2011; Harris, 2008; Widmer, 2016). Ziehl (2001) and others therefore rightfully emphasise the disconnection between family as an ideological phenomenon and its structural organisation (see also Harris, 2008; Widmer, 2016). Internationally, families are mainly conceptualised on the basis of structural-functional arrangements (Harris, 2008; Keating & de Jong Gierveld, 2015; Seekings, 2008). Although family structures and structural-functional arrangements are mainly used to define family membership boundaries, there are important disciplinary differences in terms of who could be included within families and which definitions are used to entrench this inclusion (Harris, 2008).

From an objective **family diversity and structural perspective**, family is conceptualised according to structural boundaries around family membership, while kinship groupings and household ties act as delineators of family membership (Keating, 2011; Harris, 2008). First, international scholars use kinship ties and acknowledge these ties as generational relationships such as those involving parents, children and grandchildren as well

as collateral relationships such as those involving spouses, siblings and cousins (Keating, 2011; Keating & de Jong Gierveld, 2015; Seekings, 2008). Across the global North, structural arrangements of families are institutionalised and are used to specify family's obligations towards family members (Keating, 2015; Nicoletti & Rabe, 2013).

Another approach to structural conceptualisations of families is based on household ties. Demographers who mainly use household membership and household ties to describe family membership boundaries (Seekings, 2008) do so for the purposes of census (Keating, 2011; Lefakane, Shoko, Collinson, Kahn, & Tollman, 2016). One typical example of a structural perspective that is still used to conceptualise family is the following:

“A social group characterised by common residence, economic cooperation and reproduction. It includes adults of both sexes, at least two of whom maintain a socially approved sexual relationship, and one or more children, own or adopted, of the sexually cohabiting adults” (Murdock, 1949, p. 11).

In many theoretical definitions, household structures and family structures are synonymous or used interchangeably (Gittens, 2017). At the same time, scholars acknowledge the changing structures of families and the implications of these changes for how family are conceptualised (Gerson, & Torres, 2015; Hagestad, 2018). Accordingly, some scholars agree that closed and normative descriptions of family that are only based on structure allow for limited interpretations of the daily realities of families and therefore more open family conceptualisations are recommended (Cohen, 2017; Widmer, 2016). Such conceptualisations need to allow for the more complex and less normative practices drawn from the everyday experience of families themselves (Cohen, 2017; Hagestad, 2018).

In the context of SSA, family conceptualisations centre on structural-functional ideas, where families are responsible for caring for and supporting vulnerable members, including older people (DSD, 2013; Keating, 2011; Kimuna & Makiwane, 2007; Radcliff, Racine, Huber, & Whitaker, 2012; Wilson, & Ngige 2006). A growing corpus of literature, however, indicates that families in SSA experience additional pressures on emotional, financial and social levels that make it difficult for them to care and support for vulnerable members (Ezeh, Bongaarts, & Mberu, 2012; Mokomane, 2013; Wouters, le Roux, Booysen, & Masquillier, 2016). In the face of the enormous impact of pressures such as poverty and disadvantage, exacerbated by HIV and AIDS in SSA communities, family scholars rightly question whether families can still be a network of care and social resources for older people and other family members (Heymann & Kidman, 2009; Smit, 2007; Wouters et al., 2016). Taking the above into consideration, scholars and policymakers should make provision for viewing families from a subjective interpretative perspective that is based on choice and meaning (African Union, 2004; Harris, 2008). One example of such a conceptualisation reads “*family is a state of mind rather than a particular kind of structure or set of household arrangements*” (Shorter, 1975, p. 204).

On a national level, Nkosi and Daniels (2007) believe that families in the African context can only be understood from a grounded African perspective, as there is no single universal family structure. Families in Africa are, according to them, still seen from a Western perspective, as people living together related by kinship, marriage or adoption and those who regard themselves as a family (Nkosi & Daniels, 2007). According to these authors, in contradistinction to these notions families in Africa organise themselves according to the challenges they are facing and the family strengths they have available to address these challenges (Nkosi & Daniels, 2007).

Understanding SSA families and the position of older people within the family has therefore become increasingly important. Families and the care that they currently provide and should provide have become central themes of different viewpoints and assumptions about fractured families, different family structures, customs, familial obligations and population ageing (Aboderin, 2017; Apt, 2012; Makiwane, Gumede, Makoe, & Vawda, 2017; Mokomane, 2012, 2013).

Despite the need for understanding family and the position of older people within family, the literature on family in SSA presents an incomplete and fragmented picture. African family scholars have varying perspectives on the structure and function of families as most conceptualisations are based on diversity of forms, universal functions and relationships (Amoateng & Heaton, 2015; LaRossa & Reitzes, 2009; Okon, 2012; Richter, 2018). Additionally, family conceptualisations differ according to theoretical perspectives, legislative and policy needs and the purpose of their application (Nkosi & Daniels, 2007; Tam, Findlay & Kohen, 2017a). There is thus much debate around how families should be described, and this raises the question: who should be responsible for fulfilling family obligations associated with inclusion within families?

Similar to international perspectives, African scholars use family structures to describe family membership boundaries. In SSA, numerous family forms that allow for the conceptualisation of more contemporary families are accepted. Some of these forms include African, blended, extended-, kin-category-, lesbian-, gay-, bisexual- or transgender- (LGBT), multigenerational-, household-, nuclear- and Western family structures (see Davids & Roman, 2013; Singh, 2008; Sooryamoorthy & Makhoba, 2016). Although several structures are acknowledged, some family forms are still seen as more natural and more representative of an African family than others. For example, there is a predominance in the use of extended family structures in an African context, usually set against a nuclear western

structural approach (Russel, 2004; Singh, 2008). This is limiting as these structures do not take into consideration other more contemporary family structures such as lesbian-, gay-, bisexual-, transgender-, queer- or questioning- and intersex- (LGBTQ-I) structures (Tasker, Moller, Clarke & Hayfield, 2018).

It is therefore clear that the manner in which family are theoretically conceptualised is very important in terms of international and African perspectives, especially in relation to family as agents that care for the aged. In South Africa, the study of families is at least equally significant.

Importance of Family in South Africa

The White Paper on Families (family policy document) published by the Department of Social Development in 2013, emphasises the importance of families in South Africa. The paper outlines strategies to promote family life and strengthen families through the development and implementation of pro-family policies and services (DSD, 2013; Rabe, 2017). It stresses the instrumental roles related to provision of physical resources as well as affective roles of promoting emotional support and encouragement within families that allow members to fulfil functions towards each other and society at large (DSD, 2013; Manderson & Block, 2016; Peterson, 2009).

It is universally agreed that families are the cornerstone of society and as such they have four universal functions as extensions of affective and instrumental roles that benefit individual family members and the society as a whole: (a) membership and family formation, (b) economic functioning, (c) nurturance, support and socialization and (d) protection of vulnerable members (DSD, 2013; Patterson, 2002; Rabe, 2017). The function of membership and family formation provides a sense of belonging to a family and societal context and is essential for the development of personal and social identity (Patterson, 2002). Economic

functioning revolves around the provision of basic needs such as food, shelter and clothing to family members to enable them to contribute to developing a sense of society (Mokomane, 2013; Peterson, 2009). Nurturance, support and socialisation refer to the fact that families entrench social values and norms of members and encourage the physical, emotional, psychological, social and spiritual development of its members (DSD, 2013). Lastly, families also protect vulnerable members by providing care and support, thereby minimising public care responsibility for dependent individuals (DSD, 2013; Patterson, 2002).

Problem Statement

To date, families have been studied from a historical and seemingly outdated perspective that does not necessarily reflect the diversity and fluidity of contemporary families in SSA and particularly in South Africa (Hall et al., 2018; Lubbe, 2007). The comparison of viewpoints and disciplinary perspectives highlight that there is still a strong focus on households and nuclear family perspectives when scholars propose the concept of families (Hall & Mokomane, 2018; Richter, 2018). It is therefore necessary to reconsider and conceptualise families to reflect the realities of contemporary families, especially since approximately 70 % of families in SSA and South Africa do not conform to definitions centring on nuclear family structures (Hall et al., 2018). It is vital to explore *who family is* as governments and family members themselves expect family to fulfil universal and specific functions. In the South African context, these functions and who is responsible for them within families, are not clear. The present study therefore aimed to explore who is regarded as family and why, and how families position older people within their family structures.

The Theoretical Underpinnings of the Study

Internationally and in South Africa, family scholars employ various theoretical perspectives to understand families on different levels of functioning such as societal as in the

case of structural functionalism, family or community as in the case of symbolic interactionism and individual as in the case of social exchange or developmental theories--or combinations of these theories. Furthermore, the purpose of defining family membership boundaries and functioning differs within and across theoretical perspectives and influences how families are understood and conceptualised (Belsey, 2005; DeFrain & Asay, 2007a; DSD, 2013; Keating & De Jong Gierveld, 2015; Koen, van Eeden & Rothmann, 2013; Nkosi & Daniels, 2007).

This thesis engaged the literature on families by using the tenets of the GST, the ecological model of human development, the family strengths perspective, the life-course perspective and lifespan development principles as broad guiding frameworks to examine who is regarded as family across the different stages in the life course.

Systems Perspective: General Systems Theory (GST) and the Ecological Model of Human Development

When it comes to development, GST proposes a holistic view of families where the “*individual develops and functions psychologically as an integrated organism*” within a broader social context (Magnusson & Cairns, 1996, p. 12; Rousseau, 2015). Family members’ functioning is therefore embedded within broader social contexts including societies, communities and families (Marcum & Koehly, 2015; Rousseau, 2017). Individual members’ descriptions of families can thus not be explored in isolation but should be understood in a broader family context (Bowen, 1978; Smith-Acuña, 2011).

The universal principles of GST focus on the development of systems, regardless of how they are formed. The first principle is interdependence between the distinct parts of the system in relation to the system and between its components (complexity) and the second is the organisation of components within the system (Von Bertalanffy, 1968; 1972). Based on

this principle, it is assumed that individuals within the family context continuously interact with each other and negotiate their role within the family accordingly. Second, the principle of equifinality is at work, which can be defined as the recognition that different transactions may lead to a limited number of patterns of organisation or the same outcome within a system (Von Bertalanffy, 1968; 1972; Henry, Sheffield-Morris, & Harrist, 2015). There are thus constraints on how much diversity is possible and not all outcomes are equally possible or likely. From a GST perspective, who is regarded as part of families and the position of older people within families may consequently have similar outcomes across different families and individual family developmental groups. These GST principles allowed this researcher to conduct the current study within one community and explore whom they regard as family, while making inferences about families in the broader South African context.

The GST perspective enables researchers to understand the interplay between individual and relational interactions that inform the social constructions of families (Bergman, & Andersson, 2015). Additionally, it allowed the researcher to explore families and to understand better how and why patterns emerge (see Smith-Acuña, 2011). The ecological model of human development also highlights human development across the life course as embodied in reciprocal and complex interactions with others and the environment (Bronfenbrenner, 1979; Dunst, 2016), thus confirming and refining the GST position.

In the *ecological model*, different environments can be contexts of development. The ecological systems perspective is central to the present study in three ways. First, the central force of development is the active individual family member who shapes the environment, evokes responses and reacts to them (Bronfenbrenner, 1994). Second, conceptualisations of families are personal and contextual (Bronfenbrenner, 1979; 1994; Dunst, 2016). Third, different environments relate to different types of interactions and will be perceived differently by individual family members as the life unfolds along its course (Darling, 2007).

Based on the GST- and ecological approaches, it was thus assumed that one community's perceptions of their families could provide insights into how families are understood, why they are perceived in a specific way and how older people are positioned within these families.

Family Strengths Perspectives

In relation to understanding families from systems- and developmental perspectives, the present study also relied on a theoretical underpinning known as the family strengths perspective. From this perspective, families are developing social units that experience change and stress throughout their lifespan, while they are able to adapt to these changes and stressors (Edwards, 2015; Greeff, 2013). The rationale of this focus is to gain a balanced understanding of families and how they position themselves and adjust with the least possible disruption in response to inherent difficulties (Greeff, 2013).

The present study integrates two models belonging this perspective that have been identified as relevant to understanding family functioning and structure (DeFrain & Asay, 2007b; Olson, 2000; Rada & Olson, 2016). These models are particularly useful for studies that explore the relational aspects of family systems (Peterson, 2007).

The **International Family Strengths Model** engages the exploration of relationship-based conceptualisations of family based on the individual and social realities of families (DeFrain & Asay, 2007b). In line with the present study's methodology (see Chapter 2) this model allowed for the acknowledgement of individual family members' perspectives as well as acknowledging theoretical and interpretative perspectives outside of the family (the researcher) (DeFrain & Asay, 2007b; Peterson, 2007).

This model identifies six family strengths to explore families: (a) appreciation and affection, (b) commitment, (c) positive communication, (d) enjoyable time together, (e)

spiritual well-being and (f) effective management of stress and crisis (DeFrain & Asay, 2007b; Rada & Olson, 2016). These strengths are based on having a sense of positive emotional connection with family members (DeFrain & Asay, 2007b; DeFrain, Asay, & Geggie, 2010; Olson, DeFrain, & Skogrand, 2010) and are therefore useful when it comes to gaining a deeper understanding of how family members position themselves to address their needs.

Closely related to the International Family Strengths Model and GST, the **Circumplex Model of Marital and Family Systems** suggests three dimensions to understanding family dynamics from a GST perspective (DeFrain & Asay, 2007b; Edwards, 2015; Olson, 2000; Rada & Olson, 2016). These dimensions are: (a) cohesion, (b) flexibility and (c) communication. In the case of the present study, including these dimensions allowed for a relational exploration of families and the positioning of older people within these structures.

The two models were moreover integrated in the case of the present study, based on suggestions by DeFrain and Asay (2007b, p. 300). See Table 2 below.

Table 2:

An integrated model of family strengths

Family cohesion
Commitment
Enjoyable time together
Family flexibility
Effective management of stress and crisis
Spiritual well-being
Family communication
Positive communication
Appreciation and affection

These models emphasise the role of family characteristics and strengths in cushioning the impact of the social realities they face (Edwards, 2015; Greeff, 2013; Nkosi & Daniels, 2007). The Family Strengths Perspective made possible the exploration of family conceptualisations and the position of older people without being limited to the structure only but, instead, considering also the diversity of internal family functioning within the context of the resources of and demands on these families. Building on these models, the central assumption of an integrated perspective on family strengths was that change and adversity challenged families as a normal part of the life cycle (Greeff, 2013, p. 275; Nkosi & Daniels, 2007).

Development Across the Lifespan

Studying families with a life-span developmental psychology approach is centred on two major interrelated approaches. The first is studying families across the life course, and the second, life-span research, engages various developmental theories (Baltes, 1987; Baltes, Reese, & Nesselroade, 2014). First, as GST and the ecological model indeed suggest, the study of families over time is vital since growth or decline at an individual level has consequences at group or family levels (Bengtson & Allen, 1993; Bergman, & Andersson, 2015). The **life course perspective** brings about a contextual understanding of change in the lives of individual family members over time as well as the study of families as social units over time (Bengtson & Allen, 1993; Hareven, 2018; Silverstein & Giarrusso, 2010). Second, from a **lifespan development perspective**, people live through different developmental stages. These stages are generally considered as infancy (approximately 0-3 years of age), childhood (approximately 3-11 years of age), adolescence (approximately 12-18 years of age), young adulthood (approximately 19-35 years of age), adulthood (approximately 36-59 years of age) and old age (approximately 60+ years of age) (Arnett, Chapin, & Brownlow,

2018; Baltes, 1987). Each stage presents developmental tasks that need to be mastered (Erikson, 1978; Havighurst, 1948). Individual family members transition from stage to stage through the successful resolution of developmental challenges or the performance of developmental tasks (Baltes, 1987; Lenz, 2001; Louw & Louw, 2014). These tasks are discussed below.

The current study included participants from the adolescent-, young adult-, middle adult- and later maturity developmental phases. The researcher was cognisant that the tasks described within each developmental stage were not limited to age-specific categories, but presented instead generalised patterns of development (Baltes, 1987; Erikson, 1959).

There are other ways to understand families and the position of older people within families, but for the present study, the developmental stages as described below will be used as a framework to understand the position ascribed to older people.

Adolescents. At this stage people may face challenges related to identity and role confusion (Erikson, 1978; Havighurst, 1948; Louw & Louw, 2014). Although developmental psychologists acknowledge different developmental tasks within this phase, Baltes and Silverberg (1994) describe the developmental tasks of gaining autonomy and finding self-identity as central to it. Autonomy can be described as the disengagement from parental control and confidence in self-governance (Arnett, Chapin, & Brownlow, 2018; Baltes & Silverberg, 1994). The primary developmental task associated with adolescence is therefore negotiated by balancing an emerging sense of self as being competent and a feeling of being connected to significant others, that is, other family members (Baltes & Silverberg, 1994; Lenz, 2001; Louw & Louw, 2014).

Young adults. The developmental tasks associated with this stage are mainly located within the family and other social environments (Havighurst, 1972; Nagaoka, Farrington,

Ehrlich, & Heath, 2015). The primary developmental task of this phase of intimacy versus isolation is stabilizing identity or a feeling of oneself, resulting in personal relationships with significant others (such as family members in particular) that are less centred on one's own desires than during adolescence (Baltes & Silverberg, 1994; Cavanaugh & Blanchard-Fields, 2018; Erikson, 1978). Young adults are also concerned with finding meaning in their lives within the broader society. Dacey and Travers (1999) believe that the transition into young adulthood also raises some questions about what individuals will become and future work life, while this is related to their families in certain respects.

Middle adults. In this stage of generativity versus stagnation, people assume more significant responsibilities and aim to make contributions to the environment (Erikson, 1978). Here developmental tasks relate to physical changes, changing interests, vocational adjustments and tasks concerning family life (Cavanaugh & Blanchard-Fields, 2018; Havighurst, 1972). Tasks concerned with family life include relating to family members, adjusting to ageing parents and assisting younger family members with their transition into adulthood (Cavanaugh & Blanchard-Fields, 2018; Havighurst, 1948; 1982). Meaningful relationships include family, workplace, church and community.

Later maturity (older people). The developmental tasks of old age centre on ego integrity versus despair (Erikson, 1978) and involve adjusting to decreasing physical abilities, retirement and the death of loved ones. Additionally, tasks include establishing explicit affiliation within a social group such as friends, family and community that provide safety and support and the meeting of social obligations (Cavanaugh & Blanchard-Fields, 2018; Havighurst, 1948; 1982).

Adopting a lifespan perspective allows for a nuanced understanding of who is regarded as family and what is expected of them from the phase of adolescence to that of older people. The use of lifespan developmental psychology and the life course perspective allows for the

conceptualisation of family on micro- and macro-social levels (Baltes, 1987; Bengtson & Allen, 1993; Rudolph, & Zacher, 2017). Individual family members are continuously in interaction with their family, and social contexts and these interactions have a reciprocal influence on the individual and social contexts (Bengtson, 1982; Rudolph, & Zacher, 2017). Since a family consists of people in different age groups and developmental stages, it is considered to be a group of individual members at different points in their lives (Amoateng & Heaton, 2015; De Vos, 1995; Rudolph, & Zacher, 2017).

The life course perspective and lifespan developmental psychology are appropriate theoretical frameworks for the present study, as they emphasise the link between developmental phases and members' interactions within the family (see Bengtson & Allen, 1993). The different developmental stages of family members become a crucial factor in the exploration of families, as the collective experiences of individual family members (at different developmental phases within different age groups) help to define family as a social network or group (Amoateng & Heaton, 2015; De Vos, 1995). Within such a grouping, these life span perspectives may foster an understanding of family life by taking into account the phases of development, developmental needs in participants' life course as well as which roles and expectations would need to be fulfilled.

Following the principles of developmental psychology, the relevance of different developmental phases has been highlighted in research within South Africa on relational experiences between generational members (Ferreira, 2011; Mabaso, 2011; Settles, Zhao, Mancini, Rich, Pierre, & Oduor, 2009). Intergenerational studies indicate that older generational members (G1) have increasingly negative experiences with younger generational members (G3), where G1 believe that younger people do not have respect for values and customs that were relevant to their socialization with G3 (Drury, Hutchison, & Abrams, 2016; Ferreira, 2011; Mabaso, 2011; Roos, 2011). Additionally, G1 are also

expected, in some instances, to take over the care of their grandchildren (G3) and to take on a caregiver role (Settles et al., 2009). These shifts of roles and functions in families may influence the relational interactions between inter-generational members (Dolbin-MacNab, Jarrott, Moore, Arsenault, Vrugt, & Erasmus, 2013).

Furthermore, South African research indicates that even when there are close bonds between grandparents and grandchildren, adolescents and older people report strained relationships (Dolbin-MacNab et al., 2013; Oosthuizen, 2014). For example, some studies found that adolescents express frustration and describe their relationship with older people as strained (Dolbin-MacNab et al., 2013; Ferreira, 2011; Mabaso, 2011; Oosthuizen, 2014). These frustrations stemmed from G1 and G3's differing views of respect, since G1 wish to prescribe what G1 should do, while G1 did not wish to adhere to expected behaviour (Roos, 2016). The young to middle adult groups (19-59 years of age, G2) can seemingly play a mediating role in the relationships between the younger G1 and G3 (Barnett, Scaramella, Neppl, Ontai, & Conger, 2010).

The lifespan development-, family strengths- and systems theories therefore offer windows into the real lives of individuals, where they work out their own paths of development, and provide insights into how people are socially organised and how family patterns of interaction affect the emotional and behavioural functioning of individuals within families (Baltes, 1987; Bengtson & Allen, 1993; Burman, 2016; Greeff, 2013; Rada & Olsen, 2016). Human development is therefore embedded in and takes place across the lifespan. The present study explored who is regarded as family across different life-stages, taking into account different generations and individual perspectives (see Elder, 1998; Rudolph, & Zacher, 2017). Such an exploration of families from these theoretical perspectives and across different developmental phases can provide valuable insights into older people's families. It can assist scholars in exploring the position or roles of older people within family

constructions and the implications of the positioning of older people in relation to tangible and intangible care.

Significance of the Study

Exploring families and family conceptualisations in SSA are necessary for three reasons: (a) the changing nature of family structures, (b) rapid population ageing and (c) concerns about the care of older people (Hakim, 2018; Harper, 2014a; Silverstein & Giarrusso, 2010). *First, families and family structures are continually changing*, and more varied family forms are observed. These family forms include, for example, skip-generation families, child-headed families, grandparent-headed families, multi-generational families as well as non-marital cohabitation and LGBTQ-I-families, (Amoateng, Richter, Makiwane & Rama, 2004; Bhana, 2018; Russell, 2002; Sewpaul & Pillay, 2011; Ziehl, 2001). Even though scholars acknowledge the change in family structures due to changing fertility rates and migration (Herlofson & Hagestad, 2011), this change is not reflected in how families are conceptualised (Amoateng & Richter, 2007; Mokomane, 2018; Roberto & Blieszner, 2015). The lack of reflecting the necessary changes in family conceptualisations is problematic, since varying conceptualisations are often employed to regulate obligations of care and support towards family members (Mokomane, 2018). It is crucial to recognise changing family structures as it has an impact on family relationships, the distribution of resources (time, labour, money) and filial support within families (Silverstein & Giarrusso, 2010). The present study aimed to enhance the understanding and conceptualisation of families to address a gap in current discourses about families and the role of older people within these families.

Second, rapid population ageing has been observed in global and African contexts. Developed and developing countries conform to the same demographic trends where a permanent shift of populations to an older age structure is taking place (Harper, 2014a;

Grundy & Tomassini, 2005). The shift to an older age structure globally and in SSA is driven by increased longevity and declining fertility, which implies that more people are living longer within families and communities (Bloom et al., 2011). In addition, population ageing has a significant impact on addressing the growing needs of older people (Apt, 2012; Bloom et al., 2011; Population Reference Bureau, 2014), and increasing attention is placed on issues of how population ageing will affect communities and families in SSA (Aboderin & Hoffman, 2015). It is important to note that in South Africa the legacy and impact of Apartheid have led to far-reaching disparities that primarily affect population ageing (Lloyd-Sherlock, 2018). For example, not all older people had opportunities in their productive years to prepare for financial security in old age due to job reservation and discrimination during Apartheid, forcing them to rely solely on non-contributory, means-tested, state-funded pensions (Lloyd-Sherlock, 2018; Lombard & Kruger, 2009; Schatz et al., 2015). In poverty-stricken communities, there is often an expectation in line with familial obligations that older people with their limited income will support other family members including biological family members but also community members included in family structures (Schatz et al., 2015). It is, however, unclear if these expectations of care are met.

The role of families and the family obligations they have to meet are thus central to global strategies that address population ageing, with the nature and extent of family obligations essential to the debate (Apt, 2012; Bloom et al., 2011). In the context of population ageing, the increased and extended needs of older people as well as their position and role within families necessitates understanding family expectations and how families address care needs (or not). Hence the current study aimed for an exploration of how families were conceptualised and where older people were positioned within families.

Third, government structures and scholars assume that the care and support of older people will become the responsibility of communities and families who are regarded as the

first line of support (DSD, 2013; Schatz, Seeley, Zalwango, 2018). Families, however, face increasing financial, emotional and social challenges that subsequently impact on their ability to provide care and support to their older members, leaving some older people at risk of having unmet needs (Roberto & Blieszner, 2015). For example, government organisations in developing countries such as South Africa do not necessarily have enough financial means or other resources to address the care needs of the growing number of older people (Aboderin & Hoffman, 2015; Bloom et al., 2011; Keating, 2011). The implications of the fact that the number of older people is increasing is not yet reflected in government strategies and policies in South Africa, as the current policy frameworks mostly focus on issues such as HIV/AIDS, poverty and improving service delivery in rural communities (Aboderin & Hoffman, 2015; Hontelez et al., 2011; Lloyd-Sherlock, 2018; Lloyd-Sherlock, Barrientos, Moller, & Saboia, 2012; South African National Treasury, 2015). Attention is, however, turning to pertinent issues such as how the ageing population will in future impact communities and families in affluent as well as poverty-stricken communities (Aboderin & Hoffman, 2015; Goodman, Gibson, Keiser, Gitari, & Raimer-Goodman, 2019). In the context of growing demands placed on families, the current study explored how families organised themselves and their members to adjust to these growing stressors.

Concerns about the relevance and position of older persons within families, their role and function in families, care for families as well as their care needs in limited-resource settings, emphasise the importance of considering older peoples' context within families. As a result of this, the Global Social Initiative on Ageing (GSIA, 2013) of the International Association of Gerontology and Geriatrics (IAGG) developed a research agenda on families and ageing in Africa (GSIA, 2013). The GSIA proposes three themes in their strategic plan: (a) liveability, (b) care and (c) families. Liveability refers to older people's access to economic and social resources to meet their basic needs and to have a good quality of life.

The theme of care centres on the provision of care to older people by documenting the patterns of care provided to older people and identifying sustainable care provision models (GSIA, 2013). Families, according to the GSIA, are vital to the care of older people because this is the primary social group that older people are part of (GSIA, 2013). However, as mentioned, who is regarded as part of a family, and where older persons are positioned within these family structures, is not clear (Amoateng & Richter, 2007; Schatz et al., 2015), and without clarity around this vital care for older people will be compromised.

The fact that the present project focused on conceptualisations of families and the position of older people within families can be understood against this background. An exploration of who is regarded as part of a family and the relation or position of older people will contribute to clarity in perceptions of families, ageing and familial obligation. The findings of the present study can assist policymakers towards improved conceptualisations of families in a South African context, thus to plan for populations growing older and families who are caring for them. In addition, intergenerational family positions, roles and functioning can be studied, and the findings may well contribute to the design of intergenerational intervention programmes to promote a sense of family and intergenerational family cohesion.

Defining Concepts

This thesis referenced key terms and concepts that were used throughout. Although these terms will also be discussed in the contexts of different Chapters, they are briefly explicated here.

Adolescent

The present study considered participants who were approximately 12 to 18 years of age as adolescents (see Baltes, 1987; Erikson, 1975). However, only participants older than 14 years were included.¹

Young Adults

Young adults were defined as participants aged between 19 and 35 years of age (see Baltes, 1987; Erikson, 1975).

Middle Adults

Middle adults were defined as participants aged between 36 and 59 years of age in accordance with work done by Baltes (1987) and Erikson (1975).

Older People

Participants aged 60 years and above were categorised as older people (see Baltes, 1987; Erikson, 1975; South Africa, 2006).

Families

There are various conceptualisations of family. The present study employed the following conceptualisation to understand families in a South African context:

Individual views of family are informed by ideology with a view to personal choice, belief systems and shared values, that is, the notion of the wishful family. These ideas centre on the principle that family members contribute to our lives, address our needs with a view to their functions of members. Family members may be connected to each other through blood

¹ Although there is consensus among scholars that children aged 12 years and older can be regarded as adolescents, only participants older than 14 years of age were included in this study. The decision was based on ethical considerations and the ethical guidelines of the Department of Health (2015) that stipulate that children younger than 14 years are considered more vulnerable and require special guidelines for conducting research.

relations in terms of biology (kinship and lineage), living arrangements (such as sharing living spaces), legal ties (adoption, contracts and marriage) or relational proximity (emotional closeness or connections between members). Family members do not necessarily share a residence or resources but may group themselves in terms of a family structure to include people who make other contributions to it (see Chapter 3, page 114).

Personal Values

The present study held personal family values as principles that guided families' lives and that influence their behaviour and their understanding of what families should be (see Albert & Ferring, 2012; Schwartz, 1992).

Beliefs and Convictions

Individual beliefs and convictions in this context mean the specific ideas (convictions, elements and requirements) believed to be true about participants' families and what their family members must do in their daily interactions to be regarded as part of their family (Teunissen & Bok, 2013).

Family Functions and Obligations

According to the White Paper on Families (DSD, 2013), families have certain universal functions with regard to its members. These include family formation, providing nurturance and support, socialisation and the protection of vulnerable members (Peterson, 2009). In the present study, the functions that individual family members were expected to provide were viewed as family obligations.

Family Roles

Family roles can be defined as patterns of behaviour by which individual family members fulfil their family functions or obligations (Epstein, Ryan, Bishop, Miller & Keitner, 2003; Miller, Ryan, Keitner, Bishop, & Epstein, 2000; Peterson, 2009). Individual

family members fulfil these roles based on their position within the family such as the position of a child, grandchild or grandparent (Peterson, 2009). These roles can be affective, that is, fulfilling functions that involve emotional support and encouragement or instrumental, that is, providing functions that involve the sharing of physical resources (Peterson, 2009).

Population Ageing

Population ageing refers to a demographic shift to an older age structure and an increase in a region's mean age (Da Silva Francisco, 2017). This demographic shift has two primary causes: decreasing fertility rates and increasing life expectancy (Da Silva Francisco, 2017).

Conceptualisation of Families

The present study aimed to outline who is regarded as family. To this end, various terms were used interchangeably to refer to cognitively creating and grasping the meaning and boundaries of family units. The terms used interchangeably were “conceptualise,” “construct,” “describe,” “perceive,” “understand” and “view.”

Research Questions and Aims

Given this context, the present study was guided by two aims: first, to explore who is regarded as family and why and second to explore the position of older people within these family perceptions. The objectives of the present study were to:

- Conduct a critical review of the existing literature regarding the conceptualisations of families mainly in SSA and South Africa.
- Explore and describe family constructions as seen across different developmental phases of a South African group.
- Explore and describe the position of older people in the constructions of family across different developmental phases by participants in the Western Cape, South Africa.

The present study was conducted in different stages where different questions guided each stage, as presented below in Table 3.

Table 3:
Research aims and questions

Phase	Chapter	Aim	Specific research question
Critical Review	Chapter 3	A critical review of the literature on families in SSA	How are families conceptualised in SSA family literature?
Empirical study	Chapter 4	An exploration of how a group in the Western Cape conceptualise families	How do different generational members in a group in the Western Cape, South Africa, conceptualise families and what is expected of these family members?
	Chapter 5	Exploring the position of older people within family conceptualisations	How are older people positioned within family conceptualisations, and what is expected of them?

Dissertation Overview

This thesis is structured into 6 Chapters. **Chapter 1** provides an introduction and contextualization. It introduces the thesis and positions the study with a view to addressing the gap in extant literature about the conceptualisations of families in South Africa.

Chapter 2 describes the methodology that was followed to answer research questions. It states the research aims and questions and provides a detailed description of methodological choices and applications of these choices as well as ethical considerations. It further includes information about the empirical research context. This Chapter provides a backbone of methodological rigour to the present study and provides a theoretical explanation of the methods applied in Chapters 3-5.

Chapter 3 presents a systematic and comprehensive critical review of the literature on how families are conceptualised in SSA literature. Based on the findings of this critical review, the main challenges around conceptualising the families of older people are identified, and suggestions made about setting up a research agenda.

Chapters 4 and 5 present the findings of an empirical study conducted in a community in the Western Cape Province of South Africa. **Chapter 4** comprises an overview of how families are conceptualised across different developmental stages. **Chapter 5** explores how family members at different developmental stages position older people within their families.

Chapter 6 illustrates the contributions that the current study makes or may make to address lacunae in the extant understanding and conceptualising of families and the positioning of older persons within their families. Further, the Chapter explores the implications of the present study's findings. Its contributions relating to the practical applications of the findings is discussed. Finally, this Chapter offers conclusions regarding what the findings indicate for policymakers, legislators and family scholars interested in families in SSA as well as suggestions for future research.

Conclusion

The present Chapter aimed to provide a contextualization and problem statement of the present study and to define relevant concepts. It highlighted the importance of an exploration of who is regarded as family and the position of older people. In the next Chapter, the theoretical and methodological frameworks applied in the present study will be detailed.

CHAPTER 2:

RESEARCH METHODOLOGY

Introduction

This Chapter presents an overview and motivation of the present study's methodology. Details of the design of an inductive qualitative approach to exploring who is regarded as family and about the position of older people within these family conceptualisations are described. While the exploration of the position of older people within the structures of families is of interest, the present study explores how family is conceptualised in literature in terms of a specific population to offer more comprehensive and exact description of the layered nature of families of older people in South Africa.

The qualitative approach adopted here allowed the researcher to elicit information that could add to, stimulate and elaborate on existing academic knowledge regarding families and the position of older people within these family constructions within a South African context. The strength of a qualitative research approach is the richness and depth of the descriptions it yields (Tracy, 2010, 2012).

The methodological approaches used to explore the present topic are detailed by discussing philosophical underpinnings and research methodologies in terms of research design, research questions, the heuristic constructs used as a theoretical guide, the research context, the research approaches and procedures, the data collection methods used and data analysis methods applied.

Research Design

Qualitative research methods are increasingly accepted and used by social and health care professionals, especially in psychology (Hunt, 2009). Three dominant qualitative methodologies within social and health sciences have developed within three significant

disciplines: sociology, anthropology and philosophy (see for example Corbin, & Strauss, 1990; Moustakas, 1994; Radcliff-Brown, 1944). In the past, many qualitative studies within health sciences were conducted according to three methodologies namely grounded theory, ethnography and phenomenology (Hunt, 2009). However the stringent use of these methodologies has resulted in the wrongful application of these frameworks and additional concerns arose around practices of researchers that depart from these methodological frameworks (Hunt, 2009; Thorne, 2016). For example, scholars blend these methodologies, that is, they report findings on the basis of a blended grounded theory approach; they do not align their research questions with their chosen methodology or they use them without critical engagement (Sandelowski, 2010; Thorne, 2016; Tracy, 2013).

In response to some of these concerns, scholars reiterate the importance of rigour within qualitative studies (Sandelowski, 2000; 2010). Following the views of Sandelowski (2000; 2010), the development of other methodological frameworks or approaches that could address these concerns were encouraged by health sciences scholars. One such initiative was the development of interpretative description (ID) as a methodological approach for research within health sciences, which includes psychology. ID was developed by Thorne, Kirkham and MacDonald-Emes (1997) and provided a noncategorical methodological approach that could be used to gain a better understanding of experiential questions that were relevant to health science disciplines and to questions that were not readily and rigorously answered by traditional qualitative methodologies (Hunt, 2009; Thorne, Kirkham & MacDonald-Emes, 1997; Thorne, 2016).

Taking into account that the present study aimed to understand family conceptualisations and the positioning of older members and the fact that these topics were deeply rooted within a body of theoretical knowledge that required a practical understanding, ID was deemed to be an appropriate design for its purposes (see Sandelowski, 2010; Thorne,

Kirkham, & O'Flynn-Magee, 2004, Thorne, 2016). ID allowed for a knowledge generation approach and enabled the researcher to use objective neutrality and theoretical perspectives while also allowing for the acknowledgement of the practical importance of findings (see Thorne, 2016). The choice of ID as a research design was further deemed appropriate as the underlying assumptions of the present study aligned with the philosophical underpinnings of ID (see page 43 below). ID also promoted the exploration of ethical and worthwhile topics by emphasising the principle of the integrity of purpose in the following ways.

First, there should be a *real-world problem* (Thorne et al., 2004) such as a need to conceptualise family in a way that reflects the daily realities of families and older people within them. Second, ID researchers are encouraged to conduct *comprehensive literature reviews* such as the critical review reported in Chapter 3 of this thesis, thus to understand what is known and how the study can contribute to practical and theoretical knowledge (see Thorne, 2016). Third, ID appreciates the context of participants and therefore encourages *context-sensitive research*. It was therefore found to be a fitting design that allowed for the sensitive and contextual understanding of families and how older people were positioned within families in SSA and specifically in South Africa.

Additionally, the ID research question should be *grounded within an applied discipline* such as gerontology and psychology. The ID design allowed the researcher to integrate theoretical knowledge with applied wisdom (see Thorne, 2016, 2019) and was particularly useful for exploring subjective, tacit and patterned aspects of participants' understanding of their family and the positioning of older people within their families (see Thorne et al., 1997, 2004).

To design a study based on an ID framework, Thorne (2016), describes distinctive elements that must be aligned in view of the integrity of purpose principle. The elements of design considered for the present study were interpretive descriptive research questions, the

philosophical underpinnings of ID, theoretical scaffolding, research context, data collection as well as data analysis and the ethical considerations of the qualitative study. Each of these aspects is discussed below.

Interpretive-descriptive Research Questions

The first element considered was interpretive research questions. These questions were amenable to interpretive description and were framed in such a way that the answer to it would fit the framework of disciplinary knowledge (see Thorne, 2016). Based on this design element, the broad question that guided the present study was: Who did people across different developmental phases regard as family and how are older people positioned in these conceptualisations of family? To answer this broad question, the present study was conducted in two phases: (a) a critical review of the literature and (b) an empirical study. The empirical study was divided into two stages: (a) exploring family conceptualisations and (b) exploring the position of older people within these conceptualisations. Figure 1 immediately below present the research aims and questions that guided each phase.

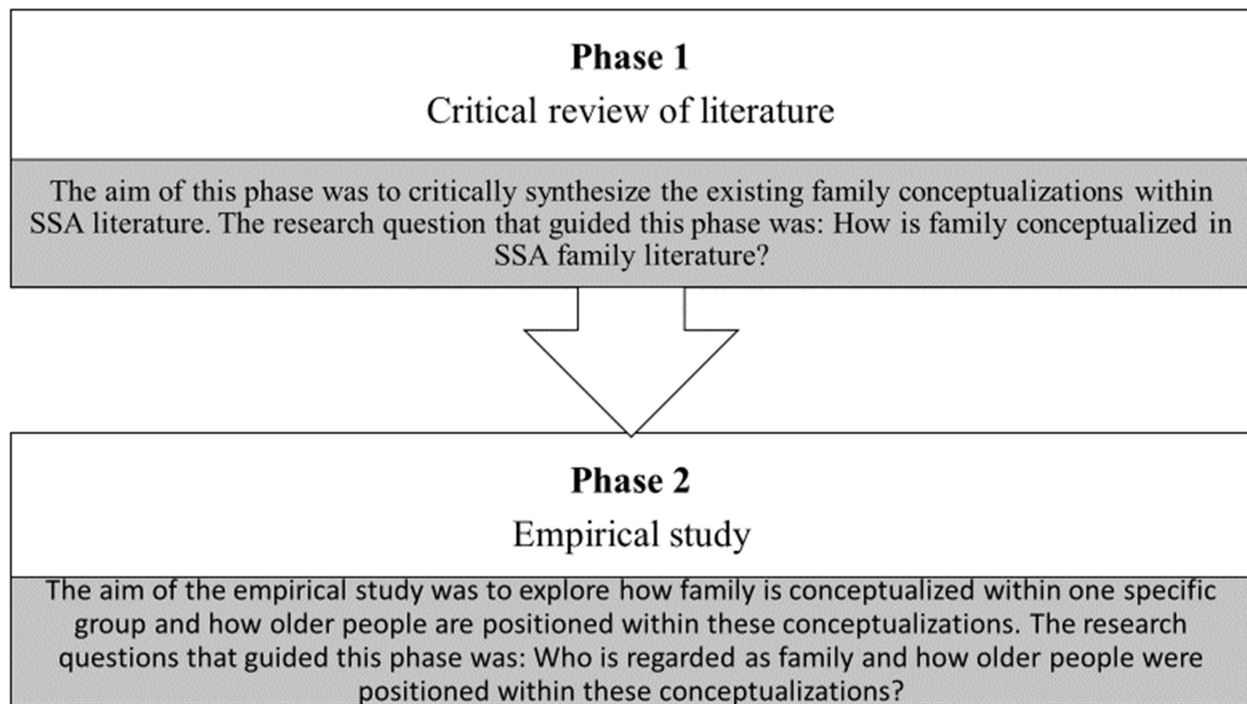


Figure 1: Phases of the present study

Philosophical and Foundational Underpinnings of Interpretative Description

The second design element considered was the philosophical and foundational tenets of the present study and how these aligned with ID. Interpretative description studies have a standard set of assumptions about the nature of human experiences and the production of knowledge. The critical assumptions of an interpretive-descriptive design are (a) acknowledging the multiple realities or truths that should be studied holistically, (b) that the researcher is part of the knowledge-creating process and (c) that theory should emerge from and be grounded in the data (Thorne, 2016; Thorne et al., 2004, Thorne et al., 1997). The foundational and philosophical underpinnings of ID therefore assume that absolute and objective knowledge are unattainable through empirical analysis alone. In the case of the present ID inquiry, theoretical understandings alone could not adequately account for who was regarded as family and how older people were positioned within these constructions. This design perspective therefore recognises that realities are social and experiential and

depend on the meaning created and constructed by the persons who hold them (Thorne, 2016). ID consequently acknowledges the theoretical and practical knowledge that the researcher contributes and co-constructs during the research process.

This design enabled the researcher first to obtain participants' subjective perspectives about how they socially constructed family and the position of older people in such constructions (Thorne, 2016). Second, it allowed the researcher to move beyond the descriptive aspect to interpret findings and describe the patterns and tendencies of the social construction of family (Thorne et al., 2004; Thorne, 2016). Additionally, this design proved to be sensitive to the role of contextual factors that could have influence the social constructions of family and the researcher's role as co-constructor of knowledge in the process. The aim of adopting this position was to inform the theoretical understanding of how family are (socially) constructed in South Africa and the position of older people within these perceived family constructions (see Thorne et al., 2004).

Theoretical Scaffolding

In line with the third design element of interpretive description, the present study was based on a theoretical framework (see Thorne, 2016) that included theories and theoretical models on family and relationships as viewed from a systems and lifespan developmental perspective. Based on the use of different theoretical approaches to understanding family, an interpretive-descriptive research design encouraged the use of conceptual frameworks that were informed by multiple theories and theoretical models (see Thorne et al., 2004). Following the conceptual framework identified in Chapter 1, different theoretical constructs were applied as heuristic constructs to aid the exploration of who was regarded as family and the position of older people within families. The heuristic constructs that guided the present study were (a) critical realism, (b) equifinality and (c) developmental phases of individuals within families.

First, *critical realism* was applied as a meta-theory (see Cruickshank, 2003; Thorne, 2016; 2019) to gain a better understanding of who was regarded as family. Given that critical realism is a meta-theory, it allowed the researcher to explore how individuals negotiate meaning within their social realities based on their interactions with their environment and their families (Fleetwood, 2013). The application of critical realism as a heuristic construct moreover allowed for the adoption of a flexible position that enabled the exploration of personal perspectives on who was regarded as family but also allowed a more nuanced exploration of family conceptualisations and the position of older people within these descriptions across developmental phases.

Second, *equifinality*, a principle of GST, was applied as a heuristic construct to explore who was regarded as family and the positioning of older people within perceived family conceptualisations (see Chapter 1, p.24). Equifinality is a psychological heuristic construct applied in the GST, and it implies that the same end state might be achieved by different paths or trajectories (Henry, Sheffield-Morris, & Harrist, 2015; Von Bertalanffy, 1968). In the present study it was thought that the different people included within the family system and the different ways to position older people within families could, therefore, show similar patterns. How families are understood by families themselves were therefore viewed as dependent on the interaction among different complex contextual factors such as life stages or community practices and beliefs (see Bronfenbrenner, 1979; Henry et al., 2015; Ungar, 2018).

Equifinality as heuristic and guiding construct was applied to the present study in the following ways. First, it was assumed that individual participants would have individual and different ideas about whom they regard as their family. Although individual participants have personal views regarding their families, these different views would inform a transferable conceptualisation of family within their specific context. Building on the

principle of equifinality within open systems, the ecological model of human development, as has been mentioned, recognises the reciprocal and complex interactions between individual development and environmental influences (Bronfenbrenner, 1979; Feiring & Lewis, 1987; Henry et al., 2015; Rousseau, 2017; Von Bertalanffy, 1968). The construct of equifinality was therefore applied while recognising the active individual family member who shaped their environment, evoked responses from their environment and reacted to them (see Bronfenbrenner, 1994; Henry, Sheffield-Morris, & Harrist, 2015). Second, equifinality allowed the researcher to explore these conceptualisations and to understand how older people are positioned within these individual conceptualisations. Following the ecological systems theory and critical realism, conceptualisations of family were thus considered personal and contextual (see Bronfenbrenner, 1979; 1994; Rousseau, 2017). Third, it focused attention on the recognition that different environments have different ways of interacting and will be perceived differently by individual family members across the life course (see Darling, 2007; Dunst, 2016).

Employing these heuristic approaches led to the insight that the interrelated contextual factors that shaped constructions of family and how older people were positioned within these constructions of family were the different life stages of participants and their relationships with family members. The perspective informed by life course and lifespan development suggested that individual changes would inspire changes at a family level, and as a consequence it was assumed that the construction of family might differ according to developmental phases (see Bengtson & Allen, 1993; 2009; Sigelman & Rider, 2014), and possibly over time and according to role expectations (Bengtson & Allen, 2009; Hareven, 2018).

To this end, the different *developmental stages* acknowledged within *life span psychology* were considered a heuristic construct. Based on the developmental phases

identified within developmental psychology (see Chapter 1, p. 26), participants who volunteered to participate represented four groups: adolescents, young adults, middle adults and older people. The age ranges assigned to each group (see Erikson, 1975) were approximations and participants could group themselves based on their evaluation. Theoretical knowledge of developmental psychology and the challenges faced during each developmental phase were therefore used to explore developmental differences in the conceptualisations of family and how older people were positioned within families.

Role of the Researcher

In accordance with the suggested positioning of a researcher within an ID study (Thorne, 2016) as well as considering the nature of qualitative studies (Creswell & Poth, 2018; Tracy, 2013), the researcher was also a primary research instrument and thus actively part of the research context. The researcher, therefore, played a central role as the primary investigator in the conceptualisation of the present study, data collection, qualitative analysis and writing of this research report. During the data collection process, the researcher was assisted by research facilitators: gatekeepers, assistants and community leaders, and an independent co-coder assisted with the coding process.

Gatekeepers were asked to distribute the advertising material and invite prospective participants to take part in the study. The primary investigator prepared the advertising material and consent forms and sent these to the gatekeepers in the community three weeks before the respective data collection sessions occurred.

The research assistants of the present study assisted the primary investigator in preparing the research material for group data collection sessions in accordance with the Mmogo-method, ® and asked probing questions if needed during these sessions.

Several community leaders acted in an advisory role during the data collection phases. These community leaders provided some background information about the community and the challenges they were facing. Community leaders also introduced the primary researcher to community members and gatekeepers.

The section below further details the roles of the primary investigator and the research facilitators.

Research Context and Participants

The present study had two broad aims: first, participants from different developmental stages were selected to obtain descriptions of who they regarded as family; and second, the position of older people within these constructions of family was explored. Drawing on the principle of equifinality (see Chapter 1, p. 24), a community in the Western Cape, a province in the South-western coastal part of South Africa (see Figure 2), was purposefully selected (Feiring & Lewis, 1987; Von Bertalanffy, 1968). By applying this principle, the researcher as primary investigator could explore individual perspectives on who was regarded as family while making some inferences about families in a broader family- and South African context (see Von Bertalanffy, 1968).

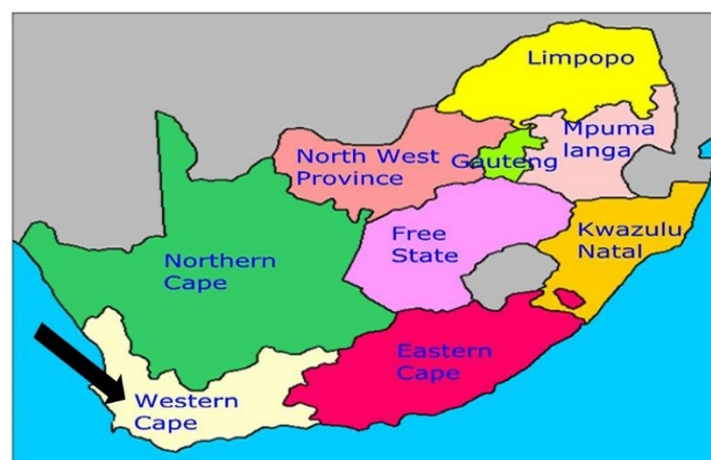


Figure 2: Map of South Africa

This community, like many others in South Africa, is impacted by high unemployment rates (22%), poverty, substance abuse (alcohol and drugs), gangsterism and a lack of formal resources (Abebe, 2012; Amoateng & Richter, 2007; Makoni, 2008; Schatz et al., 2015; van Dongen, 2003). These social challenges increase the pressure on families and communities to support each other and to provide care for family members (Francis, 2006; Makiwane, & Berry, 2013). This community is highly populated but resource-constrained, with very high levels of unemployment but with less informal housing compared to other regions, as some formal housing is provided by governments or employers (World Bank, 2018). Within this province and community, Afrikaans and English are the most frequently spoken languages while some members of the community speak isiXhosa (Amoateng & Makiwane, 2005; Statistics South Africa, 2011; 2016). Participants were thus invited to participate in either Afrikaans, English or isiXhosa.

Post-Apartheid South Africa and the Western Cape Province are still characterised by the dual legacies of Apartheid where cultural diversity and economic inequality are still based on racial classifications (Knijn & Patel, 2018; Seekings, 2008). Although no racial classifications were included in the inclusion criteria of the present study, this community where people of colour constituted the majority race group (Statistics South Africa, 2016) was chosen to afford it an equal opportunity to contribute to the academic debate about families in the Western Cape Province. Thus far, family studies within this Province only focused on other racial groups with limited studies affording brown communities the opportunity to share their family experiences (Amoateng & Makiwane, 2005; Knijn & Patel, 2018; Richter, 2018; van Dongen, 2003). To reiterate the ethical principle of distributive justice, all community members, regardless of race or language group spoken within the community, had an equal opportunity to take part in the present study. To establish this, inclusion criteria were broad so as to include all race groups, and, as just mentioned, willing

participants had the opportunity to take part in their chosen language (Afrikaans, English and IsiXhosa).

Research participants. Participants from different developmental stages and aged between 14 years and older in a community in the Western Cape, South Africa, representing different language groups (Afrikaans, English and IsiXhosa) as well as different gender groups were invited to participate in the present study. These language groups were included as they represented the primary languages spoken in the community in the Western Cape (Statistics South Africa, 2011, 2016), as mentioned, thus allowing for distributive justice.

The participants who volunteered were brown (42) and black (2) and all identified their home language as either Afrikaans (42) or IsiXhosa (2). The participants who took part were grouped according to their developmental phases and the approximate ages associated with these phases, that is, adolescents (approximately 14-18 years), young adults (approximately 19-35 years), middle adults (approximately 36-59 years) and older people (60 + years) (see data as presented in Chapters 4 and 5). These age groups as associated with the developmental phases were only used as approximations, and participants were free to group themselves in the groups of their choosing.

Participants primarily lived on farms with family ties to residents in a nearby informal settlement. Most of the participants received some support from their employers, including subsidies for housing and transport for themselves and their children as well as provision of community activities. The older people of this farming community also had access to a clinic and transport services to and from town.

The rationale for this research context. The selection of the research site depended on different considerations. The first included the choice of communities with high proportions of older people. A community in the Western Cape Province was chosen since it had one of

the highest proportions of older people in South Africa (Statistics South Africa, 2016). This was specifically important as one of the main objectives of the present study was to explore the position of older people within families.

The second consideration was that families were still able to live close to their family members. The importance of family life in the communities in the Western Cape is evidenced by the fact that most of this population group live in family groups (Amoateng & Makiwane, 2005; Statistics South Africa, 2016). This community was therefore explicitly selected because it was a farming community who received housing from employers that allowed families to stay together. Families in this community were therefore still in the position to take responsibility for their older family members. An exploration of who was regarded as family within this community would, therefore, provide insights into the position of older people within families.

Third, from a community psychology perspective, a consideration was communities with existing family initiatives that aimed at strengthening family relations (see Davids, 2017; Kitching, 2016). This was a critical ethical consideration as the research site would benefit from the dissemination of the research findings through the development of community-driven initiatives. The findings of the present study was therefore viewed as potentially useful to support and adjust existing interventions and promote the development of new interventions that could address the needs of this specific community.

Further, in line with the system's principle of equifinality, a consideration was that different transactions might lead to a limited number of patterns of organisation (see Von Bertalanffy, 1968; Henry et al., 2015). Therefore, it was postulated that who was regarded as family in this community might also be valid in other communities. Even though this specific community and its language groups participated in the present study, findings are available to all the community scholars in South Africa, and similar studies in other

communities are encouraged. Also, this is an unfolding research topic, and it is possible that more communities and language groups could be involved in the future. This chosen community could, therefore, contribute to the broader academic debate about families in South Africa and provide some insights into who is regarded as family and the position of older people within these constructions.

Selection and recruitment of participants.

Sampling. Participants were purposively selected to take part in the present study. Based on the ethical principle of distributive justice (Department of Health, 2015), participants in the chosen research community had equal opportunity to voluntarily take part in the research as it was advertised to all (see Gentles, Charles, Ploeg, & McKibbin, 2015). Participants were purposively recruited in four developmental groups: adolescence (14-18 years), young adulthood (19-35 years), adults (36-59 years) and older people (60+ years). The ages assigned to each developmental phase were only approximated, and participants could group themselves in the group they felt most comfortable with. For example, 3 participants who were 19 years of age decided to group themselves in the adolescent group, although they had the opportunity to join the young adults' group. A total of 44 participants volunteered to participate: 27 adolescents, 3 young adults, 5 middle adults and 9 older people.

Selection criteria. The initial participant selection was led by the following criteria. Participants were included in the study if they were:

- from the following developmental phases: adolescence (approximately between age 14-18 years), young adulthood (approximately between 19-35 years), adults (approximately between 36-59 years) and older people (60+);
- able to express themselves adequately in one of the following languages: Afrikaans, English or IsiXhosa;

- willing participants who volunteered and signed informed-consent / -assent forms or were able to present parental permission letters.
- residing in the specific community in the Western Cape.

Male and female participants were included in the study. No racial-, ethnic- or other specifications that could potentially be viewed as discriminatory were applied in the inclusion criteria. Although three language groups were invited to participate, only 42 Afrikaans- and 2 isiXhosa speaking participants volunteered to take part. This could be explained by the fact in this region, most of the participants' home language is Afrikaans (Statistics South Africa, 2016).

Prospective participants were excluded if they were:

- younger than 14 years of age;
- not able to express themselves adequately in Afrikaans, English or IsiXhosa;
- not willing volunteers who wished to participate in the study or sign the informed-consent / -assent forms;
- not residing in the sample community;
- unable to express themselves or struggle to deal with reality. In the case of the present study, struggle with reality meant that they did not communicate on a logical level or respond appropriately to the informed consent form questions.

Recruitment. The recruitment process was designed to invite prospective participants to participate voluntarily, to address the sampling and to benefit the prospective participants within this community. Recruitment was done according to the inclusion and exclusion criteria stated above.

Gatekeepers in the specific community in the Western Cape were asked to put up posters in public places to advertise this project and to invite prospective participants to take

part. The posters were placed in a community hall and on community bulletin boards that were easily accessible to participants. The posters were designed using simple Afrikaans, English and IsiXhosa to ensure that all the prospective participants could understand what was expected of them during the research process. The research was also announced to prospective participants by gatekeepers at local community gatherings. Participants were invited to take part from April 2017 to November 2017 after ethical clearance had been obtained (see ethical considerations below). Trained research assistants were used to obtain participants' consent forms and keep them private and confidential.

Research Methods Applied in the Present Study

Critical Review Methodology

A critical review was deemed necessary to clarify extant perspectives on families. The critical review was mainly conducted by the primary investigator while senior researchers as mentors provided some insights into the application of the findings. The critical review of family literature in SSA yielded a magnitude of references that conceptualise family. Although there are various review methodologies available (for example scoping or systematic reviews) to synthesize literature, a critical review was deemed appropriate as it included an extensive search and critical appraisal of the relevant literature (Grant & Booth, 2009). In line with an interpretive-descriptive design's integrity of purpose principle (Thorne, 2016), the methodological framework suggested by Carnwell and Daly (2001) was used to (a) define the scope of the review, (b) identify relevant sources of information, (c) review the literature found, (d) construct the review and (e) apply and conclude the review. The application of this framework is described below.

Defining the scope of this review. Currently, there are volumes of literature that focus on families in one way or another. Defining the scope for this review was therefore crucial.

This critical review included English-language peer-reviewed research articles, legislation, policy documents and government research reports that defined or described (conceptualised) family or family members in SSA. It was essential to include legislation, policy documents and government research reports to explore how family were conceptualised as these documents are used as informative works for research and other literature sources. The scope of family conceptualisations covered publications that were published between January 1, 2000 and December 31, 2018.

Identifying relevant sources of information. A detailed and systematic search of published literature was conducted with a view to references that conceptualised family in an SSA context. A precursory search was conducted to refine essential terms in the search strategy (see Grant & Booth, 2009; Kulviwat, Guo, & Engchanil, 2004). The following search engines were identified as prominent databases containing journals that consistently published articles on family-related studies across a variety of disciplines: (EBSCOHost: Academic Search Premier, Africa-Wide Information, CAB Abstracts, CINAHL with Full Text, E-Journals, ERIC, Philosopher's Index, PsycARTICLES, PsycINFO, SocINDEX with Full Text; JSTOR and Scopus. The search function of these search engines was used by keying in subject terms or keywords to narrow the search. The key terms used in the search strategy were as presented below.

Table 4:

Key terms used in the search strategy

A	Population of interest	(Africa* OR SSA* OR South Africa*)
B	Areas of interest	AND (“famil*” OR “kin*” OR “kinship*,” “OR “household*”) (keywords)
C	Outcome measures	AND (“famil*” OR “kin*” OR “kinship*,” “OR “household*”) (subject terms)

The following works were excluded:

- documents, including peer-reviewed articles, legislation, policy documents and government research reports, that focused on family but did not provide a definition or description of family or family members;
- works published before the year 2000;
- book reviews, theses, errata, presentations and notes.

Although this review focused on families of older people, the search terms were kept purposefully broad to include all documents that made references to families in general of which older people were part. Terms relating to older people were therefore not included.

Works were appraised according to the focus of the article and the definitions or descriptions of family or family members. Hand searches of the reference lists of the articles that met the inclusion criteria and citation searches were conducted to include all possible works that may have been missed during the first search. In the initial search process, 3314 articles were identified and 1376 duplicates were removed. A total of 1938 documents were screened by title and abstract to eliminate irrelevant works. Finally, 240 full documents were read to assess them for eligibility where an additional 55 articles were eliminated based on the inclusion and exclusion criteria. All in all, 185 references were therefore included in this critical review: articles (167), reports (12), legislation (1) and policy documents (5).

Review of literature. The sources identified for full review were imported to ATLAS.ti (version 8) and thematic and narrative analyses were applied to (a) critically evaluate the conceptualisations of family within and across disciplines and fields of study and (b) explore the position of older people within these general conceptualisations (see Braun, & Clarke, 2014; Tracy, 2012, 2013). First, articles were read and re-read, highlighting family conceptualisations. Second, patterns were identified to answer the question as to who is

regarded as family in SSA. Third, the position of older people was explored as found in these conceptualisations (Tracy, 2012).

Constructing the review and concluding the review. Chapter 3 presents the findings of this critical review. It discusses the conceptual approaches that were used to understand family in SSA. Subsequently, it critiques conceptualisations arrived at on basis of these approaches. Lastly, it offers some recommendations and suggests a conceptual framework to understand family in SSA. The reviewed works cut across different speciality fields such as anthropology, demography, economic studies, education, family studies, gerontology, health sciences, law, psychology, social work, sociology and social sciences, and referred to different SSA countries including Botswana, Ethiopia, Ghana, Kenya, Nigeria, South Africa, Uganda, Zambia and Zimbabwe. These reviewed works are included as supplementary material in Appendix A.

As part of the data extraction process, family conceptualisations were organised, read and reread to highlight definitions and descriptions with a view to a narrative synthesis. The highlighted conceptualisations were coded and thematically arranged into themes and sub-themes using ATLAS.ti software. An iterative data analysis process was followed to identify themes and sub-themes (see p. 63 below; see Creswell & Poth, 2018).

Empirical Study Data Collection Methods

The present study applied two data collection methods: individual graphic family sculpting ionterviews (henceforth GFS) and the Mmogo-method®. These methods are described below.

The Mmogo-method®. The Mmogo-method® is a projective visual data gathering method that uses a predetermined prompt to invite participants (8-10 per group) such as building an object using unstructured material such as clay, beads and straws (Roos, 2012;

Roos, 2016a). It employs three-dimensional clay figures that could be used to explore the relationship between visual elements (Roos, 2016a). This method was used as it allowed the participants to share their subjective perspectives, feelings and experiences in relation to their background, environment and community, and since it could be applied irrespective of the different ages of people in a group setting (Roos, 2012; Roos, 2016b). This method is not biased culturally, linguistically or in terms of age and provides participants with the opportunity to share information on social issues that may be difficult to describe (Roos, 2016a). Although all prospective participants were invited to take part in the Mmogo-method®, only adolescents (27), young adults (3) and older people (9) volunteered to take part in these sessions while the middle adult group refrained. The method follows four phases that will be described below.

Phase 1: entering the research context. In phase 1, the objective is to create a transparent context for the research (Roos, 2016a). This was achieved by explaining what the research entailed, getting permission from stakeholders to conduct the research, obtaining informed assent and consent and introducing group norms (Roos, 2016a).

Phase 2: construction phase. In phase 2, participants were asked to form groups according to developmental stages of no more than 10 people each (Roos, 2016a). Participants were given an open-ended prompt: *Please use the material provided to make something that will show us who you see as your family.* Participants were reminded that there is no right or wrong way to approach the prompt. They were allotted as much time as they needed to build representations of who they regarded as family and were offered a comfort break to wash their hands as well as enjoy refreshments once they had completed their visual representations (see Roos, 2016a). Participants were asked to place their name tags next to their models. Photos were taken of the models from different angles to capture

all perspectives (see Roos, 2016a). These photos of the visual representations were used as visual data.

Phase 3: discussion. In the third phase, the researcher and facilitators invited participants to share what they have made with the group. Participants were asked: Please tell me what you have made? (see Roos, 2016a; 2016b). Clarifying questions were asked and further probing questions included the following.

- Who are these people? How are they related to you?
- Why do you include these people?
- Who/ what is represented by these images? / Who are these images a symbol of?
- How would you describe your experience of your interactions with your family members that you have identified? / How do you feel when you are with these people?

If they have included older people as part of their representations, they were asked about support (see the following questions). If not, probing questions were asked in a general manner: Do you have any contact with older people? If so, can you explain the nature of the interactions?

Do you get and receive support from older people? Part of the probing questions revolved around financial, emotional, social, instrumental support.

After the individual group members enjoyed an opportunity to share their thoughts, others in the group were invited to add their views (see Roos, 2016b).

Phase 4: debriefing. At the end of the discussion in Phase 3, participants were invited to take their representations with them. In line with ethical considerations and as part of the debriefing process, participants were asked how they experienced the session (see Roos, 2016a). They were invited to approach formal services arranged by the researcher should

they need follow-up discussions. Formal debriefing services were made available to participants at no cost. These sessions were concluded with refreshments. Each session took about 90 minutes to complete.

Individual graphic family sculpting interviews (GFS). Linking with the Mmogo-method®, individual GFS interviews were conducted by the primary researcher to clarify descriptions and constructions of family.

Prospective participants older than 14 years of age were invited to take part in these interviews. However, only one young adult and five middle adults volunteered to take part. At these interviews the primary investigator asked participants to draw their family on one side of the paper by presenting each member with a circle, thus, to get a better understanding of the families in this specific community. Venter (1993) and Koen (2017) suggested the following questions regarding these circular representations of family members:

- Draw your family on one side of the paper by presenting each member with a circle.
- Draw the circles as big as you like and use as much space on the paper as you wish.
- Now write (in the circle or next to it) the name and age of the family member.
- Number each circle according to the order in which you drew them.
- On the back of the paper, next to number 1, write down if you have discovered or learned anything new about your family and what it is that you have learned/ discovered
- Write next to each circle if the person is sitting, lying down or standing. You can describe the positions in more detail if you like: for example, sitting comfortably.
- On the back of the paper, next to number 2, write down if you have learned or discovered anything new about your family and what it is that you have learned/ discovered.

- Indicate the direction in which the person is looking by drawing an arrow pointing in the direction that the family member is looking. Each member can only look in one direction. If it is too difficult to let a member-only look in one direction you can use dotted lines to indicate if that member is looking in more than one direction.
- On the back of the paper, next to number 3, write down if you have learned or discovered anything new about your family and what it is that you have learned/ discovered.
- Give each member a name. Choose a name that you think represents the way in which the family has labelled that person, for example, the quiet one, the smart one, the pretty one. Write down the name that you gave each member next to each circle and indicate it with an (L).
- On the back of the paper, next to number 4, write down if you have learned or discovered anything new about your family and what it is that you have learned/ discovered.
- Allocate an emotion to each member of the family and write down the emotion next to each circle by indicating it with an (E).
- On the back of the paper, next to number 5, write down if you have learned or discovered anything new about your family and what it is that you learned/ discovered.
- Finally, answer these questions on the back of the paper:
 - Next, to number 6, write down whether you found the instructions easy to follow. Yes or no?
 - Next, to number 7, write down whether you have learned anything in the process. Yes or no? If you have indicated yes, indicate what it is you have learned.
 - Next, to number 8, write down whether you became emotional during the process. Yes or no?

After these questions had been posed, participants were asked clarifying questions about their family sculpting, which comprised the following.

- Who are these people? How are they related to you?
- Why do you include these people?
- How would you describe your experience of your interactions with your family members that you have identified? / How do you feel when you are with these people?
- If they have included older people, they were asked about care and support:
- Do you have any contact with older people? If so, can you explain the nature of the interactions?
- Do you get and receive support from older people? Probe for financial, emotional, social, instrumental support and determine if it is downward or upward support.

To summarize the graphic family sculpting process, participants were afforded the opportunity to reflect on this process and what they have learnt about themselves and their families. This was an essential first step towards the member reflections process (see Tracy, 2013). The reflective process allowed the researcher and the individual participants to clarify further issues raised (see Tracy, 2013). The researcher was mindful of the fact that this method had the potential to bring forth family patterns or interactions that might be sensitive or difficult to deal with. Based on this, all participants had access to a psychologist to debrief if necessary. Participants could take home their family sculpting to further reflect on their family processes outside of the research context.

Data Collection Procedure

The data gathering took place between April and November 2017, during which time the researcher collected data in the Western Cape province of South Africa. The first data

collection phase took place during a period of one week in April 2017. On each of the different data gathering days, the researcher explained the research process, the aim and objectives of the present study and what was expected of participants. The researcher and research assistants received formal training in obtaining informed consent. The training took the form of an interactive workshop to obtain informed consent or assent (written and verbal) before the data gathering days would arrive. After the participants were informed of the aim of the study, they were given the opportunity to withdraw their participation without any negative consequences. Informed consent and assent and parental permission were obtained from participants who willingly agreed and volunteered to take part in the present study.

Participants who volunteered to take part in the Mmogo-method® were asked to group themselves per age group. Each group was asked to build an object to reflect about how they saw family using the Mmogo-method® materials, namely, as mentioned, clay, beads and grass straws, which took about 90 minutes to complete. Participants who took part in these sessions were reminded that only partial confidentiality was possible because the members of the groups would know who they were. Participants were reminded that the information that was shared in this context should be treated with confidentiality, meaning that an appeal was made to participants not to discuss the information outside the research context. Group norms such as showing respect for each other, treating others with dignity, respecting others' opinions and the confidentiality of shared ideas were also set before the sessions started. Eight to ten participants grouped themselves together for the Mmogo-method®. Additionally, participants were informed that the nature of the method might elicit feelings that they were not aware of and that some of the feelings might cause emotional discomfort. The debriefing methods to access help for dealing with emotional discomfort have been discussed in the present study under the rubric of ethical considerations.

After building the clay models participants were asked to indicate if they were willing to take part in an individual GFS interview at a later stage of the research process. Additionally, adult participants had the opportunity to volunteer to take part in these interviews. Prior to the GFS interviews, the aim of the research was described and explained a second time and participants had the opportunity to ask questions about the research process. Willing participants took part in the interviews on dates and times that were convenient and mutually agreed upon. Participants who volunteered to take part in the interviews were asked to draw a graphic family sculpting of their family and elaborate on the family sculpting in an interview.

The individual GFS interviews and the Mmogo-method® sessions were conducted at an appropriate central location, the community hall, to allow easy and safe access. School-going children were involved in the research during holidays to ensure that their schoolwork was not compromised. Participants were provided with refreshments and thanked for their participation in the research and given the opportunity to ask questions and indicate if they needed any debriefing.

Qualitative Analysis

Textual and visual data were collected. The audio recordings (textual data), were transcribed and co-coded and then analysed by using thematic analysis in ATLAS.ti software (version 8) (see Braun & Clarke, 2014; Friese, Soratto, & Pires, 2018). The visual data was analysed by using analysis as described by Roos and Redelinghuys (2016). The steps that guided the visual analysis were (1) describe the production context, (2) assume an empathic position towards the data, (3) describe the literal observations of the visual elements observed, (4) describe the symbolic meanings attributed to representations by participants, (5) describe the contexts participants introduced spontaneously and finally (6) conduct an interpretive analysis.

Analysis processes and methodological rigour. The table below details the analysis procedure followed in the present study.

Table 5:

Analysis processes and methodological rigour

Qualitative Interpretive Descriptive Analysis (see Thorne, 2016 and Thorne et al., 2004)		Supportive Evidence:
Coding principles:²	Strategies in ATLAS.ti 8	Empirical findings & critical review on family literature
First level coding: ³ Read, re-read data to familiarize Inductive open coding	Preparation of data (transcriptions of voice recordings, photos of visual representations, graphic family sculpting interviews) and upload into ATLAS.ti 8. Organise data document groups (participants 1-44; methodological groups (Mmogo-method®/ graphic family sculpting interviews)) Initial inductive coding process² The range of coding principles used to create a codebook based on Saldaña (2016): <i>Attribute codes</i> (case number, type of method, voices (age groups)) (Frieze, Soratto, & Pires, 2018)	<i>See</i> Structural organization of family obligations (Table 8 and appendix B) (Chapters 3,4,5) Methodological

² The coding principles used here are based on iterative analysis using first and second level coding (open coding, find relationships between codes, identify patterns and present the research story) as described by Tracy (2010, 2012).

³ Initial coding processes: independent inductive co-coding; co-coding by an independent coder, consensus discussions; code-book development & stabilization; consensus discussion; creation of themes and subthemes; review of themes and subthemes.

Qualitative Interpretive Descriptive Analysis (see Thorne, 2016 and Thorne et al., 2004)		Supportive Evidence:
Coding principles: ²	Strategies in ATLAS.ti 8	Empirical findings & critical review on family literature
Second level coding: Identify theme patterns Create initial themes Review and name final themes Produce report	Simultaneous coding: capturing of complex definitions and descriptions of family	comparisons within and across themes (Supplementary material on enclosed CD)
	Structural coding: creation of codes related to social, emotional, pragmatic, spiritual and academic ideas about families. Structural codes provided organizational support for codebook domains	See Chapter 4, Figure 4.
	Value codes included a reference to implicit assumptions or ideals about family membership	Visual representation of findings
	Theming the data (longer code names) included descriptive phrases explaining quotations (code segments)	
	Codebook clean-up: merging, splitting, reviewing codes; independent external code-book review	
	Establishment of code-code relationships (code-co-occurrence explorer), viewing of code distributions by voice (code-document Table)	
	Exploring thematic patterns: drawing up networks to explore code-	

Qualitative Interpretive Descriptive Analysis (see Thorne, 2016 and Thorne et al., 2004)		Supportive Evidence:
Coding principles:²	Strategies in ATLAS.ti 8	Empirical findings & critical review on family literature
	relations; interrogating code-relations using query tool (Boolean operators)	
	Drawing theme networks and re-evaluating data to interrogate and ensure themes (supported by smart codes, code groups and sub-codes)	

Data analysis. The Mmogo-method® data yielded visual and textual data. The visual data was analysed according to these steps: (a) describing the production context, (b) assuming an emphatic position towards the data, (c) describing the exact observations of elements in the visual representations, (d) describing the symbolic meanings attached by participants to the visual elements, (e) describing the participant-introduced contexts and (f) conducting an interpretive analysis (see Roos & Redelinghuys, 2016). The textual data were analysed according to the thematic analysis steps prescribed by Clarke and Braun (2014): (a) familiarize yourself with the data, (b) generate preliminary codes, (c) identifying themes, (d) reviewing themes, (e) defining and naming themes and (f) producing the report (Clarke & Braun, 2014; Saldaña, 2016). Findings gleaned from visual and textual analysis were compared with existing literature to illustrate the transferability of practical knowledge. The data was co-coded by an independent qualitative researcher. Examples of these analyses are presented in the CD enclosed in the present study.

GFS representations were only used to identify the members included within family and to prompt further discussion of who should be included within family. Figure 1 below

presents an example of these GFS representations. The names of family members were blocked out to retain confidentiality.

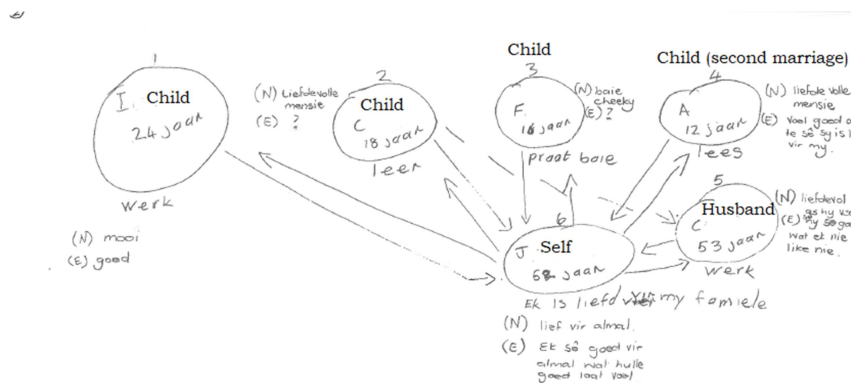


Figure 3: A graphic family sculpting of who is regarded as family

GFS was thus used as a visual prompt during the data collection phase but, again, only served as a guide of who was included and how older people were positioned within families during the analysis process.

The Trustworthiness of the Research

Several models are proposed to ensure trustworthiness and rigour in qualitative studies (Krefting, 1991; Mayan, 2009; Tracy, 2010). The present study applied several guidelines around these models towards methodological coherence of conducted research (see Mayan, 2009). The guidelines were used to ensure trustworthiness were the following; an audit trail, conceptual coherence, member checking, peer review; crystallization and investigator responsiveness (see Finlay, 2006; Krefting, 1991; Mayan, 2009; Sandelowski, 2010; Tracy, 2010).

The aim of the present study's research reports was to present a clear and coherent description of the research process, subject to an audit trail that exhibited its theoretical rigour (see Finlay, 2006). To this end, the researcher thoroughly documented the research process and included the procedures followed in an audit trail (see ATLAS.ti project bundle). The

audit trail included memos about the research procedure, the analysis used and other field notes recorded during the data collection process.

Another principle that guided the present study was conceptual coherence. It is regarded as the interconnection of literature and theories that are applied in a study, the research question, design and method, data analysis procedures and how the findings are interpreted (Mayan, 2009; Tracy, 2010, 2012). In the present study, care was taken to align literature and family theories, the research question and methods used and how the data was analysed and interpreted (see Thorne, 2016). In line with qualitative research analysis, the data was first explored by means of open coding, axial coding and selective coding before extant literature was integrated with the findings (see Saldaña, 2016).

Additionally, two qualitative data gathering methods were used to allow participants to provide detailed descriptions of their conceptualisations of family (see Roos, 2012; 2016). These data collection methods, that is, as mentioned, GFS and the Mmogo-method®, allowed for member checking and member reflections where participants had the opportunity to provide feedback and to clarify information (see Tracy, 2010), thus to ensure that the researcher did not draw her own conclusions about what was shared. Furthermore, bias was limited by using several qualitative methods in the research process, known as crystallization. The latter was applied further as there were several groups of participants from different developmental groups to maximize the range of data gathered. Two methods of analysis (textual and visual) were applied to further ensure trustworthiness. Lastly, the researcher consistently aimed to be responsive at all stages of the research by demonstrating integrity, transparency through working in close collaboration with community leaders and by being conscious of her own bias and perceptions formed by relational experiences with family and families, alleviated through group discussions and personal reflections (see Tracy, 2010; Saldaña, 2016).

Researcher Reflections on the Research Process

Reflexivity during the research process is vital for transparency and to promote the rigour of qualitative studies (Berger, 2015; Gilgun, 2010; Tracy, 2013). As part of the reflective process and as a qualitative researcher, the researcher aimed at continuously examining her own ideas and perceptions of who is regarded as family and the position of older people (Tracy, 2013; Willig, 2013). Notes were made during these self-reflections about the process and personal views about families when they were seemingly different from those presented in literature or in the empirical data. As a white Christian woman under the age of thirty, the researcher regards family and the position of older persons within families in a certain way. She was brought up with specific cultural and religious norms that informs her family life.

During data collection, she was aware that of collecting materials from different age and race groups involving significant age differences between some participants and herself. She was at a different life stage in terms of development compared to the life stages of most of the participants. Most of the participants were between the ages of 14 and 18 years and 60 years and older. This could have led to a biased opinion of participants' experiences and views regarding who is family and the position of older people within the social constructions of family. To address this, she aimed to use culturally appropriate language and to respect participants and their backgrounds, keeping reflective notes to check biases and taking part in reflective debriefing sessions with research facilitators after each data collection session.

Additionally, key aspects of conducting herself ethically during the research process included being authentic, empathic and respectful towards all participants, and viewing them as the experts on families. She undertook to be mindful of the role of participants as social actors regulating their own social world (Tracy, 2010). To this end, a diary was kept to reflect on each data gathering day. She moreover tried to be sensitive to non-verbal

communication, noting when participants felt uncomfortable or hesitant to continue. During the recruitment and data collection phases, the researcher became aware of the fact that some participants in this community were apprehensive and reluctant to share their experiences, especially in a formal research context endorsed by community leaders. Whenever she became aware of this, she tried to re-establish rapport and reaffirm the contribution they were making in addition to discussing the mistrust.

During the Mmogo-method® sessions with the adolescent groups, establishing group norms were fundamental. Although the adolescent participants were open and eager to share their experiences and views, we had to be mindful of the fact that they enjoyed a specific group dynamic due to their developmental stage (see Erikson, 1975). Group norms were therefore set to ensure that participants treated each other with respect. They were asked to treat each other and the researcher with dignity, allow others to voice their opinions even if these might differ from their own and hold what had been shared within the group as confidential. These norms were continuously reiterated during the research process.

The participants shared their stories more freely when they were reminded of their contribution and when felt their individual comments and social constructions of family were important to the success of the present study. Participants were also continuously reminded that their identifiable information would not be disseminated and shared with community leaders. Most of the participants were eager to share whom they regarded as family. After each data collection session a reflective discussion was held between the researcher and facilitators to debrief them and reflect on the research process.

During the coding and analysis phases of the process, the researcher kept memos of all her ideas, thoughts and opinions to check biases and stay reflective. This helped her to give a true and accurate reflection of the data collected, despite her own ideas regarding family. She also tried to be as factual and transparent as possible about the procedure followed in the

present study. Please consult again the audit trail included in the accompanying CD within the present study.

Ethical Considerations

Several ethical considerations guided the study. Ethical approval was obtained from the Humanities and Health Research Ethics Committee at the North-West University: NWU -HS-2016-0214. (See the ethics clearance certificate under Appendix C). The necessary permission to conduct research in the communities was obtained from stakeholders, community leaders in particular. Gatekeepers were contacted and asked to invite participants by word of mouth and by invitation as well as posters to an information session that provided more details about the process to prospective participants or their guardians. During the information sessions, the researcher explained the goal of the research, what would be expected of the participants and answered any questions that prospective participants might have had regarding the research or research process.

The researcher treated prospective participants with respect. Therefore, prospective participants or, in the case of adolescents under 18 years the parents or guardians of the minor participants, received informed-consent / -assent forms and/ or permission letters at least one week prior to the data gathering day and were encouraged to contact the gatekeepers if they had any questions during this time.

Gatekeepers in Communities

Community leaders acted as gatekeepers to introduce the researcher to the prospective research participants. Gatekeepers were asked to invite participants to an information session that would allow participants to take part in a discussion regarding the aim of the research and what would be expected of them. The data was collected at a central community hall within a five-minute safe walking distance from the participants' homes.

Research Assistants

A clinical psychologist (prospective doctoral candidate), a senior researcher and an undergraduate student acted as research assistants. These assistants were fluent in Afrikaans and English and received training to obtain informed consent, informed assent and obtaining permission from adult parents/ guardians as well as assisting the principle investigator with the Mmogo-method®. This training was presented prior to the different data gathering days by way of interactive practical workshops that were presented by senior researchers from the North-West University who were experienced in conducting research. They were also requested to sign confidentiality agreements to ensure that the personal information gathered during the research process would be kept confidential.

Transcriptions, Co-coding and Translations

The textual data (audio recordings) gathered by means of qualitative research methods were transcribed and co-coded by the researcher, an independent qualitative researcher and an external transcription company. Confidentiality agreements were signed by the co-coder and the external transcription company to ensure that the participants' identifiable information would not be made public. The transcriptions were also anonymized after the second phase of data collection had taken place by giving participants new acronyms and numbers. For instance, young adults became YPP1-YPP3, middle adults became INT1-INT6, and older people became OPP1-OPP9. After the data gathering process, the researcher took part in debriefing sessions.

Informed Consent/Assent

Prospective participants or, in the case of adolescents their parents/ guardians, received informed-consent / -assent and permission forms in their language of choice (Afrikaans, English, isiXhosa) three weeks prior to the data gathering days. These forms provided

participants with more information regarding the aims and objectives of the study and what would be expected of them. It also explained the research procedure and that participation in this research was voluntary. The forms assured participants that their identifiable information would not be made public and that their information would be kept confidential. The informed-consent / -assent and permission letters were tailored according to the different ages of the participants and submitted for approval to the Humanities and Health Research Ethics Committee (HHREC) for final review (see Appendix D).

Anonymity and Confidentiality

Participants were assured that their identifiable information would be treated as confidentially as possible and that their names would not be used in any report. Only partial confidentiality could be assured as participants participated in this research in groups. Group norms were set before each data-gathering session, and participants were asked to treat what transpired during the research process as confidential. Participants were also instructed to respect the views of other participants.

Risk-benefit Analysis

The aim of the risk-benefit analysis was to ensure that the direct and indirect benefits outweighed any risks posed by taking part in the present study. Direct benefits included keeping the research material (clay, beads and straws) and the visual representations they made as well as the material used to personalize the gifts (cards) for their family members. Participants also received “you are special to me” cards that they could personalize for each member of their family to promote the strengthening of their family bonds. Additionally, the findings of the research was shared with participants and community leaders who provided services to the area in which the participants lived.

The present study also had indirect benefits related to participation. First, participants whose voices had frequently been marginalised such as the young, the old and the poor enjoyed an opportunity to have their voices heard in an interested and respectful way, which might well have been a positive experience to some participants. Second, the present study contributed to the academic and policy debate on future and alternative family care models. Third, its findings will be used to adapt existing interventions and to develop new interventions towards family wellbeing such as family storytelling and music-making between generational members, thus to promote intergenerational relationships. Additionally, the following outputs from this study are envisaged:

- Research articles in peer-reviewed journals. (See Appendix E)
- Presentations at national and international conferences.
- Research-policy dialogues with researchers, policymakers, practitioners and industry.

The nature of the present study was of medium risk as some of the participants included minor children, older people and individuals with multiple vulnerabilities such as older and younger participants from less affluent communities. However, the actual risks posed to these participants were minimal. Table 6 below summarises these risks and the concomitant precautions taken by the researcher.

Table 6:

Anticipated risks and precautions

Anticipated risks of harm to the participant	Precautions
Psychological harm: participants might experience emotional difficulties during the research process. The Mmogo-method® and the GFS interviews are projective techniques which tap into levels of the psyche that goes beyond a surface cognitive level to the potential of deep feelings arising, but participants might not have fully realized this when they give consent.	- To deal with these risks, participants were informed as follows: <i>In the data collection methods, you need to use materials (clay, beads and straws) or GFS interviews (GFS drawings) to draw a picture or build an object related to whom you regard as your family. Please note that by making/ drawing this of whom you regard as family, you will encounter? deeper meanings and that these deeper meanings might cause discomfort when you share that with researcher (GFS interviews) or group (Mmogo-method®). However, we have people that can help you that is available on site.</i> Additional precautions: -The researcher was trained to use the data collection methods and to be sensitive to research participants' needs. -Registered independent psychologists and social worker were available for debriefing <i>during</i> each data-gathering session. -Participants also had access to a psychologist, social worker and/ or counsellor should they have experienced emotional difficulty <i>after</i> the research process had been completed. These services were available to the

Anticipated risks of harm to the participant	Precautions
Social harm: adverse effects of interactions or relationships between generations	participants at no cost to them. -Special care was taken around participants younger than 18 years of age and older people who are regarded as vulnerable groups. -Only the researcher and research facilitators with training in the Mmogo-method® conducted the adolescent group data collection sessions.
Some privacy might be lost as you will build and discuss whom you regard as a family in a group	The researchers asked the participants to respect each other's views and families. Group norms were created in Phase 1 of the Mmogo-method®

Incentives and Reimbursements

Participants were not compensated for their participation in this research project, but they received refreshments on each of the different data gathering days. They could also keep the research material (clay, beads and straws) they used in the present study, as has been mentioned. Participants also received thank you cards that they could personalize for their family members as a token of appreciation.

Data Storage

The data gathered and participants' identifiable information were stored in a safe place at the Optentia Research Unit of the North-West University. Only the researcher and the promoter had direct access to all the hard copies printed copies of these materials. The co-

coder received an anonymised ATLAS.ti project bundle and deleted the bundle from her computer after the co-coding process had been completed. The electronic data was stored on password-protected computers where only the researcher and promotor had direct access to the information. The printed and electronic data will be stored for five years in accordance with NWU policy on which it will be shredded, deleted and destroyed responsibly.

Monitoring of the Research Process

The promoter monitored the research process on-site during data collection. For this purpose, HHREC ethical guidelines were used to ensure that the present study complied with all the ethical considerations that needed to be considered. The researcher also conducted follow-up meetings with the two field workers to assess progress and to ensure that all incidents were reported according to the ethical guidelines provided to researchers. Community leaders' community organisations moreover were in constant communication with the primary researcher during the research process to provide support when needed.

Conflict of Interest

The researcher was provided with a conflict of interest form to declare these if they existed. No conflict of interest was declared.

Re-use of Data

Participants indicated that the data could be re-used in further studies with a clear focus on families and family dynamics.

Additional Considerations

The three principles that are stressed in the Belmont Report (1978), namely respect, beneficence and justice were followed in addition to research guidelines suggested by the Health Professions Council of South Africa (HPCSA) (HPCSA, 2008). Minor participants were included in the present study. As minor participants could not legally provide informed

consent they were requested to provide assent to take part in the research project to the extent that they were able, while parents/ legal guardians gave permission for their participating (see Department of Health, 2015). All participants as well as the parents / legal guardians of minor participants were informed that they could withdraw at any stage without any negative consequences.

Conclusion

This Chapter highlighted and described the methodology followed in the present study. The data gathered using the methods detailed here will be briefly discussed further in the Chapters to follow. Chapter 3 will discuss the findings of the critical review methodology, while Chapters 4 and 5 will focus on the findings of the data gathered for the empirical study.

CHAPTER 3:

A CRITICAL REVIEW OF FAMILY CONCEPTUALISATIONS IN SSA

Introduction

The aim of this Chapter will be to present the findings of a critical review of family literature and to illustrate the patterns related to how family is understood in literature. A critical review methodology (Carnwell & Daly, 2001) will be followed to explore how family is understood in SSA literature (Chapter 1, pp. 54-57; Chapter 2, pp. 53-57) as this will allow the researcher to summarise and critically evaluate extant literature (see Carnwell & Daly, 2001) as well as to “include a degree of analysis and conceptual innovation” (see Grant & Booth, 2009, p. 94). First, the general conceptualisations of family in SSA literature will be reviewed and summarised. Second, the position of older people within these conceptualisations will be explored and critiqued.

The review highlighted the different disciplinary approaches used to conceptualise family, illustrated by the magnitude of literature published between 2000 and 2018 about family in SSA, emphasising the need for a more focused research agenda for family scholars. This Chapter, therefore, will serve as a literature review and will present the findings of the first phase of data collection.

Conceptual Approaches to Understand Family in Sub-Saharan Africa

The analysis of literature demonstrates four conceptual approaches to understand families in SSA, namely: (a) connection-related, (b) functional, (c) structural and (d) ‘ideal’ or wishful (see Figure 4). It is important to note that the approaches are not static and may overlap with a view to the elements they include and for the purposes they are used. For example, structural- and functional elements are included in a structural-functional approach

to the description of families (Heaton & Amoateng, 2007; LaRossa & Reitzes, 2009; Okon, 2012).

The researcher was conscious of blended perspectives that were predominately presented in global northern contexts where integrated iterative approaches such as structural-functional approaches are used to understand family. Additionally, nuanced subject knowledge may lead to different applications of these approaches, depending on why they use the approach and how they use the approach. However, for the purpose of the present broad critical literature review the approaches were discussed separately to illustrate their elements and complexities and how older people would be positioned within families according to each approach.

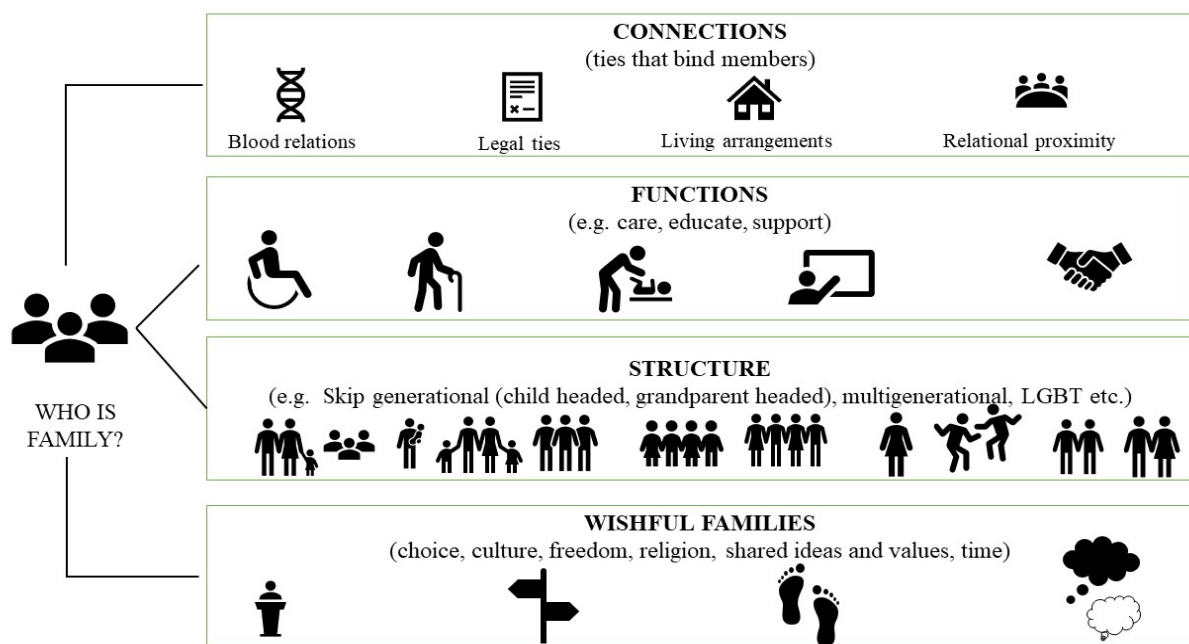


Figure 4: Conceptual approaches to understanding family in SSA

The Connections Approach

From a connections approach, family is regarded as social groups and systems (Amoateng & Richter, 2004; DSD, 2013; 2006) that maintain a common culture and are

governed by family rules (DSD, 2006; Hochfeld, 2007, 2008). Family members interact and communicate with one another in terms of their respective family roles (Bohman, van Wyk & Ekman, 2009). This approach allowed for considering different connections or ties that could bind members of a family. The main goal of the use of a connections approach is to ask how family members can be linked to the family unit. Different connections or ties that bind its members are highlighted in this approach, including blood ties related biologically or in terms of kinship, contractual obligations or ties such as those related to adoption, marriage or conjugal or with a view to shared ideas and values or relational proximity, that is, emotional closeness (Freeman & Nkomo, 2006a; Roman et al., 2016; Manderson & Block, 2016; Manderson, Block & Mkhwanazi, 2016). This connections approach to families allowed for exploring strong links to households or people related to them (kin) and cohabitation (see Amoateng & Richter, 2003; 2004; African Union, 2004; Russell, 2004).

The position of older people as viewed from a connections approach. From a connections approach, older people are included in families based on blood connections, contracts and household ties (African Union, 2004; Amoateng & Richter, 2004; DSD, 2013, 2006). However, even though older people's relational proximity connections are recognised by some authors (Freeman & Nkomo, 2006b; Manderson & Block, 2016; Manderson, Block & Mkhwanazi, 2016), they are not included in all formal constructions of family. Not all conceptualisations based on this approach include all the types of connections between members. Some only include household connections or blood relations, excluding, by implication, some people from families. The omission of certain connections from formal conceptualisations has some severe consequences. First, older people who are part of families such as step-parents, step-grandchildren or neighbours are by implication excluded. Second, not all members who should be included receive the protection or benefits that inclusion brings, leaving them with unmet needs (Allen et al., 2000).

Critique of the connections approach. One critique of the connections approach is that it acknowledges only limited links to the family unit. These connections mainly centre on certain family functions such as family formation (blood ties), providing shelter (household ties) and protecting vulnerable members (contractual ties) (see, for example, DSD, 2013). The use of only a few connections or selectively applying the ties that bind members to a family unit is problematic as it leaves some members excluded, as indicated.

The second critique of this approach is its confusing use of terminology. For example, some family scholars that adopt this approach use household or cohabitation and family terminology interchangeably while others emphasize the differences between them (Abebe, 2012; Amoateng, Richter, Makiwane, & Rama, 2004; Ansell, & Van Blerk, 2004). Hochfeld (2007) warns that cohabitation alone is not a prerequisite for inclusion within families and embodies only one type of connection members share. Based on the application above, all household members are therefore not included as part of families while, on the other hand, all family members do not have to live in the same house.

The Functional Approach

In terms of this approach, families are understood according to the functions that members are expected to fulfil with regard to society and families, such as care (Mtshali, 2016; Songca, 2011), childrearing (Okon, 2012), education, family formation (Gaisie, 2000), family roles and responsibilities (DSD, 2006; Strydom, Wessels, & Strydom, 2010), foster care (Verhoef & Morelli, 2007), holistic development of members (DSD, 2006), membership (Hosegood, 2009), production (Amoateng & Richter, 2004), safety and shelter (Oppong, 2006), sharing resources (Verhoef, 2005), socialization (Imoh, 2012) and support (Abebe, 2012) – as well as instrumental expressions of love and care such as financial aid and non-instrumental expressions such as articulations of love or care) (Abebe, 2012; Strydom et al., 2010).

The responsibility of fulfilling these functions is however not always explicitly assigned to specific members, since scholars assign them either to specific members or families as social units or even other family structures, depending on the focus of their work. See Table 7 below which demonstrates how the function of care is attributed to specific family members, extended family, general family or household, or non-specific family structures such as kinship structures, multigenerational households or the nuclear family.

Table 7:
Responsibility for care⁴

Function	Who is responsible for the function?	References
Care	Extended family- especially older people.	Apt, 2012; Abebe & Aase, 2007; Ferreira, 2006; Freeman & Nkomo, 2006a; Littrell, Murphy, Kumwenda & Macintyre, 2012; Makoni, 2008; Mturi, 2012; Muga & Onyango-Ouma, 2009; Nkosinathi & Mtshali, 2015; Oppong, 2006; Songca, 2011; Therborn, 2006
	Extended family- including aunts, uncles, nieces et cetera.	Abebe, 2012; Aboderin, 2004; Aboderin & Hoffman, 2015; Bigombe & Khadiagala, 2003; Bongaarts & Zimmer, 2002; Botha, 2014; Brown, 2011; Brown, BeLue & Airhihenbuwa, 2010; Ciganda, Gagnon & Tenkorang, 2012; Dawson, 2013; de la Porte, 2008; Foster, 2000; 2005; Haley & Bradbury, 2015; Heyman & Kidman, 2009; Iwelunmor, Airhihenbuwa, Okoror, Brown, & BeLue, 2008; Knight, Hosegood & Timaeus, 2016; Madhaven, 2001; 2004; Marteleto, Cavanagh, Prickett, & Clark., 2016; Mokomane, 2013; Nyamukapa & Gregson, 2004; Smit, 2007; Tenkorang & Adjei, 2015; Townsend, Madhaven & Garey, 2006; Young & Ansell, 2003; van Dijk & van Driel, 2009; Wythe, Alber & Geissler, 2004
	Family.	African Union, 2004; 2012; Amoateng, Richter, Makiwane, & Rama, 2004; Amoateng, Heaton & Kalule-Sabiti, 2007; Bohman et al., 2009; Bongaarts, 2001; Chipkin & Ngqulunga, 2008; DSD, 2001; 2011;

⁴ The references presented in Table 7 are listed in Appendix A. Only the references that were used in the supporting text of this table were also included within the complete reference list of the thesis document.

Function	Who is responsible for the function?	References
		Erlingsson & Brysiewicz, 2015; Lemmer, 2009; Mazzucato et al., 2015; Manderson, Block & Mkhwanazi, 2016; Okon, 2012; Lippman, Wilcox, & Ryberg, 2013; Ratele, Shefer & Clowes, 2012; Roman et al., 2016; Russell, 2004; Sooryamoorthy, 2015; Songca, 2011; Thabethe, Mbatha & Mtapuri, 2016; Strydom, Wessels & Strydom, 2010; Unanka, 2002; van Rooi, 2011
	Households.	Ansell & van Blerk, 2004; Chirwa, 2002; Kriel et al., 2014; Mturi, 2012
	Kinship structures.	Clark & Cotton, 2015; Imoh, 2012; Goldberg, 2013; Manderson & Block, 2016; Mathambo & Gibbs, 2009; Reynolds, 2016; Seekings, 2008
	Multigenerational households.	Nkosinathi & Mtshali, 2015; Schatz et al., 2015
	Nuclear family.	Chirwa, 2002; de Vos, 2004; Kwasbi, 2002; Hochfeld, 2008

The functions family members should fulfil are therefore not assigned consistently but, instead, depend on the context or academic field from within which it is studied.

The position of older people as viewed from a functional approach. This approach describes older people as primary providers of care. However, while older people often are primary providers, the caring function is sometimes exercised to the detriment of their own health and well-being (Littrell et al., 2012), while they are not always reciprocally cared for. Literature confirms the various roles that older people fulfil such as to educate and raise

children, provide care as well as provide financial aid, support and protection (Chazan, 2008; Golaz, Wandera, & Rutaremwa, 2017; Kimuna & Makiwane, 2007; van Dullenmen, 2006). However, older people are not always recognised for contributions they make to their families. Questions furthermore arise about the inclusion or exclusion of older people who can't contribute due to frailty, illness or poverty. Are these older people by implication excluded from being family?

Critique of the functional approach. Although the functional approach assumes that members will fulfil their functions, the fulfilment of these functions is not held to be reciprocal. One significant further critique of the functional approach is that it does not make provision for vulnerable members (children and older people) who have less bargaining power in families and who are sometimes deliberately excluded from care and support in challenging times (Aboderin, 2004; Ansell & van Blerk, 2004). Second, this approach enforces romantic ideas about families who use their resources to support each other (Keating & de Jong Gierveld, 2015). It also fails to explain the erosion of the families' ability to support its members on a functional level (Aboderin, 2004; Ansell & van Blerk, 2004; Brown, 2011; Keating, 2011; Keating & de Jong Gierveld, 2015; Mturi, 2012). The assignment of functions to specific members or to the family unit is not consistent and is dependent on the context and academic focus of given literature that adopts the approach. This is problematic as it creates further role confusion in families.

The Structural Approach

Family structure is understood as the arrangement and organisation of family members either by means of biological, conjugal (that is, related marriage) or legal connections (that is, as arranged according to connections). It also refers to the marital status of a family (Manning & Lamb, 2003) or the family structure in which a child is raised (Strohschein, Roos, & Brownell, 2009). Literature employs different family structures: African-, blended-,

child-headed-, contemporary-, extended-, family collective-, headship-, household-, joint, kin-category-, LGBT-, migrant-, multi-generational-, non-biological family household-, nuclear-, polygamous-, reconstructed-, single adult-, single parent-, skip-generational-, traditional- and Western family structures (Davids & Roman, 2013; DSD, 2006, Drucker, 2009; Lubbe, 2008; Russell, 2002; Singh, 2008; Sooryamoorthy & Makhoba, 2016; Ziehl, 2001).

For the purpose of the present review, the identified structures are grouped into three broad categories: traditional, contemporary and collective-family. Each of these are described for the sake of clarity; Table 8 below provides a summary of these structural family types.

Table 8:

Summary of family structures in SSA literature⁵

Traditional structures	Contemporary structures	Collective-family structures
Western	Blended	African
Married, heterosexual couple and their dependent children (<i>see</i> Seekings, 2008).	Reconstituted, complex family (<i>see</i> Bonthuys, 2010; Davids, Ryan, Yassin, Hendrickse & Roman, 2016).	Family is extended to aunts, uncles, grandparents, cousins and other relatives (<i>see</i> Agesa, 2004 Makoni, 2008, Russell, 2004).
Nuclear	Child-headed	Extended
A husband and a wife living together with their dependent children (<i>see</i> Amoateng & Kalule-Sabiti, 2008; Mturi, Xaba and Sekokotla 2005, Lemmer, 2009).	Headed by a person under 18 years who is taking responsibility for the household/ family (<i>see</i> Botha, 2014; DSD, 2011; 2013).	A multigenerational family that may or may not share the same household (DSD, 2011, 2013, Okon, 2012; Russell, 2002, 2004).
Household	Headship	Polygamous
A group of persons who live together and provide themselves jointly with food and/ or other essentials for living (<i>see</i> Kriel, Randall, Coast, & De Clercq, 2014; Russell, 2004; Statistics South Africa, 2011).	A single adult (mostly female-headed) takes responsibility for the household/ family (<i>see</i> Bigombe & Khadiagala, 2003, Rogan, 2016).	A cultural institution where the man is considered as a source of security against being left alone to care for the children of the dead wife. In this arrangement, child-rearing proceed according to the fixed ideas of kinship

⁵ The references used to compile the definitions in Table 8 are listed in Appendix A. Only the references that were used in the supporting text of this table were also included within the complete reference list of the thesis document.

Traditional structures	Contemporary structures	Collective-family structures
Single adult A single person living in a household/ family (DSD, 2013). Others use this family form interchangeably with single parent family forms if the adult is over the age of 24 (Chipkin & Ngqulunga, 2008; Dungumaro, 2008; Richter & Desmond, 2008).	Non-biological family household Non-related family members living in the same household (Makiwane, Makoae, Botsis, & Vawda, 2012).	and gender hierarchy (see; Sloth-Nielsen & van Heerden, 2014; Sooryamoorthy & Chetty, 2015). Kin category The child is situated within a strong family network that reaches beyond the nuclear family based on patrilineal or matrilineal connections (see Amoateng et al., 2004; Foster, 2000; Okon, 2012; Riley, 2013).
	LGBT Same-sex family forms (see Bonthuys, 2010, De Vos, 2004; DSD, 2013).	Skip-generational Contains at least one child with all members either below 18 or over 59 (that is, grandmother-headed) (see DSD, 2013; Richter & Desmond, 2008; Zimmer & Das, 2014).
	Single parent Single adult and at least one child (see Khan, 2012; Holborn & Eddy, 2011; Reynolds, 2016; Wittenberg	Multi-generational Adult (with or without a spouse), children and parent (or parent-in-law) or an adult (with or without a spouse),

Traditional structures	Contemporary structures	Collective-family structures
	& Collinson, 2007).	children and grandchildren (see DSD, 2006; Madhavan, Mee & Collinson, 2014; Mtshali, 2016; Okon, 2012).
	Migrant Families with at least one adult that migrate to provide for the family unit (see DSD, 2013).	

Western-, household-, nuclear- and single adult family structures are viewed as **traditional**. As far as this list goes, the most popular reference in SSA literature was to the traditional nuclear family including those who co-reside and those with a link to the household (Amoateng & Heaton 2015; Amoateng & Richter, 2003; 2004; Amoateng, Richter, Makiwane, & Rama, 2004; Bongaarts, 2001; Brown, BeLue, & Airhihenbuwa, 2010; DSD, 2013; De Vos, 2004; Lippman, Wilcox, & Ryberg, 2013; Madhavan, & Schatz, 2007). References to Western- and nuclear family structures are often used interchangeably as they have similar definitions (see, for example, Amoateng & Kalule- Sabiti, 2008; Lemmer, 2009; Seekings, 2008). Household- and headship structures involve the shared residence of members. These family forms and the living arrangements of family members are often used to conceptualise families (Abebe, 2012), while others acknowledge that the household is part of the broader society that protects families on a micro-level (Russel, 2004).

Contemporary family structures. Seven contemporary or non-traditional structures were found, namely blended (Hochfeld, 2007), child-headed- (Botha, 2014; DSD, 2011;

2013; Haley & Bradbury, 2015), headship- (Bigombe & Khadiagala, 2003, Rogan, 2016), non-biological family household- (Heaton & Amoateng, 2007; Dungumaro, 2008), LGBT- (Drucker, 2009), single parent- (Holborn & Eddy, 2011; Reynolds, 2016; Wittenberg & Collinson, 2007) and migrant families (DSD, 2013).

Collective-family structures. Collective-family structures included African-, extended-, polygamous-, kin-, skip-generational- (grandmother-headed-) and multi-generational structures. These structures allow inclusion of several types of family and have more broad definitions of families than in the case of traditional family structures. Families are organised according to shared biology and lineage and marriage, and are not restricted to living together, although some may share a household. Collective family structures incorporate kinship structures that are connected in many ways according to needs (instrumental and non-instrumental support), social contracts (across generations), expectations and cultural conventions (Abebe, 2012; Manderson et al., 2016).

Position of older people viewed from a structural approach. Across several studies, family obligations centre on children, and a limited number of studies acknowledge the reciprocal nature of these obligations (Chazan, 2008; Nortey, Aryeetey, Aikins, Amendah, & Nonvignon, 2017). Older people are organised as part of collective and contemporary family structures. Older people are however organised as primary providers of support to share resources as well as take on family responsibilities towards younger generations (Amoateng & Richter, 2004; Brown, BeLue, & Airhihenbuwa, 2010; Chazan, 2008; De Vos, 2004; Golaz et al., 2017; Mazzucato et al, 2015; Nkosi & Daniels, 2007; van Dullenmen, 2006). This perspective uses kinship structures to support arguments about the distribution of family resources, and there is a general expectation that older people use their pensions to support their family members (Bertrand, Mullainathan, & Miller, 2003; Kimuna & Makiwane, 2007).

These family obligations are sometimes performed to the detriment of older people when they place them under additional burdens) (Apt, 2012; Littrell et al., 2012; Oppong, 2006). Some studies report that older people carry the burdens associated with caring and suffer because of it (Kasedde, Doyle, Seeley & Ross, 2014; Kidman & Thurman, 2014; Oppong, 2006). Structural families, therefore, often organise themselves around older people who can help to address their needs. For example, older people within extended and multigenerational families are expected to raise and foster children (Kasedde et al., 2014; Nyasani, Sterberg & Smith, 2009). This raises a question about the inclusion or exclusion of older people who are unable to contribute or fulfil these obligations due to frailty or illness, as has been mentioned.

Although in these family forms older people are included that are recognised in the White Paper of Families (DSD, 2013), other policies and legislation that are relevant to older people unfortunately exclude them (see Older Persons Act, 2006). The lack of formal recognition of these structures in legislation limits older persons' claims to be cared for or take care of their family members (Sloth-Nielsen, & Van Heerden, 2014).

Critique of structural approach. The structural approach acknowledges a variety of conceptualisations of families. As the name indicates, most are structural in nature, based either on kinship relationships (blood relations and legal connections) (Ciganda, Gagnon & Tenkorang, 2012; Howell, 2009; Reynolds, 2015; Verhoef, 2005) or living arrangements (Abebe, 2012; Russel, 2004; Sooryamoorthy & Makhoba, 2016). There is evidence that beliefs exist about natural or ideal structures (Sooryamoorthy & Chetty, 2015; Ziehl, 2002). While a magnitude of family forms is recognised within the literature related to structural approaches, some family forms are still viewed as more natural than others. For example, nuclear families are still seen as representative of Western societies while collective family forms such as African, extended and multi-generational ones are viewed as representative of

families in SSA (Singh, 2008; Sooryamoorthy & Chetty, 2015). Collective family structures such as African, polygamous, kinship, skip-generational and multi-generational ones, also allow for family members to be connected based on their needs and expectations, social contracts and cultural conventions (Abebe, 2012; Manderson & Block, 2016).

Based on these structural organizations, there are some support obligations within families. From an SSA perspective, this approach may not be context-sensitive enough while it furthermore excludes extended family members (that is, collective family structures) such as aunts, uncles and older people who are not traditionally part of families and who may not live in the same household but who are dependent on family care and support. A further critique is that when the household is equated to family it excludes members who might have been included in broader definitions. For example, in a study to show the importance of defining concepts and providing proper fieldworker training, one fieldworker said (Makiwane et al., 2012) the following:

Ja, a household it's a family. A family of people who are living together. Everyone in the family. Ja, when I get to the house, then I find those people there. And then I interview those people. Those people to me were all the household to me in those family. I understand it like that. Besides the financially responsible person. (Mpumalanga fieldworker interview, 2012).

Although a structural approach may reflect the changes in social structure due to modernisation, industrialisation and urbanization (Amoateng et al., 2004), it does not necessarily afford legal protection to family members who are organised within these family forms. For example, adolescents that take responsibility for their family in what is known as child-headed families, still need the consent of a responsible or trusted adult to provide for their families.

Wishful or “Ideal” Family Approach

The fourth approach found in literature centres on a wishful or idealistic view. This approach understands families in terms of the ideology of what the constructed family stands for or according to ideas about what the ideal or wishful family should look like. The wishful family is a complex, open and fluid system with relational processes and practices (Fakier & Cock, 2009; Lubbe, 2008) that is regulated by resources and stressors (Ncho & Wright, 2013), interweaving economics, emotion, and power with multi-layered relations (Fakier & Cock, 2009). In the wishful family, members have a choice about who is included based on freedom of association (Lubbe, 2008), state of mind (Shorter 1975 as cited in Ziehl, 2002), religion and shared values (Singh, 2008) and/ or relational proximity (Freeman & Nkomo, 2006a; 2006b; Roman et al., 2016). The wishful family is thus whomever we say they are, and this supports the notion of “doing family” (see for example Erlingsson & Brysiewicz, 2015; Wright & Leahey, 2005, p. 60). Lubbe (2008) similarly asserts that “we do family through acting in life” (p. 24). Wishful families are presented in two ways in literature: around wishful ideas about the inclusion of family members and wishful ideas about family obligations embedded within family conceptualisations.

Wishful ideas about inclusion. In this sub-category families are described as multi-layered, open and fluid systems regulated by the sharing of resources and burdens according to its own relational processes and practices (Fakier & Cock, 2009; Lubbe, 2008; Ncho & Wright, 2013). The connections between members are open and fluid and mainly depend on abstract ideas about the inclusion of family members. Here, choice is a primary driver of family membership, and “families are whomever they say they are” (Amoateng & Richter, 2007, p.14; Wright & Leahey, 2005, p. 60). These wishful families carry the assumption that families include everyone as well as the functions members should fulfil—for example: *“families are [wishfully] regarded as the building blocks of communities and the source of*

individual development and identity among young and old members, men and women, providers and dependants”(emphasis added) (Amoateng & Richter, 2004, p. 244). Family membership is therefore not structured based a reduction to kin relations or living arrangements but also in terms of romantic ideals of what families should do and how they should make us feel.

Wishful ideas about family obligations. Moreover, there is evidence of idealistic or “wishful” standards about the fulfilment of family obligations within the existing literature. Several family conceptualisations reported in the literature are based on an underlying assumption that families are autonomous and that their roles and obligations are fulfilled reciprocally (Abebe, 2012; Bonthuys, 2010; Chirwa, 2002; Strydom et al., 2010). For example, some scholars see family as instruments of “sharing and caring - across generations” (Singh, 2008, p. 455). Some references also use outdated references to describe families as the “haven of primary fulfilment and meaningful experience’ (see Zinn & Eitzen, 1990, p. 14 as cited in Okon, 2012)

Though other works acknowledge that families are not always willing or able to take care of their vulnerable members reciprocally (Aboderin & Hoffman, 2015; Adeagbo, 2016; Smit, 2007), the wishful belief pervades that families will fulfil their universal obligations towards vulnerable members if only they were strengthened (Bonthuys, 2010; Erlingsson & Brysiewicz, 2015; Hochfeld, 2007; Lemmer, 2009; Nkosi & Daniels, 2007; Richter, 2018; Sewpaul, 2006; Singh, 2008).

Ziehl (2002; 2003) however cautions towards the use of idealized family conceptualisations as a replacement of structural conceptualisations. Despite this distinction, there is evidence that some structural conceptualisations have underlying assumptions that support wishful ideas about the fulfilment of family obligations (Keating & de Jong Gierveld,

2015). This approach focuses on aspirations as to what the structural families will contribute to their members.

Research on the views of child fostering demonstrates that wishful ideas about fulfilling family obligations are embedded in notions around how members describe their families. For example: “When we share children, we build up the family” (Verhoef, 2005, p.375). These ideals create the expectation that families live and work harmoniously together, raise children and develop a network of close family ties with extended family members (Verhoef, 2005). Other scholars indeed present SSA extended families as vibrant, creative and resilient social resources that provide resources, give hope and love to members and fulfil family obligations freely (see, for instance, De la Porte, 2008; Iwelunmor et al., 2008).

The position of older people as viewed from a wishful family approach. The approach includes all family members, but there is strong emphasis on the inclusion of children. Wishful families are held to be autonomous, taking care of each other, enjoying reciprocal love and support while all its members contribute to the well-being of other members (Bonthuys, 2010; Saleebey, 2002; Strydom et al., 2010). The reciprocal care stressed by this approach can however not be enforced, as legislation relating to older people do not include any formal conceptualisation of who are regarded as family members of older people (see Older Persons Act, 2006). And, as stated, the wishful approach to conceptualizing families does not necessarily present an accurate picture of families in SSA.

Critique of wishful approach. Although wishful family ideas are strongly represented in literature, some scholars challenge its idealised view of family and suggest that families struggle to meet the needs of all its members (Aboderin & Hoffman, 2015; Adeagbo, 2016; DSD, 2006). Indeed, Ziehl (2002; 2003) stresses that as ideological phenomena families must be distinguished from their actual structural arrangements. Despite this, the rhetoric and underlining assumptions of wishful families are active in policy and literature discourses.

However, this popular viewpoint may not manifest itself in practice, and may only provide a false view of who is included in families.

Discussion of Review Findings

This critical review exposes one or two issues around how families are studied and understood in SSA literature. First, the results of this critical review show predominance in literature towards understanding older people's families from the stance of a structural approach while wishful standards of what families should represent prevail.

Second, this review exposes the belief that families have obligations to support their members. The findings show that there are different sources of obligation: structural ones related to kinship and living arrangements on the one hand, and family obligations on the other. Structural sources of obligation include support from members in kinship structures or members who share household ties. Although many family forms are acknowledged in the literature, some forms are considered more natural than others. The use of nuclear and extended family structures are strongly represented.

Nuclear family conceptualisations are used most frequently when it comes to framing family studies in SSA, while extended families are viewed explicitly to include older people only when they fulfil certain family obligations (Bigombe & Khadiagala, 2003; Hochfeld, 2007; 2007; Marteleto et al., 2016). Older people are mainly organised as part of collective family structures where they are expected to fulfil universal family functions such as sharing resources, taking care of orphans and fostering children (Amoateng & Richter, 2004; Brown, et al., 2010; De Vos, 2004; Mazzucato et al., 2015; Nkosi & Daniels, 2007). Kinship family structures are also used to support the general expectation that older people will (and want to) use their pensions to support their family members (Bertrand et al., 2003; Kimuna & Makiwane, 2007). The family structures that receive formal recognition remain based on

nuclear rather than contemporary structures, where members are independent and self-sufficient adults who are active, caring adults that look after their passive children (Bonthuys, 2010, p. 53; De Vos, 2004).

Third, older people are also structurally organised to fulfil family obligations, although the reciprocal nature of these obligations is not necessarily enforced or recognised. Neither approach (structural or wishful) makes provision for members with less bargaining power (Aboderin, 2004; Ansell & van Blerk, 2004). Structural approaches apply family conceptualisations rigidly and sometimes fail to explain or reflect on how some families might struggle to provide care and support to their vulnerable members (Aboderin, 2004; Ansell & van Blerk, 2004; Brown, 2011; Keating, 2011; Keating & de Jong Gierveld, 2015; Mturi, 2012). These findings call for an exploration of the expectations families harbour towards their older members. Family scholars should be looking at ways to support older people within families to help them address their own needs.

Furthermore, findings suggest that the assumptions that underlie conceptions of wishful families are strongly represented within family policy and literary viewpoints. Family support seems to be the most wishful as it seems to be a romantic expression of *we all love another*. The wishful ideas of family membership boundaries are enforced by ideological, normative ideas that older people live in extended and multigenerational family units that share resources equally and take care of all vulnerable members (Bigombe & Khadiagala, 2003; Mtshali, 2016; Reynolds, 2016; Wittenberg & Collinson, 2007). These wishful standards of what families should do are supported by notions around the universal functions of families, which are in turn reiterated when it comes to how we conceptualise families. Thus, when family membership boundaries are fluid, the obligations family members should fulfil towards each other and towards society becomes fluid. The predominance of wishful families in SSA consequently suggests that scholars need to challenge idealistically

normative conceptualisations of families where family obligations are viewed as phenomena that are implicitly embedded.

Some challenges arise from these findings. Understanding the families of older people requires a more holistic approach so as to explore family membership boundaries outside of structural ideas. Participant-based conceptualisations of families within an SSA context are limited, and there is a call to include the research participants' voices in studies concerning families of older people. Researchers have yet to map SSA families across all regional settings or the actual obligations they fulfil towards members and not merely those that are perceived to exist. Previous studies mainly focused on how older people fulfil family obligations. But research on how older people support their younger family members cannot provide a comparative foundation for evaluating if and how family obligations are fulfilled in families of older people. Based on the findings of this review, three main challenges form the basis for a proposed research agenda. Foremost, there has been little research on the structural location of older people within families. Most of the studies included within this review mainly focus on the structural positioning of young children and their parents (see Bennett et al., 2015; Clarke, Cotton & Marteleto, 2015; Lu, 2009; Madhavan et al., 2014). Additionally, older people are mainly positioned in a romantic and wishful way, where they supposedly provide support to younger generations.

Further, evidence of aspirations that older people be well-supported have not been tested empirically. Therefore, future studies should focus more on how older people are supported by their families. Lastly, family structure and family obligation across the diversity of older people in the region is not well-understood. A research agenda to address these challenges must thus include (a) research on family structures and obligations from the perspectives of younger and older generations and (b) a critical evaluation of discourses about family support of older persons in SSA.

Recommendations Based on the Findings

Different trends such as globalization, migration and industrialization have influenced our understanding of families. There is a growing tendency for family relations to be based on relational proximity and not on economic or other social concerns (Heaton & Amoateng, 2007). In fact, Adeagobo (2016) goes as far as to see family units as a shell- or zombie category - dead but still alive - since the conventional definitions of families do not necessarily represent contemporary families.

Although older people are sometimes included within family conceptualisations, they, however, do not receive enough recognition, and there are indeed conceptualisations based on connections and structures that exclude them. These findings provide a foundation of practices for the further examination of the different perspectives from which family is understood and the position of older people within these different perspectives. The effect of popular practices leaves some vulnerable members older people in particular, at the mercy of limited options to receive familial care and protection, as they are not necessarily recognised as part of families. Each of the abovementioned practices are discussed below in relation to older people, and recommendations to address these practices are made.

Interchangeable Use of Family-Related Terminology

Family scholars use terms such as family, kin and households interchangeably and in this way add to family boundary ambiguity. Family boundary ambiguity refers to the inability to provide a consistent report on who is regarded as family (Bertalanffy, 1968; Carroll, Olson & Buckmiller, 2007; Henry et al., 2015). There are further problems around equating families with households or kinship structures, such as the following:

First, not all family members live in the same household (Kriel et al., 2014; Mturi, 2012) and using household definitions only provide a skewed picture of families in SSA as it leads

to the use of household data in family studies. The use of household data in family studies excludes members who do not live in the same dwelling as other family members. This, in turn, leads to family policies and legislation that do not address the needs of all family members and limits the legal recourse of members who need reciprocal care (Wrus, Wagner, Baumert, Neyer & Lang, 2011).

Second, blood- or kinship structures are not the only forms of shared connection among family members. Conceptualizing families in terms of kinship structures (blood relations) will therefore exclude some members from families.

Third, there is no consensus in the formulation of the interchangeable concepts of households, kin and family. For example, households can be defined as (a) people who share a typical dwelling and/ or eating arrangements (Botha, 2014) or *“a group of persons (or one person) who makes common provision for food, shelter and other essentials for living”* (Bongaarts; 2001, p. 5; Dungumaro, 2008). Other authors define households as *“people who eat out of the same pot”* (Freeman & Nkomo, 2006a: p. 505).

Fourth, and on the other hand, kin can be defined as *“the group who makes up a child’s parents, siblings, parents’ siblings (full and half), spouses and children, and grandparents on both paternal and maternal sides”* (Madhavan, Mee, & Collinson, 2014, p. 409) or, as in the case of other authors, as *“the social recognition of the actual facts of biological relatedness”* (van der Geest, 2004, p. 56. See also Carsten, 2000, p. 9). The examples give important glimpses into some of the 85 different ways to conceptualise families in SSA alone. These differentiating conceptualisations and the interchangeable use of concepts only add to the confusion of who is part of families and leave some members with needs that are not met.

Recommendation: The use of clear differentiating conceptualisations of who is regarded as family, households or kin within the domains of legislation, policies and census

questionnaires. The inconsistent use of family, kin and household conceptualisations leads to inaccurate reporting of data on families that inform legislation and family policies. It is simplistic to assume that household data can be used to understand families in SSA.

Exclusion of Older People in Formal Definitions of Family

Against the backdrop of poverty and HIV/ AIDS, older people have long been responsible for the care and support of family members (Chazan, 2008; Golaz et al., 2017). Although stakeholders agree that older people contribute to families in different ways with a view to raising children, financial aid, care and support (Kimuna & Makiwane, 2007; van Dullenmen, 2006), they are not explicitly acknowledged in all family conceptualisations. Structural descriptions of families mention automatic membership for children and their biological parents (Amoateng & Richter, 2004; Brown et al., 2010; De Vos, 2004; Mazzucato et al., 2015), but other members and indeed older people are not explicitly included. This leads to confusion as there are strong viewpoints about the contributions of older people within families (Abebe & Aase, 2007; Aboderin & Hoffman, 2015; Chazan, 2008; Ferreira, 2006; Mtshali, 2016; Shabalala, De Lannoy, Moyer & Reis, 2016).

Additionally, legislation and policies lend themselves to protecting vulnerable members. One concern is that not all prominent legislation and policies that relate to older people include contemporary family conceptualisations. While older people do receive recognition and family membership within some family conceptualisations, these forms are not included in other policies and legislation that are relevant to older people (see Older Persons Act, 2006). The lack of formal recognition of these structures in legislation limits older persons' need to be cared for or the authority to take care of their family members (Sloth-Nielsen, & Van Heerden, 2014). This state of affairs indicates a need to use structural conceptualisations that are more context-sensitive and more inclusive, especially in work that concerns older people.

Recommendation: The Older Persons' Act of 2006 (South Africa) and other policies and legislation relating to older people should be amended to include a family conceptualisation inclusive of older people. Older people should also be explicitly included in all conceptualisations of families. Moving forward, family scholars may benefit from using family conceptualisations that reflect the daily realities of the families of older people in SSA.

Rigidity with Reference to Family Forms

Even though the fluidity of families is recognised, family scholars continue frequently to assign rigid family forms, functions and connections when describing families. In literature, this incongruence is noted, for instance, when Smit (2007) and Nkosi and Daniels (2007) recognise the fluidity of family and periodic changes in family forms but, when they describe family, they include only members who are united through blood relations and marriage. In similar vein, Smit (2007), Nkosi and Daniels (2007) still use rigid structural categories such as “traditional” Western- and African views of family to frame their studies and motivate the use of household data for family studies (see also Ansell & van Blerk, 2004; Chirwa, 2002; Kriel et al., 2014; Mturi, 2012; Nkosi & Daniels, 2007; Smit, 2007). This dichotomy in conceptualisations is problematic as it adds to the magnitude of family conceptualisations that leads to further confusion as to who is regarded as family.

Recommendation: The dichotomous use of family forms and terminology should be avoided. Different family forms should be acknowledged in legislation and policies relating to older people. One family form should, however, not be seen as more representative than others or used as a guide for all family conceptualisations. An integrated conceptualisation of who is regarded as family in SSA is recommended.

Dated Conceptualisations around Understanding Contemporary Families in Sub-Saharan Africa

Dated international descriptions and definitions such as those of Levine (1990), Murdock (1949) and Shorter (1975) are still used to conceptualise and describe contemporary SSA families. Although there is value in acknowledging the contributions of seminal family scholars, these definitions are not necessarily applicable to the contexts they are used in. SSA has a unique character built on cultural values such as Ubuntu, solidarity and consensus that inform the manner in which families are conceptualised (African Union, 2004). The traditional view of extended families or what is known as “African” families in international and SSA literature, cannot be used in unqualified ways to describe and understand all families in SSA.

In addition, dated conceptualisations do not take the contemporary family into account and therefore negates choice, freedom and diversity in relation to contemporary families (Lubbe, 2008). This is problematic as these conceptualisations of families are used as starting points for interventions and policies such as the White Paper on families in South Africa (DSD, 2013). The vast number of conceptualisations only add to the confusion. Stakeholders are not always sure which definitions are still relevant and should be applied. Consequently, they revert to dated definitions to develop interventions and to write legislation and policy.

Recommendation: Dated international conceptualisations are not applicable to SSA families in any unqualified sense. These should not exclusively be used to develop SSA policies, interventions or legislation. Family scholars should use conceptual approaches and conceptualisations that provide an accurate picture of families in SSA.

Conclusion

The findings of this review raised questions about practices of family scholars and other stakeholders such as governments, policymakers and so on, that inform who is included within families. The effect of these widespread practices leaves some vulnerable members, in this case older people, an exposed and essential group, with limited options to receive familial care and protection as they are not necessarily recognised as part of families. The literature on families in SSA confirms confusing conceptualisations that exclude older people from families and provides a fragmented picture of families in SSA. This encompasses the clarification of concepts and terminology that describe the roles, functions and positions of family members and particularly vulnerable members such as older people, children and mentally ill adults. Based on this review of SSA literature, an integrated, contextual conceptualisation of family is therefore proposed:

Individual views of family are informed by ideology with a view to personal choice, belief systems and shared values, that is, the notion of the wishful family. These ideas centre on the principle that family members contribute to our lives, address our needs with a view to their functions of members. Family members may be connected to each other through blood relations in terms of biology (kinship and lineage), living arrangements (such as sharing living spaces), legal ties (adoption, contracts and marriage) or relational proximity (emotional closeness or connections between members). Family members do not necessarily share a residence or resources but may group themselves in terms of a family structure to include people who make other contributions to it.

This conceptualisation aims to set clear boundaries based on the systems theory approach about who is regarded as family in SSA while leaving the opportunity for individual family members to enjoy the freedom of choice to include people who contribute to their lives in different ways. In the following Chapter, this integrated conceptualisation will be

compared with the qualitative findings of an empirical study that the present thesis explored with a view to the vital conceptualisations of families held by laypersons who actually experience their families on a day to day basis.

Author's Note

Following the ID research design (Chapter 2), this Chapter aimed to critically engage with literature on how families are understood in a SSA context. The literature synthesis spoke to disciplinary debates by systematically integrating and critiquing extant views about how families are understood theoretically and by suggesting a way forward based on the reviewed literature (see Williams, Polanin & Pigott, 2017). This Chapter was also prepared as an article for publication (see Appendix E) and forms a sound literature-oriented and theoretical basis for the discussion of empirical findings in Chapters to follow.

CHAPTER 4:

WHO IS FAMILY AND WHY?

Introduction

This chapter addresses the research question: Who is regarded as family, and why? First, it provides an overview of the findings and, after that, presents the integrated findings according to (a) personal perspectives about families, (b) what families should do, (c) how families should make us feel and (d) the family membership connections identified in the research.

Overview of Findings

The main objective of this study was to explore the conceptualisations of families and the associated family obligations within families of older people. The findings reported here considered the data obtained by means of the Mmogo-method® and GFS. The purpose of the data collection sessions was not to explore family dynamics but to explore whom the participating individuals regarded as their family as well as the reasons for this? As indicated in Chapter 2, the data were analysed using visual and textual methods. Based on visual and textual data obtained, families were conceptualised with a view to the following: (a) personal perspectives about *who families should be*, (b) how they should make us feel and (c) what they should do. In the case of the present research group, family members were mostly connected through blood relations, legal ties and community proximity. Figure 5 below depicts the domains that describe who is included within perceptions of family membership.

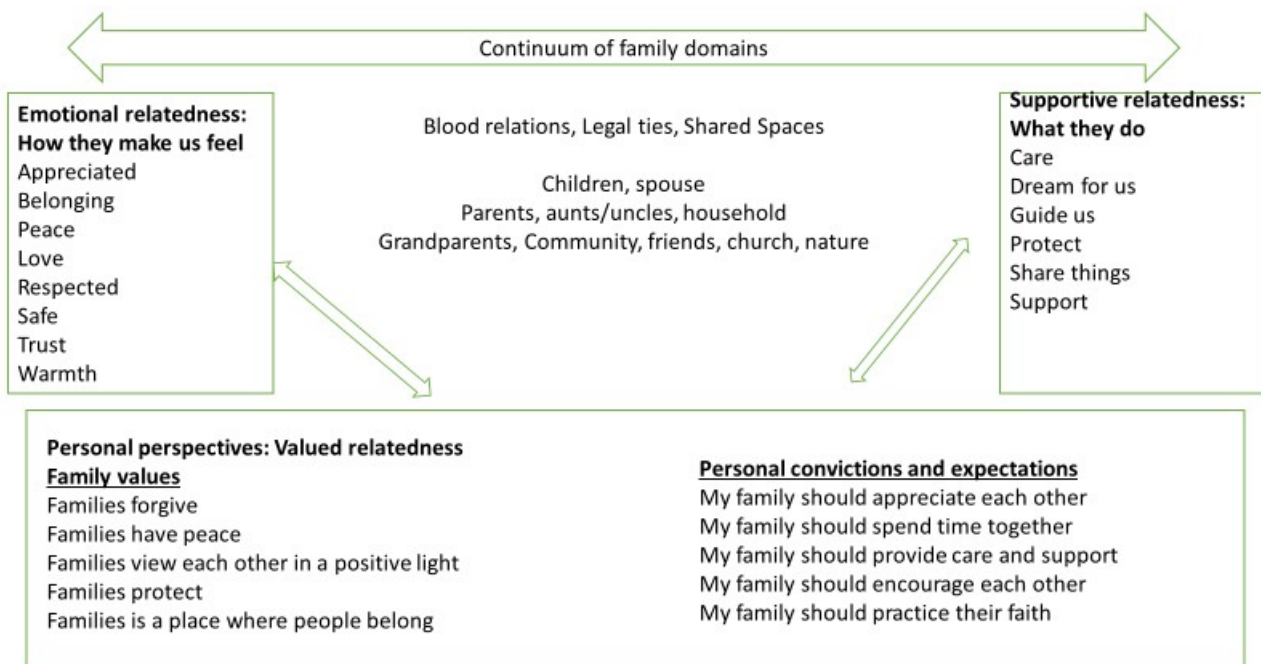


Figure 5: Main domains used to conceptualise families of older people

Theme 1: Valued Relatedness. A key theme that emerged from the analysis was *valued* relatedness that informed personal perspectives of what families should be. These personal perspectives were rooted in personal experiences with family members, the family values participants saw as necessary and the personal convictions participants held about their own families. The core values and beliefs identified by participants seemed to be embedded in concealed descriptions of what families must or should do, highlighting the complexity of families and their interactions (see Von Bertalanffy, 1968; 1972; Zacher, Rudolph, & Baltes, 2019) within participants' social ecologies (see Ungar, 2012). The values also presented as underlying components of resilience resources, that is, adhering to one's cultural values and beliefs, made visible in the ideas and ideals that were expressed about family interactions (see Ungar, 2008; Zacher et al., 2019). These personal perspectives laid the groundwork of coming to grips with who was included within families based on the feelings that family members evoked and the functions families performed.

In line with the life course perspective, the ecological systems theory and the Social Ecologies of Resilience Theory (SERT) (Baltes, 1987; Bronfenbrenner, 1994; Darling, 2007; Masten, 2016; Ungar, 2012), these personal perspectives, which manifested as beliefs and values, were multifaceted and rooted in individual members' own developmental phases. Although family conceptualisations varied from participant to participant, most participants included their personal beliefs/ convictions and values as part of their family conceptualisations, and these values and beliefs were the ideal of what families *should* represent and are not necessarily reflected in their daily realities (See also the discussion of wishful families in Chapter 3).

Theme 1.1: Personal perspectives: values. Values, viewed as socialised central principles for behaviour that have value or worth (Reber & Reber, 2001), informed who was regarded as family and how families should treat each other. Personal family values are broad principles that guide families' lives and influence their behaviour and their perceptions of what families should be. , That is, they represent broad cultural ideals that families should, in general, have (Albert & Ferring, 2012; Schwartz, 1992). In the present group, family values that influenced their conceptualisations included forgiveness, peace, positive regard, protection, and respect, sense of belonging, unconditional love and warmth. These values were related to needs, desires and goals, that is, universal ideas or ideals about families (see Hitlin, & Piliavin, 2004; Teunissen & Bok, 2013). The manifestation of personal family values differed across developmental perspectives.

Adolescents included forgiveness, peace, positive regard and a sense of belonging as part of their personal value perspectives. For example, one adolescent participant explained values that are part of how she understands family as follows: *Families have love and peace in their houses and are always there for each other and support each other* (ADP15, female).

The values of forgiveness, peace and unconditional love were strongly associated with the practice of religion. Most of the adolescent participants emphasised the role of religion and the values associated with it. For example: '*He (God as part of the family) forgave us, and so we [families] must forgive others*' (APD6, male).

The values of respect and love were also strongly represented: *They [family members] respect each other and love each other* (ADP5, male). The family value of love also emerged as a pattern from the visual data with representations in two ways: first, as hearts that symbolize love and, second, as a cross that represents unconditional love received through faith in God.

I made a heart. On the one side, it is loving, and on the other side, it is almost our struggles within the family. There are sadness and everything else on the other side. I mean that families sometimes have problems, but the other side is love. The straws show you have to get past the struggle to get to the love (ADP1, male).



Figure 6: Visual representation of a heart as a symbol for families

ADP5, male: This is a cross representing a church, and this is a heart that shows love. We (family members) love each other.



Figure 7: *A cross and a heart to represent love embedded within families*

Adolescents also identified having positive regard (acceptance and respect) for each other as part of their personal family values.

All the people in my family do not really accept me, but I have spoken to my mother about it. She said that she respects me for whom I want to be, and it is my life. She brought me into this life, but it is my choice whom I want to be (ADP20, male).

Other adolescents agreed that respect and acceptance or positive regard for one another were part of their personal values embedded within their families: *We (family members) respect each other* (ADP18, female) and *...we show love and respect.* (ADP11, female).

Young adults, on the other hand, strongly emphasized love as an embedded value within families. YPP1, female, 19-35: *This heart is for love, I really love my son.* This is best demonstrated in the following example of a visual representation:

INT5 said: they feel like part of my family, and they really appreciate what I do for them...For me, it is important when they pull you closer and see you as their family; then, I feel appreciated (INT5, female, 36-59).

Similarly, **older participants** (60 + years) also enjoyed personal values that influenced whom they saw as their family. They described the fundamental values that impacted the family obligations around families: forgiveness, love, protection and a sense of belonging.

I can't hold grudges against my family. I can get angry now and then, but I can't hold a grudge. You get people who won't speak to their family for years. Why would you want to do that? God does not hold grudges against us, so we can't hold grudges against our families (OPP4, female).

Love was also identified as a critical personal family value. These quotes illustrate how love is embedded within the perceptions of family held by older participants:

We treat each other well. (We) give support when someone is wrong, we also have our issues like every family has. But we **love** each other, **support** each other, and we **protect** each other. (OPP1, female).

OPP2 and OPP 6 also described how the value of love was embedded in their families:

OPP2, female: I love my family, and they love me.

OPP6, female: He (husband) loves me, and I love him. We do things together and help each other.

Theme 1.2: Valued relatedness through beliefs/ convictions. Individual *beliefs or convictions* are shaped by the idealised values around what families should represent. Individual beliefs and convictions in this context meant specific ideas (convictions, elements and requirements) believed to be right about families and what family members had to do in their daily interactions to be regarded as part of their family. These individual beliefs and

convictions are of a contextual nature and are therefore influenced by culture, environmental factors and religion, that is, personal ideas about how my family should treat each other (see Teunissen & Bok, 2013).

Participants described how conceptualizing family was individualistic and dependent on beliefs and values at a specific point in time within a specific context and culture (see Bengtson & Allen, 1993; Bronfenbrenner, 1979; Ungar, 2008). The personal beliefs and convictions included appreciation/ gratitude, care and support, encouraging each other, practising their faith and spending time together.

Adolescents' individual beliefs and convictions about families included that families should appreciate each other, spend quality time together, provide care and support, encourage each other and practice their faith together. Adolescent participant 14 (male) for example, stated "*I should appreciate what they do for me...*"

Spending quality time together manifested in different ways. Some adolescents felt that this included *laughing together and doing things together* (ADP2, male); *we make jokes and play games as a family* (ADP22, female) and *eating together as a family* (ADP24, male). Adolescents also emphasised that families should ideally support and encourage each other and spend quality time together, especially in difficult times: *if there are difficult times, they support me and give me the courage and attention* (ADP6, male).

Middle adults also held individual beliefs that their families should provide care and support. One middle adult participant explained her personal beliefs about what care and support should look like in her family: *I believe family should not only be there in bad times. Families have their good times. Families should always support each other* (INT5, female).

Older people stressed the care and support they give to their younger family members. For example, one older person clarified what support looked like in her family: *support is*

everywhere and in everything, like in love and encouragement (OPP1, female). Some older people also indicated that care and support should be reciprocal and that it manifested differently in each family. Talking about her son, OPP2 (female) said: *we get a lot of care and support from him. He will never leave the house without coming to hug and greet his father. And he teaches this to his children too.* For this participant, care and support revolve around spending time together and greeting each other with respect.

Religion and practising faith were major themes across all generations. People were included within families when they could share experiences and pray together:

Adolescents: *We Pray to God, every night we pray, and we go to church* (ADP25, female). Religious beliefs were also represented in the visual representation that this adolescent participant made, saying: *I made the sun, mountains and a cross.*



Figure 10: Religious values embedded within family activities

This is the cross I made for faith, hope and love. And here is Jesus. The cross represents our family. You can say we pray for each other; we have peace and love and have hopes for the future (ADP18, female).



Figure 11: A cross representing family and religion

This is the love of God. Every Sunday, you get up and go to church- and this is the heart for love and care (ADP8, male).



Figure 12: Representation of the love of God within family

Young and middle adults: My neighbour across from me. I can go to her, and she is also a woman of faith. I can go to her and say this, and this is happening, and then she will always say; let's pray about it. She, she is like my second mother and,

Without Gods help you cannot build your family. He is the one that gives you the strength (INT4, female).

We (grandmother and granddaughter) go to the prayer sessions together (INT2, female), and

When they [family] go to church with me- that makes me happy (INT1, female).

The inclusion of people who share religious experiences also surfaced in participants' graphic family sculpting as found, for example, in the figure below.

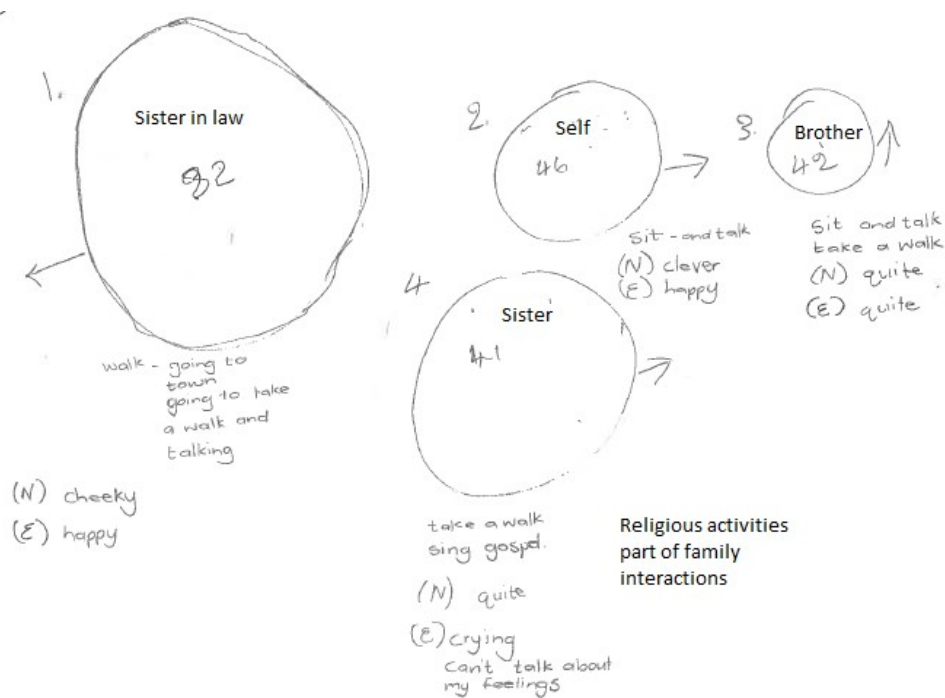


Figure 13: Religious activities shared with family members

Older people: we love to pray in our house, my son is the preacher in our house (OPP2, female);

The Lord keeps us (family) together (OPP5, female);

Faith is vital. If you (family) don't have faith in the Lord, then it is all in vain (OPP8, male);

I am thankful to God (OPP9, female).

These personal perspectives influenced the expectations of what family members should do for each other.

Theme 2: Supportive relatedness: family expectations and obligations. Participants identified different support contributions that formed part of their understanding of family. Consider in this regard that families can be described as social units that (a) care, (b) educate

and raise children, (c) listen to each other, (d) provide protection, (e) serve family members, (f) provide a strong foundation and (g) support each other. Some of these identified contributions such as care and support are universal while others are unique to each family such as listening to each other. These contributions were also informed by belief systems, that is, religious norms and personal convictions as well as personal values (see Hodgkin, 2014).

In the present study, participants from all developmental stages identified care and support as the most important contributions that family members made to each other. It was found that care referred to giving or receiving what was necessary for health and welfare, including concern or looking after family members, while support referred to giving general assistance or help to family members. **Adolescents** experienced reciprocal care and support as central to family:

Researcher: There is a special bond that binds you. What makes that bond strong?

We care for each other, and we are always there for each other. We will help each other (ADP7, male, 14-18 years).

On the other hand, participants in the adult developmental phase, that is, **young and middle adults** felt it was their duty as family members to provide care and support other members. One participant explained: *I want to care and support them all as a mother. You see, I look at my friends, and their children are too far gone, and they don't even worry about their children. But I am a mother that cares* (INT2, female, 35-59). In an individual interview, participant INT6 stressed the reciprocal nature of these contributions to families: *So, I know if I get in trouble, or if I need anything.... often, they need me too. Then we help each other where we can* (INT6, male, 19-35 years).

Older participants. Participants of 60 years and older agreed that families should provide care and support to all family members included within their conceptualisations. Care and support were established to be central functions of family members, and it was not seen as appropriate for people outside of family structures to fulfil these functions. The quote below illustrates this:

Families walk together. For me, I believe families should walk together because it is my family. If I hear my sister is sick and she lives close to me, then I will say something. I must tell her family; I can't hear from a stranger that your sister is sick, where are you? (OPP4, female)

In line with the functions as extensions of family roles identified in the White Paper on Families (DSD, 2013), participants included people who raised and educated children and provided protection for its family members. Participants however also felt that members were included if they served family members in other ways such as listening to them and provided a strong foundation of support for members. For instance: *If I have a problem, I can go to my sister to talk, she will always listen* (INT3, female, 19-35 years). , The function of providing a strong foundation was represented by the following quote and visual representation. Here the trusses of a roof are a metaphor for families that build a strong foundation for younger members: *Trusses keep the roof together. If the trusses are not there, you cannot build the house* (ADP6, male).

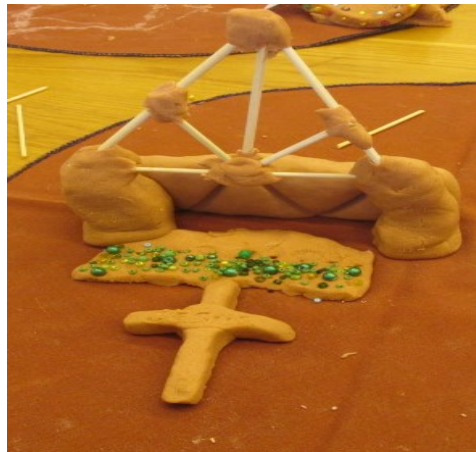


Figure 14: Visual representation of a house (family) built on a strong foundation

The views of the practicalities related to how family obligations should be fulfilled, differed across the differing lifespan categories (see Chapter 5). However, participants emphasized how family obligations are embedded in how families are experienced. These family obligations were not only based on functional needs but also emotional needs, which seemed to be a core expectation around the boundaries of family membership.

Theme 3: Emotional relatedness. Participants also indicated that they included people, animals and natural elements within their family conceptualisations in terms of the feelings that these people/ animals or elements elicited. The feelings related to families were appreciation, feeling that you belonged, were respected and safe as well as trust, unconditional love and warmth.

For **adolescent participants**, people and objects that elicited feelings of emotional closeness or a sense of belonging were included in the family in the form of a structure of care and support, as illustrated by the following quote:

What makes it (family relationship) special is I can be honest with my aunt. She is the person that I trust; I talk to her about my life. If I do something wrong, she won't hold it against me (ADP21, male).

For other participants, supportive interactions such as talking and making jokes provided emotional closeness and warmth: *we come together, and we make jokes and laugh* (ADP2, female). The supportive interactions were also illustrated by a visual representation of a family:



Figure 15: A cross and the sun provide love and warmth

ADP12 (male): I made a cross and the sun..... The sun shows how people (family members) hearts shine.

Young and middle adults highlighted supportive interactions brought about by communication with other family members. INT5 (female) explained: *we (family) talk to each other over the phone every day, or we WhatsApp (message) each other. She (daughter) will always tell me how much she loves me and what I mean to her. I share things that make me happy or unhappy. My son will always say, I love you mom, remember you are all I have.*

Older participants valued connections and supportive interactions that elicited a sense of belonging and appreciation. They appreciated interactions with younger family members that included practising their faith and building stronger connections. For example, OPP3 explained:

We talk about our problems; we sit and talk until we can solve the problem. Life is too short not to do it this way, so the church is important for these relationships (with younger generations).

Theme 4: Family connectedness. Building on personal perspectives of valued relatedness, expectations of what families should do, that is, with a view to supportive relatedness and how they should make one another feel, connected in its turn to emotional relatedness, it became clear that participants included different people, animals and natural elements within their family conceptualisations. Families were connected through blood relations, legal ties, shared spaces and relational proximity. Families were therefore seen as interconnected.

Connected through blood relations. Participants from all stages of development named people connected by blood or kinship as part of their families (ADDP1-ADDP26; INT1-INT6; OPP1-OOP9; YPP1-YPP3). Participants recognised family members connected by blood or kinship as aunts, children, cousins, great-grandchildren, grandchildren, grandparents (grandmothers, grandfathers, and step-grandparents), nieces, nephews, parents (mothers, fathers, and stepparents), self, siblings (brothers, sisters, stepbrothers and sisters) and uncles.

Extant literature indeed also recognise family conceptualisations based on blood relations (Amoateng, et al., 2004; Amoateng & Richter, 2007; DSD, 2013, 2006). In the case of the group under examination, family members related by blood were regarded as part of the family regardless of whether they lived in the same household, close by or further away. It was significant that the kinship connections identified by this group included a broad range of people across various generations.

Connected through legal ties. Participants recognised that legal connections also bound family members. In line with the literature and prevalent debates about families (see DSD,

2013, 2006; Children's Act and so forth), participants included their spouses or partners, step-parents, step-children, step-sisters and step-brothers, adoptive children, foster children as well as their in-laws in their family (as indicated for example by INT2, INT4, INT6; OPP6). What was significant, was that they included people from different generations.

Connected through shared life spaces. Participants also included as family those who lived in the same household, that is, those who shared living arrangements, and communal spaces. In the case of the community under examination here, people who were not blood relations often shared living spaces due to poverty and unemployment (see Bayat, Louw, & Rena, 2014; Statistics South Africa, 2016). The findings indicated that for some participants' people with whom they shared a space became their family, as indicated in the following statement:

I made a house, a cross and a heart (to represent whom he regards as his family). The heart means there is love-there are love and peace (within the family). And the house is almost full- everyone is happy in this home, and we love each other and laugh and do everything together as a family (ADP2, male).

The community was also regarded as a family extension. Community, including people and environment, that elicited positive emotions, in other words, embodying emotional relatedness or a sense of belonging could, therefore, be considered as part of family. This connection could be divided into two sub-categories: community proximity and a sense of belonging. Family members were therefore not only included based on blood relations (for example, mothers, fathers, children), legal connections (such as in relation to adoptive children, husbands, wives/ partners) or living arrangements alone, but also relational and community proximity, for instance in relation to community and/ or friends.

For example, in response to the question, *whom do you see as your family?* one participant noted *the people, the animals and the community* (ADP20, male):



Figure 16: People, animals and the community included within the family

In the category of shared spaces, the community, church, friends and peers, God (the Father and Son) and ex-spouses were included. This could be attributed to the most significant values that underlie who is regarded as family, including the values of positive regard, protection, unconditional love and warmth. Adolescents further included people in general, sports teams (for instance, rugby teams), natural elements (such as mountains, sun and animals), the country (South Africa) and the whole world as part of their larger or global family. Families were therefore also perceived as connected through a sense of belonging to society in general or as part of a global citizenry or the physical environment of their community. For example, a young participant clarified that he saw his rugby team as well as nature and specifically rhinos as part of his broad family. In line with the personal values associated with families, he believed that families should protect nature and rhinos and should not hurt them or each other (ADP26, male).



Figure 17: A rugby ball with a smile and a rhino with a South African flag

Following the systems approach to understanding families, all systems are integrated and influence each other (Bronfenbrenner, 1979; Dunst, 2016). This is confirmed by ADP26 who described the integrated characteristics of families and the physical environment (see Dunst, 2016; Henry et al., 2015)

Similarly, older people included the church and fellow church members and the broader community as part of their family based on relational proximity to specific members but also because of the sense of belonging they felt to the church or community. For example, OPP4 explained how this sense of belonging manifested in her experiences with family:

Give your heart to the Lord. He has a reason for everything that happens in your life. He will raise you up when something is wrong. You need to pray every day for your family. Every house (family) has it's cross to bear, this is how you bear your cross (OPP4, female).

Strictly speaking, a sense of belonging could only be viewed as a connection that ties family members together. However, in this group, a sense of belonging was also the bridging connection between connections themselves, the affective functions family members should fulfil and the wishful ideas of who families should be. This finding strongly links with the concept of belongingness established by Baumeister and Leary (1995). The motivation to form and sustain familial relationships seemed to be a strong driving force for these

participants and thus influenced whom they included within their families (see Baumeister, 2012).

Integrated Discussion of Findings

In the present study four major themes emerged that related to how this group of participants conceptualised their respective families. Participants' personal perspectives on families, the ideas around what families should do and how they should make you feel were central to the question of who was included within family conceptualisations. Participants therefore included people within their families who were connected to them by blood (such as grandparents, aunt and uncle), legal ties (including adoptive children, foster children and spouses), community proximity (related to older people in their community and churches) and in terms of functional connections as extensions of roles they fulfilled. Although the focus of this study was not on exploring strengths within these families, the findings highlighted how they used their strengths in conceptualisations of their families. Intriguingly, the findings pertaining to this community differed from some assumptions put forward in the existing literature about the inclusion of family members within families. A brief discussion around these assumptions, offered below, will be followed by a reflection on the findings from the perspective of family strengths, thus to broaden the discussion on how families are conceptualised.

Assumptions about Families in Existing Literature

As discussed above, the findings of this study challenge some assumptions within literature. These assumptions include views about (a) family membership, (b) family obligations and (c) what families should look like.

Assumptions about family membership. *Family membership was not only based on traditional structural connections* such as blood relations, legal ties and contracts, in contrast

to statements made in literature (*cf.* Chirwa, 2002; DSD, 2013; Guillon & Mace, 2016; Reynolds, 2015; Singh, 2008). Participants clearly perceived connections between family members that allowed them to include people who shared life spaces with them. Although extant literature about families acknowledges blood and legal connections the group examined here presented a unique perspective around shared spaces and community proximity. Participants of this group included in their perceptions members who lived in the same household, that is, shared living arrangements or other communal spaces with them. However, some of the connections were very abstract: as demonstrated, broad family conceptualisations included people in general, sports teams, the country and the entire world. These reflect a psychological need to form and maintain interpersonal relationships and to belong to a larger systemic group (see Baumeister & Leary, 1995; Scorgie & Forlin, 2019). Individual family members could, therefore, form connections with people who addressed their need to belong to a larger social group. It was notable that only adolescent and older participants included people in their family descriptions based on shared spaces and a sense of belonging.

From a lifespan-development perspective, adolescents grappled with the balance between finding themselves and feeling connected to their family members (see Baltes & Silverberg, 1994; Heckhausen & Wrosch, 2016; Lenz, 2001), while older people were more concerned about building social networks that would provide them with safety and support (see Baltes & Silverberg, 1994; Havighurst, 1952; Heckhausen & Wrosch, 2016; Lenz, 2001). This finding points to a need to broad belongingness and it could be a manifestation of how adolescents and older people shared ways to build up their family relationships. The connection based on community proximity and a broad sense of belonging, however, complicated the categorisation of people who are included in families. Such a connection may have developed because of socio-affective needs that should be met such as belonging to

a group (see Baumeister & Leary, 1995; Greenfeld, 2017; Maslow, 1943). The inclusion of people who shared living spaces could also be attributed to poverty and unemployment in this community (see Bayat et al., 2014; Statistics South Africa, 2016). It could in other words amount to a resilience mechanism (see Ungar, 2018). Being connected through community proximity is context-specific, fluid and complex and may become redundant once specific needs have been met.

Assumptions about family obligations. The findings of this study voice the longing for the actualization of family obligations such as care and support within existing family structures (see Chapter 3). For instance, connection through shared spaces entails that families are multi-layered, open and fluid systems regulated by the sharing of resources and burdens, thus embodying its own relational processes and practices (see Dunst, 2016; Fakier & Cock, 2009; Henry et al., 2015; Lubbe, 2008; Ncho & Wright, 2013). It would seem that choice and need fulfilment are primary drivers of family membership (Amoateng & Richter, 2007; Greenfeld, 2017; Wright & Leahey, 2005). These wishful families that shared life spaces carried the assumption that families included everyone based on the functions that members should fulfil, in line with work done by Amoateng & Richter (2004, p. 244).

As would be expected with a view to extant literature on family and family well-being, obligations to care and support family members were strongly represented within structural family perspectives of the group examined (see Abebe & Aase, 2007; Bigombe & Khadiagala, 2003; Amoateng & Richter, 2007; Mtshali, 2016; Verhoef & Morelli, 2007; Wissing, Khumalo, & Chigeza, 2014). Participants from all developmental phases included people, especially older people, with whom they enjoyed close relationships and who fulfilled their needs and contributed to their family in different ways.

Older people were included in family conceptualisations if they had positive social interactions with younger members and if they made contributions to the family. Moreover,

there was evidence of idealistic, 'wishful' standards around the fulfilment of family obligations. These family conceptualisations were indeed based on an underlying assumption that family roles and obligations were fulfilled reciprocally, as was to be expected in relation to work done by Abebe (2012), Bonthuys, (2010), Chirwa (2002) and Strydom et al. (2010). While some literature acknowledges that families are not always willing or able to take care of their vulnerable members reciprocally (Aboderin & Hoffman, 2015; Adeagbo, 2016; Smit, 2007), the topic of wishful belief among participants and scholars prevails, that families will fulfil their universal obligation towards vulnerable members - if they were only strengthened to achieve it (Bonthuys, 2010; Erlingsson & Brysiewicz, 2015; Hochfeld, 2007; Lemmer, 2009; Nkosi & Daniels, 2007; Richter, 2018; Sewpaul, 2006; Singh, 2008).

Although older people indicated expectations of care and support from younger generations (in literature and in the present group), the participants emphasised obligations towards younger family members. This is of some concern, as older peoples' needs often go unmet, as has been found by Aboderin and Ferreira (2009), Roberto and Blieszner (2015) and Skinner, Cloutier and Andrews (2015). Some scholars see obligations to care for the youth as the responsibility of specific family members (mostly older people), while others delegate these obligations based on the structure of families (see, for example, Nkosinathi & Mtshali, 2015; Oppong, 2006; Songca, 2011).

In line with the concept of wishful families, family membership was found to be not only based on structural-functional connections but were influenced by personal ideals, positive interactions and need fulfilment. In the group studied here, family was therefore conceptualised to take on a broader meaning based on personal values and beliefs (see Carter & Fuller, 2015; Blumer, 1969). A broader conceptualisation of family allowed participants to include people who made valuable contributions on emotional and financial levels to the family within their social networks (see Denzin, 2016; Rank & LeCroy, 1983). Participants

could, therefore, include people who contributed resources and people who shared spaces with them. This is particularly noteworthy against the background of the legacy of Apartheid, where family life was destroyed (Barbarin, & Richter, 2013). Although participants in this community received political rights, they still faced some socio-cultural and personal challenges such as limited resources (see Amoateng & Makiwane, 2005). The communities' broader conceptualisation of family served the purpose of allowing for interconnectedness between family members and their environmental networks and subsequently the sharing of resources to address the needs of their families (see Carter & Fuller, 2015; Blumer, 1969; Denzin, 2016; Verhoef, 2005).

Assumptions about what families should look like. Furthermore, these broader family conceptualisations were informed by the wishful ideals participants held about what families should look like. Despite facing different developmental phases, participants all included wishful family ideas within their family conceptualisations. The needs these wishful families fulfilled seemed to feed into the daily struggles that participants faced. The different challenges and transitions of each developmental phase influenced the way in which these wishful ideas were manifested and were strongly linked with developmental and physical needs.

Wishful ideals about families are also reflected in literature that focuses on family conceptualisations (see Chapter 3). Such wishful ideals, beliefs and values about families also relate to the need for fulfilment and reflect needs such as positive regard, protection, a sense of belonging and receiving unconditional love (Denzin, 2016; Koltko-Rivera, 2006; Maslow, 1954; Walsh, 2015). These personal perspectives, therefore, allowed for the inclusion of people who were not traditionally seen as part of families and relied on connections between members based on a sense of belonging to a specific group (see in this regard Baumeister & Leary, 1995; Greenfeld, 2017; Henry et al., 2015). From this

perspective, it became clear that relational interactions between family members were embedded in the conceptualisations of families among this group of participants. Family membership was thus found to be based on the relationships between individual family members and the solidarity they felt towards each other and the impacts they experienced on their individual and family well-being (see Goodman et al., 2019; Wissing et al., 2014). Fostering close and familial bonds with significant others such as community members or a rugby team also nurtured individual- and family resilience and highlighted family strengths (see Goodman et al., 2019; Walsh, 2015).

Reflection on findings from the perspective of family strengths and resilience

The findings presented above raised interesting questions around family strengths and resilience-related processes within these family contexts. In the present project, participants related stories of how their social ecologies, that is, families and community, were resources that helped them to fare better than expected in coping with daily realities (see Masten, 2016; Ungar, 2011; 2012). These stories illuminate different processes that participants engage in, and which make their positive growth and adjustment within their social contexts possible, that is, they connect with social ecologies of resilience (see Ungar, 2012, p. 19; Ungar, 2018). Although not all the mechanisms of resilience were present in this group, participants used some of their resilience resources such as access to supportive relationships and resources as well as adherence to cultural traditions to regulate their social and family environments, an important topic discussed by Masten (2016), and Ungar (2008).

To summarise, the findings presented in preceding chapters (a) recognised the protective capabilities of families, (b) highlighted the importance of connectedness to families through togetherness, belonging and values and (c) stressed the flexibility families need to adjust to challenges. These point to resilience processes and family strengths present in this

community, and how family conceptualisations were influenced by the internal processes of the family system and the family's response to external stressors (see Masten, 2016).

Emerging Understanding of Family Conceptualisations

Family conceptualisations in South Africa focus on the pragmatic and structural-functional positioning of individual members and is mainly based on systemic understandings, as discussed in Chapter 3. To expand this understanding from a systems perspective, family strengths and ecological processes that influence these conceptualisations should be considered.

From an ecological point of view, the findings of this study demonstrate that families are resilient systems. The families in this study showed resilience in the form of systemic interactions through which individual family members, family units and the broader community (as extensions of family) secured the resources required for sustainability in their stressed environments (see in this regard Ungar, 2018). The findings of this study therefore confirm the principles of resilient family systems with a view to connectivity and collaborative social ecologies that promote the growth of the family as a whole as described by Ungar (2018). From this perspective, family conceptualisations are therefore not only dependent on structural-functional perceptions but also on social ecologies that these families are embedded within.

Ungar (2018; 2012) argues that resilience is likely to occur among individuals and families as systems if they engage with their community, experience belonging and facilitate social networks. The findings in this study indeed show that resilience processes and family strengths occur on multisystem levels. The employment of community networks, creating a sense of belonging and engaging with religion within families and the broader community allowed these participants to adjust positively to the challenges they faced within their social

environments, that is, within their families and communities (see Masten, 2016; Ungar, 2006). They were thus enabled to include people who addressed their needs in their family contexts. The multi-layered conceptualisations of families that include people who are connected by the feelings they elicit and the sense of belonging they create, could therefore be seen as protective factors that promote family resilience, as suggested by Ungar, Ghazinour, & Richter (2013).

Reviewing the findings through the lens of an integrated family strengths approach also dovetailed with expanded understandings of how families are conceptualised. To date, family scholars mainly relied on structural-functional approaches around conceptualising families (see Chapter 3). This group however highlighted the importance of incorporating a connections-approach to family membership boundaries. An integrated family-strengths perspective (Chapter 1) further encompasses the inclusion of other connections to families such as emotional and valued relatedness, thus occasioning the acknowledgement of family flexibility in the formation of bonds with people that do not only make tangible contributions to families. This approach therefore prompts the inclusion of people who are not necessarily willing and able to provide tangible care and support, that is, financial contributions or sharing household spaces, but also people who provide emotional closeness or a feeling of togetherness (see Olson, 2000). The strengths of family flexibility and family cohesion should thus be viewed as important factors towards comprehending and conceptualising family membership boundaries. In the context of South African families, this is particularly important since families face a variety of unique challenges within this country. Consider in this regard that the adoption and inclusion of alternative connections to families indicates families' capacity to adapt to daily stressors and crises (Defrain & Asay, 2007a; 2007b). All in all, future studies on how families are conceptualised should focus on the embedded resilience processes and strengths that influence who is included within families.

Pursuing a strengths-based approach to understanding the nature of family membership soon shows that family strengths also play a crucial role when it comes to comprehending the supportive relatedness of families. Although family scholars acknowledge that family obligations are not always reciprocal, a family-strengths approach tenders the vital recognition that family members contribute to families in different ways. Participants of the present study underscored this when they acknowledged people who supported them physically, emotionally or spiritually. As discussed above, these contributions find themselves on a continuum based on needs, roles and rules within families (see Olson, 2000). This also points to family flexibility and family communication as key strengths that influence how families are conceptualised.

Conclusion

The findings of this study suggest that all generations are included in families. People are regarded as family when they are interconnected and make contributions to the family. Families are, however, much more than the connections between members or how these members are organised. The present study confirmed that who is regarded as family revolves around family strengths, values and belief systems embedded within our environments at specific moments in time and space (see Alwin, 2012; Shabalala et al., 2016; Ungar, 2018). In the community studied here, who is regarded as family took on a broader meaning and suggested the inclusion of people who contributed to the family in different ways. Wishful ideas about families and relational interactions among family members also influenced the conception of who would be included within families. In this regard, there are similarities between institutional conceptualisations as reflected in extant literature and personal ones held by laypersons. A necessary caveat is that these similarities might reinforce romantic ideas about families where everyone is included, protected and cared for.

Nonetheless, the findings provide a useful starting point from which to explore families in a South African context. As mentioned, these families face various challenges, and although they are acknowledged in literature, families as well as communities that function as extensions of families are still expected to fulfil various functions in society and among family members. In light of this contradictory set of challenges and expectations, the functions might however not be fulfilled. Although the conceptualisation of family should be broad so that family roles and functions can be negotiated, it is unclear whether all family members contribute to families. In the next chapter, the position of older people within these families will be discussed.

Author's Note

In line with the ID research design (Chapter 2), this chapter aimed to acknowledge the multiple realities and conceptualisations of families individually and holistically. The empirical study contributed to extant literature by challenging assumptions about families rooted in literature and suggesting alternative ways to view family membership boundaries. This Chapter therefore acknowledged the theoretical aspect as set out in Chapter 3 and the practical knowledge of participants as discussed in Chapters 4 and 5. As demonstrated here, it could be valid to maintain that practical and nuanced understandings of who is regarded as family are rooted in theoretical understandings of family membership boundaries.

CHAPTER 5:

THE POSITION OF OLDER PEOPLE WITHIN FAMILY

Introduction

The aim of this chapter is to explore the position of older people within family conceptualisations. Chapter 4 focused on how families were conceptualised across the various stages in the lifespan and explored the valued relatedness, supportive relatedness and emotional relatedness embedded within these descriptions. The present chapter focuses pertinently on how older people are positioned and what is expected of them within these positions. The findings to be reported here are based on results obtained by using the Mmogo-method® (ADP1-ADP26; YPP1-YPP3; OPP1-OPP9) as well as GFS interviews (INT1- INT6).

Integration of Research Findings

Based on the analysis of textual and visual data, individual family members positioned older people across generations affectively or instrumentally, that is, in terms of emotional, iterative care relationships and according to instrumental roles involving provision for the various needs among family members including pragmatic assistance and help in general. The contributions received and expected from family members were dependent on the social positions within families that individual members fulfilled and the expectations they held regarding their own behaviour and the behaviour of family members across the various stages of development in the lifespan (see Amoateng & Richter, 2007; Bohman et al., 2009; Elder, 1998; Macmillan & Copher, 2005).

Ideally, when, embedded within family, older people were expected to make contributions towards younger family members and in turn could expect younger members to make contributions towards them that would will help them to address some of their needs.

Participants across the lifespan acknowledged the affective and functional positions of older people differently.

Participants in this study included older people within families who were connected to them by blood (grandparents, aunts, uncles), legal ties (adoptive children, foster children, spouses), community proximity (older people in their community and churches) as well as those connected to them through functions they fulfilled as extensions of roles (see also Chapter 4). Older people were seen as caregivers and were positioned affectively and functionally to address different needs. The themes relating to these positions are described below.

Theme 1: Affective Positioning of Older People based on Affective Needs

Participants positioned older people affectively by acknowledging the contributions they made (a) to meet their expectations of (reciprocal) care and (b) to engage in supportive interactions that facilitated addressing family members' needs for care.

Theme 1.1: Expectations of (reciprocal) care. Participants across all developmental phases positioned older people as contributors to reciprocal care. This care, however, manifested differently across the different developmental groups comprising adolescents, adults (young and middle) and older people, as will be discussed below.

The reciprocal care between **adolescents** and **older people** was experienced in three ways. First, adolescents expected older people to contribute to families by providing care to younger members of the family. Care in this context meant providing emotional, psychological or social assistance to family members as well as promoting quality of life and having a general concern for the wellbeing of family members (see also Older Persons Act 13 of 2006 and Maintenance Act 99 of 1998 that refer to family's reciprocal duty to provide care). For adolescents, reciprocal care included entertaining hopes and dreams for each other,

receiving guidance from older people, spending time together, visiting grandparents and caring about the general welfare of their grandparents. For example, ADP25 explained how he spends quality time with his grandparents:

ADP25: This (referring to the visual representation) is my grandfather and me.

Researcher: What are you doing?

ADP25: My grandfather is holding my hand. We are just walking around, and we are going to give flowers to my grandmother.



Figure 18: Visual representation of grandson and grandfather walking in nature

Second, adolescents reported that older people and other family members showed care by maintaining hopes and dreams for each other. This function of care was not only to be fulfilled by older people but family members in general. ADP18 explained how family members (including older people) wanted the best for each other: *we pray for each other, we have peace and love and hopes for each other*. ADP21 included his aunt (60+) as part of his family description and explained how he had hopes and dreams for her and his other family members:

Because my family (aunt) cared for me for all the years, I have been with them. They do everything for me, and I want my dream car, so they can use it and not struggle with transport (ADP21, male).

Third, adolescents expected families and older people to provide guidance for younger family members as part of care. According to this adolescent group, older people also provided, for example, spiritual guidance to younger members, by taking them to church and praying for them. The participants indicated that older people took responsibility for taking younger family members to church: *we pray to God (as a family); we pray every night; and we go to church* (ADP25, female). The nature of guidance was also reciprocal, as ADP15 (female) explained: *we influence each other. If one of us asks for advice, then the others (older family members) will give them advice.*

From a **young adult perspective**, older people were positioned to address their emotional needs by caring for each other, giving advice and guiding younger members. In this perspective the position of older people was based on the relational proximity between young adults and the older people they included in their families in addition to the amount of time they spent together. For example, a participant said: *I love my mother; she (60 + years) gives me everything I need* (YPP2, female).

Young adult participants spent time with older people by attending church with them. As INT6 (male) explained: *I really care about my father (older person). I can go and sit with him and say- I am worried about this.* One young adult acknowledged that older people took responsibility for the younger generations to go to church so they could spend time together: *they (older people in the community) encourage us to go to church with them* (YPP1, female).

Middle adult participants acknowledged reciprocal care not only in relation to older people but in relation to all family members as (a) caring for each other, (b) encouraging and building younger family members and (c) giving advice and guiding family members. INT2 (female) explained: *families should provide care and support, through good times but also in difficult times.* Another middle adult participant specifically talked about how she supports her elderly mother: *we care for her by taking her out, to spoil her. If she is sick, we are there*

for her- if she has a problem, we are there (INT4, female). The middle adult participants also indicated that reciprocal care included building younger generations. It further embraced the matters of encouragement, guidance and giving advice. INT5 (female) explained the nature of such caring in her family, which included different generational members (adolescents, young adults, middle adults and older people):

You talk to them (younger family members) and get to the root of the problem; this is how you teach your children. I learn so much from my children because we will communicate with each other. For example, my son is teaching me how to budget each month and save more, and I give him and his wife financial assistance where possible. They also help me when I have a problem by giving me advice. We learn from each other. It is important for families to learn from each other (INT5, female).

Older people positioned themselves towards addressing reciprocal care needs by (a) caring for younger family members, (b) encouraging and building members and (c) giving advice to and guide younger members. To this end, older people believed that it was their role to encourage and build up younger members. For example, OPP1 clarified how she fostered and guided younger members when they did something wrong:

You don't like it when other people say bad things about your family (younger family members), so you will say to them (family members) that what they said or did was wrong. You build each other up to say that what they did was not right.

Older people moreover indicated that encouraging family members and guiding younger family members were closely related. OPP2 (female) described how she guided her children when they made mistakes: *Yes, when they made mistakes, (I tell them) fix your mistakes so we can move on.* OPP2 explained that older people should guide younger generations by way of

their own example: *They (younger generations) learn from us. If we (older people) swear and say nasty things, then they will pick it up.*

In turn, older people expected that younger family members would care for them and share things with them. Participants indicated that care should be provided by children, grandchildren, the community and people in general. For some, this care and support manifested as showing respect and caring about older people's general well-being. For example:

We get a lot of support from him (child), and he will never leave the house before he gives his mother and his father a hug in bed. When he gets up, he greets us, and he will teach his children (grandchildren) to do the same- greet grandma and grandpa in the morning (OPP2, female).

Theme 1.2: Supportive interactions informing expectations of care. Participants also recognised supportive interactions between family members as an influencing factor around care that they expected from family members and, accordingly, how they positioned older people.

Adolescents acknowledged supportive intergenerational interactions that influenced their affective positioning of older people. The affective position of older people from an adolescent perspective was influenced by supportive interactions such as family activities and the relational proximity between older and younger family members. Consequently, adolescent participants acknowledged that they partook in different family activities that strengthened their relationships with older people and affected how older people were positioned to address their needs. These activities included bringing flowers to a grandmother (ADP25), eating together (ADP1; ADP3), going for walks with older people (ADP25), tending to their gardens together, playing (ADP23), spending time talking (ADP22;

ADP24), going to church and watching television together (ADP2; ADP14). Moreover, adolescents acknowledged that they showed respect to older people by listening to them and regarding their opinions. Adolescents recognised that different interactions between older people and adolescents influenced the closeness of their relationships (see Bengtson & Roberts, 1991; Hodgkin, 2014). Interactions that promoted feelings of appreciation, a sense of belonging, trust and unconditional love and care elicited reciprocal affection between adolescents and older people.

Middle adults acknowledged that supportive interactions included family activities and talking about problems to find solutions. These participants further included exchanges that promoted feelings of appreciation (INT3, INT4), sense of belonging (INT1, INT2, INT4, and INT6), trust (INT6), and unconditional love and care (INT1, INT2, INT4). These feelings allowed for reciprocal affection towards older people that formed the basis on which older people were regarded as family. Like adolescents and young adults, middle adults agreed that the position of older people was dependent on the relationship between middle adults and older people. Middle adults thus encouraged family activities such as spending time together and going to church.

Some key examples of this theme follow:

When we watch TV, or when we go out somewhere- we do it together as a family (ADP2, female).

Family is a beautiful thing if we support each other, help each other and love each other (INT6, male).

As a family we sit together and speak words of encouragements to each other. When we sit around the table or in front of the television, I tell them (my family) to turn down

the television so we can talk about God. I tell them that He loves us and we should accept Him as our Savior. We always talk about religion (INT2, female).

Theme 2: Functional Positioning of Older People based on the Fulfilment of Needs

Participants from all developmental phases positioned older people functionally to address their instrumental needs.

Adolescents recognised that **older people** contributed to the family by using their resources to support younger members. The support adolescents reported included instrumental support received from older people such as financial support, material goods (food and clothing) and help in general. Older people also supported younger generations by giving them opportunities to grow and learn new things and to help them to achieve their dreams. Older family members helped younger members by ensuring that their basic needs were met by dividing the financial responsibility to support family members between them. For example, ADP21 (male) explained:

They help me with clothes, to buy clothes, money for the weekend if I maybe want to go out with my friends, to visit my friends for a day. Then they help me with money. One of them helped me with my school fees: when my aunt doesn't have money, then he (uncle) helps with school fees. Then another one (older family member), when we have a school trip, and my aunt doesn't have the money, then I will tell them. (If) my aunt doesn't have the money, so I can't go, then one family member will always make sure that I can go to school.

Other adolescent participants agreed that older people in families *will always help* (ADP4; female and ADP7; male) if they need anything. This support encompassed spoiling grandchildren. For example, *my grandmother always has sweets and buys me a bar of chocolate* (ADP24, female). In turn, adolescents were obligated to provide care and support for older family members. Adolescents indicated that they contributed towards the wellbeing

of older people by helping them with physical work such as maintenance of cars (ADP25), gardening, housework, doing dishes, help in general and visiting older people when they became sick. For example: *I help him (grandfather) in the garden (ADP8, male) and I always help my grandmother in the kitchen (ADP25, female).*

Similarly, supportive interactions between young adults and older people embraced a practice where older family members shared their resources with young adults to provide support. For example, Young adult 1 explained that her parents supported her in looking after a baby, their grandchild: *I am unemployed right now, but they help me by buying clothes and blankets when she needs it and helps her to raise her child.* In turn, young adults acknowledged that they should care for and support older people.

They are in this with me, they help me if I need something like blankets, or whatever I ask for, they help me (YPP1, female).

Middle adults recognised educating and raising children and providing support as part of the functional positioning of **older people**. Although middle adults agreed that older people should contribute to raising the children, it was also acknowledged that they should not take all the responsibility. This was asserted by middle adult participant 1 speaking about her mother: *She always says: you are grown up, you should look after your children yourself, control your own children.* From a middle adult perspective, support is seen as reciprocal. Support to older people included assisting through illness, helping them travel to and from medical clinics, administering medicine and other general assistance (INT6, male), and listening to their problems (INT4, female). INT6 (male) explained how he helps his diabetic father (60+):

I realised that I am the eldest son and I am the one who takes care of him (older father). I buy his pills and go and pick it up for him I will go to the clinic and stand in the queue to

collect his insulin injections. It is not the only thing I do for him; I do a lot of things for my father. When he was unable to help and take care of himself, I took care of him.

Older people also positioned themselves functionally within their families. They believed that they should contribute to families by helping to raise children, protect vulnerable members and support younger generations. Although older people believed that they were responsible for co-raising, educating and protecting vulnerable children within families, this was not the responsibility solely of blood relations but also older people within extended families (including uncles and aunts and older people in the community) who helped raise children:

...but sometimes this child is neglected and abused by brothers, sisters or parents. So, it is important to me, because we, I don't have a disabled child, but we have a disabled child in our community, and he is close to my heart (OPP1, female).

Older people acknowledged their obligation to help care for the children within their family. However, this posed challenges to them. Lastly, older people believed that they were responsible for the support of their younger family members:

We support them when they do something wrong, but we all have our issues. Every family has them, but we love each other, and we are very supportive of each other....and protective (OPP1, female).

Discussion of Findings: The Social Positioning of Older People within Families

This study illustrated how family members from different developmental stages positioned older people within their families. Participants in each developmental phases positioned older people as the caregivers of families that had to address affective and instrumental needs. That family obligations acted as the basis of how older people were positioned, centred on younger family members (adolescents and young adults) and, for a

limited number of participants, the reciprocal nature of these obligations was maintained (see Chazan, 2008; Nortey et al., 2017). As primary caregivers older people were supported by all participant groups. Extant research on ageing and families has indeed argued that the provision of care for older people is increasingly seen as the responsibility of families (Apt, 2012; Bloom et al., 2011; Kimuna & Makiwane, 2007).

Participants in this community recognized the presence of give-and-take responsibilities within intergenerational relations (see Rowlingson, Joseph & Overton, 2017; White & Klein, 2008). These intergenerational contracts between family members were implicitly embedded within familial relationships but the expectations of what care and support should look like differed across different developmental stages (see Harper, 2014b; Makiwane, 2010). Adolescents and older people, for example, focused on those expectations and obligations that promoted affectual solidarity (emotional closeness) and consensual solidarity (shared beliefs, opinions and values) among family members (see Hodgkin, 2014).

Adolescents, therefore, did not only position themselves as individuals within a broader family context but also in relation to older people and their needs including addressing these. This is particularly significant as other scholars who report strained relationships between adolescents and older people attribute it to the difference in developmental phases, as in the cases of Barnett et al.(2010), Dolbin-MacNab et al. (2013), Mabaso (2011) and Oosthuizen (2014). These findings however highlight strong familial bonds between older people and adolescents.

Young and middle adult groups, however, tended to focus on providing practical assistance and support among members when it came to their expectations of and obligations towards older people (see Hodgkin, 2014). This could be attributed to the developmental phases in which these groups found themselves.

Older people were organised as primary providers and caretakers of support, thus to share resources as well as take on family responsibilities towards younger generations (see Amoateng & Richter, 2004; Brown et al., 2010; Chazan, 2008; De Vos, 2004; Golaz et al., 2017; Kimuna & Makiwane, 2007; Mazzucato et al., 2015; Nkosi & Daniels, 2007; van Dullenmen, 2006). These family obligations were sometimes practised to the detriment of older people included in these family structures, that is, it placed them under additional burdens (see Apt, 2012; Littrell et al., 2012; Oppong, 2006).

Several studies in extant literature confirm this when they report that older people carry the burdens associated with caring work while they suffer because of it (Kasedde et al., 2014; Kidman & Thurman, 2014; Oppong, 2006), thus raising questions about the inclusion (or, by implication, exclusion) of older people who are unable to contribute or fulfil these obligations due to a lack of means, frailty or illness. Contrary to intergenerational findings that report strained relationships between adolescents and older people (Dolbin-MacNab et al., 2013; Drury et al., 2016; Ferreira, 2011; Mabaso, 2011), however, the present study reports positive relational experiences between older people and adolescents (see also Chigeza et al., in press). However, these positive interactions only marginally influenced how older people were positioned in their family and the care they received in return.

Emerging understanding of the social positioning of older people

Older family members were included and positioned within families according to the affective or functional contributions they made. To date, extant literature has mainly referred to the positioning of older people as either a resource or a burden (for instance, Schatz et al., 2015) but the different patterns within each position have not been explored thoroughly. To identify the patterns of interaction that influence the alternative ways of how older people could be positioned, these interactions should be viewed from a balanced perspective. Although the findings of this study highlight challenges that older people face, they also

indicate the presence of family strengths and resilience. The section below first discusses the former based on the findings. Subsequently, family strengths and resilience processes that could help overcome these challenges faced by individuals and families will come under scrutiny.

These findings pose concerns around families with older members and to older people themselves. First, *older people are not afforded the opportunity to adopt other roles* within the family. Yet, they are expected to fulfil the functions of other roles by providing resources, nurturance and support as well as develop the life skills of younger family members (see DSD, 2013; Petersen, 2009). From a lifespan-development perspective, this is contradictory to the developmental tasks they should be fulfilling such as building and cultivating strong bonds with family members who provide care and support for them (Baltes & Silverberg, 1994). Although participants acknowledged that they made contributions to the lives of older people, there was a notable imbalance when it came to sharing resources: it was skewed in favour of younger family members. There were numerous demands on older people and they were expected to address various familial obligations. However, they could and did expect very little in return, which may have left their needs unmet or unsupported. When positioned affectively, older people were expected to provide emotional support, guidance and maintain hopes and dreams for their younger family members (see Davids et al., 2016; Petersen, 2009).

Although older people did not fulfil other roles within the family context, it would seem that there were variations on how they could fulfil the role of caretaker. Reviewing the findings through the lens of a strength-based approach, however, illustrated not only the challenges older people faced but also how they were perceived to be the facilitators of family resilience processes.

The older people in this group contributed to family resilience and strengths by facilitating family flexibility such as by encouraging religious activity and spiritual well-being, encouraging family cohesion through spending quality time together and fostering positive communication by demonstrating appreciation and affection (see Chapter 1,; DeFrain & Asay, 2007b). The social positioning of older people as affective resources therefore offered benefits to the larger family unit. This positioning allowed younger members to create meaning and belongingness (see Lambert, Stillman, Baumeister, Fincham, Hicks & Graham, 2010) within their broader social networks, that is, as mentioned, families and communities. This role of developing strong bonds with younger generations does also belong within the ambit of the developmental tasks of older people according to extant literature, as advocated by Baltes & Silverberg (1994).

A second challenge presented in the findings is that *older people that are positioned instrumentally to fulfil functions* that include sharing resources to address family members' needs. The transfers of emotional and financial support between generations depend on different stages of the life course (Dykstra & Komter, 2012; Hodgkin, 2014) as well as the availability of resources such as time, labour and money (Abebe, 2012; Bowes & McColgan, 2013; Macmillan & Copher, 2005; Mogotlane et al., 2010).

The findings of the present study however indicated an unequal distribution of resources. Despite the direction of the obligations and expectations being skewed towards younger family members, the participants emphasised their obligations towards younger members, especially when it came to resources that were geared towards adolescent family members. For the most part, young and middle adults, with the exception of one middle adult participant, acknowledged that they had a familial obligation towards older people, but they did not provide explicit examples of how this was to be carried out. Adolescent participants,

on the other hand, provided explicit, tangible examples of the reciprocal nature of the care and support older people received, and older people affirmed these supports.

However, following an approach based on family strengths and resilience, it should be acknowledged that this positioning might not always be negative. The positioning of older people as the facilitators of material support may also be viewed as a protective factor around the growth and development of the family system (Ungar et al., 2013). In such a case, the older people within these families help mitigate the daily stressors and crises and build family resilience (Ungar, 2018) through adopting the caretaker role.

A third challenge identified was the *positioning of older people solely as resources*, reducing them somewhat to providers of care to younger members while there seemed to be no space for their own vulnerabilities. This is a cause of concern as older people face increasing challenges and vulnerabilities due to increased dependency associated with ageing (Aboderin & Ferreira, 2009; Roberto & Blieszner, 2015; Skinner et al., 2015). The implications of diminished capacity for older people as resources to families have far-reaching effects for family members who depend on the provision of these resources, especially when older people are explicitly positioned to address the care needs of younger family members.

This burden has been exacerbated by the consequences of the Apartheid dispensation where older people did not get the opportunity to accumulate resources for their old age and are dependent on informal social contracts to gain access to resources (Lloyd-Sherlock, 2018). Limited family resources hinder support from family members. Older people then receive minimal instrumental support from their families, not least because they are still seen as the primary caretakers.

The fact that younger family members see the position of older people as that of caretakers rather than caring for them, raises questions. If young people do not see themselves as responsible for the care and support of their older family members, who will in future care for them? Indeed, who will care for them if the responsibility is not acknowledged and internalized by younger people early on?

Despite the burdens that families of older people face, the instrumental positioning of older people could be the application of a resilience mechanisms to perform better than expected in light of these burdens (Masten, 2016). Older people facilitate financial, educational and material opportunities for younger family members, encourage family and community belonging and foster cultural and religious beliefs and values within family systems. This indicates their role within the family system to foster resilience as it is more likely to be present when families and family members are successful at navigating their physical and affective resources within their social environments (Ungar, 2018). The social positioning of older people within family patterns of engagement within this resource-constrained community may therefore create conditions of well-being that might mitigate the impact of poverty and promote cultural values, as has been suggested in a broader context by Ungar (2018).

Conclusion

The findings of this study demonstrate how older people are positioned within families as well as the expectations and obligations ascribed to older family members as viewed by family members found in multiple developmental stages. Older people are seen as mechanisms of intergenerational solidarity, intergenerational transfer and resilience (Harper, 2014; Ungar, 2008; 2018), and family members' solidarity influence the expectations they hold around older people and the obligations they feel towards older people (Bengtson & Roberts, 1991; Hodgkin, 2014). The expectations and obligations among the participants of

different developmental stages are dependent on the available resources within families. It is thus crucial to explore how the positioning of older people as resources can be balanced to include addressing their own needs. Future studies could, therefore, explore the intergenerational contracts between family members, and interventions could address the imbalances in the give-and-take relationships between older people and their younger family members.

Author's Note

Following the ID research design (Chapter 2), this chapter aimed to explore how older people were positioned within families. The findings from this empirical study described an emerging understanding of how older people are positioned within family systems. The practical descriptions of the social positioning of older people informed the theoretical understanding of the roles older people have to fulfil in family contexts.

CHAPTER 6:

FAMILIES OF OLDER PEOPLE IN SOUTH AFRICA: CONCLUSION AND RECOMMENDATIONS

Introduction

Preceding chapters of the present study present findings on the basis of a critical review of the literature and an empirical study. The thesis set out to improve the understanding of how families are conceptualised in SSA (literature) and in SA (South African group) and how older people are positioned within these conceptualisations. The core question that guides this study is: Who is regarded as family, and what is the position of older people within these family conceptualisations? In response, the following objectives have been pursued: (a) to conduct a critical review of literature on family conceptualizations in SSA and South Africa; (b) to explore the family conceptualisations of a specific group representing members from different developmental phases and (c) to explore the positioning of older people within these family conceptualisations.

To achieve these objectives, this study has been conducted in two phases. First, a critical review of how families are conceptualised in SSA literature has been conducted. This review aims to synthesize the state of knowledge of family conceptualisations in SSA literature and explore the longing of the actualization of family obligations within these family conceptualisations. The critical review method has followed a five-stage process: (a) defining the scope, (b) identifying references, (c) review of the literature, (d) constructing the review and (e) applying and concluding the review, all in accordance with Carnwell & Daly (2001). The iterative process followed has made it possible first to explore how families are conceptualised in extant literature and, second, to explore the embedded family obligations within these conceptualisations. The findings of this review are presented in chapter 3.

Second, to address the lacuna identified regarding contemporary conceptualisations of families of older people in SSA, an empirical study was conducted to explore how particular community members in SA conceptualised families and how they positioned older people within their families. This study made use of two qualitative data collection techniques that allowed the researcher to explore family conceptualisations across different developmental phases (see Koen, 2017; Roos, 2016b; Tracy, 2013; Venter, 1993). The explanations of family members from different developmental stages provided insights about how families positioned older people to address their needs. In Chapter 4, the broad findings of how families were conceptualised were presented and the family obligations embedded within these conceptualisations were discussed. Chapter 5 outlines how older people were positioned within families.

This study therefore provides empirical and scholarly insights into how family is conceptualised and how older people are positioned within these conceptualisations. **Chapter 1** contextualises and positions the study in a broader research context of family studies. The chapter further addresses an important lacuna in current literature. **Chapter 2** discusses debates about the methodological applications of research designs by applying Interpretative Description (Thorne, 2016) as a research design in a study about families in an African context.

Chapter 3 critiques and expands extant literature in family-related disciplines on a multitude of significant levels, thus making further important contributions to discussions around this vital topic. First, the chapter synthesizes literature and knowledge about how families are conceptualised in SSA and South African literature. A critical review in the manner of a systematic review of literature is undertaken to make a major contribution to disciplinary fields as it integrates and groups findings of different studies to gain a better understanding of a phenomenon of interest: in this case, families (see Grant & Booth, 2009).

The findings of the review inform the evidence-based development of future studies and interventions that need to determine who can be regarded as family.

Second, the review identifies and highlights a unique conceptual approach to understanding wishful families. Although some of the elements in this approach link with romanticized notions of conceptualizing families, it voices the longing for the actualization of the idealistic (romantic) beliefs about families, as shown in Chapter 3. Third, this review contributes to the broader academic debate by identifying problematic practices when studying families. Lastly, based on the findings of the synthesized literature, the chapter proposes a research agenda for future studies.

Chapter 4 contributes to the knowledge about family by providing some insights into *how* families are conceptualised. Contrary to popular understanding that has been outlined in Chapter 1, families are not only conceptualised through blood ties, contracts and living arrangements, but inclusion into families is also dependent on personal perspectives about families as well as need fulfilment and expectations of how needs should be met. To this end, the Chapter suggests a new connection between family members, namely through a sense of belonging. Additionally, the findings that this chapter presents challenge the prevailing belief as found in the literature that adolescents and older people struggle to relate to each other based on their different developmental phases.

Chapter 5 contributes to debates about the families of older people and how older people are positioned within family structures. Older people are positioned within families to address different affectual and instrumental needs. They are therefore seen as the caretakers of families. Second, this chapter highlights the expectations of older people when they are included within families.

Chapter 6 suggests a new conceptualisation of families that can be applied in different contexts. This chapter also contributes to family studies by challenging prevailing beliefs since it provides counter-views that can be used in future studies. This final chapter also critically reflects on the key findings and contributions of this study and concludes by highlighting its limitations and contemplating research recommendations for future studies.

Critical Reflection on Findings

International and SSA family discourses often point towards the centrality of older people in the lives of their family members, as argued in Chapter 1. The occurrence of rapid population ageing in SSA drives these discourses (Chazan, 2008; Kidman & Thurman, 2014; Lloyd-Sherlock et al., 2018; Schatz et al., 2015). Additionally, the families of older people are key stakeholders in addressing the challenges associated with ageing (Aboderin & Hoffman, 2015; Chazan, 2008; Keating, 2011; Keating & de Jong Gierveld, 2015). Generally, efforts to understand the role of family in the lives of older people vary from seeing older people as burdens or an untapped source of support in relation to vulnerable younger members (Kimuna & Makiwane, 2007; Lloyd-Sherlock et al., 2018; van Dullemen, 2006). To date, limited studies have focused on how families are conceptualised in relation to older people and what (type of) family obligations are associated with inclusion within these conceptualisations (Schatz et al., 2015).

Contributions of this Study

This study makes several contributions to the fields of family studies and to psychology. Following a general systems theory and ecological approach, these contributions can be applied to the different levels of functioning in different disciplines on the following levels: societal, familial and in terms of community as well as the individual (psychological) level.

Contributions on a Societal Level

On a societal level, this study makes contributions towards legal- and policy viewpoints and applications of theories. First, it contributes to policy- and legal understandings of family membership boundaries and family obligations, as found in Chapters 3 and 4. A key contribution of this study is the expansion of previously accepted connections that bind family members to the family unit. The data explored in the empirical study illustrated how people were regarded as family when they were interconnected and made contributions to the family, as Chapter 4 demonstrates. Family membership boundaries are therefore not only based on biological-, legal- or structural connections as has been suggested in literature by Freeman and Nkomo (2006a; 2006b), Manderson and Block (2016), and Manderson, Block and Mkhwanazi (2016) but also other connections such as shared spaces. The findings of this study suggest a paradigm shift in traditional thinking as all generations (related and non-related) are included within families, as demonstrated in Chapter 1.

The empirical part of the present study has shown that in addition to traditional inclusive frameworks, families and communities consider significant others as an extension of families, while these are still expected to fulfil various functions to society and family members. These significant others seem to be those who have an impact on their lives, as Chapter 4 suggests. Wishful ideas about families, that is, that all family members are cared for and supported as well as relational interactions between family members also influence who is included within families. In this regard, there are similarities between institutional conceptualisations of family as reflected in extant literature and personal (participant) conceptualisations. These similarities might reinforce the wishful families' approach to understanding families where everyone is included, protected and cared for, as Chapter 3 has shown.

Second, the suggested family conceptualisation has far-reaching implications for policies and legislation that conceptualise families (see Chapter 3). In the context of South Africa, there are various legislations that has to conceptualise families for different purposes such as legislation relating to estate planning, burial and cremation and conflict resolution within families, as found among others in the Maintenance act, Domestic Violence Act, Children's Act, Older Person's Act and Civil Union Act. Legislation relating to families that contain conceptualisations should expand their conceptualisations to include older people and other family members that are connected through shared spaces and wishful family ideals. Legislation and policies that do not include formal conceptualisations such as the African Union Plan of Action on the Family and the Older Person's Act should be amended to include inclusive conceptualisations that reflect the daily realities of families. This is important as formal conceptualisations influence the rights and responsibilities that can be afforded to family members that are legally recognised.

Third, consider that the rhetoric and underlining assumptions of a wishful families' approach are prevalent in policy and literature discourses, as argued in Chapter 3. That Chapter raised questions about the possibility that such popular discourse might manifest in practice. Similarly, the findings presented in Chapters 4 and 5 seem to support the notion of wishful families in practice. These wishful families are, however, not reflective of the daily realities of families. These ideologies about what families *should* be points to a deep longing to address emotional and instrumental needs. Several scholars challenge this idealised view of family and suggest that families struggle to meet the needs of all its members (Aboderin & Hoffman, 2015; Adeagbo, 2016; DSD, 2006). Despite this, the wishful idea that families will be willing and able to include all members and provide resources to address their needs prevails in both literature and in practice. The present research indicates that the premises of wishful families allude to the reality of what family means in South African contexts and

even more so in contexts of poverty (see Francis, 2006). To this end, the absence of clarity about what is considered family obligations and who is responsible for them should be addressed. The critical review of literature also provides insights into how policymakers and legislators conceptualise families in relation to older people. Although the empirical study proved that older people were central stakeholders within families, there is still no conceptualisation in legislation or policy that explicitly includes older people within family conceptualisations or conceptualises families in relation to older people.

Contributions on Family- and Community Levels

This study contributes to the understanding of families from a microsystem perspective (Bronfenbrenner, 1979; Ungar, 2018) and provides insights into how families are conceptualised to include people within their social environments. First, it contributes insights on a community-psychological level by representing an underrepresented group within family studies. In the historical context of South Africa, communities were constructed in relation to their racial differences (Sithole, & Mathonsi, 2015). Previous studies, therefore, mainly focussed on black African or white families while brown communities' contributions were underrepresented and they were viewed as an in-between group. Including the voices of this group therefore confirms the ethical- and community-psychological principle of distributive justice.

Second, this study illuminates the practices in family research that hinder an integrative understanding of the daily realities of families (see Chapter 3). The findings of the review on family conceptualisations raises questions about the practices of family scholars who conceptualise families in SSA. Despite a widespread call for new and contemporary ways to understand families (Hall et al., 2018, Mokomane, 2018; Sooryamoorthy & Chetty, 2015; Tasker, et al., 2018; Widmer, Aeby & Sapin, 2013), family scholars still make use of practices that do not include the contemporary realities of families. Although the use of rigid

and outdated family conceptualisations is widely criticized they continue to be predominant (Hall et al., 2018; Lubbe, 2008)

Other practices, such as only viewing families from only a structural approach, are also widespread. The use of nuclear and extended family conceptualisations is the most popular (Sooryamoorthy, 2015, 2016). Additionally, some scholars still motivate the use of household data in family studies (Hall et al., 2018). The use of these practices leads to the exclusion of vulnerable members, that is, children, older people and mentally ill adults from families and leaves them with limited protection. These practices hinder the layered understanding of who is regarded as family and the position of different family members within families.

Chapters 4 and 5 moreover suggest an emerging understanding of the role of resilience and family strengths within the conceptualisation of family units and the positioning of older people within these units. Considering family strengths and resilience processes within family dynamics and family conceptualisations may lead to a more nuanced understanding of the daily realities of families.

Contribution on an Individual (Psychological) Level

This study makes contributions on a psychological and individual level. First, a significant finding is that family membership centres on values and belief systems embedded within our environments at specific moments in time and space (see Alwin, 2012; Shabalala et al., 2016). Family membership therefore takes on a broader meaning than traditionally allowed in literature and prompts the inclusion of people who contribute to the family in different ways, that is, in terms of emotional support and providing a sense of belonging (see Tasker et al., 2018). This dovetails with international trends to understand how contemporary families are conceptualised (see Tasker et al., 2018). Such inclusion criteria align with

wishful conceptualisations as found in the literature (see Freeman & Nkomo, 2006a; Roman et al., 2016). The connection between members based on shared spaces presented in a unique way in the group examined by the present study. This connection seems to address a contemporary need to address emotional and functional needs (see Keyes, 2005; Prilleltensky, 2005). The inclusion of personal perspectives as a contributing factor in the conceptualisation of families engenders a more layered understanding of who can be included and per implication excluded from families.

Second, another important contribution to understanding families in SSA and in South Africa is the finding around the emergence of the wishful family. This contribution is overarching and has implications on societal-, community- and individual levels. The critical review of extant literature illustrated how family scholars report wishful ideas about the inclusion of families and what family members are responsible for, known as family obligations. These wishful beliefs are also embedded in how participants in the Western Cape conceptualise their families. This is, however, very problematic. Making use of wishful and romanticized notions of who families should be and what they should do contribute to a fragmented and unrealistic picture of families in SSA and in South Africa. Family scholars and government organizations cannot begin to support families if they continue to make use of romanticized ideas that maintain that some family forms are more natural than others, or if they use idealised conceptualisations where everyone is included to frame their policies, legislation or interventions (Sooryamoorthy, 2015, 2016).

Family scholars should acknowledge the inclusion into families as also need-based and dependent on personal perspectives, how people make us feel and what people can contribute to families. This hints at a layered understanding of who is regarded as family - where people who influence us are included (Von Bertalanffy, 1968; 1972). These broader connections that allow for the inclusion of family members based on needs, personal perspectives and

affect confirm the notion of wishful families, as presented in Chapter 3. In the light of the challenges and the social contexts in which families in SSA and in South Africa find themselves, these functions might not be fulfilled. The expansion of family membership boundaries raises questions that warrant further investigation. These are: do all communities in South Africa use such abstract connections to regulate family membership boundaries? Who is responsible for fulfilling family functions within families? How can families be based on these abstract connections be regulated with a view to policy and legal perspectives? And, do these connections provide an accurate picture of who can support other family members?

Third, this study provides insights into the position of older people in South African families. The findings demonstrate how older people are positioned within families as well as the expectations and obligations around them. Older people are specifically positioned within families to address care and support needs. Bearing these findings in mind, it is crucial to explore how the positioning of older people as resources can be balanced (see Mtshali, 2015; 2016).

Additionally, Chapter 3 delves deeper into how families of older people are understood and the beliefs about families around older people. In SSA, expectations of care and support from older family members are embedded within how families of older people are understood.

In addition, Chapter 3 sets out a research agenda for future studies. The questions that have been uncovered as important should guide future studies towards a more comprehensive understanding of the families of older people.

The study has found that, contrary to some conceptualisations in extant literature that exclude older people, families are not only conceptualised according to family structures. Families in this research were in fact conceptualised around older people, as has been

demonstrated, and literature confirms the various roles that older people fulfil such as to educate and raise children and provide care, financial aid, support and protection (Chazan, 2008; Golaz et al., 2017; Kimuna & Makiwane, 2007; van Dullemen, 2006). Although older people are not always recognised in extant literature for critical contributions they make to their families (see Edgar, 2014; Keating, 2011; Mokomane, 2018; Patel et al., 2018; Togonu-Bickersteth & Akinyemi, 2014), the group examined in the present study indubitably positioned themselves around older people. Given that family membership boundaries are used to support arguments about the distribution of family resources, it is noteworthy further that the present project found that a general expectation exists that older people will use their pensions to support their family members (in this regard, see also Bertrand et al., 2003; Kimuna & Makiwane, 2007).

Conversely in terms of reciprocity between families and older members, this study also contributes to discourses about the role of families in the lives of older people. To date, many scholars have argued that older people are absorbed within families and families address older people's needs. The present study has however demonstrated that, contrary to the expected developmental tasks that older people *should* face, they actually still fulfil the role of primary caretakers of families (see Erikson, 1975). Older people seem to be central to families and are expected to take on family responsibilities.

On this front, a further key finding of this study points to supportive interactions between older people and adolescents. Contrary to findings in extant studies (see Barnett et al., 2010; Dolbin-MacNab et al., 2013; Oosthuizen, 2014; Roos, 2011), the present study found that older people and adolescents engaged in supportive family interactions and shared beliefs about what families should look like. This could be attributed to the developmental tasks that these groups face, which relate to building and maintaining relationships with family members (see Erikson, 1978). Despite initial expectations that family

conceptualisations would differ according to developmental phases, participants showed that wishful ideas ingrained within our family conceptualisations were much more relevant to the exploration of the nature of families.

Conceptual Beliefs about Families: A Challenge

Although it was not the purpose of the present study to seek or provide evidence of a general pattern for conceptualizing families or how to position older people within them, it did raise interesting questions about research on families. The findings raised questions about the prevailing beliefs within the literature about how families are conceptualised and how older people are positioned within them. However, the present study has demonstrated that these incorrect assumptions are well represented in policy- and research documents that focus on families and the members' obligations. The impact of these beliefs surfaces around what we expect from families and especially from older people within families. As part of the critical reflection of the findings of this study, these beliefs are systematised below and critiqued, and each section will be concluded with a qualifying statement that summarises the reflections and reaches a conclusion.

Belief 1: Structural Understandings of Families are Inclusive

Families of older people are mainly understood in terms of a structural-functional approach where older people are positioned based on family structures and expectations of support. Further, older people are also structurally organised around expectations of care and support. Although other approaches exist in literature, they do not make provision for members with less bargaining power (Aboderin, 2004; Ansell & van Blerk, 2004). Family conceptualisations based on a structural approach are applied rigidly and sometimes fail to explain or reflect on how some families might struggle to provide care and support to its

vulnerable members (Aboderin, 2004; Ansell & van Blerk, 2004; Brown, 2011; Keating, 2011; Keating & de Jong Gierveld, 2015; Mturi, 2012).

Counterview: A structural approach to understanding families does provide insights into the different family forms observed. However, older people with less bargaining power and resources should also be included within family structures. Families embody more than simply how they are organised around family structure. Family scholars should move away from solely relying on structural understandings and instead pursue an integrated approach when exploring families of older people.

Families are complex systems that do not function on linear levels of understanding. Indeed, family membership is not only dependent on family structure. Based on the findings of this study, families included people around personal beliefs about what families should be and do for each other and how they should make members feel (see Chapter 4). Needs and family strengths therefore drive family membership boundaries.

Belief 2: Disciplinary Applications of References to Families can be Applied Interchangeably to Describe and Understand Them

The second belief held by family scholars is that disciplinary perspectives that employ interchangeable language can be used to understand families. Disciplinary perspectives such as those based on demography, law, social work and sociology often use interchangeable language to delineate family studies and understand and describe families in SSA (Gerson & Torres, 2015; Gittins, 2017; Hagestad, 2018). One reason for these disciplinary approaches probably has to do with the widespread conflation of household and kinship structures around perceptions of family (Kriel et al., 2014; Mturi, 2012; Richter, 2018). Although families might share household or blood ties with their members, the findings of this study on the contrary suggest that families do not only connect with their family members through

blood, contract or household (see for example Chapter 4). The disciplinary associations of families with households or kinship organizations appear to influence how research is carried out within these disciplines and which issues are given prominence. The scarce literature that solely focuses on the families of older people focusses almost exclusively on the position of older people within families (Schatz et al., 2015) based on living arrangements or some references to the burdens on older people (Sanuade & Boatemaa, 2015)

Counterinterview: Family scholars in SSA should differentiate between household, kin and family. The interchangeable use of these terms unrealistically equates households and kin structures with family units. A necessary transdisciplinary and complex concept of families transcends disciplinary language limitations. This study, therefore, endorses the call in the variation in the conceptualisation of families made by Mokomane (2018)

Belief 3: Families can Address the Needs of its Vulnerable Members - If They Were Only Strengthened

The third belief is that families are willing and able to meet the needs of their members if they had the necessary resources. This is an almost wishful and romantic belief that families are strong and want to support each other. Examining extant literature strongly suggests that it embraces the underlying assumptions around wishful families that are willing and able to support each other in discourses focusing on family policy. Family support seems to be the most wishful aspect here as it seems to be a romantic expression of the sentiment that “we all love one another”. These wishful ideas around family membership boundaries within the families of older people are enforced by ideological, normative ideas that older people live in extended and multigenerational family units that share resources equally and take care of all vulnerable members (Bigombe & Khadiagala, 2003; Mtshali, 2016; Reynolds, 2016; Wittenberg & Collinson, 2007).

Counterview: Governments and other organizations assume that families can and will address the needs of its members. Despite the pertinent presence of these wishful family notions that in literature, some scholars challenge them and suggest that families and especially older people grapple with meeting the expectations of support from members (Aboderin & Hoffman, 2015; Adeagbo, 2016). These scholars rightfully call for an exploration of the expectations families entertain about their older members. The present study in fact highlights the existence of wishful beliefs about who is regarded as family and what these people should do if they wished to be included in the family. Researchers should therefore be looking at ways in which we could support older people within families to help them address their own needs. Additionally, a strength-based approach may lead to imperative illuminations around why older people are positioned as primary caretakers of families.

Belief 4: Families Support all Members Reciprocally

The fourth common belief found in the literature is that family support is reciprocal. Although there is a body of knowledge about family obligations of support to younger family members, countries in the global South have been largely missing from discourses about how families support their older members (see Chapter 3). This is especially true in SSA, a demographically young region where the focus has been on challenges to support young people in terms of employment, HIV/AIDS, poverty and internal migration (Aboderin & Hoffman, 2015; Hontelez et al., 2011; Lloyd-Sherlock, 2018; Lloyd-Sherlock, Barrientos, Moller, & Saboia, 2012). To be sure, the urgency of challenges facing young people in the region cannot be set aside. Family scholars therefore rightfully focus on how poverty, HIV/AIDS and migration influence the daily lives of young people and how families should support these younger members (Hall, & Posel, 2018; Knight, Hosegood & Timæus, 2016;

Randall & Coast, 2015). Within the region, discourses about family support to young people is in other words widespread.

Young and Ansell (2003) and Bennett, Hosegood, Newell, and McGrath (2015), for example, describe how children are expected to stay with extended family members while parents move to urban areas in search of employment. Family scholars also emphasise the role of families to care and support for orphans, foster children and provide financial support to younger family members (Chazan, 2008; Kidman & Thurman, 2014; Schatz et al., 2015). References to older people caring for children and grandchildren are common and are perhaps more prominent because the topic forms part of the discussion related to challenges facing young people. There are, however, limited references relating to the pressing matter of the support and care that older people can, in their turn, expect.

Counterview: Extant studies mainly focus on how older people fulfil family obligations. But research on how older people support their younger family members cannot provide a comparative foundation for evaluating families and how family obligations are fulfilled in families that include older people. Based on the findings of the present study, three main challenges form the basis for a proposed research agenda. Foremost, there has been little research on the structural location of older people within families. Most of the studies instead focus on the structural positioning of young children and their parents (see Young & Ansell, 2003). Additionally, older people are mainly positioned in a romantic and wishful way where they are expected to provide support to younger generations. Finally, evidence of aspirations towards older people that they will be well-supported has not been tested empirically. Therefore, future studies should focus on how older people are supported by their families; family structure and family obligation across the spectrum of older people in all their diversity within the region is not well-understood.

Belief 5: All Family Members have Distinct Roles and Fulfil Family Obligations

The fifth closely related assumption as found in literature involves wishful standards of what families should do, as discussed in Chapters 3 and 4. These are usually believed to be supported by universal functions of families and, in turn, these reiterated in how we conceptualise families. A certain circularity of thought therefore keeps some of the incorrect wishful assumptions about families alive. Literature reports on the distinct roles that family members *must* or *should* play in relation to their family members and society (Epstein, Ryan, Bishop, Miller & Keitner, 2003; Miller, Ryan, Keitner, Bishop, & Epstein, 2000; Peterson, 2009). Family scholars assume that individual family members fulfil these roles based on their positions within the family (Peterson, 2009). Paradoxically, only limited references in literature occur to studies that illuminate who is responsible for fulfilling these roles or family obligations (Tenkorang & Adjei, 2015; Reynolds, 2015; Songca, 2011; Verhoef, 2005; Whyte, Alber, & Geissler, 2004).

Counterview: Opposed to this more rigid application of how family obligations and roles should play out, it should be considered that when family membership boundaries become fluid the obligations family members should fulfil towards each other and society also become fluid. This means that the predominance of a wishful-families approach to understanding families in SSA where idealistically normative conceptualisations of families reign holding that family obligations are implicitly embedded should be contended.

That is, challenges arise from these beliefs. Understanding the families of older people requires a holistic approach to exploring family membership boundaries over and above merely exploring structural ideas about families. Participant-led conceptualisations of families within an SSA context are limited and there is a call to include the research participants' voices in studies concerning families of older people. We have yet to map SSA families across all regional settings or in terms of the actual obligations, not simply the

perceived one that they fulfil towards members. A research agenda to address these challenges must thus include: (a) research on family structure and obligation from the perspectives of younger and older generations, (b) a critical evaluation of discourses about family supportiveness to older persons in SSA and (c) principles to guide applications of embedded knowledge in policy and research.

Recommendations for Future Research

This study underscores the need to explore the families of older people in SSA and in South Africa. Each chapter has made suggestions for future studies in this respect. First, the present project firmly recommends that family scholars should explore how families are understood in all provinces in South Africa. This study only explored one group that included high numbers of older people. It is therefore recommended that other communities should be explored to obtain a more comprehensive description around the nature of families of older people.

The present study provided an interesting finding in relation to older people and adolescents in families. Previous studies in South Africa reported on negative relations between these generations but this study gave found supportive interactions between older people and adolescents. Future studies should thus specifically focus on family dynamics as experienced across the life course as well as support that older people receive from their younger members and, in addition, defining who should be responsible for what family obligation.

An additional recommendation is that policies and legislation should include conceptualisations of families in relation to older people. Although they have a right to reciprocal care South Africa, the absence of a formal conceptualisation of who is regarded as their family limits their ability to enforce this right. Legislators and policymakers should be

cautious when interpreting the longing for inclusive and romantic family conceptualisations as absolute and representative of actual family structures.

Limitations of this Study

This study aimed to obtain an in-depth understanding of how family is understood in SSA and in South Africa and how families position older people within its structures. Due to the explorative and qualitative nature of this study, the sample was limited to one group in the Western Cape and is therefore not necessarily representative of South Africa as a whole. The research questions were relatively broad with the aim of capturing who was regarded as family and why. Additionally, the findings of this study should be interpreted as a preliminary investigation of family in South Africa. Further studies that explore the family dynamics of a broad range of families could ideally further illuminate how older people are positioned when it comes to the matter of addressing needs in families.

Consider further that a limited number of middle adults volunteered to be part of this study. This could be attributed to working long hours to support their families but can also be an indication of strained relations with their families. Therefore, future studies should focus on family interactions between middle adults and older people and the mediating effect they have in relationships between adolescents and older people (see Barnett et al., 2010).

The use of GFS as a data collection technique carries one or two limitations. Although this technique is in fact used as a data collection method it is not always advisable. Researchers should be aware of the projective nature of this technique and its probing questions. In retrospect, conducting in-depth interviews may have been less intrusive.

Concluding Remarks

This study addressed the research question of who is regarded as family and why. Family conceptualisations are dependent on personal perspectives, how people make us feel

and their actions and how they contribute to the family unit. Older people seem to be central stakeholders within families. They do, however, receive limited attention from family scholars. This study has demonstrated that families indubitably are more than the connections that bind and structure them. Families transcend kinship. This study also illuminates how families are organised around need fulfilment and how they therefore extend beyond the boundary of merely including people related by blood- and legal ties and living arrangements to include animals, natural elements and wishful ideas that we entertain about who families are and how they should act.

I hope that this study will frame future studies and put older people at the forefront of discussion. I envision that the conceptualisation suggested here will be used to frame studies of older people in South Africa. In the process, understanding around the wishful ideas we have about who families are and how they should act as well as who will fulfil family obligations will be improved. To conclude this thesis, I would like to end with a quote by Harriet Morgan:

- Family is a circle of strength of love with every birth and every union the circle grows-

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APPENDIX A

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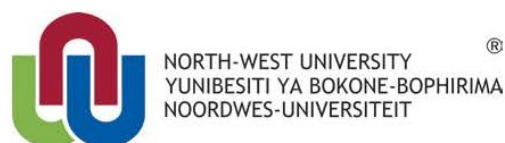
APPENDIX B

Table *Filial Obligations of support*

Function	Who is responsible for support of vulnerable members?	References
	An 'assigned relative' who meet criteria. May include biological aunts, older adults and uncles	Ansell & van Blerk, 2004; Heymann & Kidman, 2009; Okon, 2012; Nyamukapa & Gregson, 2004; Verhoef, 2005
	blood relations, parents, siblings	Bennett et al., 2015; Clarke, Cotton & Marteleto, 2015; Lu, 2009; Madhavan, Mee & Collinson, 2014;
	Extended family members where older people are not explicitly mentioned	Abebe, 2012; Ansell & van Blerk, 2004; Boezaart, 2013; Ciganda, Gagnon, & Tenkorang, 2012; Freeman & Nkomo, 2006; Goldberg, 2013; Imoh, 2012; Madhavan, 2001; Madhavan, Mee & Collinson, 2014; Mathambo, & Gibbs, 2009; Mokomane, 2012; Monasch & Boerma, 2004; Van Blerk & Ansell, 2007; Verhoef, 2005
	Older people within extended families	Abebe, 2012; de la Porte, 2008; Freeman & Nkomo, 2006; Madhavan, 2001; Marteleto et al., 2016; Nkosi & Daniels, 2007; Nyasani, Sterberg & Smith, 2009; Oppong, 2006; Roy, 2008; Russel, 2003; Songca, 2011; Young & Ansell, 2008
	Multigenerational families where reciprocal support between generational members are acknowledged	Apt, 2012; Bonthuys, 2010; Ferreira, 2000; Nkosi & Daniels, 2007; Schatz et al., 2015;

Function	Who is responsible for support of vulnerable members?	References
	Older people – predominantly grandmothers- related or non-related older people connected through social relationships, households or available resources	Abebe & Aase, 2007; Aboderin & Hoffman, 2015; Agesa, 2002; Ansell & van Blerk, 2004; Apt, 2012; Brown, 2011; Brown, BeLue, & Airhihenbuwa, 2010; Chazan, 2008; Ciganda, Gagnon, & Tenkorang, 2012; Clarke, Cotton & Marteleto, 2015; De Vos, 2004; Edmonds, Mammen & Miller, 2005; Ferreira, 2006; Guillon & Mace, 2016; Hayley & Bradbury, 2015; Imoh, 2012; Littrell et al., 2012; Madhavan, 2001; 2004; Madhavan & Brooks, 2015; Manderson & Block, 2016; Marteleto et al., 2016; Muga & Onyango-Ouma, 2009; Nkosi & Daniels, 2007; Nyamukapa & Gregson, 2004; Nwoye, 2006; Oppong, 2006; Tenkorang & Adjei, 2015; Reynolds, 2015; Songca, 2011; Verhoef, 2005; Whyte, Alber, & Geissler, 2004

APPENDIX C



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Institutional Research Ethics Regulatory Committee

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ETHICS APPROVAL CERTIFICATE OF PROJECT

Based on approval by the **Humanities and Health Research Ethics Committee (HHREC)** on **13/03/2017**, 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: Family and Aging in South Africa: An exploration of family and the position of older people.															
Project Leader/Supervisor: Prof V Roos & Prof J Hoffman															
Student: S. Steyn															
Ethics number:	N	W	U	-	HS	-	2	0	1	6	-	0	2	1	4
	Institution						Year					Project Number			
Application Type: N/A															
Commencement date: 2017-03-13					Expiry date: 2020-03-13					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.

General conditions:

While this ethics approval is subject to all declarations, undertakings and agreements incorporated and signed in the application form, please note the following:

- The project leader (principle investigator) must report in the prescribed format to the NWU-IRERC via HHREC:
 - 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 deviation 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:
 - 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:
 - 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

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: 2017.03.22

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Prof Linda du Plessis

Chair NWU Institutional Research Ethics Regulatory Committee (IRERC)

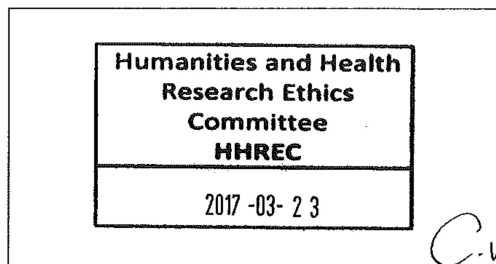
APPENDIX D



NORTH-WEST UNIVERSITY
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23 March 2017

**PARTICIPANT INFORMATION LEAFLET AND CONSENT FORM FOR
Family and Aging in South Africa: An exploration of family and the position of
older people.**

We invite you to be part of this project!

Who are we?

We are from researchers from the North-West University. We are doing a project called: **Family and Aging in South Africa: An exploration of family and the position of older people.** Our contacts are at the end of this letter if you need them.

What are we doing in this project?

This project is about families and to better understand them. We are looking at who people in your community (Groendal) from all ages see as family. We are going to ask you questions about who you see as a family because we want to help people in your community to help families have better relationships and to care for each other.

¹
CvE.

You will be asked to make something about who you see as family and to talk about that in a group, and/or to talk about who you see as family individually.

About 120 people will be included in this study (30 people the same age as you), but this could change depending on how long it takes to get a full answer to the question asked

This **Humanities and Health Research Ethics Committee (HHREC) of the Faculty of Humanities of the North-West University** has said it is OK for us to do this project (ethical number NWU-HS-2016-0214). They know we will work carefully using the international and South African ethical rules (this is called the guidelines and principles of the international Declaration of Helsinki and the ethical guidelines of the National Health Research Ethics Council). HHREC will maybe want to look at the forms you sign (if you say yes to being this project) to check that we did everything in the right way.

Why are we asking you to be part of this project?

Because you:

- Are 14 years and older
- You can talk in Afrikaans, English or isiXhosa;
- Stay in the Groendal community (Western Cape)
- You want to talk to us about who you see as family

What do you need to know?

- You can say no. If you say no, there will be no problem, you don't need to give a reason. Even if you say yes now, it is OK for you to change your mind later and stop taking part.
- We will also ask your parents/guardians to agree that you can participate in the project. If they say no, then we can unfortunately not let you answer our questions. If they say yes, but you say no, then there will be no problem: nobody can force you to say yes.

If you say yes, what will you be asked to do?

Meet a researcher at a time at the community centre in your community. You will be asked to take part in a group talk where you will be asked to build and talk about what you have made about who you see as family. Some of you will also be asked to

²
CvE.

tell us who you see as family in a one-on-one talk. We will ask you again if you want to do this and it is OK if you do not want to do the one-on-one talk.

Because you are going to talk in a group this could take 90 minutes or maybe even longer. The one-on-one talk can take 90 minutes or even longer.

The researchers have been taught how to talk with people in groups or in a one-on-one talk. The researchers will ask questions about what you have made in the group and the other people in the group will be allowed to talk to you about what you have made.

What do you get out of this?

- We will use what you tell us about who you see as family to better understand family.
- We will help you to make something personal for your family members.
- You will get to keep the research material you used to make something that tells us about your family.
- The findings of this research will be shared with organizations in your community to help them to choose programmes in your community to make your community better.

Can you get hurt by taking part?

- We don't think that you can get hurt physically, but there are some other risks. We explain them below and what we will do to manage them

<i>Probable/possible risks/discomforts</i>	<i>Strategies to minimize risk/discomfort</i>
Some of the questions we will ask could upset you (e.g. tell me about who you see as family)	-If you feel emotionally uncomfortable, please tell the researchers.
In the Mmogo-method (group activity) you need to use beads, clay and straws to make something of who you regard as your family. Please note that by making something of who you regard as family, you will give deeper meanings and that these deeper	-A psychologist, social worker and/or counsellor will be there to talk to you to feel more comfortable. - Alternatively, the researchers will arrange for you to talk to a psychologist, social worker and/or counsellor in your community. This will be available to you at no cost.

meanings might cause some discomfort when you share that with researcher or group. However, we have people that can help you that is available on site.	
You could feel negative emotions because of interactions with other people	-Only researchers with training in talking with children and adolescents will talk with the young people - If you feel emotionally uncomfortable, please tell the researchers -A psychologist, social worker and/or counsellor will be there if you feel you need to talk to someone.

- **There is one other thing you must know. If you tell us, while we are doing the project with you that you are planning to hurt someone or that someone is abusing you, then we must tell people (including the police) who can help.**

Who will know what you have shared?

- In the group talks the other people will know what you have said. We will ask them not to talk about it with other people. What you share in the one-on-one and group talks will only be shared with researchers from North-West University.

What will happen to what you share with us?

- Researchers will record what you say and copy it onto a computer document. We will delete the recordings from the recorders. Your name will not be added.
- All the talks with the other people in this project will be added to this document too. Their names will also not be added. This means nobody will

know who answered what. This document will be stored on a password-protected computer.

- Photos will be taken of what you make of who you see as family. The photos will be added to the document and deleted from the camera. Your name will not be added to the photo.
- We will print the computer document and it will be stored safely at the university for ten years and then destroyed.

This is NOT a once-off project, so what you share with us may be used by other researchers at North-West University. In your name will not be used.

Who will see the forms you sign and what happens to them?

Only researchers from North-West University will see the forms you sign. They will store these forms for 10 years. They will not be stored with the computer or printed document.

Will you be paid to take part in this study?

No, you will not be paid.

Will it cost you anything to take part in this study?

No, it will not cost you anything. We will bring the clay, beads and straws you will use to build something of who you see as family. We will not take back the clay, beads and straws when you are finished answering our questions.

Do you have any questions you want to ask?

- You can contact Nico Mettler if you have any further queries or encounter any problems.
- You can contact the chair of the Humanities and Health Research Ethics Committee (Prof Chrizanne van Eeden) at 016 910 3441 or Chrizanne.VanEeden@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 Chrizanne with Ms Daleen Claasens (016 91030441)
- You will receive a copy of this information and consent form for your own records.

5
CvE.

Declaration by participant

By signing below, I [full name] agree to take part in a research study entitled: **Family and Aging: A human developmental exploration of family and the position of older people in a South African community**

I say that:

- I have read and understood this information and consent form and it is written in a language with which I am fluent enough and comfortable.
- I have had a chance to ask questions to both the person obtaining consent, as well as the researcher (if this is a different person), and all my questions have been adequately answered.
- I understand that taking part in this study is **voluntary** (I can say no) and I have not been pressurised to take part.
- I understand that what I share (what I say or make visually) could be shared with other researchers but without reference to my identity, my name or photo.
- I may choose to leave the study at any time and that will not be a problem.
- I may be asked to leave the study before it has finished, if the researcher feels it is in my best interests
-
- Signed at (*place*) on (*date*) 20....

.....
Signature of participant

.....
Signature of witness

- You may contact me again
- I would like a summary of the findings of this research

☐ Yes ☐ No
☐ Yes ☐ No

The best way to reach me is:

Name _____ & _____ Surname: _____
Postal _____ Address: _____

Email:

Phone Number: _____

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Cell Phone Number: _____

In case the above details change, please contact the following person who knows me well and who does not live with me and who will help you to contact me:

Name & Surname: _____

Phone/ Cell Phone Number /Email: _____

Declaration by person obtaining consent

I (name) declare that:

- I explained the information in this document to
- I encouraged him/her to ask questions and took adequate time to answer them.
- I am satisfied that he/she adequately understands all aspects of the research, as discussed above
- I did/did not use an interpreter.

Signed at (place) on (date) 20....

.....
Signature of person obtaining consent

.....
Signature of witness

Declaration by researcher

I (name) declare that:

- I explained the information in this document to
- I encouraged him/her to ask questions and took adequate time to answer them.

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CvE.

- I am satisfied that he/she adequately understands all aspects of the research, as discussed above
- I did/did not use a interpreter.

Signed at (*place*) on (*date*) 20....

.....
Signature of researcher

.....
Signature of witness

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CvF.

APPENDIX E

The wishful family': deconstructing beliefs about families of older people in sub-Saharan Africa

S.E. Steyn

Author's Note:

This article is based on the data extracted (highlighted definitions and descriptions of families in SSA) from the review of literature in the previous chapter. However, only sections of the findings of the review described in Chapter 3 are presented here, and original data examples were used to substantiate findings. The author would like to thank Professors Norah Keating, Jaco Hoffman and Vera Roos for the conceptual contributions made to this article.

Introduction

Families as a core unit of society have been an increasingly important research topic both internationally and in sub-Saharan Africa (SSA) (Aboderin & Hoffman, 2015; Keating & de Jong Gierveld, 2015; Roberto & Blieszner, 2015). Against the backdrop of population ageing, the family obligations families should fulfil towards their vulnerable members (such as children and older people) are a central component to these endeavours (Department of Social Development, 2013; Keating, 2011; Mokomane, 2018). As a result, debates about the place of families in the lives of older people have been an important element of global strategies to address population ageing (Mokomane, 2018, 2013; Wouters, Le Roux Booysen, & Masquillier, 2016).

The focus on family obligations is reaffirmed by family scholars, governments and policymakers that use family structures and family obligations to conceptualize families (DSD, 2013; Patel, Hochfeld, Englert, 2018; Van den Berg, 2018). Due to the changing nature of families, more diverse family structures and the family obligations associated with

these structures are reported (Davids & Roman, 2013; Drucker, 2009; Lubbe, 2008; Sooryamoorthy & Makhoba, 2016). Based on these structures and obligations, governments and authors assume that families, in its various forms, provide care and support to its members as part of social contracts between families and the state (Hall, Richter, Mokomane & Lake, 2018). In light of this, vital questions about boundaries around family membership are also increasingly part of family obligation discourses (Patel, Hochfeld, Englert, 2018; Van Bavel, Dykstra, Wijckmans & Liefbroer, 2010).

These discussions have however been largely absent in SSA and the boundaries around family membership (who is seen as part of contemporary families) and who is responsible to fulfil these obligations across and between generational family members is not clear (Van Bavel et al., 2010). Nevertheless, Sub-Saharan Africa (SSA) will have 161 million older people by 2050, almost triple the number of older people recorded in 2015 (United Nations, 2017). Families, where older people are embedded, are consequently fundamental to understanding the challenges and the opportunities of ageing in SSA (Aboderin & Hoffman, 2015).

Although a magnitude of family literature exists in SSA, literature with a focus on older people is limited, and it is time to bring African scholarship into the global conversation about families of older people. This article discusses findings from a critical review of SSA literature on family conceptualizations and family obligations of care and support to vulnerable family members.

Methodology

To discuss the gap in the understanding of families of older people within family conceptualizations, a critical review was deemed necessary. The choice of a critical review method was utilised as it includes an extensive search of literature with a critical appraisal of

the quality of the literature (Carnwell & Daly, 2001; Grant & Booth, 2009). The steps as set out by Carnwell and Daly (2001) were followed: (a) define the aim of the review; (b) determine the scope of the review parameters (c) identify literature through predetermined inclusion and exclusion criteria; (d) review the data extracted and (e) compile a review report.

Inclusion criteria

Publications were included if they were articles or research reports about families in SSA and published between 2000 & 2018 and met search term criteria. The following search criteria were applied in subject terms or keywords to narrow the search: ('family' OR 'kin', OR 'kinship', 'OR 'household') AND (sub-Saharan Africa OR South Africa) in title or abstract; and ('family', OR 'kin', OR 'kinship', 'OR 'household') in subject terms. These keywords were selected after a preliminary search revealed that authors use these terms interchangeably to refer to family. Search terms were purposefully broad to capture all publications that included definitions or description of families within an SSA context.

Twelve databases were searched: EBSCOHost (Academic Search Premier, Africa-Wide Information, CAB Abstracts, CINAHL with Full Text, E-Journals, ERIC, Philosopher's Index, PsycARTICLES, PsycINFO, SocINDEX with Full Text); JSTOR, Scopus. These databases were chosen because they are prominent databases with journals that consistently publish articles on family-related studies. A total of 3314 articles were identified in the initial search process, and 1376 duplicates were removed. 1938 documents were screened, eliminating irrelevant articles by screening titles and abstracts. A total of 240 full documents were read to assess them for eligibility. After this process, an additional 55 articles were eliminated because they lacked a clear and detailed conceptualization of families in SSA. After the full review, 185 references were included in this critical review.

Data extraction

After the full-text review, 185 references [articles (167), reports (12), legislation (1) and policy documents (5)] were selected for inclusion in this study. Articles included in this narrative analysis cut across disciplines (anthropology, demography, economic studies, education, family studies, gerontology, health sciences, law, psychology, social work, sociology and social sciences) representing various SSA countries (Botswana, Ethiopia, Ghana, Kenya, Nigeria, South Africa, Uganda, Zambia, Zimbabwe). Articles were read and re-read and the definitions and descriptions of families were highlighted to extract data for the narrative synthesis. The conceptualizations of families were reviewed and organised thematically into categories with sub-themes facilitated by using ATLAS. ti (version 8) software (Frieze, Soratto, & Pires, 2018). Using this framework, the codebook created in ATLAS.ti were reviewed by an independent researcher to improve the trustworthiness of the findings. The data analysis involved an iterative process of first and second level coding and re-organising sub-themes of each broad category (Frieze, Soratto, & Pires, 2018; Tracy, 2013).

Findings

Results of the analysis show evidence of diverse family conceptualizations in two broad conceptual categories: structural-functional families and wishful families. The nature of the underlying assumptions that inform how families are conceptualized differs across these categories. Family conceptualizations, however, share some idealistic elements of family membership and how they position older people across all categories.

Structural-functional families.

Findings indicate a predominance of structural and functional family conceptualizations based on blood relations, legal connections and living arrangements (*cf.* DSD, 2013; Hall &

Mokomane, 2018, Verhoef, 2005). Within structural-functional families, family membership is based on ideologically normative ideas of how families should be organized, that is, as nuclear or as extended families) and the universal functions families should fulfil.

Diverse family structures

Families in sub-Saharan Africa are organised into different structures based on the marital status of families or the type of family children are raised in (Manning & Lamb, 2003; Strohschein, Roos, & Brownell, 2009). In this category, families are organised according to shared biology or lineage, marriage and living arrangements which include the shared residence of family members or having ties to a household (*cf.* Abebe, 2012; DSD, 2013; Russel, 2004; Sooryamoorthy & Makhoba, 2016). The most prominent structures identified in literature include the following: blended (Bonthuys, 2010; Davids et al., 2016), child-headed (Botha, 2016; DSD, 2011; 2013), extended (sometimes referred to as African) (Agesa, 2002; DSD, 2011, 2013, Makoni, 2008, Okon, 2012; Russell, 2002, 2003), household (Kriel et al., 2014; Russell, 2003; Statistics South Africa, 2011), joint (Amoateng & Richter, 2007; Amoateng, Richter, Makiwane, & Rama, 2004; Okon, 2012; Sooryamoorthy & Chetty, 2015), kin-category (Amoateng et al., 2004; Okon, 2012; Riley, 2013), LGBT (Bonthuys, 2010, De Vos, 2004; DSD, 2013; Lubbe, 2008; Singh, 2008), multi-generational (DSD, 2006; Madhavan, Mee & Collinson, 2014; Mtshali, 2015; Okon, 2012; Sooryamoorthy & Makhoba, 2016), non-biological family household (Department of Social Development, 2006), nuclear (also referred to as traditional or Western families) (Lemmer, 2007; Seekings, 2008), polygamous (Bigombe & Khadiagala, 2003; Hall et al., 2018; Sloth-Nielsen & van Heerden, 2014; Sooryamoorthy & Chetty, 2015), single adult (Chipkin & Ngqulunga, 2008; Dungumaro, 2008; Richter & Desmond, 2008), single parent (Holborn & Eddy, 2011; Reynolds, 2016; Wittenberg & Collinson, 2007), skip-generational (DSD, 2013; Richter & Desmond, 2008; Zimmer & Das, 2014).

Collective family structures such as African, polygamous, kinship, skip-generational and multi-generational structures, also allow for family members to be connected based on their needs and expectations, social contracts and cultural conventions (Abebe, 2012; Manderson & Block, 2016).

While a magnitude of family forms is recognised within literature, some family forms are still being seen as more natural than others. For example, nuclear families are still seen as representative of Western societies while family collective forms (African, extended, multi-generational) are seen as representative of families in sub-Saharan Africa (*cf.* DSD, 2013; Hall et al., 2018; Singh, 2008; Sooryamoorthy & Chetty, 2015).

Filial obligations and family membership

Obligations to care and support family members were strongly represented within these structural family conceptualizations. The majority of references identified one or more of the following filial obligations when conceptualizing families: care, childrearing, education, family formation, family roles and responsibilities, fostering, holistic development of members, membership, safety, shelter, share resources, socialization, and support (*cf.* Amoateng & Richter, 2007; DSD, 2011, 2013; Hall et al., 2018; Mtshali, 2016; Verhoef & Morelli, 2007). However, it is not always clear who is responsible to fulfil these functions. Some scholars see these functions as the responsibility of specific family members (mostly older people), while others delegate these functions based on the structure of families. See for example how the obligation to support is assigned.

Table

1

Filial obligation to support

Function	Who is responsible for the function?	References
Support	An assigned relative who meet criteria. May include biological aunts, older adults and uncles	Ansell & van Blerk, 2004; South African Children's Act, 2005; Heymann & Kidman, 2009; Okon, 2012; Nyamukapa & Gregson, 2004; Verhoef, 2005
	Kinship structures- blood relations, parents, siblings	Bennett et al., 2015; Clarke, Cotton & Marteleto, 2015; Lu, 2009; Madhavan, Mee & Collinson, 2014;
	Community – including non-biological related older adults with available resources	Ansell & van Blerk, 2004; Guillon & Mace, 2016; Hayley & Bradbury, 2015; Imoh, 2012; Manderson & Block, 2016; Songca, 2011
	Extended family members where older people are not explicitly mentioned	Abebe, 2012; Ansell & van Blerk, 2004; Boezaart, 2013; Ciganda, Gagnon, & Tenkorang, 2012; Freeman & Nkomo, 2006; Goldberg, 2013; Imoh, 2012; Madhavan, 2001; Madhavan, Mee & Collinson, 2014; Mathambo, & Gibbs, 2009; Mokomane, 2012; Monasch & Boerma, 2004; Van Blerk & Ansell, 2007; Verhoef, 2005
	Older people within extended families	Abebe, 2012; Children's Act, 2005; de la Porte, 2008; Freeman & Nkomo, 2006; Madhavan, 2001; Marteleto et al., 2016; Nkosi & Daniels, 2007; Nyasani, Sterberg & Smith, 2009; Oppong, 2006; Roy, 2008; Russel, 2003; Songca, 2011; Young & Ansell, 2003
	Multigenerational families	Apt, 2012; Bonthuys, 2010; Ferreira, 2000; Nkosi

Function	Who is responsible for the function?	References
	where reciprocal support between generational members are acknowledged	& Daniels, 2007; Schatz et al., 2015;
	Older people – predominantly grandmothers- related or non-related older people connected through social relationships or households	Abebe & Aase, 2007; Aboderin & Hoffman, 2015; Agesa, 2002; Apt, 2012; Brown, 2011; Brown, BeLue, & Airhihenbuwa, 2010; Chazan, 2008; Ciganda, Gagnon, & Tenkorang, 2012; Clarke, Cotton & Marteleto, 2015; De Vos, 2004; DSD, 2013; Edmonds, Mammen & Miller, 2005; Ferreira, 2006; Littrell et al., 2012; Madhavan, 2001; 2004; Madhavan & Brooks, 2015; Marteleto et al., 2016; Muga & Onyango-Ouma, 2009; Nkosi & Daniels, 2007; Nyamukapa & Gregson, 2004; Nwoye, 2006; Oppong, 2006; Tenkorang & Adjei, 2015; Reynolds, 2015; Verhoef, 2005; Whyte, Alber, & Geissler, 2004

As seen in the table above, family obligations revolve around older people- either through explicitly assigning filial roles and responsibilities within specific family forms or by assigning these functions to collective family structures where older people are implicitly included to fulfil certain roles. For example, there are expectations of support and implicit family obligations of older people who are part of communities, extended families or multigenerational families.

Across several studies, family obligations revolve around children, and a limited number of studies acknowledge the reciprocal nature of these obligations (Chazan, 2008; Nortey et al., 2017). Older people are however organised as main providers of support, to share

resources as well as take on family responsibilities towards younger generations (Amoateng & Richter, 2004; Brown, BeLue, & Airhihenbuwa, 2010; Chazan, 2008; De Vos, 2004; Golaz, Wandera, & Rutaremwa, 2017; Kimuna & Makiwane, 2007; Mazzucato et al, 2015; Nkosi & Daniels, 2007; van Dullenmen, 2006). These family obligations are sometimes exercised to the detriment of older people, that is, placing them under additional burdens embedded within these family structures (Apt, 2012; Littrell et al., 2012; Oppong, 2006). Some studies report that older people carry the burdens associated with caring work and suffer as a result of it (Kasedde, Doyle, Seeley & Ross, 2014; Kidman & Thurman, 2014; Oppong, 2006). Structural-functional families, therefore, organise themselves around older people who can help to address their needs. For example, older people within extended and multigenerational families are expected to raise and foster children (Kasedde et al., 2014; Nyasani, Sterberg & Smith, 2009). This raised some questions about the inclusion or per implication exclusion of older people who are unable to contribute or fulfil these obligations due to frailty or illness.

Wishful families

Among the 180 references, 47 references conceptualized families based on abstract ideal ideas of what families should be and what families should do. The smaller amount of studies here does not suggest however that wishful family are well represented or under-represented in literature. These studies voice the longing for the actualization of family obligations such as care and support within existing family structures. Wishful families are thus described in two broad categories: wishful ideas about family boundaries and wishful ideas of family obligations towards family members.

Wishful ideas about inclusion

Within this sub-category, families are described as being multi-layered, open and fluid systems, which are regulated by the sharing of resources and burdens and has its own relational processes and practices (Fakier & Cock, 2009; Lubbe, 2008; Ncho & Wright, 2013). The connections between members are open and fluid and mainly depend on abstract ideas about the inclusion of family members. Here, choice is a primary driver of family membership, and ‘families are whoever they say they are’ (Amoateng & Richter, 2007, p.14; Wright & Leahey, 2005, p. 60). Wishful families are therefore based on the freedom of association, the state of mind of family members, shared values and religious practices as well as their relational proximity (Freeman & Nkomo, 2006; Lubbe, 2008; Seekings, 2008; Singh, 2008; Roman et al., 2016; Ziehl, 2002). These wishful families carry the assumption that families include everyone and include the functions members should fulfil for example: *“families are (wishfully) regarded as the building blocks of communities and the source of individual development and identity among young and old members, men and women, providers and dependants”* (Amoateng & Richter, 2003, p. 244).

Wishful ideas about family obligations

Moreover, there is also evidence of idealistic ‘wishful’ standards about the fulfilment of family obligations. A number of family conceptualizations are based on an underlying assumption that families are autonomous, and their family roles and obligations are fulfilled reciprocally (Abebe, 2012; Bonthuys, 2010; Chirwa, 2002; Strydom, Wessels & Strydom, 2010). For example, some scholars see family as instruments of “sharing and caring - across generations” (Singh, 2008, p. 455). Some references also use archaic references to describe families as the “haven of primary fulfilment and meaningful experience’ (*cf. Zinn & Eitzen, 1990, p. 14* as cited in Okon, 2012). While other works acknowledge that families are not always willing or able to take care of its vulnerable members reciprocally (Aboderin &

Hoffman, 2015; Adeagbo, 2016; DSD, 2006; Smit, 2007), there is still this prevailing wishful belief that families will fulfil their universal obligation towards vulnerable members- if they were only strengthened (Bonthuys, 2010; DSD, 2011, 2013; Erlingsson & Brysiewicz, 2015; Hall et al., 2018; Hochfeld, 2007; Lemmer, 2009; Nkosi & Daniels, 2007; Richter, 2018; Sewpaul, 2006; Singh, 2008). Ziehl (2002; 2003) however cautioned the use of idealised family conceptualizations as a replacement of structural-functional conceptualizations. Despite this distinction, there is evidence that some structural-functional conceptualizations have underlying assumptions that inform these wishful ideas about the fulfilment of family obligations. Research on the views of child fostering reports that these types of wishful ideas about fulfilling family obligations are embedded within how participants (within this study) describe their families: 'When we share children, we build up the family' (Verhoef, 2005, p.375) These ideals create the expectation that families live and work harmoniously together, raise children and develop a network of close family ties with extended family members (Verhoef, 2005). Similarly, others present SSA extended families as vibrant, creative and resilient social resources that provide resources, give hope and love to members, and fulfil family obligations freely (de la Porte, 2008; Iwelunmor et al., 2008).

Discussion

The results of this review show a predominance to understanding older people's families from a structural-functional approach and wishful standards of what families should represent. First, a large number of family forms are acknowledged in literature, but some forms are seen as more natural than others. Nuclear family conceptualizations were used the most to frame studies in SSA, while extended families only explicitly include older people when they fulfil certain family functions (Hall et al., 2018; Hochfeld, 2007; Martaletto et al., 2016). Older people are mainly organised as part of collective family structures where they are expected to fulfil universal family functions such as sharing resources, taking care of

orphans and fostering children (Amoateng & Richter, 2004; Brown, BeLue, & Airhihenbuwa., 2010; De Vos, 2004; Mazzucato et al, 2015; Nkosi & Daniels, 2007). Kinship family structures are also used to support the general expectation that older people will (and want to) use their pensions to support their family members (Bertrand, Mullainathan, & Miller, 2003; Kimuna & Makiwane, 2007). The family structures that receive formal recognition, remain based on nuclear rather than contemporary structures where members are independent and self-sufficient adults who are active caring adults that care for their passive children (Bonthuys, 2010, p. 53; De Vos, 2004).

Legislation and policies lend itself to protecting vulnerable members. One big concern is that not all prominent legislation and policies that relate to older people include contemporary family conceptualizations. While older people do receive recognition and family membership within some family conceptualizations, these forms are not included in other policies and legislation that are relevant to older people (*cf.* Older Persons Act, 2006). The lack of formal recognition of these structures in legislation limits older persons' authority to be cared for or take care of their family members (Sloth-Nielsen, & Van Heerden, 2014). This points to a need to use structural-functional conceptualizations that are more context-sensitive and more inclusive- especially in work that concern older people. Moving forward, family scholars might benefit from using family conceptualizations that reflect the daily realities of the families of older people in SSA.

Second, older people are also structurally organised to fulfil family obligations, although the reciprocal nature of these obligations is not necessarily enforced or recognised. Neither approach (structural-functional or wishful) make provision for members with less bargaining power (Aboderin, 2004; Ansell & van Blerk, 2004). The family conceptualizations from a structural-functional approach are applied rigidly and sometimes fail to explain or reflect how some families might struggle to provide care and support to its vulnerable members

(Aboderin, 2004; Ansell & van Blerk, 2004; Brown, 2011; Keating, 2011; Keating & de Jong Gierveld, 2015; Mturi, 2012). These findings call for an exploration of the expectations families have of their older members. We should be looking at ways we could support older people within families to help them address their own needs.

Third, findings suggest that the underlining assumptions of wishful families are strongly represented within family policy and literary discourses. The following assumptions are the most prominent:

- Despite various family forms in SSA, families mainly organise themselves in nuclear and extended families
- Families have the necessary capacity and resources to fulfil obligations to all family members
- Everyone is included within family structures- even if they have limited resources
- Family members take care of each other despite limited resources.

The wishful ideas of family membership boundaries are enforced by ideological normative ideas that older people live in extended and multigenerational family units, that share resources equally and take care of all vulnerable members (DSD, 2011, 2013; Hall et al., 2018; Mtshali, 2016). The wishful standards of what families should do are supported by the universal functions of families that are in turn reiterated in how we conceptualize families. Thus, when family membership boundaries are fluid, the obligations family members should fulfil towards each other and towards society becomes fluid. The predominance of wishful families in SSA consequently suggests that we need to challenge the idealistically normative conceptualizations of families where family obligations are implicitly embedded.

Some challenges arise from these findings. Understanding the families of older people requires a more holistic approach to exploring family membership boundaries outside of only exploring structural-functional ideas about families. Participant-led conceptualizations of families within an SSA context are limited, and there is a call to include the research participants' voices in studies concerning families of older people. We have yet to map SSA families across all regional settings or the actual obligations (not perceived) they fulfil towards members. Previous studies mainly focused on how older people fulfil family obligations. Research on how older people support their younger family members cannot provide a comparative foundation for evaluating if and how family obligations are fulfilled in families of older people.

Conclusion

In sum, the findings of this review provide a foundation for further examination of how we see the families of older people in SSA. An exploration of the wishful beliefs that are embedded within how we conceptualize families is also needed. These findings can contribute to how we conceptualize families in SSA. The findings of this review reiterate the importance of using family conceptualizations that reflect the daily realities of older people. The use of dated and idealistically normative conceptualizations should be avoided and the use of contemporary definitions of families are encouraged.

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APPENDIX F

Declaration of Language Editing



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DECLARATION OF LANGUAGE EDITING

I, Juan Etienne Terblanche, hereby declare that I edited the PhD thesis
titled:

**Family and ageing in South Africa: An exploration of family and the
position of older people**

for S. E. Steyn for the purpose of submission as a postgraduate research
project. Changes were indicated in track changes and implementation was
left to the author.

Regards,

A handwritten signature in black ink, appearing to read 'J. E. Terblanche', is shown on a light blue background.

Prof. J. E. Terblanche

Cum Laude Language Practitioners (CC)