

The effect of a community-based social support programme on the resilience of children from vulnerable families

Motlalepule Ruth Mampane

Faculty of Education, University of Pretoria, 0002 Pretoria, email: ruth.mampane@up.ac.za

Abstract

This article reports on the effect of a community-based social support programme offered through a government-linked centre that works on the resilience of children of families from low socioeconomic backgrounds. Purposive sampling was used to select four parents (mothers) and nine school-going children (N=13) who all benefit from and attend a community-based social support programme (drop-in centre) that targets vulnerable learners and their families. A case study design was implemented to construct data using biographical questionnaires, semi-structured interviews and focus group discussions. The findings revealed that the socioeconomic status of families and the degree of vulnerability of primary school children are key determinants and identification strategies that are used by schools to refer learners to social support programmes aimed at supporting their resilience. Moreover, the identification of vulnerable children through the school system enhances and facilitates their family's access to social support programmes..

Keywords

Resilience; social support; drop-in centre; family resilience; social support programme; vulnerable families

Introduction

Community-based social support programmes facilitate the implementation of government policies (Sansom, 2011) aimed at enhancing the resilience of individuals and families (Distelberg & Taylor, 2015) in the communities they serve. There is sufficient literature available on programmes that support the resilience of school-going children (Walsh & Kane, 2015), especially the programmes offered by non-government organizations (NGOs) and government-sponsored social support programmes (Republic of South Africa, 2011; Voss & Lenihan, 2015). However, there is a dearth of literature that focuses on the role of family and schools in supporting childhood resilience. Researchers such as Craigie, Brooks-Gunn, and Waldfogel (2012), Masten (2001), Werner and Smith (2001) and Walsh (2012, 2015), argue that family context and structure influence the resilience of children. Similarly, Fomby and Cherlin (2007) argue that family structure, e.g. marital status of parents, socioeconomic status and support, may influence the stability of children negatively or positively, even into their adulthood. Many South African families experience high poverty levels (Chipkin & Ngqulunga, 2008). In 2011, a household census reported that 15.5% of South African families were earning no financial income and 29.7% of those households were in the Gauteng province (Lewis, 2018; Statistics South Africa, 2015).

Stats SA's Census Report of 2015 confirmed that the number of female-headed households with no financial income exceeded the corresponding number of male-headed households. The current study purposively selected four parents and nine school-going learners all living in the Mamelodi

area and all from single parent, female-headed households. All caregivers involved in this study were unemployed, they occasionally found part-time work positions, and all the participants relied on the support received from community-based social support programmes. According to Holborn and Eddy (2011), most families who have to cope with unemployment and poverty experience dysfunctional lives. What is worrisome in South Africa is that employment is distributed along gender and generational lines, with women in the lower distribution graph of employment (37% of working age women are employed, compared to 50% of men) and high unemployment of youths (50% – higher than all older age groups) (Sulla & Zikhali, 2018, p. 4). This implies that most South Africans experience huge unemployment problems (Industrial Development Corporation [IDC], 2013).

The Department of Social Development uses social and educational programmes to implement social support policies, help alleviate poverty, intervene in existing risk and adversity, and build resilience in communities (Republic of South Africa, 2011). Therefore, social support programmes can be relied on to assist communities in managing adversity in their environment. Social support is relational (it involves the existence of a relationship) and focuses on providing actual assistance during stressful times (Lahey & Cohen, 2000). In their research on the stress levels of single-parent households, Conger, Conger, and Martin (2010), who used the Family Stress Model, found that families who experienced economic pressures were more susceptible to their children being at risk of behavioural and/or emotional issues. Research conducted in the impoverished villages of Cameroon by Tchombe et al. (2012) found that strong family support could ameliorate the threats associated with a family's socioeconomic challenges.

Heaney and Israel (2008) state that social support programmes aim to strengthen the behavioural and functional aspects of a relationship by using four key areas of support: emotional, instrumental, informational and appraisal support. To ensure the effectiveness of social support programmes, Ozbay et al. (2007, p. 37) declare that such programmes must create clear and accessible social ties as well as access for individual(s), larger communities and organizations to available resources.

A report by Sulla and Zikhali (2018), sponsored by the International Bank for Reconciliation and Development, confirms that almost 50% of the South African population is chronically poor and that the country has a small middle-class population. The report further states that there are high levels of income polarization characterized by a high percentage of the population classified as low-income earners, few as high-income earners, and a small number as middle-income earners (Sulla & Zikhali, 2018, p. xviii). Previous survey reports by Stats SA (2013) on the living conditions of South Africans found that from 2008 to 2009, 56.8% (more than 50%) of the population lived below the poverty line, as only about 16 million out of the almost 52 million South Africans were employed in the third quarter of 2016 (Statistics South Africa, 2013).

Community-based social support programmes

Socioeconomic status, quality of parent–child relationship and family life satisfaction have an influence on family functioning (Conger et al., 2010). The previous Statistician-General, Dr Pali Lehohla, confirmed that vulnerable population groups (children aged 17 years and younger; the female population and people over the age of 60 years) rely on social support programmes and state resource allocations to improve their lives (Stats SA, 2017). Enhancing access to resources for destitute and vulnerable families through community-based social support programmes like drop-in centres, is one way of supporting vulnerable population groups. Vulnerable groups are defined as a 'part of the South African population that experience a higher risk of poverty and social exclusion than the general population' (Stats SA, 2017, p. 1). The state social support grant system is intended to alleviate adversity in most South African families where it serves as the only source of income. The 2013 report by SASSA (South African Social Security Agency) and UNICEF SA (United Nations Children's Fund South Africa) on South Africa's social grant system found that 76% (7.56 million) of eligible children (0–17 years) were receiving the child social grant (CSG). Sadly, 23.7% (2.35 million) of eligible children had not received the CSG due to lack of access in 2011.

Forms of adversity reported by most South African families from low socioeconomic residential areas include poor housing, hunger, insecurity, a high crime rate and the poor delivery of essential services like law enforcement by police and efficient service delivery by municipalities (Prinsloo, 2016). Due to recent resource constraints, South Africans have increasingly experienced inadequate access to electricity, transportation, education and health resources (Ebersöhn, Loots, Mampane, Omidire, & Malan-Van Rooyen, 2017). Conger et al. (2010) declare that the improvement of the family's economic status has had a beneficial effect on the entire family.

Community social support programmes – such as the afterschool drop-in centre in the case of this study – provide many support strategies to families who struggle to provide academic support to their children. These include homework assistance, adequate and nutritional food, educational programmes such as extra lessons, mental health and wellness support (i.e. access to social workers), and life skills programmes focusing on social and personal skills development. Research confirms the assumption that afterschool programmes provide families with access to organized and structured activities, coupled with child supervision, academic assistance and teaching of personal and social skills (Durlak, Weissberg, & Pachan, 2010; Mampane, 2017).

Resilience of school-going children

Resilience refers to the ability to adapt to challenges that threaten the functioning of the system (Masten, 2013, 2014). Accordingly, Masten (2001, p. 228) defines resilience as a 'phenomenon characterized by good outcomes in spite of serious threats to adaptation or development'. Resilience in families refers to successful experiences of healthy functioning, despite experiencing challenges (MacPhee, Lunkenheimer, & Riggs, 2015). Reference to the system in resilience research acknowledges the significance of the individual's relationships with other people and the context within which the individual develops (Masten, 2001; Werner & Smith, 2001). Theron and Theron (2014) confirm that challenges that expose children to traumatic incidents and poverty make them vulnerable to developing in adverse ways. Ultimately, resilience is viewed as a process of positive adaptation within the context of multiple and competing adversities (Masten, 2001; Walsh, 2012; Werner & Smith, 2001). Theron, Liebenberg, and Malindi (2014) argue that the school system is filled with protective factors that foster the resilience of learners.

Rationale of the study

Individuals and families living in a poverty context and poor socioeconomic environment experience multiple risk factors. They also have limited access to the resources needed to buffer the impact of such risks and enhance their resilience (Holborn & Eddy, 2011; Prinsloo, 2016). Understanding resilience processes is significant when promoting and enhancing the healthy functioning of families and school-going children, especially against the background of increasing systemic adversity in South Africa. The current research was conducted in the Mamelodi East area, which is known for a lack of sufficient and accessible public/formal amenities such as health facilities, educational institutions, shopping centres and effective policing. The area is also characterized by high rates of unemployment and HIV/AIDS mortality, which results in numerous child-headed households (Steyn, 2011). Mamelodi East is in dire need of community-based support programmes to enhance family functioning and resilience.

Goals of the study

Our study sought to investigate how community-based social programmes such as the drop-in centre can play a significant role in promoting the resilience of vulnerable families and school-going children. The following two questions helped to direct the focus of the research:

- (1) How can a community-based social support programme enhance the resilience of families from a low-status socioeconomic environment?
- (2) How can a community-based social support programme enhance the resilience of school-going children from a low-status socioeconomic environment?

The participating school-going children were asked three sub-questions during semi-structured interviews and focus group discussions to better understand how their family and the drop-in centre for Orphans and Vulnerable Children (OVC) support their resilience:

- (1) What is the role of grandparents in facilitating the adolescents' resilience?
- (2) What is the role of the drop-in centre in facilitating the resilience of adolescent children from low socioeconomic backgrounds?
- (3) Which risks and protective factors do orphaned adolescents experience in their environment?

The caregivers were also asked two sub-questions during focus group discussions to better understand how the OVC drop-in centre supports the resilience of their families:

- (1) Which resilience processes are key to families from a low socioeconomic environment?
- (2) Which risk factors are perceived to threaten the resilience of families from a low socioeconomic environment?

Research methodology

Participants in and context of the study

A qualitative case study research design was used to investigate and understand the effect of a community-based social support programme on the resilience of participating school-going children and caregivers living in a low socioeconomic context (Yin, 2014). The case study design was used to 'generate an in-depth, multi-faceted understanding of a complex issue in its real-life context' (Crowe et al., 2011, p. 2).

Non-probability and purposive (convenience) sampling techniques (Maree & Pietersen, 2011) were used to select the sample. Non-probability sampling is selected when the researcher doesn't know the participants and cannot generalize beyond the chosen sample (Acharya, Prakash, Saxena, & Nigam, 2013). With non-probability sampling, all the individuals in the population do not have an equal chance of being selected, and thus it 'results in selection bias in the study' (Acharya et al., 2013, p. 332). Because of the selection bias, the findings of such a study cannot be generalized. Convenience sampling is a non-probability sampling method where the sample is selected conveniently because it has unique characteristics that best represent the population targeted in the research (Acharya et al., 2013; Strydom & Delpport, 2011).

I conducted my research at a centre for Orphans and Vulnerable Children (OVC) in Mamelodi East, Pretoria South Africa. The centre operates satellite centres at three primary schools in Mamelodi East and is partially sponsored by the Department of Social Development, with additional private (business) sector support. It employs a social worker and community care workers who assist families in the Mamelodi community by providing social resources, food parcels, blankets, school uniforms and access to social workers (Mampane, 2017). Currently, the centre has a database of approximately 250 families who are consistently dependent on their support programmes. The centre also provides an aftercare facility where children are given lunch and are assisted with homework. Biographical details of the nine school children who participated in the research are presented in Table 1.

All the data were collected concurrently (De Leeuw, 2005) by two co-researchers. In total 13 participants (as indicated in Tables 1 and 2) participated in the study. The four caregivers (see Table 2) who participated in the research were not related to the school-going participants (Table 1). All

Table 1. A sample of school-going participants.

Participant/data	Age	Gender	Home language	Grade	Primary caregiver	Residence
P 1 (semi-structured interview - SI)	14	Male	Sepedi	8 (High School - HS)	Grandmother	Mamelodi
P 2 (SI)	14	Male	Sepedi	8 (HS)	Grandmother	Mamelodi
P 3 (SI)	15	Male	IsiNdebele	9 (HS)	Grandmother	Mamelodi
P 4 (SI)	16	Female	IsiNdebele	10 (HS)	Grandmother	Mamelodi
FP 1 (focus group FG)	13	Male	IsiZulu	7 (Primary School – PS)	Grandmother	Mamelodi
FP 2 (FG)	11	Male	Setswana	6 (PS)	Grandmother	Mamelodi
FP 3 (FG)	10	Male	Setswana	5 (PS)	Grandmother	Mamelodi
FP 4 (FG)	9	Male	Sepedi	4 (PS)	Grandmother	Mamelodi
FP 5 (FG)	9	Male	Setswana	4 (PS)	Grandmother	Mamelodi

school-going participants (Table 1) were raised by a grandmother in a single-headed family. The manager of the OVC Centre assisted the researcher to select four caregivers displaying the following characteristics from their database of female-headed families: children benefiting from the support of the OVC Centre, and living in the low-status socioeconomic environment of Mamelodi.

Mode of enquiry

An interpretivist paradigm was used to gain an understanding of the interaction between the participants and their environment and how they gave meaning to their experiences (Jansen, 2016; Nieuwenhuis, 2013). Interpretivism acknowledges that reality is socially constructed by individuals through their subjective social interactions (Wahyuni, 2012). Accordingly, the interpretive paradigm gives the researcher the opportunity to account for the unique perspectives of the study participants and allows the researcher to explore these perspectives in greater detail (Fouché, 2011; Nieuwenhuis, 2013).

Data-gathering methods used

Caregivers had to complete a biographic questionnaire, after which focus group discussions were held to encourage participants to elaborate on each other's contribution and promote in-depth discussions (Nieuwenhuis, 2013). All four caregivers participated in one focus group interview. A focus group uses structure and focused, open-ended questions to interview a group of participants and obtain qualitative data (Nieuwenhuis, 2013). Focus groups ensure that the discussion is focused and not broad. Since participants in focus groups have a common understanding of the phenomenon being researched, they are able to elaborate on each other's contributions, which leads to in-depth discussion, contribution and information.

In the case of the school-going participants, different methods were used to collect data (see Table 1). Focus group discussions were held for all primary school participants (Grade 4–7) and semi-structured interviews for all high school participants (Grade 8–10). Our aim was to gain a detailed understanding of their beliefs or perceptions about the phenomenon, to obtain comprehensive and comparable data, and to separate the younger and older learners (Greeff, 2013). Semi-structured interviews involve open-ended questions and discussions guided by an interview guide to understand the participant's views on the phenomenon being researched (Willig, 2008). All school-going participants were assisted in completing a biographic questionnaire. (See Table 3 for the process followed in data collection and fieldwork). Focus groups constituted a key method for use with primary school participants since the moderator was skilled in all the local languages they speak and thus able to guide the discussion within the scope of the questions asked.

Rigour of the study

Qualitative research achieves validity through trustworthiness (Altheide & Johnson, 2011). The validity and reliability of qualitative research are measured by its trustworthiness, which is indicated

Table 2. A sample of caregiver participants.

Family caregiver (gender and age in years)	Highest level of education	Children cared for (gender and age in years)	Home language	Type of family dwelling	Relationship partner	Community support programme
Participant 1 Female: 47	Grade 11	Female: 27 Male: 21 Male: 13 Female: 6	Sepedi	Four-roomed government house	Cohabiting with boyfriend (not father of children)	Orphans and Vulnerable Children (OVC) Centre; Children grant
Participant 2 Female: 45	Grade 10	Female: 24 Male: 20 Male: 13 Female: 7	Sepedi	RDP housing	Cohabiting with father of children	OVC Centre; Children grant
Participant 3 Female: 40	Grade 7	Male: 6 Female: 4	Sepedi	Four roomed government housing	Cohabiting with boyfriend (not father of children)	OVC Centre; Children grant
Participant 4 Female: 37	Grade 11	Male: 14 Female: 7 Female: 5	Sepedi		Cohabiting with boyfriend (not the father of children)	OVC Centre; Children grant

Note: None of the caregivers are employed. None of the caregivers have ever been married, but they all are in relationships.

by the degree of credibility (the representation of participants congruent with the feelings and perceptions they shared), transferability (other researchers being able to reproduce the findings of the study in full when full descriptions are provided), dependability (the research process being conducted logically and recorded precisely) and confirmability (the results of the study being confirmed by other researchers) (Kumar, 2014). To adhere to these rigorous principles of trustworthiness, all data sets and records are kept safe, they remain the intellectual property of the University involved, and they can be provided when requested.

Data analysis

Thematic data analysis was used to analyse data sources. This means that data were transcribed to convert field notes and audio recordings into text (Creswell, 2012; Nieuwenhuis, 2016), after which it was inductively analysed to identify themes. The main goal of thematic data analysis was to group the data under themes that reveal the participants' core experiences (Schurink, Fouché, & De Vos, 2011).

Table 3. Purpose and dates of meetings held for data collection and field work.

Purpose of meeting	School children's meeting date	Caregivers' meeting date
Meeting centre manager to explain purpose of research, to request venue for research and to discuss the sampling process	16 May 2016	24 April 2017
Meeting with potential participants to explain purpose, process and ethics of the research; interested adults signed consent forms Interested minor children were noted, letters of invitation were sent to parents to invite them to the centre for meeting with researchers	18 May 2016	15 May 2017
Meeting with parents of minor children to explain purpose of the research and signing of consent forms by parents and assent by learners	20 May 2016	
First semi-structured interview	24 May 2016	
Second semi-structured interview	25 May 2016	
Focus group interview	26 May 2016	19 May 2017
Third semi-structured interview	4 June 2016	
Fourth semi-structured interview	4 June 2016	
Member checking	5 and 6 September 2016	31 July 2017

Ethical issues

Ethical clearance for the study was granted by the University of Pretoria. Informed consent, voluntary participation, confidentiality, avoidance of exposure to harm or deception of the participants, and accuracy of report writing were maintained at all times when conducting the research and reporting on the findings (Flick, 2011; Strydom, 2011). All the participants agreed to participate after the study process had been explained to them (including parents of minor children), and they signed informed consent and assent forms. The participants were protected from emotional and physical harm (social worker was available for referral when necessary), and their anonymity and confidentiality were ensured through the use of pseudonyms (Nieuwenhuis, 2011).

Results of the study

The following five themes were identified in both case studies:

Results of caregivers' focus group discussions	Results of children's focus group discussions and interviews
Access to education is significant and key to liberating the family: <i>Education as a strong contributor to the socioeconomic status of an individual</i>	The significance of the individual: <i>The person I am is important.</i>
Families experience risk in their ecological environment: <i>Risks factors encountered by families living in a low socioeconomic environment</i>	The significance of making community resources accessible is valued: <i>Access to community resources.</i> Family (immediate) support is significant: <i>The support I receive from my grandparents is important.</i>

Outcomes from caregivers' data analysis

The following two main themes emerged from the focus group discussions with caregivers. (The italicized responses of all participants are quoted verbatim in the rest of this report.)

1. Education is a strong contributor to the socioeconomic status of an individual

Caregivers believed that their lack of education contributed to their poverty and unemployment status. They viewed their poor education status as a direct contributor to their poverty and unemployment, and thus to their ongoing low socioeconomic status.

We are encouraging our children not to be like us, we did not study because our parents could not afford it, we lived in rural areas; when we came to town, we brought up our children so that we can educate them and not be like us. (FG, lines 14–16)

The main thing is perseverance – encourage children to study and tell them not to end up like you . . . (FG, lines 579–580)

One participant indicated that poverty and orphanhood contributed to her lack of education:

My mother passed on, but she had a mental illness, so she was never going to be able to afford to give me an education, the education that I needed. So as a mother, I want to give my children what my mother did not give to me. (MC, lines 56–59)

Furthermore, the caregivers felt empowered and capable of positively influencing the future socioeconomic status of their children by supporting and motivating their children to value education, attend school and have a profession.

We were brought up in poverty and do not want our children to live the same lives that we lived, things have to change. (FG, lines 25–26)

When you see your children studying, you need to encourage them to study so that they do not end up like you. (FG, lines 19–20)

I don't know what will happen to my child, whether he becomes a soldier or a policeman or a teacher or whatever. I will be able to say I have won if my children have achieved something, for now I can't say I have won, I am still on this journey. (FG, lines 574–576)

We want what is best for our children. (FG, line 22)

The goal of educating their children was multifaceted, as caregivers expected that when children have better future prospects, they will look after their parents. Thus, by educating their children, caregivers may possibly overcome their own poverty. In this instance, education is seen as a buffer against poverty.

Once our children have schooled and are educated, they will look after us (FG, line 287) and I think they will be able to look after me at a later stage. (FG, line 603)

2. Risks factors encountered by families living in a low socioeconomic environment

Risks have a negative impact on the healthy development of individuals (Kraemer, Lowe, & Kupfer, 2005) and their resilience.

Our children know that life is tough at the moment, I am unable to provide for them, I want to work and provide for them, life is difficult. (FG, lines 23–24)

When I am working, I know I want to buy this and that for this child; some Fridays I want to buy nice food for my children, like cake, we are unable to do so. Because you are unemployed, you are unable to do so. (FG, lines 28–30)

You wish to do so much; the money we receive for the grant is too little. Very little, even when you get the grant for two children, it is too little, you are able to buy maize and other things, sometimes the child will go to school without food. (FG, lines 31–33)

If there is no food, it is disheartening ... , it breaks one's heart, it is sad for a child to sleep on an empty stomach and wake on an empty stomach and go to school with no food. (FG, lines 140–142)

The supportive role of the OVC drop-in centre in alleviating family poverty and providing nutrition for school-going children was indicated as follows by one of the participant caregivers:

The problems arise during weekends, Saturday and Sunday. Monday, I know they eat, sometimes you will find that there is no money on the weekends to buy any food. (FG, lines 154–155)

Another parent recalled an incident where the food provided by the drop-in centre was shared with other children who did not attend the centre:

One goes to the drop-in centre, the other one does not. The one from the drop-in centre can sometimes bring meat home, and we don't have meat. The very child will share with the other one who does not have, I am teaching my children to learn and share. (FG, lines 467–470)

Caregivers indicated that they try hard to find employment even though it is hard, due to a lack of opportunities:

You have to go out there and look for jobs in order to fend for your children, look for jobs, ask people (FG, lines 136–137). You have to find a job so that your children do not sleep on an empty stomach, you have to fend for them. (FG, lines 138–139)

Outcomes of the data analysis for school-going participants

The following three themes emerged from the data generated with participating school-going children.

1. The person I am is important

The theme defines who they are, their circumstances and the resources they control. The older learners mostly focused on positive attributes, future aspirations and general behaviour. However,

participants generally defined who they were based on their views on social behaviour, engagement, self-regulation and learning.

I'll just tell you that I am a very open-minded person, I have so many ideas at times, and I just wish to implement them at the same time but I try to handle them. I'm a guy that loves to do their work, especially school work. I always make sure that I have no other complications even when I do not understand I ask for assistance so that I could do much better. I admit my problems so that I can learn from them. I have patience towards people who are rude and I try to cope with them. (P3, lines 17–25)

This learner focused on his future aspirations and the longing or need to be of value to self and others. He wanted to be a support to others in the future.

My personal value is that I want to mostly become 'someone'; I just want to take care of other people. I don't want other kids ... of another generation to go through what I am going through ... As I said I wanted to be an inventor but sometimes I just thought that [...] if only I could just grow up and then be that accountant or that inventor, I want to open a foundation where kids could be helped. Kids that live with grannies, or kids that are orphans could be helped. Yeah, I want to open an organisation as my personal value, I want to take care of my family, I just want to learn more, I want to learn more about the world and stuff like that. (P3, lines 26–136)

Primary school participants focused on positive and negative behaviour attributes:

I am a person who is OK. (FP2, line 34)

Because I have respect. (FP3, line 63)

I am person who has anger, and sometimes I become angry. (FP2, line 19)

When a person is impatient with me, I give them attitude. (FP2, line 26)

Furthermore, participants focused on what was important to their family, their relationships and how their family members made life easier for them. They were able to elaborate on their daily interactions and what they loved about their family.

My family is also something that I could regard as an important thing because they are always there for me, they support me, and they give me all a kid could ask for even though we don't have that much money. But they try all their best so that I get whatever I need. (P3, lines 90–91)

The people in my life are my sisters and people that are close to me, other family members and they are good to me, we all take care of one another. We live together with my sisters and their children. (P4, lines 36–38)

Relationships with significant others (family members, teachers, neighbours and peers) were included in the definition of self.

I love her [grandmother], she does good things. When she sends me I do not refuse. I just go wherever she needs me to go. (P2, lines 50–51)

Yes, I have that person. It's my school teacher. Mrs M, she's a really open hearted woman she cares a lot about other people when I'm with her I could just pump out that sad feeling that I have in my heart, it's really a relief to talk to her. (P3, lines 280–283)

It's people like sister N, who always tells me that school is important and that when she was young she used to go to school to make sure that she can be where she is now. (P4, lines 176–178)

It's having friends who can help you on the streets. (FP2, line 551)

Having friends, when you are bored you go to them and play with them. (FP3, line 559)

Prayer and religion are among the things noted by participants as an important aspect of who they were.

It's love, praying before I sleep and respecting others. (P2, line 103)

I love singing and praying. (FP2, line 240)

Mam, what I love is that we pray. (FP3, line 210)

What I love about going to church is that we pray, we go today and tomorrow and Friday. (FP1, lines 217–218)

I love church because we sing and pray and then they give us bread and macaroni. (FP1, line 255)

Because I love God a lot and when I go to church, I feel better about my life. (P4, lines 103–104)

I sing and we clean the church on Saturdays as youth members. (P4, line 112)

Participants have future dreams and aspirations, which they use to define who they want and aspire to be.

My dreams are to get a job when I finish school so that I can take care of my family and provide for their needs. I wish for my dream to come true. (P4, 299–300)

My dream is to see myself as an accountant. I also want to see myself as an inventor or that I just want to see the stuff that I have invented running around the world. People just have that inspiring or that motivation to buy that thing and being an accountant would really mean a lot because that's the one thing that I would like to become. (P3, 208–213)

2. Access to community resources

Participants were able to identify community resources they can access, including the community-based support centre, schools and clinics. They reported that they positively benefited from accessing these resources.

They help us to do our homework, spelling and we sometimes read (P2, line 136).

When I am sick I can go to the clinic and they give me medication and that's what I like in my life. (P2, line 181)

I love school and going to school every day gives me motivation to change my life for my future and my situation. (P3, lines 200–203)

They also highlighted a lack of access to basic resources:

There is water but there is no electricity. (P1, line 300)

We get electricity from extension 20 and then we pay them at the end of the month. (P1, lines 311–312)

There are no RDP houses, we live in shacks but it is OK. (P1, line 317)

3. The support I receive from my grandparents is important

The participants experienced their grandmothers as providers of nurturance and as parents who give them unconditional love, affectionate care and attention. They expressed their inherent need to respect them and communicated the good relationship they had with their grandmothers as they provided emotional support and care.

I live with my grandmother, who is my caregiver. Also have two sisters, nephew and niece. My grandmother is such a loving person and she makes sure that when I go to bed I have eaten; she is very loving and she is good at taking care of us. And then my sister tries her best to make sure that we do not go to bed on an empty stomach and that we get what we want. My biological sister is a bit controlling. But because we are kids, we have to cope with it and be patient. (P3, lines 53–66)

It's knowing that I have people taking care of me. (P1, line 114)

Grandparents were expected to provide support and assistance with school-related needs.

Oh they help me by paying for my school trips, homework and buying me school uniform. (FP1, lines 80–81)

I love that she buys me school uniform. (FP1, line 121)

They help me with whatever I want, with homework and everything that I ask them to help me with. (FP2, lines 88–89)

She buys me clothing, pays for my school trip and helps me with homework. (FP5, lines 114–115)

As carers, grandparents were reported to take care of their grandchildren's basic needs:

We don't go to bed on an empty stomach, when she comes back from work she buys us food, we eat and sleep well on a full stomach. (FP5, lines 160–162)

She helps me by buying me clothing. (FP1, line 167)

Discussion

Parents who provide support to their children are a resource to them. Poverty has a negative effect on the well-being of families and in this study poverty mainly accounted for the academic status of single-parent households. Research shows that female-headed households experience more financial stressors compared to their male counterparts (Sulla & Zikhali, 2018; Statistics South Africa, 2015) and compared to a two-parent household (Waldfoegel, Craigie, & Brooks-Gunn, 2010). The adult participants in this study indicated that there is a link between poverty and opportunities to access education, but they all emphasized the role their parents played in their lack of accessing education. They also mentioned that their rural development context contributed to the minimal opportunities they had to escape and access education. Caregivers strongly confirmed that their current context of poverty was not an obstacle to their children accessing academic success, despite the child coming from a single parent and low socioeconomic status household. This finding confirms what Malczyk and Lawson (2017) found, namely that an explanation for achieving academic outcomes – whether in a single or a two-parent household – may be found in family dynamics and parental practices. None of the adult participants completed their high school education, but all of them saw the value of education and they encouraged and motivated their children to do better than them and to have professions. Education is seen as a resource and a solution to their poverty that will ensure positive future prospects for their children. Research has consistently shown that poverty and the low socioeconomic status of families and youths in South Africa are exacerbated by unemployment, income disparities and the difficulties of educational achievement and land ownership (Sulla & Zikhali, 2018; Statistics South Africa, 2015). Ultimately, the caregivers noted the following:

- They value education and envisage their children as educated and independent adults who will eventually help them as parents.
- They want to improve their children's lives and therefore they use their own lived experiences and the risks they experienced in their families of origin as examples to avoid and protect their children from.
- They use their positive language and loving home environment to support the resilience of their children.

Similarly, the school-going participants saw themselves as resourceful and in control of their lives and future. Knowledge and understanding of who they are were important to them. In this study, they demonstrated their resilience by seeing positives and strengths in continuing to attend school, passing subjects at school and having good relations with their teachers. They also have long-term and short-term goals tailored towards achieving good academic progress and success.

Similar to the adult participants, the children valued education and saw it as a resource essential to resilience. They demonstrate resilience by being adaptable to their environment; they make use of what is available to them to live (Masten, 2001). They continue to have dreams and goals, a positive

outlook and healthy functioning and they relate well with peers and elders. Participants demonstrated resilience by having a positive self-concept. They seemed to have unconditional positive regard for themselves, high self-confidence and much hope for their future. They were able to indicate the careers they would like to follow, could state the reasons for wanting to follow those careers, and stated that they wanted to work so that they could provide for their families. They had respect for elders, especially their grandparents. Adapting and behaving in socially accepted ways and demonstrating the manners that they have been taught by their grandmothers was a sign of being submissive to authority, which can be viewed as part of the resilience process. Participants demonstrated resilience by accessing and utilizing available resources that can enhance their resilience (Mampane, 2012). They made use of community resources such as clinics, schools and the community social support centre. They related well with peers, teachers and neighbours. According to Umberson and Montez (2010), relationships can have positive benefits for an individual, for instance social support and personal control. Some participants indicated that they have individuals in their lives with whom they have good relationships. They also spoke about how these individuals taught them good life lessons and motivated them to continue with school.

Recommendations

All of the participating caregivers were unemployed, they struggled to find employment since they did not have any skills, and consequently they relied heavily on social support programmes. It is thus recommended that access to community social support resources be advocated and increased as it acts as a buffer against adversity for families coping with low socioeconomic factors. Furthermore, career guidance should be provided for all township schools learners, as the study indicates that learners and parents have a positive future outlook and they believe that education is the key to success. They want to unleash their potential by becoming educated and so increase their chances of securing white-collar jobs. South African policies relating to healthy family development and social support programmes need to be assessed for their effectiveness in areas of poverty and their limitations and possible areas of development should be identified. Finally, it is recommended that the psychology profession should focus on career guidance and skills for adults with no matriculation qualification so that they can support their families.

Limitations

To ensure the rigour of this study, I did not aim to generalize the research findings to contexts beyond the lived experiences of the participants of this study.

Conclusion

Families living in poverty experience financial insecurity, but this is not their only stressor (Corr, Milagross Santos, & Fowler, 2016). In addition, children from low socioeconomic areas who live in single-parent homes may be disadvantaged by insufficient nutrition and inadequate schooling (Orfield, 2013). The caregivers in this research outlined the financial challenges they experience and desired to do much more for their children, but they felt limited by their financial circumstances. Some of the caregivers admitted that sometimes their children went to bed hungry, which made them feel discouraged by their circumstances. Research shows that single mothers are hindered by limited wage opportunities, employment instability and difficult work schedules (Johnson, Kalil, & Dunifon, 2012). In this study the participants expressed a desire to find more permanent work, but they felt that their limited education prevented them from attaining better work opportunities. Lastly, it was found that none of the participants were receiving child maintenance from their children's fathers. A report published in 2012 found that 69% of black children in South Africa live without their fathers (Hall, Meintjes, & Sambu, 2014). Other research supports the notion that

South African black fathers are commonly known for not supporting their children financially (Madhaven, Richter, Norris, & Hosegood, 2014).

The findings of the current study indicate that resilience processes observed included the interplay between protective factors and risk factors, which further indicated an interplay between different systems. This included the orphaned adolescents forming good relationships with adults, which emerged under the theme 'Things that are important to me.' Relationships with others were revealed to be important for most participants. They indicated that they learned from adults and were able to talk to them about their problems. The findings acknowledge that resilience is a process and includes resources such as relationships with competent and caring adults in either the family or the community (Masten, 2001). One of the participants (P3) indicated that he was able to confide in his teacher, who seemed to understand him well, so that he was able to speak to her about any challenges that he was confronted with. This means that he had an additional support system that could buffer his resilience. Close and supportive relationships with adults, school attendance, and supportive family members are also associated with the resilience of orphaned adolescents and contribute to their healthy functioning (Carr, 2016; Ungar, 2012).

We can conclude that the current study fulfilled its aim, which was to understand the factors that contribute to the resilience of orphaned adolescents. The participants in this study made use of their different resource systems to ensure that they experience a healthy development. All of them indicated that they have supportive family members, they all attended school and they had supportive relationships with adults in their different contexts.

Acknowledgements

The participants in this study are thanked for their contribution to this research. I thank the two Master's in Educational Psychology students who were involved as co-researchers in the bigger research project, Ms Lee-Anne Lewis and Ms Thabile Nicholene Mtsweni.

Disclosure statement

No potential conflict of interest was reported by the author.

Funding

Funding from the NRF Competitive Support for Unrated Researchers Fund [grant number CSRP170516231072] is hereby gratefully acknowledged.

Notes on contributor

Motlalepule Ruth Mampane is an Associate Professor of Educational Psychology, university of Pretoria. Her research focus is on resilience in families and adolescence. Her scholarly contributions is centred on the influences of context and developmental processes on adolescent and family resilience against multiple adversities that South African families are exposed to.

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