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CAREGIVERS' VIEWS ON PLAY AND PLAY AREAS AT MIKRO SCHOOL IN RUSTENBURG, NORTH WEST PROVINCE

by

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I dedicate this dissertation to my daughter, Blyde Kruger.

- Firstly, and most importantly, I thank my Heavenly Father, who gave me the ability and courage to complete this study.
- I thank my husband, Stefan Kruger, for always supporting me, helping me and for carrying me through tough times.
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ABSTRACT

CAREGIVERS' VIEWS ON PLAY AND PLAY AREAS AT MIKRO SCHOOL IN RUSTENBURG, NORTH WEST PROVINCE

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This study aims to clarify the perceptions that caregivers have regarding play and play areas. Play is beneficial for children. It develops a child physically, psychologically, emotionally and socially. The study was conducted within the Developmental Assets Theory and the Ecological Systems Theory of Bronfenbrenner. Bronfenbrenner's micro system includes children's caregivers. Play has a direct influence on this system since it can improve the relationship between the child and the caregiver. Play areas form part of Bronfenbrenner's meso-system. The caregiver's views of the safety and availability of play areas impact children's ability to play.

The exo-system, which is in line with the study, includes the caregiver's workplace and South-Africa's crime rate, which have an indirect influence on children's ability to play. The macro-system of Bronfenbrenner includes the caregiver's cultural context about play and how that culture is or is not passed on to their children. Caregivers form part of all four of Bronfenbrenner's systems, which has an impact on children's ability to play. Therefore, this study aims to answer the question: "What are the views of caregivers of children in Mikro School in Rustenburg, North West Province, of play and play areas?"

In trying to gain insight into caregivers' views of play and play areas, the researcher conducted a qualitative, applied study, using a collective case study design. A review of play and play areas forms the basis of the study. An in-depth interview was done with ten caregivers who had children between the ages of four to six years old.

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From the empirical study, it has been concluded that caregivers do play with their children and that safety issues are a huge concern for them. There are limited safe play areas for children and this needs to be brought under the attention of the local municipalities. The study sheds light on the challenges that caregivers face in South Africa regarding play with their children. The study ends off with recommendations to caregivers and the municipality by the participants regarding play and play areas. Finally, recommendations are made for future research.

The following key concepts are used in this study:

- Caregivers
- Play
- Play areas
- Early childhood
- Ecological Systems Theory
- Developmental Assets Theory

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CHAPTER ONE
INTRODUCTION TO THE STUDY

1.1 INTRODUCTION

This study explores and describes the views caregivers have of their role in terms of playing with their children, whether or not they view it as important, as well as their perceptions on the use of play areas. The focus of the introduction is on the benefits of play, especially during children's early childhood years, the social surroundings of play, different kinds of play, how modern times influence play and the key concepts relevant to the study.

Play can be defined as a child's job, it is what he does everyday, how he sees the world, it is part of who he is (de Witt, 2012:129). Children in their middle and early childhood years use play as a language to express themselves (Oaklander, 2007:160). There are many purposes of play for children, including helping them to develop mentally, socially, physically and psychologically (Davin, 2013:3, 6, 12, 20, 21). Play is an invaluable part of children's everyday lives and has a holistic influence on a child's development.

Children communicate through play and it allows them to externalise their internal feelings, thoughts and emotions (de Witt, 2012:132). Several authors agree that play provides adults with the opportunity to see the inner world of a child. It also gives a child the opportunity to symbolise experiences, use fantasy and use their senses (Schoeman & van der Merwe, 1996:65; de Witt, 2012:62). Children love to play and pretend to be creations of their imagination. Play helps a child to take risks and engage in new behaviours; it helps to improve a child's self-esteem and develops his or her communication skills (Weber & Haen, 2005:5). Children try out new things when they play, they engage with friends, build positive character and play gives children a sense of mastery (Blom, 2006:107). Children acquire all sorts of new skills by playing.

Piaget's theory of cognitive development places children between the ages of two to seven in the preoperational stage of development and children between the ages of

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seven to eleven in the concrete operational stage (Papalia, Wendkos Olds, Duskin Feldman, 2008:30). The focus of this study is on children between the ages of four to six, since children of this age group generally like to play. According to Piaget's theory, children in this stage develop their language skills, learn to solve problems and use fantasy (Sigelman & Rider, 2006:42). These are all vital aspects of play.

Children play in different ways, and in different places. The environment has a direct influence on a person's development (Shaffer & Kipp, 2010:62). Children can play in various areas including home, school, parks and recreational areas. The researcher uses "he" to refer to the child, but it includes both genders, namely he and she.

Play has different forms. Children can play at home or in a park outside. They can play alone or with friends. Caregivers play a pivotal role in the development of children and children grow and develop through play (Schoeman & van der Merwe, 1996:6-8). Caregivers have a direct influence on children (Papalia et al., 2008:30). It can be assumed that caregivers are essential in their role as playmates and their view on the importance of play for their children can influence the development of the children. Papalia et al. (2008:13) are of the opinion that modern times have impacted the amount of quality time caregivers have available to spend with their children, since caregivers have to spend much more time at work to receive an income.

This study explores the views of South African caregivers on play. It also explores perceptions of caregivers on play areas and whether caregivers utilise play areas for the purpose of play for children.

The following key concepts were used throughout the study:

- **Caregivers:** Family structures changed and are not typical nuclear families with a mother, a father and two children (Carter & McGoldrick, 2005:8). Today, families consist of single mothers, working parents, foster parents and child headed households to name just a few (Papalia et al., 2008:13). This is the reason why the term "caregivers" will be used throughout the study instead of "parents". According to the Children's Act, Act 38 of 2005 (as amended) a caregiver is any

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person other than the biological parent or guardian, who literally cares for a child and it includes a foster parent; a person who cares for a child with the implied or expressed consent of a parent or guardian of a child; a person who cares for a child whilst the child is in temporary safe care; the person at the head of a child and youth care centre where a child has been placed; the person at the head of a shelter; a child and youth care worker who cares for a child who is without appropriate family care in the community; and the child at the head of a child-headed household. In this study, caregivers include biological parents, grandparents, family, foster care parents, place of safety parents and or any of the terms named above.

- **Play:** In the context of this study, play is seen as the core activity that forms part of children's lives that can happen anywhere and at any time (Landreth, 2012:7). Play is an integral part of every child's life.

- **Play areas:** "Public open spaces, which include areas in the local neighbourhood such as local parks, playgrounds and sports ovals have traditionally been recognised as play spaces for children" (Veitch, Salmon & Ball, 2007:410). In the context of the study, the focus is on play areas surrounding Mikro School, in Rustenburg, North West Province. Although the study takes place in a school setting, it does not exclude other play areas such as play parks or restaurant play areas.

1.2 LITERATURE REVIEW

This literature review endorsed the main relationships between the existing knowledge on the topic of caregivers' views on play and play areas and the research problem being investigated (McMillan & Schumacher, 2010:73). The purpose of the literature review was to give a theoretical underpinning and to look at other studies on the topic (McMillan & Schumacher, 2010:466-467). A general view on the role and advantages of play was explored. Different forms of play, as well as the development of play, have briefly been explored. The literature review explored the role of caregivers in play with

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children and the challenges they might face. Lastly, various aspects of play areas have been discussed.

1.2.1 The advantages of play

As discussed in the introduction, play has many advantages for children. Play gives children the opportunity to be creative (for example play dough), practise their handiness (for example building something with Lego blocks) and it strengthens their minds (for example building a puzzle), bodies (for example running around playing "touches") and emotions (Ginsburg, 2007:183). Play impacts the child's whole being. Although West (1996:26) is a dated source, the author accurately and relevantly states that play can be seen as an emotional, physical, psychological, social and intellectual need that children have that should be met in order to enjoy life, develop their full potential and grow up as healthy adults. This implies that if children play, whilst growing up, it has a profound favourable impact on their adulthood.

Children want to have fun and enjoy life and are in the privileged position not to be burdened with adult problems. Play helps a child to prepare for adulthood by playing out games like "going to the grocery store" (Ginsburg, 2007:183). Play not only prepares children holistically for the multiple facets of life that they have to face during childhood, but also as an adult.

1.2.2 Development of play

After discussing the advantages and the role of play, the focus moves to the development of play. Different authors place children in different stages of development. Since this study focuses on children between the ages of four to six, only the stages that incorporate these ages will be discussed. Generally, children between these ages start to identify colours and shapes, play with play dough, and learn to balance or even start cycling, start to draw, paint pictures and build small puzzles (Davin, 2013:7). Children in this age group tend to play with different things in different ways.

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Piaget's preoperational stage is the stage where children are between the ages of two to seven years old (Sigelman & Rider, 2006:42). Play at this age should focus on developing children's language, solving problems through trial and error and should focus on one stimulus at a time (Sigelman & Rider, 2006:42). Since children in this stage can classify objects in different ways, play should focus on classifying objects according to their shape, colour, size and texture. Play can focus on placing objects in an ascending order, rather than a descending order. Children at this stage like to use their imagination, make use of mental images and use symbols. Since they start understanding rules, play can also incorporate rules. At this stage, children are egocentric and do not think that they are wrong, and they think their way is the only way of thinking (Henderson & Thompson, 2011:33). This is probably why children at young ages do not like to lose at a game.

1.2.3 The role of caregivers

Generally, caregivers are involved in all aspects of their children's lives. The question whether nature (what a child receives through genetic make-up) or nurture (the influence of the environment) has the most influence on a child's development has been solved in that both aspects influence a child's development (Levine & Munsch, 2011:8). Different cultures, religions and types of families in South Africa allow for many different views and perceptions regarding the upbringing of children (Levine & Munsch, 2011:13). Children are not only influenced by the genetics of their biological parents, but are also influenced by the different environmental factors in which they are raised in.

Moving abroad, research done by Fogle and Mendez (2006:508) with middle class Caucasian parents indicated that these parents were involved in the developmental activities with their children like book reading and they also realised the value of pretence play. These parents recognised the importance of play in their children's cognitive development and creativity (Fogle & Mendez, 2006:508). This study also highlighted the parents' involvement in their children's play activities. The mothers who believed that their participation is important in their child's play, and who realised the significance of play in their children's development tended to spend more time with

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their children (Fogle & Mendez, 2006:508). Some parents value academic results more than the fine motor skills that can be achieved through play. There should be a balance between playing and learning so that children can benefit from both activities. According to the above-mentioned study, caregivers who deem play as important will spend time with their children, which in turn, enhances their relationships.

Caregivers can influence the way that children play. Their role is to imitate, model and encourage children to play (Freeman & Kasari, 2013:148). Children learn how to play by trying to imitate a caregiver doing something that is just above their capacity (Freeman & Kasari, 2013:148). Children then struggle and practise doing what the caregiver has done until they accomplish it. Children need caregivers to be their security and to respond positively to their play; caregivers must be sensitive and their behaviour should be predictable (Howard & McInnes, 2013:49). According to Howard and McInnes (2013:50) when children play with their caregivers, a healthy relationship of respect develops between them.

Children engage in play more readily when caregivers keep their attention on multiple objects, follow their focus, engage responsively, and support them by interacting and by imitating (Freeman & Kasari, 2013:148). A child needs the support of a caregiver in order to encourage play and not to give up if something is too difficult for him. Children react negatively if caregivers are intrusive and ask too many questions. When too many instructions are given, it causes children to withdraw from activities (Howard & McInnes, 2013:51). From the aspects mentioned above it can be concluded that caregivers should allow children to accomplish things on their own and assist in a play activity only when the child asks for assistance.

Children's development is highly influenced by loving and steady relationships with caregivers, since the caregivers relate with the children through play (Ginsburg, 2007:183). This play relationship with the caregiver teaches the child to have enduring relationships and it shows them that the significant people in their lives care for and love them and pay attention to what they are doing (Ginsburg, 2007:183). Children learn a lot from the examples they see; if they have a healthy relationship with their

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caregivers in childhood, they are more likely to have healthy relationships once they are older.

A factor that influences how caregivers interact with their children is if the caregiver is single and cannot spend as much time with their children because of other responsibilities (van Wyk & Lemmer, 2009:17-18). They sometimes find it easier to place children in front of a television or computer and feel that it is enough to develop them (Ginsburg, 2007:183, 184, 185). There should be a balance of time for children between both scheduled activities run by adults and unscheduled play activities for free playtime (van Wyk & Lemmer, 2009:10). Children should be able to have fun, participate in after-school activities and have time for chores and homework.

1.2.4 Play areas

The last aspect of the literature review was play areas. The precautions that caregivers in South Africa have to take to ensure the safety of their children have increased over the last couple of years (de Witt, 2012:326). Safety is a big concern when it comes to play areas (Ginsburg, 2007:186). Caregivers want to know that their children are safe and protected while playing. A study done by Farley, Meriwether, Baker, Watkins, Johnson and Webber (2007:1625) to determine whether or not safe play areas have an influence on children's physical activity, found that if caregivers felt that their children are safe, they play more and there is increased physical activity, which reduces obesity and increases a healthy lifestyle.

Generally, South Africa seems to have a great need for safe play areas outside. A study by Veitch et al. (2007:413) about children's perceptions of the use of public open spaces and free play, indicated that the children liked being outside since it was fun; they could run around and be active as well as play with friends and family. They could play with balls, ride bikes and play on the equipment. The children also liked the natural elements of nature and liked not feeling stuck at home. Many children do not have access to natural play areas, because they live in informal settlements, which is characterised with overcrowding, crime and low socio-economic circumstances (de

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Witt, 2012:317). These last named environmental hazards can impact a child's ability to play outside negatively.

Play apparatus should be safe, in working condition (Davin, 2013:7). The opposite can also be true that if play apparatus are broken, outdated and thus unsafe, it could be a factor that prevents children from playing outside.

The literature review can be concluded by stating the following aspects. Play has many advantages for children. Children in early childhood play in certain ways according to their developmental level. There are different ways to play. Caregivers play a big role when it comes to a child's play. Children need safe play areas to play.

1.3 THEORETICAL FRAMEWORK

The theoretical frameworks that was used for this study is the Developmental Assets Theory and the Ecological Systems Theory. The Developmental Assets Theory focuses on the assets of every individual to enhance healthy development and promote good behaviour (Atkiss, Moyer, Desai & Roland, 2011:171). By using the Developmental Assets Theory as a looking glass, the focus is not on preventing problems that occur, and/or focusing on the negative, but rather on the positive assets (Vimont, 2012:506). Assets can include positive relationships, opportunities, skills, values and a good self-image (Scales, Benson, Roehlkepartain, Sesma & van Dulmen, 2006:691). The focus in this study will be on the assets of children, the family and the environment that can contribute towards the healthy development of every individual.

Bronfenbrenner's Ecological systems theory states that the environment, which influences a child's development (Bronfenbrenner, 1995, in Shaffer & Kipp, 2010:62), influences a person as a whole. There are four different systems: the micro-system, mesosystem, exo-system and the macro-system. The micro-system consists of the interactions that are closest to a person, for example a person's direct family. You influence your family and your family influences you (Sigelman & Rider, 2006:22). In line with the study, the caregivers represent the systems that had a direct influence on

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the child's play. The relationship between the children and their caregivers in the child's first years is important for mental health and can have a lasting effect on the child's later stages (Jernberg, 1979 in O'Connor, 2000:30). If a caregiver views play as important for a child's development, he/she will allow a child to play. If a child is holistically healthy in the micro system, there is no need for the other systems to intervene, for example, if a child has a healthy childhood with no abuse at home, there will be no need for play therapy.

A meso-system is the combination of two or more of the micro-systems (Sigelman & Rider, 2006:22). In line with the study, the play areas were the meso-systems, which include school, play parks and recreational areas. Exo-systems are those systems that influence a person although he/she is not in the system (Sigelman & Rider, 2006:22). In line with the study, the exo-system was the caregiver's workplace and or daily responsibilities that keeps him/her too busy or stressed to play with his/her children. The exo-system included the safety of the play area and the high crime rate in South Africa.

The macro-system is the larger cultural umbrella under which the micro-system, meso-system and exo-system falls (Sigelman & Rider, 2006:22). This culture includes what caregivers teach children and what their values are (Shaffer & Kipp, 2010:64-65). Caregivers are the main influence on the way children play.

The environment and the individual cannot be separated (Yontef, 1995:263 in Fall, Holden & Marquis, 2010:205). A child's environment includes his/her caregiver and play areas. The child's caregiver has a direct influence on a child's play. If a caregiver views play as unimportant, the child will view it the same way. If there are no play areas for children to play or the play areas are unsafe, it affects the fact that a child will not be able to play, which influences a child's development. Every individual is part of a community that affects him or her directly or indirectly. The lack of playgrounds or the availability of playgrounds can affect how children play.

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In the context of this study, the Developmental Assets Theory and the Ecological Systems Theory guided the researcher to view the child, caregivers and environment in a positive light within different systems.

1.4 RATIONALE AND PROBLEM STATEMENT

In most households, play is a daily activity for children. Children can play anywhere, whether it be at home, at school, with friends or at a play area. Caregivers may play with their children, or they may leave their children to play on their own. They may have views on how and where their children play. Some caregivers have obstacles in their way that prevents them from playing with their children. Caregivers can have certain preferences when it comes to their children's play. There are no research on caregivers' views on play and play areas in South Africa. Throughout this study, the researcher attempted to fill this research gap and make new and relevant information about South Africa available on these aspects, in order for it to be utilised by future researchers.

The research question for this study was formulated as follows:

- What are the views of caregivers of children in Mikro School (in Rustenburg, North West Province) of play and play areas?

The following sub-questions were added to the research question:

- What are the views of caregivers on the value of play for children?
- What are the views of caregivers on the availability, the nature and the utilisation of public play areas in the living environment?

1.5 GOAL AND OBJECTIVES

The goal of the study was to explore and describe the views of caregivers of children in Mikro School in Rustenburg, North West Province, of play and play areas.

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The objectives of the study were:

- To theoretically contextualise the role of play in the lives of children in early childhood.
- To explore and describe caregivers' views on play in the lives of their children.
- To explore and describe how and whether caregivers engage with their children in play.
- To explore and describe caregivers' views on the availability, nature and utilisation of play areas in the living environment.
- To raise awareness among caregivers and professionals on the value of play and access to play areas through the conclusions and recommendations of the study.

1.6 RESEARCH APPROACH

For this research study, the qualitative approach was used to answer the question of what the caregivers' views of play and play areas were, with the purpose of describing and understanding this phenomenon from the caregivers' point of view (Fouché & Delport, 2011:64). The research started with a general research question about what the perceptions of caregivers were about play and play areas, rather than a specific hypothesis (Fouché & Delport, 2011:64). The researcher wanted to obtain the knowledge of and answers from the participants (Niewenhuis, 2007a:50). The views of the caregivers provided rich, profound information (Rubin & Babbie, 2011:446). The researcher collected an extensive amount of verbal data from a small number of participants (in this case the ten caregivers), by doing interviews (Fouché & Delport, 2011:64). The research focused on understanding the participants' natural way of life (Niewenhuis, 2007a:51) and the researcher utilised an interview schedule in order to do this. After the verbal data had been collected, the data was organised in a meticulous way in order to provide consistency (Fouché & Delport, 2011:64). Verbal descriptions from the caregivers were used to portray the studied situation, in this case, the views of the caregivers on play and play areas (McMillan & Schumacher, 2010:322). The qualitative approach focused on obtaining rich valuable information.

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The research process was not set in stone: the specific focus, design, data-collection methods (in this case interviews), and interpretations developed or changed over time (Rubin & Babbie, 2011:447). It had a broader view and considered all the elements (Fouché & Delport, 2011:64). The study was more likely to end with possible answers, ideas, or conclusions about what was observed by the researcher (Fouché & Delport, 2011:64). Qualitative data had room to be flexible and the view of the researcher was a determining factor. The researcher chose respondents who fit the criteria the most in order to meet the purpose of the study (Strydom & Delport, 2011:392).

1.7 TYPE OF RESEARCH

The type of research applicable in the study was applied in nature, because the main aim of this study was to address a problem found in practice (Fouché & de Vos, 2011:95) which relates to the views of caregivers about play and play areas. There is a lack of knowledge on the views of caregivers on play in South Africa. It was necessary to explore whether or not caregivers deem play as important and whether they know the benefits that play can have for children. As discussed in Fouché and de Vos (2011:95), the researcher intended to investigate the problem as found in practice on a daily basis.

1.8 RESEARCH DESIGN

The relevant research design was the collective case study design. The researcher used a number of caregivers at a private school, namely Mikro School in Rustenburg for the study (McMillan & Schumacher, 2010:345). The principal of the school acted as a go-between between the researcher and the caregivers by informing the caregivers of the researcher's research study. The MSW (Play Therapy) students of the University of Pretoria conducted a group study where cases were chosen, in order to compare the cases and concepts with one another. The purpose of the study was to extend and validate the theories and findings across different provinces and settings (Mark, 1996 in Fouché & Schurink, 2011:322). By using collective case studies, the information that was acquired will be broader and give a larger variety of information

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(McMillan & Schumacher, 2010:345). The focus of the study was to get as much information on the topic of the views of caregivers on play and play areas.

1.9 RESEARCH METHODS

The researcher made use of non-probability sampling, or criterion sampling, since the researcher identified the criteria that the participants should meet in order to get the most relevant information (McMillan & Schumacher, 2010:136). The population consisted of ten caregivers from Mikro School in Rustenburg, North-West Province. The researcher used purposive sampling to acquire participants with the following characteristics (McMillan & Schumacher, 2010:138):

- Caregivers of children in early childhood at Mikro School in Rustenburg, North-West Province.
- Children between the ages of four to six, since this is an age group where play is very important for children.

The excluding criteria was that the participants had to have time to speak with the researcher. If they were in a hurry, the researcher could not do the interview with them. If the reposndents had children with them, the children couldn't be agitated or irritated to wait for their caregiver. The researcher needed respondents who could give the interview their complete attention and interest in order to obtain rich information.

A semi-structured interview with an interview schedule was used since the researcher did a one-on-one interview with caregivers in Rustenburg. The MSW Play Therapy students of the University of Pretoria and their study supervisors developed the interview schedule. All ten students utilised the same interview schedule. An audio recording of the interviews, which participants permitted, was made in order to be able to transcribe the content for data-analysis purposes.

Data was analysed by identifying themes from the participants' answers (Niewenhuis, 2007c:99). The purpose of the data-analysis was to summarise the data that was obtained by using the participants' words. During the analysis of the data, trustworthiness was a key aspect. With reflexivity, the researcher made sure not to be

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biased and not to generalise the findings (Niewenhuis, 2007c:115). Prejudice was avoided. The researcher used two participants for the pilot study.

1.10 CHAPTER OUTLINE

To provide a brief overview of the research report, the researcher highlights the content of each chapter:

- Chapter 1 consists of a comprehensive introduction indicating the researcher's aims, objectives and methodology for the intended research study. It includes pertinent aspects relating to the research process.
- Chapter 2 comprises of the literature review of the study, namely caregivers' view of play and play areas. This includes an in-depth discussion of play, caregivers and play areas.
- In Chapter 3, the researcher focuses on data collection and analysis. The researcher carried out the research process by conducting semi-structured interviews with ten caregivers of children in their early-childhood in Rustenburg, North-West to explore and understand the phenomena. The data was analysed using the data analysis steps of Niewenhuis (2007c) in order to identify and explore key themes prevalent in the findings from the data.
- Chapter 4 comprises of the conclusions and recommendations of the research study. This chapter indicates the findings from the study highlighting key themes as identified by the researcher. Furthermore, it establishes and highlights the limitations of the study and makes recommendations for further research studies.

1.11 LIMITATIONS OF STUDY

There are natural limitations when conducting research. The following limitations formed part of the study:

1.11.1 Generalising research results

The ten participants in this study are hardly representative of the large population of caregivers of children between the ages of four to six years old. However, the

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participants added profound insight into and value to the better understanding of the research topic, which formed part of the foundation for further research.

1.11.2 The profile of the participants

The participants formed part of a small community in Rustenburg, North West Province. They were mostly from lower socio-economic circumstances. All the participants were white, and spoke Afrikaans. The more affluent members of the population and other races were thus excluded from this study.

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CHAPTER TWO
CAREGIVERS' VIEWS OF PLAY AND PLAY AREAS IN RUSTENBURG, NORTH WEST PROVINCE

2.1 INTRODUCTION

The relationship between a child and caregiver is pivotal for the development of a child's emotional, physical and social well-being (de Witt, 2012:240). Play is a tool that children use to express themselves non-verbally (de Witt, 2012:129). Play is an important part of a child's childhood. It teaches them skills such as problem solving and social skills (Davin, 2013:20, 21). In this study, caregiver's views on play and the impact it has on children's play, will be explored. Do they deem it as an important part of a child's life and do they think they need to be a part of a child's play routine?

Children can play almost anywhere in different ways. Children play in different ways at different ages. Playing in outdoor spaces is generally advantageous for children, including for instance fresh air and physical activity. According to Davin (2013:7) it is important that play areas are available and safe for children to play.

Caregivers' views of play areas influence children's ability to play there or not. Children's ability to play is influenced by their age, gender, their socio-economic status and the area they live in (Veitch et al., 2007:410). There are many challenges for children to play which are influenced by Bronfrenbrenner's micro, meso and macro systems. Children's micro system, which includes their caregivers, influences children's play through their belief system. Caregivers' views of play and whether or not children need to play, greatly influences children's ability to play. The meso system, which includes a child's culture, influences a child's play. If a child's culture determines that their education is more important than play, the child will be less prone to play. The macro system is the community's safety and crime influences. If a play area is deemed too dangerous to play in, a child's opportunity to play there is greatly reduced.

The literature review will further explore the above mentioned.

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2.2 CONCEPTS RELEVANT TO THE RESEARCH STUDY

The following concepts are relevant to this study: Caregivers, play and play areas. These concepts were described and can be referred to in the introduction of chapter one and will be discussed in more detail in the section to follow.

2.2.1 Caregivers

In the context of this study and as explained in chapter one, the term caregiver will be used to include every type of person looking after a child, including mothers, fathers, grandparents, older siblings and/or family and foster or adoptive parents. Children need their caregivers to be there for them, love them, care for them, understand them, understand what they are feeling and react to their feelings in the right way (Howard & McInnes, 2013:49). Children need someone who will be there for them no matter what. They need to know that they can depend on their caregiver to guide them through life.

Being a caregiver to a child is not an easy task and caregivers often find it difficult to bring up children through their different stages (van Wyk & Lemmer, 2009:34). Every child is different and needs to be raised and cared for differently. The responsibility of caregiving is huge and caregivers are supposed to do everything they can to bring up healthy, well-adjusted children into this world.

The Children's Act (38/2005) delegates certain tasks to caregivers. A caregiver's primary task is to "care" for a child. In summary and shortly translated, the Children's Act (38/2005) defines "care" as:

- Giving a child a proper place to live in.
- Giving a child the necessary financial means.
- Every aspect of a child should be kept safe and be encouraging.
- The child should be protected in every way possible, against any type of abuse, neglect and or exploitation.

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- The child's rights, according to chapter two in the Bill of Rights should be endorsed.
- The caregiver should guide a child in his/her education, culture and religion according to the child's level of understanding and developmental level.
- Guiding the child in his decision making abilities, and behaviours.
- "Maintaining a sound relationship with the child."
- A child's special needs should be taken into consideration and respected.
- Making sure that the best interest of the child always comes first.

The objects of care are encompassed in all of Bronfenbrenner's systems. In order for a caregiver to look after a child's basic needs, like providing a home and food (micro system) for the child, the caregiver needs to work (meso system) in order to provide finances. The child's education, religion and culture form part of the child's macro system.

Chapter two of the Bill of Rights constitutes the rights of children. In short and roughly translated the following aspects are important:

- A child has the right to a caregiver's care.
- A child has the right not to be abused, neglected and or hurt in any way.
- A child has the right to basic food sources, house, medical and social services.
- A child has the right to be unemployed. A child can work, but it may not interfere with the child's well-being, school going abilities, or harm him/her physically, mentally spiritually or developmentally.
- A child may not be held captive.

From the above section of the Children's Act (38/2005), it is clear that a caregiver should not only take care of a child, but should also protect a child's right to be a child. It is interesting to know that a child has the right to a relationship with a caregiver. It was deemed so important for a child to have a relationship with a caregiver that it is a right of a child. Caregivers should respect this right of a child and respect what the Children's Act (38/2005) says in order to care for a child.

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The Children's Act (38/2005) states that a caregiver should look after a child in any possible way, to enhance a child to just be a child. Caregivers need to understand that children do not only have to play, they *need* to play (Lester & Russell, 2010:2). It is a part of who they are; it is part of their development as healthy functioning children. If caregivers do not realise this fundamental need that a child has, they fail to meet the child's needs and they don't fulfil the child's rights.

The role of caregivers in the play of children

Caregivers are important for children, since they are the ones who set rules and are children's role models (van Wyk & Lemmer, 2009:39). Most children see their primary caregiver every day. They are one of the only constant factors in a child's life. It is natural to assume that if a child spends every day with a caregiver, that the child will look at the caregiver's ways and behaviours and copy or resemble them. Caregivers should teach children responsibilities, consequences for their actions, discipline them in a positive manner, build children's self-esteem, encourage them and help them to set achievable goals (van Wyk & Lemmer, 2009:40-41). It is up to the caregiver whether or not he/she is going to portray a positive or negative image for a child to look up to.

The involvement of a caregiver in a child's life is crucial (Howard & McInnes, 2013:49). In Erikson's (1950) first stage of psychosocial development namely, basic trust versus mistrust, children already learn to rely and depend on people and objects during their infant years (Papalia, Wendkos Olds, Duskin Feldman, 2008:224). The trust aspect of his theory states that a child learns to form intimate relationships and the mistrust aspect of Erikson's theory states that children learn to protect themselves (Papalia et al., 2008:224). There should be a balance between the two aspects, so that children can believe that their needs will be met and that children will also not have trouble to form relationships (Papalia et al., 2008:11). The relationship between a constant caregiver and a child is so important that if the child does not form a bond during the first 18 months of his life, it could negatively influence the way he builds relationships for the rest of his life.

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Children who have a positive relationship with both their mother and father tend to be more popular with other children (Papalia et al., 2008:325). The opposite can be true for children with strict, harsh, neglectful or depressed parents. These children are often shy and reserved and rejected by peers (Coplan et al., 2004 and Rubin et al., in Papalia et al., 2008:325). This is a clear indication of how Bronfenbrenner's different systems influence one another. The child's micro system, namely his family, has a direct impact on his meso systems, namely his friends and whether or not they get along and or play together.

The study of Fogle and Mendez (2006:507-518) correspond with this by finding a clear correlation between caregivers' belief about play and children's ability to interact with peers and teachers. If the mother believed play to be important in a child's life, the child had better interactions with peers and teachers. This shows the positive impact that play has in a child's' life.

Children with neglectful parents often struggle with behavioural problems (Baumrind, 1991; Parke & Buriel, 1998; Thompson, 1998 in Papalia et al., 2008:317). A caregiver can influence a child's development negatively by not being present or by not fulfilling the duty of love and care. This can cause children to act out or rebel with behaviours such as drinking, doing drugs and promiscuous activities. This will influence the relationship between a caregiver and child negatively.

Routine and structured activities should be an important factor for caregivers to consider when raising children. There should be a time for education, sport, family time and leisure time which should include playing (van Wyk & Lemmer, 2009:39). Pellegrini (2009) in Howard and McInnes (2013:50), state that in order for children to have good relationships they need caregivers who play with them. If a child has a perceptive, open and dependable caregiver in his life, the child will learn how to trust (Papalia et al., 2008:224). The trust that a child learns in infancy has lasting effects on the way he handles his relationships during adulthood (Papalia et al., 2008:228). It is clear that caregivers have a huge responsibility towards their children to help them become successful adults.

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Families can be enriched by playing board games, doing puzzles or playing games while driving together in the car (van Wyk & Lemmer, 2009:85). Caregivers need to lower themselves to a child's level and come up with interesting and creative ways to play and interact together. Children learn good characteristics when they engage with supportive parents; these characteristics include caring for others and being truthful to others (Milteer & Ginburg, 2012:208). These characteristics can be enhanced during play activities between caregiver and child.

From the above section, it can be concluded that caregivers should be positive role models; a child's relationship with his caregiver affects all his future relationships; neglectful caregivers can cause children to have behavioural problems and caregivers should play with their children.

Challenges in allowing play

There are many obstacles caregivers face when it comes to playing with their children. The social-ecological model proposes that individuals can be influenced by the behaviour of other individuals and or the environment (Veitch et al., 2007:410). Caregivers can thus influence children's play behaviour with their views and perceptions about play. Caregivers' perceptions of play, culture and socio-economic factors will be discussed in the following segment.

Perceptions

Caregivers' perceptions of play can directly or indirectly influence children's ability to play. According to Lin and Yawkey (2014:108), "Parents' perceptions of play affect their behaviours in establishing children's learning environment and quality of play in the home setting." Parents' positive perception of play influences children's ability to make friends, it lets parents become involved in play, provide the toys to play and they aid in the play process (Lin & Yawkey, 2014:108). Different caregivers can have different perceptions of play.

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Social competence can be linked to a caregiver's perception of play. If caregivers deem play as amusement, entertainment and a way to express curiosity, their children will be less socially competent than children of caregivers whose beliefs are that play contributes to a child's learning and development (Lin & Yawkey, 2014:111). Social competency and or the ability to communicate are needed for children to play. Some caregivers think of play as less important, some do not like to think about it, others might think there are more important things in life, some think play might hurt a child, and some might see it as a way to learn new things or communicate (Lester & Russell, 2010:ix). Caregivers' perceptions can directly influence children's ability to play or not.

Fogle and Mendez (2006:507-518) found that the target group of African American mothers deemed reading as more important than play. Interestingly if the mothers thought pretend play was an important factor in a child's life, they would spend more time with their children. According to Fogle and Mendex's study, many caregivers focus more on academic and cognitive development.

Glenn and Knight (2012:3) found that caregivers had the following reasons for not allowing their children to play: Children had to fall in with the caregivers' plans, children had to come and eat, children were being punished for bad behaviour or they had to do schoolwork or housework. It is possible that caregivers' lives and their rules are deemed more important than a child's play.

Adults are in a fixed world with rules and structures, therefore they sometimes forget what it is like to make use of or live in a world of fantasy (Lester & Russell, 2010:7). Children automatically and instinctively make use of fantasy during play (Davin, 2013:20). Children's worlds are the exact opposite of those of caregivers. Adults' worlds are governed by organised activities and predetermined plans (Lester & Russell, 2010:7). Children like to live in the moment and be spontaneous, thus, they want to play (de Witt, 2012:129). This huge age gap between children and adults can make it difficult for adults to place themselves in children's shoes. The adult way of thinking can greatly influence caregiver's perception of play and its importance.

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Parents' responsiveness to their children can become another barrier to children's play. According to Landry, Smith, Swank, Zucker, Crawford and Solari (2012:969) responsive parenting is when a caregiver gives a child love and warmth on a constant level for a long time, accept that a child is like no other, talking and communicating with a child, and knowing what a child likes and dislikes. An example would be if a child feels down, a caregiver picks up on the child's feelings and takes action like talking to the child to make the child feel better. If a caregiver is responsive to a child, it influences a child in every aspect of their being (Landry et al., 2012:969). A pivotal aspect of play includes that a caregiver should respond to a child.

Culture

Culture can be interpreted in different ways. Sigelman and Rider (2006:42) state that…

> "The shared understandings and ways of life that we call culture include beliefs and practices concerning the nature of humans in different phases of the life span, what children need to be taught to function in society, and how people should lead their lives as adults."

Caregivers carry culture over from one generation to the next (Henderson & Thomas 2011:43), therefore they should develop a culture where their children can look up to them and respect them to become healthy adults. They can also create a culture of play with their children. If play is deemed an important factor by the caregiver of a child, it can be carried over from generation to generation, becoming part of who children are as adults. This can become possible if play is given the necessary time, skills and energy.

Lefley (2002), as quoted by Thompson and Henderson (2011:42) states that culture is "a set of shared beliefs, values, behavioural norms, and practices that characterise a particular group of people who share common identity and the symbolic meanings of a common language." Culture is a factor that influences every aspect of people's lives including where they are employed, how they bring up their children, how their children play, and the types of games they play (Papalia et al., 2008:15). This means that there is a direct link between culture and the way in which a child is seen, which might in turn mean that there is a direct link between culture and how play, as part of a child's development, is viewed.

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Although West (1996) is a dated source, he states it perfectly and in a way that can still be accepted today that play can be influenced by traditions, values, the child's age, gender and socio-economic status (West, 1996:25). Research results from a study by Farver and Howes (1993), as discussed in Fogle and Mendez (2006:508) state that children in different cultures play differently: Some cultures, like Caucasian mothers, felt play is important whilst Mexican mothers felt it is only an amusement for children. Different cultures have different views on the importance of play.

Socio-economic status

Not only has the nature of families changed worldwide but also in South Africa. Factors leading to difficulties in family functioning in South Africa include: black families living in disadvantaged circumstances because of previous policies of separation, HIV/AIDS, low educational standards, lack of basic resources, high crime and unemployment (van Wyk & Lemmer, 2009:34). The list continues to separation of parents, teenage pregnancies, and substance abuse (van Wyk & Lemmer, 2009:34). According to de Witt (2012:317) all of the above mentioned factors have a direct negative influence on family structures in South Africa.

Children have had to learn to deal with adult problems (de Witt, 2012:314). They are faced with caregivers who are stressed because of unemployment, adults affected by HIV/AIDS and parents dying of the AIDS epidemic (Holborn & Eddy, 2011:1). It was found that 5 700 000 children lost either one or both their mother and father to AIDS (Holborn & Eddy, 2011:1). Further problems are that children have had to deal with issues like not being able to go to school, mostly because of financial problems, dealing with depression because they are faced with their parents who passed away, as well as being hungry and poor (Holborn & Eddy, 2011:1). Children, who grow up being poor, have their childhood stolen from them which affects their socio-emotional development negatively (Milteer & Ginburg, 2012:204). All of these problems that children have to face prevent them from just being care-free children who can play.

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One primary area that the above mentioned factors influence is family structures. Children are brought up by grandparents, single parents and child-headed households as the families are influenced by HIV/AIDS, crime and substance abuse (van Wyk & Lemmer, 2009:35, 157). Families face many more obstacles to stand together and to play together. Families often focus more on what needs to be done in order for the household to survive financially. With all the factors mentioned above, it is more challenging to be a family who plays together when faced with challenges such as HIV and AIDS and poverty.

Poverty influences the family's home conditions, diet, their access to proper medical services, educational opportunities and chances to succeed (Papalia et al., 2008:13). It can impact the whole family holistically in a negative way. Parents suffer from stress which is caused by low income and directly impacts family life (Papalia et al., 2008:13). The South African family consists mostly of single mothers and or caregivers who do not work (Holborn & Eddy, 2011:1). This automatically means that caregivers have less time to spend with their children. Children have the time of only one parent, instead of two and/or the single parent is stressed, looking for work or too busy working. This has a direct impact on the amount of time and or quality time that a parent spends with a child playing.

Parents in well-off families tend to spend a lot of time working, which also influences the amount of time they spend with their children (Papalia et al., 2008:14). Caregivers spend a lot more time at work in order to provide for the family's physical needs. Emotional needs like bonding with a child over play time is often neglected (de Witt, 2012:317). Parents or caregivers come home tired or after dark when a child is already asleep. Milteer and Ginburg (2012:205) state that well-off children may have opportunities in school to "play", with activities such as arts, music and physical education classes, but the time spent on extracurricular activities might impose on the time caregivers could have spent with their children playing.

A study by Ginsburg (2014:1) indicated the factors that prevent caregivers from spending time with their children. These factors included a busy lifestyle, any change in a family dynamic, and parents who focus too much on academics. Caregivers often

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place a strong focus on academics, since a good education leads to security in the workplace in order to be able to look after the family's needs. In this case, caregivers may see play as a waste of time and as not being serious about one's future.

People have certain basic needs that can be influenced by their socio-economic status. Maslow's (Thompson & Henderson, 2011:28) hierarchy of needs consists of the following elements/levels: Level one is a person's physiological needs which consists of food, shelter, water and warmth. The second level is safety needs, which includes personal and psychological needs. The third level is a person's need to feel loved and to belong; this includes feeling accepted as part of a group.

The fourth level is the need for self-esteem, which includes feeling good about yourself and the final and fifth level is the need for self-actualisation, which includes the need to fulfil one's potential (Thompson & Henderson, 2011:28). An example of how a person's socio-economic status can impact the fulfilment of their needs, is when a main breadwinner loses a job, it impacts their ability to provide the basic needs like food, shelter and water, but it also impacts the breadwinner's self-esteem negatively. This can cause stress, or divided attention, that means there is less attention or time to play with their children.

Play assists in making children feel (level two of Maslow's hierarchy) safe enough to explore feelings and thoughts and to play them out (Blom, 2006:53). It enhances a child's self-esteem (level four of Maslow's hierarchy), by building the child's sense of self (Blom, 2006:52). It can also help a child reach their full potential by developing them socially, emotionally, cognitively, physically and psychologically (level two and five of Maslow's hierarchy) (Blom, 2006:54). Furthermore, a child's need to feel safe and loved and to belong to a group (level three of Maslow's hierarchy), can be fulfilled by a loving relationship with his/her caregiver.

From the above it can be concluded that Maslow's hierarchy of needs encompasses all of children's rights. When a child plays, he fulfils his needs to be a child and his rights to be a child. Unfortunately, factors like poverty, HIV/AIDS, crime and unemployment take away from a child's right and needs to play, and to be able to play

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with their caregiver. From the discussion above, it is clear that socio-economic circumstances challenge children's ability to play.

2.2.2 Play

There are many functions and advantages of play for a child. Play happens in many ways. Play influences a child's development. These factors will be discussed in the next section.

Role and advantages of play

According to Milteer and Ginburg (2012:204), play has holistic advantages in that it affects children's:

- social capabilities, by allowing a child to practice communicating with friends and family;
- emotional capability, by playing out feelings like frustration and anger;
- cognitive capabilities by allowing them to struggle with a toy or obstacle and they have to figure out how to overcome the problem;
- physical capabilities when they run, jump and roll

It is essential for caregivers to realise the advantages that play has to enhance and build a relationship with their children (Milteer & Ginburg, 2012:204). By playing together and spending time together, a caregiver learns to know their children, how they think, who they are, what they feel and what they like and dislike.

Children cannot function the way that adults do (Landreth, 2012:7). They need other ways to communicate what they are feeling and thinking than expressing it verbally (Oaklander, 2007:11) and that is why they use play. Children like to play and they know how to play; it comes naturally to them to be able to express themselves through play. Play allows us to see a child's world from their perspective and helps us to unlock their secrets (Oaklander, 2007:11). Children often play out their inner most thoughts and desires.

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Most adults' lives consist of working, earning an income, paying bills and pursuing success. They often expect children to be as goal directed as they are and think that playing is a waste of time (Landreth, 2012:7). Adults sometimes forget that children need to be children who play. However, play can never be a waste of time, as it teaches children to be who they want to be, it teaches them about themselves and life in general (Landreth, 2012:9). It prepares them for what is ahead and helps them deal with all their different emotions (Landreth, 2012:9). Play is the only way that children have to communicate their feelings.

Play helps children to develop their thinking skills and to be innovative (de Witt, 2012:131). In the study of Fogle and Mendez (2006:508), they found that parents believe that play contributes to children's cognitive and creative development. Play contributes to a child's need to develop and reach their full potential.

Play has added advantages in that it helps children discover and explore their senses; strengthen their sense of self; come into contact with their bodies, minds and intellect (Oaklander, 2007:60). The play therapy process uses different play techniques to develop the above mentioned factors. For example, a child's senses can be enhanced by playing with clay (de Witt, 2012:133). Play can teach a child different life skills including sharing, negotiating, resolving conflicts, feeling free to say what you want and being a leader (Milteer & Ginburg, 2012:205). It does not focus on teaching a child these skills; it happens automatically as a child engages in play.

Play has the advantage of being flexible, it allows a child to choose the outcomes of the games, rules can be changed and made to fit them (Blom, 2006:81). It teaches them different responses to different scenarios; there is no consequences for their actions when it is just a game, they have all the power and life is just a game (Lester & Russell, 2005:x). Children who grow up in houses where there is abuse or neglect often struggle with control. They lose the ability to decide for themselves. According to Blom (2006:81), play helps children gain back the control in their lives.

A study done by Landry et al. (2012:984) found that mothers who spend time with their children reading, which is also a form of play, and who are responsive to their children,

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enhance a child's development. Thus, one of the many advantages of play is that it enhances a child's development. Lin and Yawkey (2014:107) did a similar study where they found that play enhances a child's social competence. Play helps children to make friends, to negotiate, communicate and learn how to behave in a group setting (Lin & Yawkey, 2014:107). Play does not only affect one area in a child's life, but also impacts his/her total being.

Forms of play

Play can occur in various forms. Play can happen at any time and at any place. It can be organised, or it can just happen spontaneously. Play can happen during chores, whilst working, at school during education or at home (Lester & Russell, 2010:2). Children can play freely where their creative juices flow, which is called unstructured play, or they can play together with an adult where the adult's attention is on the child and the adult is in control of the play; this is called semi-structured play (Milteer & Ginburg, 2012:205). During semi-structured play it is important that the caregiver is responsive and attentive as discussed earlier in this chapter.

Children like to play in different ways, including playing outside, moving around a lot, video games and playing with friends (Glenn & Knight, 2012:2). The new era of technology has changed the ways in which children are able to play.

Boys play differently to girls. A study done by Holmes and Procaccino (2009:1103) with 40 three and four-year-old boys and girls concluded that girls like to play with safer toys such as a sandbox, while boys liked to play on swings and jungle gyms. Girls tend to play safer games like jump rope, while boys tend to play games like wrestling, jumping, running and kicking (Papalia et al., 2008:308, 337). Boys generally like to play rougher more daring games than girls.

Play can take place many different forms including dreams, fantasy play, play with words, puzzles and thinking games (Wood, 2013:17). In the modern era we are faced with a generation of technology wizards. Children play games on computers, Xbox and PlayStation. These games are usually played without peers and adult supervision

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is not always necessary (Milteer & Ginburg, 2012:207). Children in settlements may not have elaborate equipment to play with and may use anything they can find to play with, including rocks and bottles (Lester & Russell, 2010:11). Children in underprivileged areas have to find creative ways in order to play.

Other forms of play include the use of fantasy play. Children often emerge themselves in their own fantasy worlds to escape from their own lives which may be filled with sorrows (Oaklander, 2007:11). Children play with clay, and they draw pictures (Oaklander, 2007:12). Children play by writing stories, writing poems and playing with puppets (Oaklander, 2007:12). Children can use almost anything to play with. During fantasy they can even exchange a false object to make up for the real thing, example using a stick as a person.

Holt, Lee, Millar and Spence (2013:1), state that play is an active game where children make up their own rules; children can play together or alone and it includes rough play, exercise and games that are risky. Play that involves being active include running, climbing, chasing, bike riding, playing outdoors and in nature (Holt et al., 2013:1). Children can use different equipment to play or make use of what they find in nature.

Play in a play therapy context

In the play therapy context, play develops in different stages. Blom (2006:237-238) sets out six stages of play therapy during the Gestalt therapy process. The first stage is building a therapeutic relationship with the child client, assessment and treatment planning. The child and therapist are on the same level; the therapist does not evaluate or diagnose and should not make quick judgements (Oaklander, 2007:165). The therapist should focus on what the child is experiencing in the here and now (Blom, 2006:237). The second stage includes contact-making and promoting self-support. The gestalt therapist assesses whether the child is in contact or not. It is assessed whether a child makes contact during play and if he fully gives himself over to the play process. The third stage includes emotional expression.

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Stage four includes self-nurturing. “Self-nurturing is done by contact-making of unacceptable parts of the self” (Blom, 2006:138). Stage five includes the handling of the persistent inappropriate process. The last stage is the termination stage. By looking at the child’s process the therapist determines when the child is ready to end the therapeutic process (Blom, 2006:138). Therapists use play to build a relationship with a child to be on the same level as a child. They use play as a non-intrusive medium to explore a child’s world from their point of view. If play is such an invaluable part of the therapeutic relationship, it can be assumed that caregivers can use these techniques to build and sustain a relationship with their children.

Earlier in the chapter there is a discussion about children’s rights. Children’s rights are impeded when they are abused, neglected, exploited and harmed. According to Lester and Russell (2010:4), play therapy assists in helping children deal with the consequences of abuse.

Development of play

The development of play should take a child’s physical, cognitive and psychosocial development into account. As discussed in chapter one the study will focus on children in their early childhood who are between the ages of four to six, since this is generally the age when children like to play.

In order to understand children’s play development, it is necessary to know their typical major developments during their childhood. This discussion will start with the typical major developments of children in early childhood between four to six years. Physically, children between the ages of four to six are able to use their hands in a practical manner and they start to throw or kick a ball and they also pick up small blocks (Papalia et al., 2008:11). Children start playing with different objects according to their developmental level.

Cognitively, children between the ages of four to six start using their memory more and they are able to communicate more effectively (Papalia et al., 2008:11). This means that children can play games which require them to use their memory and

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language skill. Play is developed at this age at kindergarten with games like balancing beams, scooters, climbing, jump rope, puzzles, reading, ball kicking, throwing a ball and many more.

In kindergarten, children start socialising with friends and they start noticing differences between themselves and their friends, especially the difference between girls and boys (Papalia et al., 2008:11). Play can focus on developing their emotional awareness since they start to understand the different emotions like fear and aggression more clearly (Papalia et al., 2008:11). Blom (2006:125) explains a game where there are faces with different emotions on and a child can identify different emotions by mimicking the faces.

During the pre-operational years (two to seven years old) according to Piaget's theory, children learn to recognise symbols (Sigelman & Rider, 2006:42). This helps children to develop the ability to do pretend play where a child would for instance use a toy dog to represent a real dog (Papalia et al., 2008:269). If children can pretend that they are someone else, it teaches them empathy, since they feel how it feels to be in another person's shoes (Papalia et al., 2008:269). Play can help a child to learn social cues; it does not just have to be rough and tough games.

Erikson puts three to six year olds in the initiative versus guilt stage. It is during these years that a child develops by trying out new things and does not feel guilty (Sigelman & Rider, 2006:32). Children will often take another child's toy without thinking or feeling guilty, because they want to play with it.

2.2.3 Play areas

When looking at play areas there are three main points to discuss: Safety issues, different types of play areas and factors that influence children's ability to play. In order for children to play in play areas, there is a need for adults to understand how and why children play. There is also a need for adults/developers/parents to place themselves in the shoes of children and their caregivers in order to understand how a play area should be developed. This includes the development of a natural environment, when

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building streets and combatting crime (Lester & Russell, 2010:2). Adult professionals in the different spheres of life are the ones who are responsible to make sure children's inherent ability to play is respected and provided for.

Safety issues

Children's safety should always be the number one priority. Children in lower-income households face more dangers in play areas. These dangers include illegal substances, violent people and people who are out to destroy property (Milteer & Ginburg, 2012:205). Tovey (2007) in Howard and McInnes (2013:66) state that a play environment should be safe for a child to play in, but not too safe that a child cannot explore. In a country ridiculed by crime, a caregiver can never be too safe when it comes to their child (van Wyk & Lemmer, 2009:79). Safety can be established with a sense of community and a sense of presence of community members (van Wyk & Lemmer, 2009:79). Curtis, Hinckson and Water (2012:7-8) agree that a sense of community enhances trust and creates a safer community. There is community when neighbours know each other and look out for one another and each other's children.

Bringolf-Isler, Grize, Mäder, Ruch, Sennhauser, Braun-Fahrländer and the SCARPOL team (2010:251-256), found that parents' perceptions have an influence on children's play. They found that smaller children and girls are less likely to play outside because of safety issues. If it was the parents' perspective that their children would not be safe because of traffic, crime or non-availability of play areas, children would be less likely to play outside.

Little (2013:1-17) investigated mothers' belief about their children's play. She found that mothers agreed that there are some small risks involved in indoor play and that they could be accounted for, but they were concerned for their children's safety in outdoor areas. Children's ability to learn and develop by playing outside can thus be limited by their mothers' concern about safety. The study also found that children want to be able to take risks to see what they are capable of and to win and lose at something new (Little, 2013:13). Children learn and develop by exploring and asking questions and using their senses to experience new things.

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A study conducted by Farley et al. (2007:1625) found that if children have a safe play area outside, they will play more outside and spend less time in front of the television and computer. Playing outside can enhance a child's physical and mental capacities (Wood, 2013:124). It also helps children to get away from computers and prevent obesity (Wood, 2013:124). There should be a balance between the amount of time children spend in front of the computer/television and the time they spend outside.

A study done by Holt et al. (2013:1-17) found that there was a culture of fear among children's parents of perceived threats to their children's safety. Parents were more likely to take children to paid activities instead of allowing the children to play outside. They found that if there were to be a sense of adult supervision that parents would let their children play outside more.

Any responsible and loving caregiver will place their children's safety at the top of their priority list when it comes to playing in play areas.

Different types of play areas

Play can happen anywhere at any time, children can play outside, in streets, in gardens, in parks and inside (Holt et al., 2013:2). Children play in many different ways in many different areas. Outdoor play areas help children develop their cognitive, physical, social and emotional abilities (Holmes & Procaccino, 2009:1103). They do this by playing together with friends, exploring new areas and by using their senses.

Wood (2013:125) states that there is a movement away from fixed play structures towards movable parts, secret places, bare soil patches, mud and equipment that is more challenging. Children like to explore and figure out new ways to play that challenge them on a cognitive, physical and social level.

Children like play in areas where they can jump, climb, roll and move around (Howard & McInnes, 2013:78). Children want to be active while they play, they do not always like to just sit still. Children need play space where they are still under adult

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supervision, but where there is a feeling of secrecy and independence to enhance exploration (Howard & McInnes, 2013:78). Playing allows children to be free to be themselves and to try out new things to prepare themselves for real life challenges. “Being in the outdoors helps children understand their identity and sense of self in the wider world and can lead to a more positive approach to future citizenship” (Nutbrown & Clough, 2009 in Howard & McInnes, 2013:78). Children find out who they want to be and can be by practising new skills whilst playing outside.

Factors preventing/influencing children to play

Children’s lives are often governed by adults’ rules and children try to find their own way in the busy lives of their caregivers (Lester & Russell, 2005:ix). Adults are in control of children’s lives, which may make it difficult for children to just be children.

There are external factors preventing children’s play. Lester and Russell (2005:ix) give a good indication of this by stating: “Children’s ability to find time and space for play is affected by a range of social, cultural, economic and political factors. These include gender, socio-economic status and disability.” According to Lester and Russell (2010:x), children are not able to influence their play areas if it is unsafe, it is the caregiver’s responsibility to help ensure that children’s play areas are made safe.

Caregivers sometimes lack the skill or energy to know how to play with their children and consequently it is easier for them to place their children in front of the television or computer (van Wyk & Lemmer, 2009:84). They also sometimes lack the knowledge on how to enrich their children’s lives through play, since they come from families who didn’t know either (van Wyk & Lemmer, 2009:84). As discussed earlier, families need to create a culture of play that is handed over from generation to generation.

Holt et al. (2013:1-17) found that factors that prevented children from playing outside were the weather, teenagers, strangers and parental rules. The weather might be too cold or too hot for children to play outside. Older children often intimidate or bully younger children as a way of entertaining themselves. There are often homeless people hanging around play areas which increase the safety risks for children to play

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outside. They also found that children are spending less time playing outdoors and more time in front of the television and computer.

Children may be more likely to play outside if play parks were more interesting, imaginative and engaging (Holt et al., 2013:2). Thus, if play areas were boring they would rather play with something else or somewhere else.

Similarly, Veitch et al. (2007:409-422) found the following factors prevent children from playing freely in outdoor spaces: Some children said the playground equipment is outdated and not stimulating enough. Another reason younger children did not want to play in outdoor spaces was because the older children bullied them. Children had no free time to play outside during the week because they had other organised activities.

Children are also unable to go to parks without adult supervision, and their parents did not always have the time to take them. Some children had easy access to the park, but could not go there since they had other obligations at home. Children in Veitch et al.'s (2007:409-422) study, said they were more willing to go to parks if their friends would be there and if the park was neat and clean. Children would prefer a range of things to do at in an outside area. Independence from adults seems to be a main factor for children.

Bringolf-Isler et al. (2010:251-256) also found that if there were more people outside and more buildings, children would be less likely to play outside. If young children had friends of their own age group, they were more likely to play outside. As discussed in the section on the development of play, this aspect is very age appropriate. Adolescents would play outside more if they have younger siblings.

2.3 CONCLUSION

Caregivers come in different forms, from single parents, grandparents, family members, foster or adoptive parents and even child-headed households. Caregivers should know what the Children's Act (38/2005) states the rights of children to be and

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act according to those requirements. These include looking after a child, feeding, dressing, housing and protecting a child from any type of abuse, neglect or harm. A child also has the right to be looked after by a caregiver and be protected from any type of harm. It is not only a child's right to be a child, but a child needs to be a child. A child needs to play, because it determines who and what a child is.

The caregiver has a huge responsibility to look after children and to raise them as happy, healthy functioning adults. Caregivers need to be there for children and be involved in every aspect of children's lives. Children already form a bond with caregivers from infancy, which in turn impacts their future relationships. The positive or negative bond that a child creates with a caregiver can influence the relationships that children form with their friends and teachers. There should be a balance between all the activities in caregivers' and children's lives, including school, work and play.

There are many challenges that prevent children from playing. These include the environment and caregiver's perceptions of play. Different caregivers have different perceptions of play. Some caregivers see play as a waste of time, and that the child should be more serious otherwise they won't be successful in life. Not playing, is not an option for a child. It is part of who they are, they need to play. Some adults deem academics more important than play.

Caregivers need to respond to their children in everything they do. Whilst communicating, playing or just doing everyday activities, children need to feel that what they do and say is important and acknowledged by their caregivers. Culture is passed on from one generation to the next generation. Some cultures see children as potential wage-earners whilst others see childhood as an important milestone.

Socio-economic status can influence children's ability to play. A huge concern is the spreading of the HIV/AIDS epidemic. Children are losing their parents, becoming orphaned and losing their ability to live care-free as children should. Single parent households mean a lack of income and one less parent to play with. Caregivers who need to work long hours and who stress over finances struggle to find time to play with

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their children. Even children from wealthier families are affected when their caregivers spend a lot of time at work.

Play has many advantages. It develops a child's cognitive, emotional, psychological and physical abilities. It helps them to build relationships. It prepares them for adult life by teaching them needed life skills including negotiating, communication and self-esteem. Play comes in many forms. Children can play at any time and at any place. Play can be structured or unstructured. Boys play differently to girls. Play can happen inside the home whilst playing video games or outside in parks.

The play therapy process uses play to help children deal with problems. There are different stages of play therapy. Play therapists make use of different play mediums including, clay, puppets, music and book reading.

Children can only play according to their developmental abilities. Children between four and seven fall under early childhood. Their cognitive, emotional, verbal, psychological and physical abilities are still limited.

Children play in different play areas. These play areas need to be safe for children to play in. It is adult's responsibility to make sure these areas are safe. Ongoing traffic can become and obstacle for children to play safely. Bad weather, crime and bullying at play parks can reduce children's ability to play there. A sense of community and supervision are needed in order for children to be safe whilst playing. Children need play areas to be safe, they want the equipment to be age appropriate and not out of date. They are more likely to play outside if they know their friends from their age group are going to be there.

During the literature review almost all the studies were international studies. Some qualitative studies were done with small groups of participants and thus the results are not easily quantified. Most of the studies on the topic used the qualitative approach, which implies that using the qualitative approach for this study would be appropriate. There is a need for studies on the topic of caregivers' views of play and play areas in South Africa. The studies that were reviewed focused on young children from five to

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six years old, or children from 11 to 12 years old. There was not a study that focused on the age groups between four to ten years as this study proposed to do.

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CHAPTER 3
RESEARCH METHODOLOGY AND EMPIRICAL STUDY

3.1 INTRODUCTION

The research was conducted in order to explore caregivers' views of play in children's lives. There was a need to establish the view of caregivers on the value of children's play and the developmental, physical, psychological, emotional and social benefits that play has for children. There are certain challenges that caregivers face in South Africa regarding play. Caregivers often work long hours and do not have time to play with their children or that they do not view play as important. The safety of play areas and the high rate of crime influence children's ability to play.

The question the study aims to answer is: What are the views of caregivers of children in Mikro School in Rustenburg, North-West Province, of play and play areas? The goal was to explore and describe the caregivers' views by interviewing them and deriving meaning from the data that was collected during the research project. This chapter provides an overview of the research methodology used for drawing the empirical findings and conclusions. The ethical aspects that guided the empirical process will also be discussed.

3.2 RESEARCH APPROACH

For this research study, the qualitative approach was used to answer the question of what the caregivers' views on play and play areas are, with the purpose of describing and understanding this phenomenon from the caregivers' point of view (Fouché & Delport, 2011:64). The researcher aimed to obtain the information from the participants in person (Niewenhuis, 2007a:50). The views of the caregivers provided the researcher with rich, profound information (Rubin & Babbie, 2011:446). The researcher collected an extensive amount of verbal data from a small number of participants, (in this case the ten caregivers) by doing semi-structured interviews (Fouché & Delport, 2011:64), focusing on understanding the participants' natural way of life (Niewenhuis, 2007a:51). The verbal descriptions from the caregivers were used

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to portray the studied situation, in this case, the views of the caregivers on play and play areas (McMillan & Schumacher, 2010:322).

3.3 TYPE OF RESEARCH

The type of research applicable in the study was applied in nature, due to the fact that the main aim of this study was to address a problem found in practice (Fouché & de Vos, 2011:95) which relates to the caregivers and children's play and play areas. There is a lack of knowledge concerning the views that South African caregivers have on play. It was necessary to explore in practice whether or not caregivers deem play as important and whether they are aware of the benefits that play can have for children (Fouché & de Vos, 2011:95). The other problem that this research study aimed to investigate was caregivers' views on suitable play areas for their children of Mikro School in Rustenburg (North West Province). The research results may be applied in practice.

3.4 RESEARCH DESIGN AND METHODOLOGY

3.4.1 Research design

The relevant research design is the collective case study design (Fouché & Schurink, 2011:322). The researcher purposively selected ten caregivers at Mikro School in Rustenburg for the study (McMillan & Schumacher, 2010:345). The MSW (Play Therapy) students of the Department of Social Work and Criminology, University of Pretoria conducted a group study where different cases in different contexts were chosen, in order to compare the cases and contexts with one another. The purpose of the study was to extend and validate the theories and findings across different provinces and settings (Mark, 1996 in Fouché & Schurink, 2011:322). By using collective case studies, the information that was attained will be broader and give a larger variety of information (McMillan & Schumacher, 2010:345). The focus of the study was to get as much information on the views of caregivers on play and play areas.

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3.4.2 Research population, sample and sampling method

The population for the study was caregivers of children in their early childhood between the ages of four to six years at Mikro School in Rustenburg, North West Province. To select a sample, the researcher made use of non-probability sampling, or criterion sampling, since the researcher identified the criteria that the participants should meet in order to get the most relevant information (McMillan & Schumacher, 2010:136). The researcher used purposive sampling to obtain participants that had the following characteristics (McMillan & Schumacher, 2010:138):

- Caregivers of children in their early childhood at Mikro School in Rustenburg, North West Province,
- With children between the ages of four to six,
- Willing to participate in the study voluntarily,
- Able to speak English and/or Afrikaans.

The researcher tried to avoid participants who were in a hurry, or who had children with them that were tired or irritated. The researcher looked for particpants who had time to give to the researcher, and who could give their full attention. This was done to obtain rich, informative information that will best serve the purpose of the study.

3.4.3 Pilot study

The researcher made use of two participants for the pilot study. These two participants did not form part of the main/end/actual planned study. The researcher identified participants that had the same qualities as the participants for the main study (McMillan & Schumacher, 2010:205). The main aim was to evaluate if the procedure was feasible and the interview schedule was clear (Fouché & Delport, 2011:73). There was no need to change the questions of the interview schedule since the caregivers understood all the questions. The researcher had to translate the questionnaire into Afrikaans to meet the language needs of the participants.

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The pilot study was helpful to see how long an interview took in order to inform the participants of the study (McMillan & Schumacher, 2010:205). The researcher used this opportunity to ensure that the questions were understandable and to see which questions should be kept and/or left out (McMillan & Schumacher, 2010:205).

3.4.4 Data-collection method

A semi-structured interview schedule was used where the researcher did a one on one interview with ten caregivers at Mikro School in Rustenburg, North West Province. The researcher used open-ended questions that allowed the participants to give their opinions or views thoroughly (Greeff, 2011:352). The questions were relevant and related directly to the study and research question (Greeff, 2001:352). Saturation point was reached after the tenth interview was completed. The researcher did all of the interviews at the school and after school when most of the participants were not in a hurry to get to work or go home.

The semi-structured interview schedule directed the researcher. The interview schedule was developed by the Play Therapy students of the University of Pretoria and their lecturers. All ten students had the same interview schedule. The first section of questions attended to the biological information of the caregivers, including their race, age, descendants, age of descendants and whether or not the caregivers were employed (see Appendix 4).

The researcher was able to ask probing questions on the answers given by the participants (Niewenhuis, 2007b:87). The researcher focused on the topic and was not side-tracked (Niewenhuis, 2007b:87). With permission of the participants an audio recording of the interviews was made by the researcher in order to transcribe the content for data-analysis purposes. The participants were assured of the confidentiality of the recordings.

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3.4.5 Data-analysis

The data was analysed by identifying themes that surfaced from the participants' answers to the questions in the interview schedule (Niewenhuis, 2007c:99). The purpose of the data-analysis was to summarise the data that was obtained from the participants' words (McMillan & Schumacher, 2007:371). The first step that the researcher took in the data-analysis procedure was to provide a comprehensive description of participants who participated in the study (Niewenhuis, 2007c:103). This included the participants' sex, age, employment, education, marital status and the environment under which the study was done (Niewenhuis, 2007c:103-104).

The second step was to organise the data in a way that simplified the categorisation of the data and finding the information efficiently (Niewenhuis, 2007c:104). The researcher summarised the vast amount of information into smaller workable parts (Fouché & Delport, 2011:75). Every individual participant was marked with a number from one to ten to ensure his/her anonymity (Niewenhuis, 2007c:104).

The researcher transcribed the data by recording the interviews with an audio recorder and by writing down every word of the interview (McMillan & Schumacher, 2007:370). The researcher made side notes regarding the participants' body language (Niewenhuis, 2007c:104). This step was done promptly after the interviews so that no details were forgotten.

The third step was for the researcher to study the data thoroughly by reading the transcripts more than once (Niewenhuis, 2007c:104-105). The fourth step was to save the data in multiple formats (Niewenhuis, 2007c:105). This ensured that no data was lost.

For the fifth step the researcher coded the data by dividing it into logical parts (Niewenhuis, 2007c:105). The same themes had the same codes. After the researcher had done the coding, the sixth step was to summarise and organise the data into categories. McMillan and Schumacher (2007:367) call this "inductive analysis" where the vast amount of information is converted into categories and patterns.

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The seventh step was to find links between the different categories (Fouché & Delport, 2011:64). Niewenhuis (2007c:111) states that the eighth step in the data-analysis process is to interpret the data, as this will explain the reason why the information that the researcher found is the way it is. Thus, in step eight the researcher interpreted the data by looking at the information and knowledge that was already available on the topic and explored how it substantiated or added to existing knowledge (Fouché & Delport, 2011:75).

Lastly, the researcher drew conclusions from the data (Niewenhuis, 2007c:113). The conclusions were made in correlation with existing knowledge. When this stage in the research process had been reached, the researcher determined the views of caregivers on play and play areas at Mikro School in Rustenburg, North West Province. The views of the participants were very informative. The researcher used an inductive analysis to allow research findings to emerge from frequent or significant themes found in the raw data.

The data was represented in the form of a research report written under the supervision of Prof. C.E Prinsloo from the Department of Social Work and Criminology at the University of Pretoria.

3.4.6 Trustworthiness

During the analysis of the data, trustworthiness was a key aspect. The researcher verified the data with the participants to ensure that the information was correct (Niewenhuis, 2007c:113). The researcher made notes on the procedure that was followed to analyse the data in order for others to comprehend the researcher's thought trail (Niewenhuis, 2007c:114). The trustworthiness of data was determined during the pattern seeking period (McMillan & Schumacher, 2007:379). Through continuous reflexivity, the researcher was cautious not to allow influences or prejudice to manipulate the study.

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The researcher allowed the participants to check the data by adding comments (Niewenhuis, 2007c:114). The results of the study were verified with the participants in order for them to comment verbally or in written form (Niewenhuis, 2007c:114). The researcher used mostly Afrikaans in order for the participants to understand in their mother tongue. The researcher made sure not to be biased and not to generalise the findings (Niewenhuis, 2007c:115). Quotes from the participants were chosen and the researcher made sure not to choose the ones that only said what the researcher wanted the data to say (Niewenhuis, 2007c:115). Thus, prejudice was avoided.

The researcher made sure to keep the participants' information confidential by not mentioning their names or details in a way that others can identify them (Niewenhuis, 2007c:115). This was to protect the participants from any harm.

The researcher made use of qualitative methods to obtain results. This implied that subjective views of the participants and researcher were used to collect and transcribe the data (McMillan & Schumacher, 2010:332). This causes the rigidness or credibility of the study to be under scrutiny (Creswell, 1998; Langer & Furman, 2005; Sandelowski, 1993; Seale, 2002; Szto, et al., 2005 in Lietz, Langer & Furman, 2010:443). To ensure rigidness of this study, trustworthiness was increased through the use of reflexivity, peer debriefing and an audit trail. The researcher made use of reflexivity by examining herself constantly and deliberately (McMillan & Schumacher, 2010:332). The researcher could relate with the caregivers, since she is also a working caregiver of a child. The researcher used her own experience as a caregiver as a resource to relate to the participants (McMillan & Schumacher, 2010:332). The researcher made sure she was approachable, trustworthy and non-judgemental and that she made the participants feel at ease whilst conducting the interview (McMillan & Schumacher, 2010:332).

The researcher made sure that the participants' voices were the only ones that were heard and that she did not influence their views with her views and that the information received was accurate (McMillan & Schumacher, 2010:333).

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The researcher made use of peer debriefing by critically discussing the research, the interview schedule and the ways in which the results were going to be obtained and analysed with an objective and impartial colleague (McMillan & Schumacher, 2010:333). The researcher could understand her role more clearly after this debriefing session (McMillan & Schumacher, 2010:333).

An audit trail was kept throughout the research process. There was a clear trail of codes and categories used, so that the researcher could make sure her thought and decisions trail could be repeated and or critically scrutinised by another researcher (McMillan & Schumacher, 2010:334).

3.5 ETHICAL CONSIDERATIONS

After submitting a letter of intent (See Appendix 2) to do the research at Mikro School, the researcher obtained the written permission from the principal of Mikro School in Rustenburg, North West Province, to interview the caregivers of children between the ages of four to six years (See Appendix 3). The principal also provided written consent that she would act as the go-between between the researcher and the participants. Furthermore, the researcher considered the following ethical issues, as they may have been a concern in her particular research study:

Avoidance of harm

Rubin and Babbie (2011:78) stress the importance that no participant should be harmed in the research process. Creswell (2003) in Strydom (2011:115) states, “The researcher has an ethical obligation to protect participants within all possible reasonable limits from any form of physical discomfort that may emerge from the research project.” No physical harm was foreseen. Although this was not an emotionally intrusive study, the researcher still had to critically contemplate the possibility and she had to explain it to the participants. For example, participants might have felt guilty if they did not pay attention to play as they would have wanted to.

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The researcher tried to avoid intrusive questions and she gave the participants a chance to withdraw from the study. She was constantly aware of the possibility of emotional reactions. Should any participant have experienced any harm, the researcher would have referred them to Reverend Peter Kotze from NG Moedergemeente, Rustenburg, who is a qualified counsellor. The researcher found that the participants were very willing to do the interviews and she did not pick up any negative emotional reactions to the interview.

Voluntary participation

Rubin and Babbie (2011:76-77) state that participation should always be voluntary and no one should be forced to participate in a project. The participants took part in the study voluntarily and the researcher did not force them to take part. They knew that they could withdraw from the study at any point, without any negative consequences.

Informed consent

Rubin and Babbie (2010:118) state that the participants should understand the research study after the researcher had explained it to them and that they should be able to exit the study at any time. The researcher compiled an informed consent letter and gave it to participants before collecting the data, so that they could make a voluntary decision to participate in the research or not. The letter stipulated the risks, goals, advantages, disadvantages and data-storage. The researcher informed the participants that the interviews would be digitally recorded and it was also stated on the informed consent. Participants signed the informed consent. They were cognitively able and competent to sign the letter of informed consent. In the informed consent letter, it stated that there was no financial gain.

Deception of subjects and / or respondents

Rubin and Babbie (2011:83) state that the researcher must be open and honest and describe the procedure to the participants. By verbally explaining the detail of the study

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and giving it in written format in the letter of informed consent, participants were fully aware of the process. The researcher did not mislead the participants in any way.

Violation of privacy / anonymity / confidentiality

The researcher respected the participants' privacy (Strydom, 2011:119). It was important that the participants understood the research process. There is a difference between anonymity and confidentiality. Anonymity is where the researcher does not know the participants' names or identities. Confidentiality occurs when the researcher knows to whom he or she is talking face to face, but does not mention any identifying particulars in the study, which means that anonymity is not applicable anymore. In the case of this research study, the researcher knows who said what, but did not link information with any participant in the report. The researcher did not discuss information with anyone, and used a code system to ensure confidentiality.

Compensation

According to Strydom (2011:121), compensating participants might be unethical. It is difficult to determine whether the participants will be part of the study or give the "right" answers, since they know they will be compensated. In this particular research study, the researcher did not compensate the participants. It was made clear before the study started. Their permission was obtained to do the study. The time it took to do the study were explained to the participants and the researcher made sure that there was no other pressing matter that the participant needed to attend to, but could not because of the research taking place, for example, that they needed to be at work or home. The researcher did not try to convince participants to participate by offering them compensation to be part of the study.

Debriefing of participants

McBurney (2001) in Strydom (2011:122) state that "Debriefing sessions are sessions during which subjects get the opportunity, after the study, to work through their experiences and its aftermath, and where they can have their questions answered and

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misconceptions removed." The researcher ensured the interpretation of what was heard was correct. There was a debriefing session with every participant. If the researcher identified any harm, the participant could have been referred to a counsellor. Fortunately, no harm occurred.

Actions and competence of researchers

The researcher made sure she was competent, honest and adequately skilled to undertake the proposed investigation (Walliman, 2006 in Strydom (2011:123). She is a qualified social worker and completed the theoretical requirements for the MSW (Play Therapy) degree in 2014. The researcher made sure to do the research the way she was supposed to do it. The role of the researcher was clear to the participants of the study, who in this study were the caregivers of children in their early childhood. The researcher made sure participants knew what to expect from the researcher and that she was not a counsellor. It was stated in the informed consent that the counsellor would be Reverend P. Kotze from NG Moedergemeente Rustenburg, a qualified and capable counsellor. The research was done under the guidance of an experienced research supervisor, Prof C.E. Prinsloo from the Department of Social Work and Criminology at the University of Pretoria.

Publications of the findings

According to Strydom (2011:126), the research must be easily understood and readable by the public. An ethical obligation falls onto the researcher to ensure the investigation proceeded correctly, and that no deception took place (Babbie, 2011:487). The researcher has complied with the standards and regulations of the University of Pretoria regarding the publications of the findings.

The research proposal was submitted to the Postgraduate Committee of the Faculty of Humanities and to the Ethical Committee of the Faculty of Humanities, University of Pretoria, and the researcher adhered to all necessary research regulations stipulated by the University. Both the participants and Mikro School were informed that the results would be published and data would be published in an academic journal; and

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all research data would be kept at the University of Pretoria for 15 years. The researcher explained to the participants that the final report remained the property of the University of Pretoria.

3.6 PRESENTATION OF EMPIRICAL DATA

3.6.1 Biographical data of participants

The relevant biographical information of the ten participants interviewed for the research study is summarised in Table 1: Biographical data. Pseudonyms have been used to protect the identity of the participants.

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Table 1: Biographical data of participants

No	Age	Gender	Home language	Level of education	Employment status	Type of employment	Full time	Relational status	Main breadwinner	Sources of income	No of Children	Child age	Biological	Gender	Full time day care	Attend pre school	Attend school	Attend after school	Chronic illness	Disabled
1	58	Female	Afrikaans	Degree	Employed	Teacher	Full time	Married	Husband	Salary	4	6	No	Female	No	No	Yes	No	No	No
												6	No	Female	No	No	Yes	No	No	No
												3	No	Female	No	Yes	No	No	No	No
												4months	No	Male	No	No	No	No	No	No
2	29	Female	Afrikaans	Matric	Employed	Typist	Full time	Single	Self	Salary	1	4	Yes	Male	No	Yes	No	Yes	No	No
3	43	Male	Afrikaans	Grade 10	Retrenched	Unemployed	Unemployed	Divorced	Fiancé	Salary	2	16	No	Female	No	No	Yes	No	No	No
												5	Yes	Female	No	Yes	No	Yes	No	No
4	27	Female	Afrikaans and English	Grade 10	Unemployed	Unemployed	Unemployed	Married	Husband	Salary	3	8	Yes	Male	No	No	Yes	No	No	No
												6	Yes	Female	No	No	Yes	No	No	No
												5	Yes	Female	No	Yes	No	Yes	No	No
5	40	Female	Afrikaans	Matric	Employed	Sight administrator	Full time	Married	Husband	Salary	2	6	Yes	Male	No	No	Yes	No	No	No
												5	Yes	Female	No	Yes	No	No	No	No
6	34	Female	Afrikaans	Matric	Employed	Branch administrator	Full time	Married	Husband	Salary	2	4	Yes	Female	No	Yes	No	Yes	No	No
												2	Yes	Male	No	Yes	No	Yes	No	No
7	43	Female	Afrikaans	Diploma	Employed	Senior Administrative clerk	Full time	Married	Husband	Salary	2	12	Yes	Female	No	No	Yes	No	No	No
												4	Yes	Female	No	Yes	No	Yes	No	No
8	52	Female	Afrikaans	Matric	Unemployed	Unemployed	Unemployed	Married	Husband	Salary	1	5	No	Female	No	Yes	No	No	No	No
9	24	Female	Afrikaans	Matric	Employed	Admin	Part-time	Engaged	Fiancé	Salary	1	5	Yes	Male	No	Yes	No	No	No	No
10	41	Female	Afrikaans	Matric	Unemployed	Unemployed	Unemployed	Married	Husband	Salary	3	21	Yes	Male	No	No	No	No	No	No
												18	Yes	Female	No	No	Yes	No	No	No
												5	Yes	Male	No	Yes	No	Yes	No	No

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Ten caregivers with children between the ages of four to six years participated in the study. Two of the participants were not the biological parents of the children. One of the ten participants was a male, and the rest were females. The age group of the participants was between 24 and 58 years. Six of the ten participants were employed. Nine of the ten participants' home language was Afrikaans. Seven of the ten participants were married and their husbands were the main breadwinners in the household. Six of the ten participants have matriculated, two finished grade 10 and two have tertiary qualifications. All of the participants' main incomes were their salaries.

Three participants had one child, four participants had two children, two participants had three children, and one participant had four children. Thirteen of the participants' children fell under the age category of four to six years old. Of the thirteen children in the appropriate age category of four to six years old, six were female and four were male.

None of the children were in full time day care since the study was done at a pre-school. Nine out of the 13 children attended pre-school. Four of the children attended school. Six of the children went to afterschool care. None of the children had a chronic illness or disability.

3.6.2 Discussion of themes and sub-themes

Introduction

There are four different systems in Bronfenbrenner's Ecological systems theory: the micro-system, mesosystem, exo-system and the macro-system. Every system influences a person either directly or indirectly (Bronfenbrenner, 1995, in Shaffer & Kipp, 2010:62). In line with the study, the caregivers are the micro-systems that are closest to the child with a direct influence on the child's play (Sigelman & Rider, 2006:22).

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The play areas linked with the caregivers are the meso-systems, which include the pre-school, play parks and recreational areas (Sigelman & Rider, 2006:22). Exo-systems are those systems that influence a person although he/she is not in the system (Sigelman & Rider, 2006:22). In line with the study, the exo-system could be the caregiver's workplace and daily responsibilities that keep him/her too busy or stressed to play with his/her children. The exo-system can also include the safety of the play area and the high crime rate in South Africa.

The macro-system is the larger cultural umbrella under which the micro-system, meso-system and exo-system falls (Sigelman & Rider, 2006:22). This culture includes what caregivers teach children and what their values are (Shaffer & Kipp, 2010:64-65). The Developmental Assets Theory focuses on the assets of every individual to enhance healthy development and promote good behaviour (Atkiss, Moyer, Desai & Roland, 2011:171). Safe play areas enhance a child's play which promotes healthy development for a child (Vimont, 2012:506). Caregivers who are able to play with their children can be seen as positive assets for the child, since it builds healthy relationships between the child and the caregiver (Scales, Benson, Roehlkepartain, Sesma & van Dulmen, 2006:691).

Caregivers' views on play are a very important influence on the way children play.

Identified themes and sub-themes

Table 2: Identified themes and sub-themes

Theme	Sub-Themes
Theme 1: Caregivers' views on play	• **Sub-theme 1:** Defining play • **Sub-theme 2:** Importance of play vs house chores • **Sub-theme 3:** Types of play • **Sub-theme 4:** Types of games
Theme 2: Caregivers' views	• **Sub-theme 1:** Time spent on play • **Sub-theme 2:** Whereabouts of play • **Sub-theme 3:** Structured versus unstructured

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on the construction of play	
Theme 3: Caregivers' views of how culture influences play	• **Sub-theme 1:** Influence of culture on children's play
Theme 4: Caregivers' views of factors influencing play	• **Sub-theme 1:** Availability of time • **Sub-theme 2:** Obligations
Theme 5: Caregivers' views of public play areas	• **Sub-theme 1:** Nature and availability • **Sub-theme 2:** Use of play areas • **Sub-theme 3:** Concerns/expectations of play areas
Theme 6: Caregivers' recommendations about play and play areas	• **Sub-theme 1:** For caregivers • **Sub-theme 2:** For municipality/local government

Theme 1: Caregivers' views on play

Theme one, which is Play, is divided into defining play, the importance of play versus house chores, types of play and types of games.

- **Defining play**

The participants were asked to define play or to give their opinion of what they thought play means. The following verbatim quotes substantiate the theme:

Participant 1: "*Play is to discover the world." ["Speel is om die wêreld te ontdek."]*

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Participant 2: *"Play, like these apparatuses outside, slide and cars and friends etcetera." ["Speel, soos hierdie apparate hier buite, glybaan en karretjies en maatjies ensovoorts."]*

Participant 3: *"To be a child, to do anything and everything, for me it is to be naughty." ["Kindwees, enigiets en alles doen, vir my is dit maar stout wees."]*

Participant 4: *"Play, that which they are doing now, running around, climbing on jungle gyms, throwing balls, things like that."* [*"Speel, wat hulle nou doen, rondhardloop, klimrame, balle gooi, sulke goed."]*

Participant 5: *"Play is to play outside, to play with a ball, jump on a trampoline, swimming pool. Let me think what else is at home, swinging, dolls, they have their own little house full of toys, *Danie is crazy about cars, *Lindie is at the make-up and dolls stage, hair and all of tha…, So yes, we are busy with that the whole day." ["Speel is buite speel, met die bal speel op die trampolien spring, swembad. Laat ek dink wat is nog alles by die huis, swaai, poppe, hulle het hulle eie huisie vol speelgoed, *Danie is mal oor karretjies, *Lindie is op die make-up en poppe stadium, hare en al die goeters… So ja, ons is maar heeldag besig met dit."]*

Participant 6: *"Yes, well they play with the balls and their dolls, use their imagination a little bit, cars, they have lots of cars, even if they are two girls." ["Ja, ag hulle speel met die balle en hulle poppe, gebruik bietjie hulle verbeelding, karretjies, hulle het baie karrettjies, al is dit twee dogtertjies."]*

Participant 8: *"Like when they play outside, kicking the ball, riding bicycle." ["Soos as hulle buite speel, bal skop, fietsry."]*

Participant 9: *"Playing in the sand, getting dirty." ["In die sand speel en vuil word."]*

In summary, it is clear from the above information that the participants viewed children's play as exploring all facets of the world around them. Children can play by using different objects and instruments. Play is part of childhood. Play can be doing

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physical activities like jumping, kicking a ball, throwing a ball, or sitting down and playing with dolls. Play can also be gender related, for example girls like to play with dolls as well as cars and boys like to play with cars. Play can happen anywhere at any time. Children can learn something new while they are playing. The caregivers and children used what they could play with and did not focus on what they did not have, which forms part of the Developmental Assets Theory (Vimont, 2012:506). The findings of the study is in full accordance with Blom (2006:107) who says that children try out new things when they play, they engage with friends, build positive character and play gives children a sense of mastery.

Play can enhance a child's senses, for example if a child plays with sand it can enhance their sense of touch (Oaklander, 2007:60). Parents' positive perception of play influences children's ability to make friends, it involves parents in play and parents provide the toys to play with and they aid in the play process (Lin & Yawkey, 2014:108). All of the participants viewed play as an important and a positive factor in a child's life, which means they are part of the play process of their children.

- **Importance of play versus house chores**

Play can happen during chores, whilst working, being at school during education or at home (Lester & Russell, 2010:2). The participants were asked whether they deemed play or house chores more important.

Participant 1: *"Play and chores inside the house, both are important, but you must not give chores as if a child is a slave, it must happen as if the child is playing." ["Speel en takies in die huis, altwee het sy waarde, maar jy moenie takies gee asof 'n kind 'n slaaf is nie, dit moet spelenderwys gebeur."]*

Participant 4: *"Just cleaning their room and that is that, then they can do what they want to." ["Net kamer skoonmaak en dis dit, dan kan hulle maak soos wat hulle wil."]*

Participant 7: *"You know what, I think play, especially when they are still young, but she has chores already, as they become older they have to do chores, play is very*

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important for me." ["Weet jy ek dink speel, veral as hulle nog bietjie kleiner is, maar sy het al takies, soos wat hulle ouer word moet hulle maar takies kry, speel is vir my baie belangrik."]

Participant 8: *"She has to do chores inside the house, but she also has to play, it is not just chores all the time, there has to be a balance, she also has to know what to do inside the house like making up the bed or so, but play as well, a child has to play." ["Sy moet takies kan doen in die huis, maar sy moet speel ook, dit is nie heeltyd net takies nie, dit moet gebalanseerd wees, sy moet weet wat om te doen in die huis ook soos bed regtrek of so, maar speel ook, 'n kind moet speel."]*

Participant 9: *"I would say that they should first finish their chores inside the house then they can play." ["Ek sou sê hulle kan eers hulle takies klaarmaak in die huis en dan speel."]*

Some of the participants viewed play as more important than chores, while others viewed chores as more important than play. Five of the participants were of the opinion that there needs to be a balance between playing and doing chores; they viewed both as equally important.

It was clear that the participants were of the opinion that a child should not do too many chores. The participants took the child's young age into consideration when it came to allocation of chores. There should be a time for education, sport, family time and leisure time which should include playing (van Wyk & Lemmer, 2009:39). There is a time to play and a time to do chores. One of the participants was of the view that chores can be done in a playful manner. Doing chores and playing can teach children important skills that promote healthy behaviour (Atkiss, Moyer, Desai & Roland, 2011:171). Children can quickly pick up new behaviours by doing repetitive activities like house chores.

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- **Types of play**

The caregivers were asked if they were of the view that a child should spend more time doing physical, fantasy or educational games.

Participant 1: *"Physical and fantasy." ["Fisies en fantasie."]*

Participant 2: *"A little bit of everything." ["lets van als."]*

Participants 3: *"Educational is more important." ["Opvoedkundig is belangriker."]*

Participant 6: *"It is a combination of them all, because through play they discover and that is also how they learn, especially *Danie. *Lindie is at the stage where she will have her own imaginary friends, and will play with dolls, and be a teacher and read books, not really read, but play-play, where *Danie wants to explore, so he discovers everything and he digs in everything and opens everything to discover things better." ["Dit is 'n kombinasie van hulle almal, want deur speel ontdek hulle en so leer hulle ook veral *Danie, *Lindie is op daai stadium sy sal soos haar eie imaginary friends hê en met poppe speel en 'n juffrou wees en boek lees, nie rêrig lees nie, maar lees speel-speel, waar *Danie nog explore, ja hy ontdek alles en hy grou in alles en maak alles oop om nog beter te ontdek."]*

Four of the participants held strong views that play should be educational and that a child should learn whilst playing. The other four participants were of the opinion that there should be a combination between educational, physical and fantasy play, which could imply that all three factors are equally important. Two of the participants deemed it necessary that a child should play anything he/she wants to play. According to Piaget's theory, children in the preoperational stage of two to seven years develop their language skills, learn to solve problems and use fantasy (Sigelman & Rider, 2006:42). Thus, the findings of the study that educational, fantasy and physical play are important are in agreement with Piaget's theory. Although West (1996:26) is a dated source, the author's findings accurately and relevantly substantiates the findings

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of the study by stating that play can be seen as an emotional, physical, psychological, social and intellectual need that children have that should be met in order to enjoy life.

- **Types of games**

The participants were asked to name the games they play with their children.

Participant 1: *"I play puppet shows with them, I sing along, I dance with them, I jump trampoline, I play dolls with them, I even ride bicycle with them." ["Ek hou saam poppekas, ek sing saam, ek dans saam, ek spring trampolien, ek speel pop saam, ek ry tot fiets saam."]*

Participant 2: *"Cricket practice or cars, or whatever." ["Krieket oefening of karretjies of wat ookal."]*

Participant 3: *"We swim, sometimes we play television games, things like that." ["Ons swem, partykeer speel ons op die TV games, sulke goed."]*

Participant 4: *"We will play touchers with them, or hide and seek, or what is that touch game, umn, Simon says." ["Ons sal met hulle touchertjie speel, of dat hulle gaan wegkruip, of daai wat jy sê touch this, umn, Simon says."]*

Participant 5: *"Sometimes we kick ball, sometimes we play dolls, building blocks, puzzles, things like that." ["Partykeer is dit bal skop, party is dit poppe speel, blokkies bou, legkaarte bou, sulke goeters."]*

Participant 6: *"Playing ball, jumping trampoline, hoola-hoop, *Lindie always wants me to jump rope with her, and jump blocks, *Danie plays with his cars, we play cars together, there are even cars in the bath tub." ["Bal speel, swing, trampolien spring, hoola-hoop, *Lindie wil altyd hê ek moet tou spring, en blokke spring, *Danie speel met sy karretjies, ons speel saam karretjies, tot in die bad is daar karretjies."]*

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Participant 7: *"We play television games, and outside as well, throw the ball through the hoop, or things like that, it is a little bit of everything." ["Ons speel saam TV speletjies, ag en buite ook, gooi saam die bal deur die hoop of sulke goed, dis maar iets van als."]*

Participant 8: *"I draw with her, colour in with her, and outside she is always on the trampoline, then I sit underneath the tree with her, I am constantly with her. I believe in that, where she must be, I cannot leave her alone." "She rides bicycle, we take her out to "Funky Monkey", things like that, I believe a child has to get out, not always be inside the house." ["Ek teken saam met haar, kleur saam met haar in en buitekant is sy altyd op die trampolien dan sit ek onder die boom saam met haar, ek is gedurig by haar. Ek glo daaraan, waar sy ook moet wees, ek kan nie vir haar alleen los nie." "Sy ry fiets, ons vat haar uit na "Funky Monkey" toe, sulke goetertjies, want ek glo 'n kind moet uitkom ook, nie altyd by die huis nie."]*

Participant 10: *"We wrestle, I read books to him, we swim together, we chase each other and we play hide and seek." ["Ons stoei, ek lees vir hom boeke en ons gaan swem saam en ons jaag mekaar en ons speel wegkruipertjie."]*

It was clear that all the participants play with their children/grandchildren in different ways. Some of the games are physical, like kicking a ball, jumping on the trampoline or riding a bike. Other games require sitting down and concentrating more like drawing or colouring in. It is possible to play inside the house and outside the house and to make use of venues where there are play apparatus.

One of the participants viewed supervision during play as important. Children need their caregivers to be there for them, love them, care for them, understand them, understand what they are feeling and react to their feelings in the right way (Howard & McInnes, 2013:49). The only way caregivers can meet their children's needs and understand them is by building a relationship with them; this can be done by playing with their children. A thriving and healthy relationship that can be built through play with children is seen as an important asset in a child's life (Scales et al., 2006:691). This contributes to healthy development.

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Theme 2: Caregivers' views on the construction of play

Theme two, construction of play, was sub-divided into: child's time spent on play, whereabouts of play and structured versus unstructured play.

- **Child's time spent on play**

The participants were asked how much time their children should spend on playing.

Participant 1: *"As much as possible." ["Soveel as moontlik."]*

Participant 2: *"No I do not know, half a day spent on learning, half a day spent on playing." ["Nee ek weet nie, so half dag leer half dag speel."]*

Participant 5: *"Three hours at the most." ["So drie ure op die langste."]*

Six out of the ten participants were of the opinion that a child should be able to play as long as possible. One of the participants viewed routine in her children's lives as very important. Two of the participants were of the opinion that their children should play at least half a day long. Caregivers need to understand that children do not have to play; they need to play (Lester & Russell, 2010:2). All of the participants said that a child needs to spend a big part of the day playing.

- **Whereabouts of play**

The participants were asked where their children play. It seemed that most of the participants agreed that their children play more outside, however, both inside and outside were mentioned as whereabouts of play.

Participant 1: *"Both places." ["Altwee plekke."]*

Participant 2: *"Outside, play outside." ["Buite, speel buite."]*

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Participant 6: *"Outside a lot, because their little house is outside, the swimming pool is outside, trampoline and swing, so yes, definitely outside." ["Baie buite, want hul huisie is buitekant die swembad is buitekant, trampolien en swaai, so ja, definintief buite."]*

Seven out of the ten participants said that a child should play outside. Three of the participants mentioned that a child should play as much outside as inside. Wood (2013:124) and Holmes and Procaccino (2009:1103) agree that playing outside can enhance a child's physical, mental, cognitive, social and emotional capacities. It is clear that both the literature and the findings of the study correlate with the necessity for children to play outside. Factors to consider was the hot weather outside and all the play apparatus outside.

- **Structured versus unstructured play**

The participants were asked whether they should decide what their children should play or whether their children could decide on their own.

Participant 2: *"No, he has to decide on his own." ["Nee, hy moet self besluit."]*

Participant 3: *"They can decide for themselves, it just needs to be safe." ["Hulle kan self besluit solank dit net veilig is."]*

Participant 5: *"They can choose, and you can give them guidance I would say." ["Hulle kan kies en jy kan, leiding gee sal ek sê."]*

Participant 7: *"Well, now and again they would tell me they do not know what to play, then we give them ideas, but most of the time they use their own imagination." ["Ag, af en toe sê hulle vir my hulle weet nie wat om te speel nie, dan gee ons maar idees, maar die meeste van die tyd gebruik hulle hul eie verbeelding."]*

Eight out of the ten participants said that children should decide for themselves what they want to play. One of the participants said that children use their imagination to

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come up with games to play. A child's willingness or laziness is also a factor to take into consideration.

Two of the participants said that safety is a big concern and that adults should supervise children's play. Two of the participants said that they sometimes give their children ideas on what to play. Children do not always have the ability to think of new games and need adult intervention. Children also sometimes come up with naughty ideas, and that is why adult supervision is important while children are playing. Holt et al. (2013:1) agree that play is an active game where children make up their own rules. Children can play together or alone and this includes rough play, exercise play and games that are risky.

Caregivers should teach children responsibilities, consequences for their actions, discipline them in a positive manner, build children's self-esteem, encourage them and help them to set achievable goals (van Wyk & Lemmer, 2009:40-41). Caregivers have an opportunity to teach the above mentioned skills to their children by playing with them, which is an asset to the child (Scales, Benson, Roehlkepartain, Sesma & van Dulmen, 2006:691), assisting in healthy development.

Theme 3: Caregivers' views on how culture influences play

Theme three focuses on one sub-topic namely influence of culture on children's play.

- **Influence of culture on children's play**

Culture is a factor that influences every aspect of a person's life including where the person is employed, how they bring up their children, how their children play, and the types of games they play (Papalia et al., 2008:15). Culture is part of Bronfenbrenner's meso-system, which is one of a child's systems, but influences a child's life indirectly.

The participants were asked how their culture viewed play.

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Participant 1: *"As I told you earlier, discovering the world, to use something for something else as what it is supposed to be, like a wooden block that becomes a telephone, and a dog that becomes a doll, and climbing over something, and underneath it, and discover what water can do, and to play in the sand, that is really playing, to be free, and to enjoy that what is on the earth, even with the insects." ["Ekt nou-nou vir jou gesê, ontdek van die wêreld, om 'n ding te gebruik en om vir iets anders aan te wend as wat dit regtig is, soos 'n houtblokkie wat 'n telefoon word en 'n hond wat 'n pop word en oor 'n ding klouter en onder dit deur en ontdek wat kan water doen en in sand speel, dis rêrig speel, vry en dit geniet met dit wat in die aarde is, tot met die goggas."]*

Participant 2: "*Playing outside is playing for us*." *"Buite speel is vir ons speel."*

Participant 5: "*Good, not bad, yes, does not do naughty things. Play, play, play with a ball, kick a ball, does not throw other children with the ball or kick another, you know, child while they are playing*." [*"Mooi, nie lelik nie, ja, doen nie stoute goed nie. Speel, speel, speel met 'n bal, skop 'n bal, gooi nie die kinders met balle of skop 'n ander kind nie, jy weet terwyl daar gespeel word."]*

Participant 6: *"Playing outside, today everything is about technology, everything is video games and television and DVD's and and and, so the longer you can keep them small the better it is to rather play outside, to play with a car or a doll inside the house and not to lie in front of the television the whole day." ["Buite speel, want vandag se lewe het alles so tegnologie geword alles is video games en TV en DVD's en wat wat, so hoe meer jy hulle langer klein kan hou hoe beter om liewers buite te speel om met 'n karretjie of met 'n pop in die huis en nie voor die TV te lê die heeldag nie."]*

Participant 8: *"Yes, it is games like we always used to play when we were children like (tip)cat and I spy and all those things, I think you carry it over to your child and then they carry it over again to their children, so it is something that goes from one generation to the next, some fade away, others stay there." ["Ja, dis maar net speletjies soos wat ons altyd gespeel het toe ons 'n kind was soos kennetjie en blikkaspaai en al daai goeters ek dink maar jy dra dit oor na jou kind toe ook en dan dra hulle dit weer*

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oor na hulle kinders toe so dit is maar 'n ding wat gaan van 'n generasie na generasie, party sterf weg ander bly daar."]

Participant 9: *"We had folk dances when we were younger and we went into the woods to look for fruit. Today's children only play computer games and most of them ride their bicycles." ["Ons het soos toe ons jonger was volkspele gehad en ons gaan in die bos in en gaan soek vrugte. Vandag se kinders speel net computer games en meeste van hulle ry fiets."]*

Participant 10: "*Play is to get dirty and to be naughty. You know what, today's children do not play anymore, our kids used to play, but today's children do not really play, they do not know what play is, as long as they are in front of the television, they are happy. Don't you think our black culture has a different way of playing? Yes a lot, they had a different way of playing, they keep themselves busy with sticks and stones, our children cannot do that." ["Speel is lekker vuil word en lekker stout wees. Weet jy wat, eintlik vandag se kinders speel nie meer nie, ons tipe kinders het nog gespeel, maar vandag se kinders speel nie eintlik meer nie, hulle weet nie wat speel is nie, solank hulle voor die TV games kan sit is hulle happy. So jy sal nie byvoorbeeld sê ons swart kultuur het 'n ander manier van speel nie? Ja baie, hulle het 'n baie anderste manier van speel, hulle hou hulle self besig met stokkies en klippies, ons kinders kan nie dit doen nie."]*

Most of the participants struggled to answer the question about culture. The researcher had to ask the question in different ways in order to obtain the needed and valuable information from the participants.

Most of the participants said that their Afrikaans culture encourages a child to play outside. Some of the participants remembered games from their childhood that they taught their children; some of those games are still played today while others are not.

It is clear that a new culture of play has developed with the development of technology and of television games. Children these days tend to focus more on playing with technology, than playing outside.

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From the answers of the participants the researcher concluded that in previous generations children used their imagination more and played actively outside. At present, children tend to play inside more by using technological games. According to the Developmental Assets approach (Scales et al., 2006:691), the good times and games should be kept and remembered and passed on to new generations, but the new ways of playing with technology should also be embraced and should not be seen as a negative thing

Theme 4: Caregivers' views of factors influencing play

Theme four, factors influencing play, was sub-categorised into two themes namely; availability of time and obligations.

- **Availability of time**

The participants were asked whether they played with their children, and they all agreed, and how long and often they played with their children.

Participant 1: *"Every time an opportunity presents itself, it depends, you use every chance." ["Elke keer as daar 'n geleentheid opduik, dit hang maar af, mens benut elke kans."]*

Participant 2: *"Well, in the week not a lot, after work maybe an hour." ["Wel, in die week nie baie nie, en na werk miskien so 'n uur."]*

Participant 4: *"(We play)… a lot, until I am tired and I have had enough." ["(Ons speel)… baie, tot ek moeg is en genoeg gehad het."]*

Participant 5: *"About an hour." "Not every day, over weekends about an hour." ["Seker so 'n uur. Nou nie elke dag nie, dis gewoonlik oor naweke so 'n uur."]*

Participant 8: *"On and off throughout the day." ["So aan en af deur die dag."]*

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Participant 9: *"About three to four hours, twice a day." ["So drie tot vier ure, tweekeer 'n dag."]*

Participant 10: *"It is not every day, I would say every third day, mommy does not have a lot of time for herself." ["Dis nie elke dag nie, ek sal sê so elke derde dag, mamma het nie baie tyd vir haarself nie."]*

It seems that most of the participants tried to work in time to play with their children after they returned from work. According to Glenn and Knight (2012:3) play time with children happens in between the caregivers' other obligations like house chores, which means there is not always a lot of time to play with their children.

The grandparent loves to play with her grandchildren every chance she gets, but she is also restricted by the biological parents' routine or time. Caregivers need to spend time with their children in order not to neglect them; this will help children become confident in themselves (Coplan et al., 2004 and Rubin et al., in Papalia et al., 2008:325). It can be deduced that there is more time during weekends when caregivers are not working to play with their children.

- **Obligations**

The participants were asked whether there was anything that came between them and their children which causes them not to be able to play with their children.

Participant 6: *"Work and house chores, and tiredness, but they do not give you a chance to be tired, they will go on until you do something with them, but yes, making supper, cleaning house, washing, you still have to do the normal things, even if there is not always time, but you do it after eight when the children go to bed. "["Werk en huishou, en moegheid, maar hulle gee jou nie kans om moeg te wees nie, hulle sal aanhou totdat jy iets saam met hulle doen, maar ja kosmaak, huis skoonmaak, wasgoed doen, mens moet nog die normale goed doen al is daar nie altyd tyd nie, maar mens doen dit as hulle slaap na agt in die aande."]*

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Four of the participants said that nothing gets in their way of playing with their children, which shows that their children are a high priority to them. This does not mean that the caregivers who are employed do not see playing with their children as a high priority. They just do not have as much time to play with their children as they would probably want to. It seems that although the caregivers might be stressed or tired from work, they all try to find at least a few hours to play with their children or be with their children. Children's lives are often governed by adults' rules and children try to find their own way in the busy lives of their caregivers (Lester & Russell, 2005: ix). Children have to fall in with their caregivers' ways of doing things.

In line with Bronfenbrenner's ecological approach (Sigelman & Rider, 2006:22), the children in the study are influenced by their caregivers' (children's micro system) availability to play with them due to the responsibilities the caregivers have at work (children's exo system).

Theme 5: Caregivers' views of public play areas

Theme five, public play areas, was sub-divided into three different sub-themes namely; nature and availability, use of play areas and concerns/expectations of play areas.

- **Nature and availability**

The participants were asked whether or not there were public play areas available for their children to play in close to where they live.

Participant 1: *"No, not at all." ["Nee glad nie."]*

Participant 6: *"It is unsafe, the park is just down the street, you will see there is not a fence around it, the play apparatus is broken, the slide does not work, the swings do not have chairs on them anymore." ["Dis onveilig, die parkie is net hier onder, en jy sal sien die parkie het nie meer omheining nie, die apparate is gebreek, die slide werk nie, die swaais het nie meer stoeltjies in nie."]*

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Participant 8: *"No, not near to where we live, that is why we always take her to Geelhoutpark, we take her there because close to where we live there are not really places to go to, there was a place a long time ago, but it is closed now and torn down, so we always take her out, or we take her to the Zoo there in Pretoria, close to us there are not really places." ["Nee nie rondom waar ons bly nie. Dis hoekom ons vat haar maar altyd daar na die daai Geelhoutpark, ons vat haar maar soontoe want daar rondom ons is daar nie eintlik 'n plek waar, daar was vroeër jare maar dis mos nou maar toe en afgebreek, so ons vat haar maar altyd uit of ons vat haar maar dieretuin toe daar na die dieretuin in Pretoria of so, so rondom ons is daar nie regtig plek nie."]*

Participant 10: *"Yes, there is a park at the swimming pool." "There are jungle gyms and swings and a slide, and there is a swimming pool." ["Ja, daar is 'n parkie by die swembad. Daar's klimrame en swings en 'n glyplank, en daars 'n swembad."]*

Nine out of the ten participants said that there is not a public play area close to their home. Most of the participants have to take their children to public play areas where they have to drive to get there. Most of the public play areas require an entree fee. Children's ability to play is influenced by their age, gender, their socio-economic status and the area they live in (Veitch et al., 2007:410). It seems that most of the caregivers have to pay money in order for their children to play anywhere outside of their homes, since there are no public parks. Not all caregivers have the necessary means to go to structured places for their children to play.

Two of the participants mentioned the public play area in their area, but said it was unsafe and the equipment was broken. One of the participants mentioned a public play area at the swimming pool which the other participants did not mention; this could be that she stayed nearer to the public swimming pool. It seems as if it is important for the participants that their children should get out of the house. The findings of the study correlates with Little's (2013:1-17) findings that if a caregiver viewed a play area as unsafe, it would greatly hamper children's ability to play there. Veitch et al. (2007:409-422) also found that children will not play at play areas were the equipment is broken

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or outdated. This is a clear example of Bronfenbrenner's theory, that the meso system (the play areas), has a direct influence on the micro system (the child).

- **Use of play areas**

The participants were asked whether or not they used the play areas available to them.

Participant 10: *"Not so much, let us say once per month, maybe an hour, with supervision." ["Nie baie nie, kom ons sê so eenkeer per maand, seker so 'n uur, met supervisie."]*

The one participant who knew about a public play area and whose child used it said that she is with her child for supervision, and that they go there once a month for about an hour. Most of the participants found ways, or time or places to play with their children which shows that they focused on the assets of their community and not on the negatives of not having safe play areas (Scales et al., 2006:691). Play can happen at any time, anywhere.

- **Concerns/expectations of play areas**

The participants were asked whether or not they would like a public play area and what they thought it should look like. All of the participants said that they would like a public play area in their immediate environment. The crime and safety of the play areas form part of Bronfenbrenner's macro system, which is part of a child's systems, but influences a child indirectly.

Participant 3: *"Clean and safe." ["Skoon en veilig."]*

Participant 5: *"Yes, the games/toys that are there have to be safe, and preferably there should be a fence." ["Ja, hy moet met speelgoed wat veilig is toegerus wees, en hy moet omhein wees verkieslik."]*

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Participant 8: *"Convenient for the child, it has to be safe, OK, it is logical the parent has to be there, it has to be safe." ["Gerieflik vir die kind, veilig wees, OK, dis mos logies die ouers moet daar wees, dit moet net veilig wees."]*

All of the participants agreed that they would like the public play areas to be safe and clean. The play equipment should be in working condition in order for children to play on it and to have fun (Veitch et al., 2007:409-422). According to Maslow's hierarchy of basic needs, safety is level two of a person's basic needs (Thompson & Henderson, 2011:28). Caregivers need to know that their children will always be safe when they are playing. There should not be any perceived dangers or risks. This includes factors like crime that should not be there and/or play equipment that should be safe to play on.

Theme 6: Caregivers' recommendations about play and play areas

Theme six, caregivers' recommendations about play and play areas, was sub-divided into two themes namely; recommendations for caregivers/parents and recommendations for the municipality.

- **For parents/caregivers**

The participants were asked to give advice to other caregivers about play.

Participant 3: *"They just have to enjoy it." ["Hulle moet dit net geniet."]*

Participant 7: *"Use your imagination." ["Gebruik jou verbeelding."]*

Participant 10: *"To make more time with their children, because some people do not have any time, they can at least listen to what the child wants to play and not always say no." ["Om bietjie meer tyd te maak saam met hulle kinders, want party mense het glad nie tyd nie, en hulle kan ten minste bietjie luister wat die kind wil speel en nie altyd sê nee nie."]*

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Most of the participants emphasised the fact that time is an invaluable part when it comes to playing with your children. There is never enough time to play with one's child and one can always make more time. Adults should make an effort to play with their children. If a caregiver is responsive to a child, it influences a child in every aspect of his/her being (Landry et al., 2012:969). The one participant stressed the fact that house chores and play is as important as the other. This correlates with the Developmental Assets Theory (Scales et al., 2006:691) that both chores and play can be beneficial to children. Play should be fun, educational, developmental and enjoyable for children.

- **For the municipality**

The caregivers were asked to give the municipality advice about public play areas.

Participant 4: *"Neat, clean and safe." ["Netjies en skoon en veilig."]*

Participant 6: *"Parks, put fences around, cut the grass, there are just thorns." ["Parkies, sit weer omheining op, sny die gras gereeld…dis net dorings…"]*

Participant 7: *"There were places that had parks, but they no longer exist, I would like that to come back, they should maybe get alternative materials for the swings' chains, so that they cannot be stolen." ["Hier is plekke wat parkies gehad het, maar dit bestaan nie meer nie, en ek sal graag dit weer wil terughê, hulle moet dalk alternatief kry vir kettings vir die swings dat dit nie gesteel kan word nie."]*

Participant 8: *"Just that is has to be safe, there has to be fences around it, and someone should be at the gate, so that you can see who comes in and out or whatever, the big thing is that it should be safe." ["Net dit moet veilig wees, dit moet omhein wees en daar moet iemand wees wat by die hek kan wees sodat jy kan sien wie kom in en wie kom uit of wat okal... die groot ding is dit moet veilig wees."]*

Participant 9: *"I would say parks again, because there is nothing, parks like, a place of safety, almost like a after school with games that they can play the whole day long*

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which is educational, something like that, yes." ["Ek sal sê weer parkies, want hier is nie, parkies soos, 'n veilgheidsplek, amper soos 'n naskool dan is daar speletjies wat hulle heeldag kan speel wat geleerd is en so iets ja."]

Participant 10: *"Maybe give more security, because there is no security, some of the swings are so broken you cannot even play on them, so I would say create a little bit of order." ["Meer sekuriteit gee dalk, want daar's geen sekuriteit nie, party van die swings is so gebreek jy kan nie eers op dit speel nie, so ek sal sê skep bietjie orde."]*

All of the participants agreed that the municipality should bring parks back that are safe, clean and neat. There should be gates around the parks with security to keep everyone who enters or leaves accountable. There should be grass where children can run on without any thorns that hurt their feet. The municipality is part of a child's exo-system that influences a person although he/she is not in the system (Sigelman & Rider, 2006:22). The lack of safe public play areas directly influences the ability of the children of the study, to play.

3.7 SUMMARY

The question the study aimed to answer was: What are caregivers' views of children in Mikro School in Rustenburg, North West Province, of play and play areas? The goal was to explore and describe the caregivers' views by interviewing them and deriving meaning from the data that had been collected during the research project. This chapter provided a complete overview of the research methodology used for drawing the empirical findings and conclusions. The ethical aspects that guided the empirical process has also been discussed. All the requirements as set out by the University of Pretoria were met during the data-analysis.

It is very important for caregivers to play with their children. Children play in different ways in different places, which can be inside or outside. Children of different cultures might play differently. Technology seems to have infiltrated the way in which children play these days.

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The research was conducted in order to establish caregivers' views of play and play areas. There was a need to establish whether caregivers value children's play and the holistic benefits that play has for children. Caregivers face certain challenges in South Africa regarding play and often work long hours, thus they do not have time to play with their children or that they do not view play as important. The safety of play areas and the high rate of crime are big influences on children's ability to play. Children's ability to play is impacted or influenced by their micro system (their caregivers), their macro system (their culture) and their exo system (the availability of public play areas). Based on the empirical findings of this chapter, the researcher will draw conclusions and make recommendations in the following chapter.

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CHAPTER 4
CONCLUSIONS AND RECOMMENDATIONS

4.1 INTRODUCTION

Play is an important developmental aspect of children's lives. Caregiver's views on play highly impact children's abilities or opportunities to play. The availability and conditions of public play grounds affect children's ability to play. In this chapter, the conclusions and recommendations of the empirical data and findings of this study will be discussed. The researcher will first examine whether the goal and objectives of the study have been achieved in order to contextualise the conclusions and recommendations.

4.2 RESEARCH GOALS AND OBJECTIVES

The goal of the study was to explore and describe the views of caregivers of children in Mikro School in Rustenburg, North West Province, of play and play areas. Although the study only used ten participants and generalisation is limited, the goal was achieved in relation to the specific study and much insight was gained in the understanding of caregivers' views on play and play areas.

The goal was achieved through the following objectives:

- *To theoretically contextualise the role of play in the lives of children in early childhood.*

The objective was reached as the researcher provided an extensive literature review of play, play areas and caregivers' views on play in chapter two. The researcher found that much literature was available in terms of play, but that research and literature about caregivers' views on play specifically in the South African context, was not readily available.

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- *To explore and describe caregivers' views on play in the lives of their children.*

The researcher received rich, cumulative data by doing interviews with the participants. The recommendations they made will be applicable to caregivers of children between the ages of four to six years as discussed at the end of this chapter.

The research question that the study intended to answer was as follows: What are the views of caregivers of children in Mikro School in Rustenburg, North West Province, of play and play areas? The question was answered during the data collection and analysis stage of the research process.

- *To explore and describe how and whether caregivers engage with their children in play.*

The objective was reached as the abovementioned aspects formed part of the interview schedule used with the participants. The participants were eager to share their views since it concerned the children whom they love and care for. Play is generally a positive topic and a fun topic to talk about.

- *To explore and describe caregivers' views on the availability and utilisation of play areas for their children.*

The objective was reached as the abovementioned aspects formed part of the interview schedule used with the participants. The participants had clear views on and insights into the availability and utilisation of play areas for their children. Generally, it was a matter of concern for the participants.

- *To raise awareness among caregivers and professionals on the value of play and access to play areas through the conclusions and recommendations of this study.*

The objective was reached as the abovementioned aspects formed part of the interview schedule used with the participants. The conclusions and recommendations of this study will be given to caregivers and professionals to enhance their current

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knowledge on the value of play and play areas. The professionals mentioned in this study are the municipal workers. Other professionals can include teachers, social workers, educational psychologists and occupational therapists.

4.3 KEY FINDINGS

The key findings of caregivers' views on play and play areas are as follows:

- Children use play to explore the world around them. Children can play by using different objects and instruments, like balls, books, and dolls. Play is an integral part of childhood. Play can be physical activities that are like jumping, kicking a ball, throwing a ball, or sitting down and playing with dolls or colouring in a picture. Play can also be gender related, for example girls like to play with dolls and boys like to play with cars. Play can happen anywhere at any time. Children can learn something new while they are playing.

- There needs to be a balance between playing and doing chores. A child should not do too many chores. The child's age should be taken into consideration when allocating chores.

- Play should be a combination of educational, physical and imaginative play.

- Children should be able to play as long as possible. Children do not have to play; they need to play (Lester & Russell, 2010:2). Children need to spend a big part of the day playing.

- Children should mostly play outside, but can also play inside. Factors to consider is the hot weather outside and all the play apparatus outside.

- Adults should supervise children's play. Caregivers can give their children ideas on what to play. Children do not always have the ability to think of new games and need adult intervention. Children also sometimes come up with naughty ideas, and that is why adult supervision is very important while children are playing.

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- Within the Ecological Systems Theory, caregivers form part of Bronfenbrenner's micro system which has a direct influence on how children play. If caregivers deem play areas unsafe, children will not be able to play there. Children often play outside or alone when caregivers are too busy or too tired to play with their children.

- Different ways of playing can be transferred from one generation to the next. It is possible that different cultures can play in different ways. Children these days tend to play more with technological devices. Children's culture forms part of Bronfenbrenner's macro system which indirectly influences a child's ability to play.

- Caregivers want to spend as much time as possible to play with their children. This is not always possible, due to obligations like work and house chores. There should be a balance between caregiver's duties and their time to play with their children. Caregivers' workplace form part of a child's exo-system, the child is not part of the system, but it has a direct impact on him/her.

- Caregivers want their children to be safe while playing. If the play areas in their immediate environment are not safe, or the equipment is broken or outdated, caregivers resort to driving and or paying play places in order for their children to play safely. According to the Ecological Systems Theory, public play areas are part of Bronfenbrenner's exo-system, since the governing bodies' ability or responsibility to keep public play areas safe and neat, impacts a child's ability to play there.

- The Developmental Assets Theory states that one should focus on the positive and not on the negative aspects. These caregivers found the time, energy and places to play with their children, even when they were tired or when there where no public play areas to play at.

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4.4 CONCLUSIONS

- Qualitative research assisted the researcher to understand the personal experiences of the caregivers, which also helped with the understanding of the phenomena of play and play areas based on the views of the caregivers themselves.

- Interview schedules give the researcher a guided opportunity to gather rich ideas and thoughts directly from the participants.

- Play is an important part of every child's life and influences a child holistically.

- A child's ability to play is directly/indirectly influenced by Bronfenbrenner's micro, meso, macro and exo-systems in the Ecological Systems Theory.

- Caregivers' views on play and play areas influence a child's ability to play.

- Children can play almost anywhere, whether it be inside or outside, as long as it is safe.

- The Developmental Asset Theory encourages us to focus on the positive aspects of play and play areas and not on the negative aspects.

4.5 RECOMMENDATIONS

4.5.1 Recommendations to caregivers

Even if caregivers have busy schedules and limited resources, they can still engage in play with their children.

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4.5.2 Recommendations to authorities/local municipalities

The caregivers expected the municipality or people in power positions to maintain the parks. There should be security, to see who comes in and out of the park. There should be fences around the parks. The grass should be maintained and there should not be any thorns. The equipment must be kept up to date, and must be safe for children to use.

4.6 RECOMMENDATIONS FOR FUTURE RESEARCH

From the data collected the researcher found that the following topics can be researched further:

- The impact that technology has on the way that children play.
- The impact of socio economic conditions/circumstances on how children play.
- Children's views on play and play areas.

4.7 CONCLUDING REMARKS

Children need to play. It forms part of who they are. They develop physically, emotionally and psychologically through play. Children's world of play can never be limited. They can play anywhere at any time. Children deserve to have safe play areas to play at. Children's healthy development is dependent on their ability to play. Caregivers can show how much they love and care for their children by playing with them as much as possible.

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APPENDICES

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- Appendix 4: Letter of informed consent.
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Appendix 1: Ethical clearance letter

UNIVERSITEIT VAN PRETORIA
UNIVERSITY OF PRETORIA
YUNIBESITHI YA PRETORIA

Faculty of Humanities
Research Ethics Committee

28 January 2016

Dear Prof Lombard

Project:	**Caregivers' views on play and play areas at Mikro School in Rustenburg, North West Province**
Researcher:	**S Kruger**
Supervisor:	**Prof R Prinsloo**
Department:	**Social Work and Criminology**
Reference number:	**27216812 (GW20151128HS) Group research**

Thank you for the response to the Committee's correspondence 20 November 2015.

The Research Ethics Committee notes that the above application forms part of a larger group research project. The Committee formally **approved** the application at an *ad hoc* meeting held 28 January 2016, data collection may therefore commence.

Please note that this approval is based on the assumption that the research will be carried out along the lines laid out in the proposal. Should your actual research depart significantly from the proposed research, it will be necessary to apply for a new research approval and ethical clearance.

The Committee requests you to convey this approval to the researcher.

We wish you success with the project.

Sincerely

Prof. Karen Harris
Acting Chair: Research Ethics Committee
Faculty of Humanities
UNIVERSITY OF PRETORIA
e-mail: karen.harris@up.ac.za

Kindly note that your original signed approval certificate will be sent to your supervisor via the Head of Department. Please liaise with your supervisor.

Research Ethics Committee Members: Prof KL Harris(Acting Chair); Dr L Bokland; Dr JEH Grobler; Ms H Klopper; Dr C Panebianco-Warrens; Dr C Puttergill; Prof GM Spies; Dr Y Spies; Prof E Taljard; Ms KT Andrew (Committee Admin); Mr V Sibhele (Committee Admin)

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Appendix 2: Letter of intent

UNIVERSITEIT VAN PRETORIA
UNIVERSITY OF PRETORIA
YUNIBESITHI YA PRETORIA
Faculty of Humanities
Department of Social Work & Criminology

26/02/2016
Our Ref: Prof CE Prinsloo
Tel: (012) 420-2601
E-mail: reineth.prinsloo@up.ac.za

Ref. Soleil Kruger - student number 27216812
Tel. 0846139932
E-mail: soleilkruger@yahoo.com

The Head
Rustenburg Mikro Skool
56 Kruger Street
Rustenburg
0299

Dear Ms Mathilda van der Merwe

REQUEST FOR PERMISSION TO PERFORM EMPIRICAL RESEARCH
SOLEIL KRUGER - STUDENT NUMBER 27216812

I am a registered student for the following programme at the Department of Social Work, University of Pretoria: MSW (Play Therapy). I am required to write a mini-dissertation, resulting from a research project, under the supervision of Prof CE (Reineth) Prinsloo. The research study has been approved by the Departmental Research Panel and will only proceed once the Faculty Research Proposal and Ethics Committee has approved the proposal and data collection instrument(s). The following information from the research proposal is shared with you, although a copy of the research proposal will be provided to you if needed.

The envisaged title of the study is: Caregivers' views on play and play areas at Mikro School in Rustenburg, North West Province.

The goal of the study is to explore and describe caregivers' views of play and play areas at Mikro School in Rustenburg, North West Province.

The objectives of the study are:

- To theoretically contextualise the role of play in the lives of children in early childhood.

Fakulteit Geesteswetenskappe
Lefapha la Bomotho

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University of Pretoria, Private Bag X20
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- To explore and describe caregivers' views on play in the lives of their children.
- To explore and describe how and whether caregivers engage with their children in play.
- To explore and describe caregivers' views on the availability, nature and utilisation of play areas in the living environment.
- To raise awareness among caregivers and professionals on the value of play and access to play areas through the conclusions and recommendations of the study.

The envisaged target group of the study is caregivers and/or parents of children between the ages of four to six years.

I intend to do the empirical part of the study through means of 12 semi-structured interviews with caregivers and/or parents of children between the ages of four to six years in your school. This request will not result in any demands from you or your staff. No costs will be incurred by this request.

I undertake responsibility to provide you with a copy of the final report – if required.

It would be appreciated if you will consider this request and identify such caregivers and/or parents and grant written permission (on an official letter head of your agency) to proceed with the project, at your earliest convenience.

Kind regards

Ms Soleil Kruger

.....
STUDENT

Prof CE Prinsloo

.....
ASSOCIATE PROFESSOR AND SUPERVISOR

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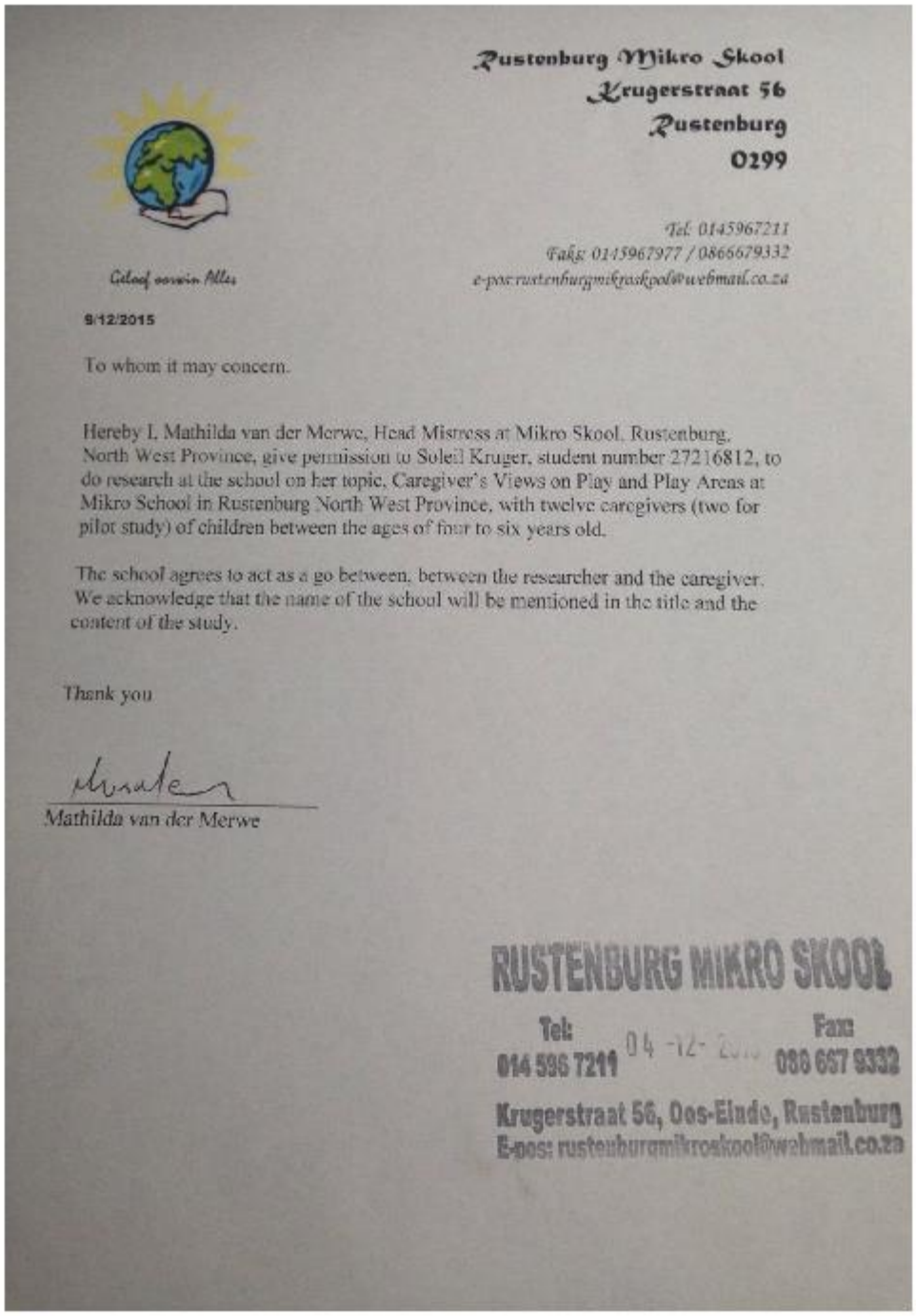
Appendix 3: Permission from Mikro School



Rustenburg Mikro Skool
Krugerstraat 56
Rustenburg
0299

Tel: 0145967211
Faks: 0145967977 / 0866679332
e-pos:rustenburgmikroskool@webmail.co.za

Geloof oorwin Alles

9/12/2015

To whom it may concern.

Hereby I, Mathilda van der Merwe, Head Mistress at Mikro Skool, Rustenburg, North West Province, give permission to Soleil Kruger, student number 27216812, to do research at the school on her topic, Caregiver's Views on Play and Play Areas at Mikro School in Rustenburg North West Province, with twelve caregivers (two for pilot study) of children between the ages of four to six years old.

The school agrees to act as a go between, between the researcher and the caregiver. We acknowledge that the name of the school will be mentioned in the title and the content of the study.

Thank you

Mathilda van der Merwe

RUSTENBURG MIKRO SKOOL
Tel: 014 596 7211
04 -12- 2015
Fax: 086 667 9332
Krugerstraat 56, Oos-Einde, Rustenburg
E-pos: rustenburgmikroskool@webmail.co.za

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APPENDIX 4: LETTER OF INFORMED CONSENT

UNIVERSITEIT VAN PRETORIA
UNIVERSITY OF PRETORIA
YUNIBESITHI YA PRETORIA

Faculty of Humanities
Department of Social Work & Criminology

26/02/2016

INFORMED CONSENT

1. NAME OF RESEARCHER
Soleil Kruger
Tel: 0846139932

2. RESEARCH TITLE
Caregivers' views of play and play areas at Mikro School, Rustenburg, North West.

3. PURPOSE OF THE RESEARCH STUDY
The purpose of the research is to explore the views of caregivers on play and play areas at Mikro School, Rustenburg, North West.

4. DESCRIPTION OF PROJECT
The aim of the research is to explore the views of caregivers on play and play areas within Rustenburg. The researcher will conduct one-to-one interviews, guided by a semi-structured interview schedule, with the selected participants. The researcher will explore their views on play and play areas. The interview will take between 45 minutes to an hour. Every interview will be recorded with a digital recorder for the researcher to be able to transcribe the content and analyse the research data. Participants are guaranteed of confidentiality and their responses will be anonymous in the final research report.

5. NUMBER OF PARTICIPANTS
Ten (10) to twelve (12) participants will be selected to take part in the research project.

6. RISKS INVOLVED IN THE RESEARCH STUDY
The participants will not be subjected to any harm and the researcher will make every effort to conduct this research in a manner that will minimize possible harm, however, should the researcher perceive any participants to be negatively affected by the research a debriefing session would be conducted.

7. BENEFITS OF THE RESEARCH STUDY
There are no economic benefits for participating in this research project. However, the long-term benefits are that by talking about their views on play and play areas it will be contributing towards the recommendations the research findings will propose and as a result, strategies may be developed to address them.

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Lefapha la Bomotho

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8. VOLUNTARY PARTICIPATION

Although the researcher seeks my permission to be part of the research, it does not obligate me to do so. My participation is voluntary. I will be free to withdraw my participation at any point, and will experience no negative consequences.

9. RECORDS OF PARTICIPATION IN THIS RESEARCH

The information provided will be protected and my responses will be kept confidential. Recordings and transcripts will be stored in a locked cabinet. The only individuals who will have access to this information will be those directly involved with this research project that have been trained in methods to protect confidentiality. The research information will be safely stored at the Department of Social Work and Criminology, University of Pretoria for a period of fifteen years. The results of this research may appear in publications but participants will not be identified.

10. CONTACT PERSONS

If I want more information about this research, I may contact the researcher as indicated at the beginning of this document.

11. AGREEMENT TO PARTICIPATE IN THE RESEARCH STUDY

My signature indicates that I have read, or listened to, the information provided above and that I received answers to my questions. I have freely decided to participate in this research and I know I have not given up any of my legal rights.

I hereby freely give my permission to participate in this research project.

This document was signed at _____ on the _____day of _____ 2015.

NAME: .....

SIGNATURE: .....

SIGNATURE OF RESEARCHER: .....

Soleil Kruger

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APPENDIX 5: ENGLISH INTERVIEW SCHEDULE

SECTION A: BIOGRAPHICAL DETAILS

Biographical profile of participant (parent/care-giver)

Age	
Gender	
Home language	
Level of education	
Employment status	Full time/ part-time/ unemployed
Type of employment	
Relational status	Single / Married / Divorced / Widowed / Live-in partner
Main breadwinner in the home	Participant / Spouse / Partner / other* *Please specify ……
Sources of income	Salary / pension / social grant / other* *Please specify ……

Family composition

Children in the home	Age (yrs)	Bio-logical child	Gender	Full-time day care	Attend pre-school	Attend school	Attend after school	Chronic illness	Dis-ability
1		Y/N	M/F	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
2		Y/N	M/F	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
3		Y/N	M/F	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
4		Y/N	M/F	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
5		Y/N	M/F	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
6		Y/N	M/F	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
								Please specify: …… ……	Please specify: …… ……..

Number of children relevant to the age group for the study: ----------
(indicate with an X in the table above)

SECTION B: INTERVIEW SCHEDULE

1. What are your views (or your opinion) on play?
   - Definition/description of play
   - Importance of play vs. learning or tasks in the home
   - Types of play children should engage in (e.g. educational, fantasy, physical play)
   - The amount of time that children should play in a day
   - Indoor/outdoor play

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- Structured play (determined and planned by parent/care-giver) vs. unstructured play (determined by child)

2. How do people in your culture regard/view play? (e.g. Pedi, Xhosa, White)

3. Do you play with your child?
   - If yes, describe how you and your child play
     - Duration (how long) and frequency (how often)
     - What type of play, e.g. board games, puzzles, fantasy play, watching movies/cartoons?
   - If no, what are possible reasons for not playing with your child?
   - What factors influence your involvement in play with your child (time, responsibilities/chores, motivation to play, likes/dislikes)

4. Where does (do) your child/ren mostly play? (e.g. inside/outside, bedroom, garden, sidewalk, next door)

5. Do you have any public play areas in your environment where child/ren can play?
   - If yes (there are play areas):
     - Describe the play areas (nature and quality)
     - Do your children make use of these areas?
       - If yes, how often, how long, with/without supervision
       - If no, what are reasons? (e.g. concerns over safety, strangers, traffic)
   - If no (there are no play areas):
     - Would you like to have a public play area where your child/ren can play?
     - What would you expect these areas to be like? (safety, distance, structures)

6. What advice on children's play can you give to other mothers or care-givers?

7. What recommendations regarding play areas can you make to the local authorities or municipality?

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APPENDIX 6: AFRIKAANSE ONDERHOUDSKEDULE: SPEEL EN SPEELAREAS

AFDELING A: BIOGRAFIESE BESONDERHEDE

Biografiese profiel van deelnemers (ouer/versorger)

Ouderdom	
Geslag	
Huistaal	
Vlak van opvoeding	
Werkstatus	Voltyds/ Deeltyds/ Nie-werksaam
Tipe werk	
Verhoudingstatus	Enkellopend / Getroud / Geskei / Weduwee / Saamleefmaat
Hoofbroodwinner in die huis	Deelnemer / Huweliksmaat / Saamleefmaat / Ander* *Spesifiseer asseblief …….
Bron van inkomste	Salaris / pensioen / toelaag / ander* *Spesifiseer asseblief ……

Familie komposisie

Kinders in die huis	Ouder-domme (jare)	Biologiese kind	Geslag	Voltyds dagsorg	In kleuter skool	In skool	In naskool	Kroniese siekte	Gestremdheid
1		J/N	M/V	J/N	J/N	J/N	J/N	J/N	J/N
2		J/N	M/V	J/N	J/N	J/N	J/N	J/N	J/N
3		J/N	M/V	J/N	J/N	J/N	J/N	J/N	J/N
4		J/N	M/V	J/N	J/N	J/N	J/N	J/N	J/N
5		J/N	M/V	J/N	J/N	J/N	J/N	J/N	J/N
6		J/N	M/V	J/N	J/N	J/N	J/N	J/N	J/N
								Spesifiseer asb: ……	Spesifiseer asb: ……..

Aantal kinders wat deel uitmaak van die studie: ……

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AFDELING B: ONDERHOUDSKEDULE

1. Wat is u opinie/oogpunt oor speel?
   - Definisie/beskrywing van speel.
   - Belangrikheid van speel teenoor takies in die huis.
   - Tipe speletjies waaraan kinders moet deelneem (bv: opvoedkundig, fantasie, fisiese spel).
   - Hoe lank moet ‘n kind speel in die dag?
   - Binne/buite speel?
   - Gestruktureerde speel (bepaal en beplan deur ouer/versorger) teenoor ongestruktureerde speel (bepaal deur die kind).

2. Hoe sien mense in u kultuur speel?

3. Speel u met u kind?
   - Indien ja, beskryf hoe u en u kind speel?
     - Tyd (hoe lank) frekwensie (hoeveel keer).
     - Watter tipe speletjies speel u, bv, bord speletjies, legkaarte, fantasie spel, televisie kyk, flieks kyk.
   - Indien nee, watter redes is daar dat u nie met u kind speel nie?
   - Watter faktore beinvloed u betrokkenheid met speel met u kind? (Tyd/werk/verantwoordelikhede/motivering om te speel/voorkeure/afkeure).

4. Waar speel u kinders die meeste? (bv buite/slaapkamer/tuin/sypaadjie/bure).

5. Weet u van enige openbare areas in u omgewing waar u kind kan speel?
   - Indien ja (daar is speelareas):
     - Beskryf die speelarea (aard en kwaliteit)
     - Gebruik u kind die speelareas?
       - Indien ja, hoe baie, hoe lank, met of sonder supervisie?
       - Indien nee, wat is die redes hiervoor? (bv bekommernisse oor veiligheid, vreemdelinge of vervoer)
   - Indien nee (daar is geen speelareas nie):
     - Sal u daarvan hou om openbare speelareas te hê waar u kind kan speel?
     - Hoe sou u verwag moet hierdie speelareas lyk? (afstand, veiligheid, strukture)

6. Watter advies kan u vir ander ouers/versorgers gee oor “speel” met hulle kinders?

7. Watter voorstelle oor speelareas sal u maak vir die munisipaliteit of mense in gesagsposisies?

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