



***Health promotion for families with
adolescents orphaned by HIV/AIDS in rural
Hammanskraal***

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Co-promoter: Dr ADH Botha**



DECLARATION

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I declare that the thesis

Health promotion for families with adolescents orphaned by HIV/AIDS in rural Hammanskraal

is my original work and that it has not been submitted before for any degree or examination at any other institution. All the sources that have been used or quoted have been acknowledged by means of complete references in the text and bibliography.

MMAPEKO DORICCAH PEU

DATE

DEDICATION

This study is dedicated to the following people who helped me to face my studies courageously:

- My late dad, Kgosi Nkwate Reuben Pilane, and my late mom, Mpolokeng Milia Pilane, who used to encourage me to finish my studies by saying **“THUTO KE BOSWA GA GONA YO A KA GO TSEELANG YONA”**.
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ABSTRACT

Health promotion for families with adolescents orphaned by HIV/AIDS in rural Hammanskraal

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Health promotion is regarded as the cornerstone of good health. The aim of this research was to develop and validate health promotion guidelines for families with adolescents orphaned by HIV/Aids in rural Hammanskraal. The objectives were to explore and describe the health promotion needs of families with adolescents orphaned by HIV/Aids in rural Hammanskraal, and to develop and validate health promotion guidelines for such families. The research was conducted within a qualitative paradigm that was both exploratory and descriptive. In Phase 1 of the research, a qualitative, exploratory, descriptive and contextual research design was followed to investigate the health promotion needs phenomenon identified above. The study population for Phase 1 was made up of families with adolescents orphaned by HIV/Aids. Participants in this research, which were purposely selected, included substitute parents of all ages and adolescents between the ages 10 and 17. Data were collected by means of group interviews and field notes, and qualitative data analysis methods were used. Themes, categories and subcategories were identified and verified by means of a literature control. Thirteen themes summarising the needs of participant families as they relate to health promotion were identified from data obtained during several rounds of data collection. These themes served as the foundation for the development of health promotion guidelines for families with adolescents orphaned by HIV/Aids in rural Hammanskraal.

The development and validation of health promotion guidelines for families with adolescents orphaned by HIV/Aids in rural Hammanskraal comprised Phase 2 of the research. The research findings were discussed in the context and framework of relevant literature, *Maslow's Hierarchy of Needs* theory and a revised *Multilevel Approaches toward Community Health (MATCH)* model. Identified themes within the frameworks of the theory and model were utilised together with the empirical part of the study as the foundation for the development of the guidelines. Preliminary guidelines were refined by a panel of twelve stakeholders that were purposely selected because of their involvement in HIV/Aids programmes. The set of nine guidelines was validated by experts in the fields of guideline validation and HIV/Aids care. The guidelines were submitted to the National Director: Unit of Health Promotion at the South African Department of Health for confirmation that the guidelines were in line with national health promotion policies. However, the study context was rural Hammanskraal and it can therefore not be taken for granted that the results are applicable to other contexts. Recommendations are testing the guidelines in a clinical setting, preparing them for piloting before implementation and, after implementation, reviewing and updating the guidelines to ensure their credibility and sustainability.

Key terms: Health promotion, health promotion guidelines, adolescents orphaned by HIV/Aids, validation of guidelines.



OPSOMMING

Gesondheidsbevordering van gesinne met adolessente wat wees gelaat is weens MIV/VIGS in landelike Hammanskraal

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Gesondheidsbevordering word beskou as die hoeksteen van goeie gesondheid. Die doel van hierdie navorsing was om gesondheidsbevorderingsriglyne te ontwikkel en geldig te verklaar vir gesinne met adolessente wat wees gelaat is weens MIV/Vigs in landelike Hammanskraal. Die doelwitte was om die gesondheidsbevorderingsbehoefte van gesinne met adolessente wat wees gelaat is weens MIV/Vigs in landelike Hammanskraal te verken en te beskryf, en om gesondheidsbevorderingsriglyne vir sodanige gesinne te ontwikkel en geldig te verklaar. Die navorsing is gedoen binne 'n kwalitatiewe paradigma wat beide verkennend en beskrywend is. 'n Kwalitatiewe, verkennende, beskrywende en kontekstuele navorsingsontwerp is in Fase 1 van die navorsing gevolg om die fenomeen gesondheidsbevorderingsbehoefte wat hierbo omskryf is, te ondersoek. Die studiebevolking vir Fase 1 het bestaan uit gesinne met adolessente wat wees gelaat is weens MIV/Vigs. Deelnemers aan die navorsing, wat doelbewus gekies is, het substituutouers van alle ouderdomme en adolessente tussen die ouderdomme 10 en 17 ingesluit. Data is deur middel van groepsonderhoude en aantekeninge tydens veldwerk ingesamel, en kwalitatiewe data-ontledingsmetodes is gebruik. Temas, kategorieë en subkategorieë is omskryf en deur middel van 'n literatuurkontrole geverifieer. Dertien temas, wat die behoeftes van die deelnemende gesinne opsom soos dit met gesondheidsbevordering verband hou, is geëien uit data wat verkry is tydens verskeie rondtes data-insameling. Hierdie temas lê die ontwikkeling

van gesondheidsbevorderingsriglyne vir gesinne met adolessente wat wees gelaat is weens MIV/Vigs in landelike Hammanskraal, ten grondslag.

Die ontwikkeling en geldigverklaring van gesondheidsbevorderingsriglyne vir gesinne met adolessente wat wees gelaat is weens MIV/Vigs in landelike Hammanskraal, beslaan Fase 2 van die navorsing. Die navorsingsbevindinge is bespreek binne die konteks en raamwerk van tersaaklike literatuur, *Maslow se teorie oor die hierargie van behoeftes* en die model *Meervlakkige Benaderings tot Gemeenskapsgesondheid* wat aangepas is. Temas wat geëien is binne die raamwerke van die teorie en model, het saam met die empiriese deel van die studie die grondslag gelê vir die ontwikkeling van die riglyne. Voorlopige riglyne is verfyn deur 'n paneel van twaalf belanghebbendes wat doelbewus gekies is weens hulle betrokkenheid by MIV/Vigs-programme. Die stel nege riglyne is deur kundiges op die terreine van riglyngeldigverklaring en MIV/Vigs-sorg geldig verklaar. Die riglyne is voorgelê aan die Nasionale Direkteur: Eenheid vir Gesondheidsbevordering by die Suid-Afrikaanse Departement van Gesondheid vir bevestiging dat die riglyne met nasionale gesondheidsbevorderingsbeleide ooreenkom. Die studiekonteks is egter landelike Hammanskraal en die resultate is dus nie vanselfsprekend op ander kontekste van toepassing nie. Aanbevelings is toetsing van die riglyne in 'n kliniese opset, die voorbereiding daarvan vir 'n loodstoets vóór implementering en, ná implementering, die hersiening en opdatering van die riglyne om die geloofwaardigheid en volhoubaarheid daarvan te verseker.

Sleuteltermes: Gesondheidsbevordering, gesondheidsbevorderingsriglyne, adolessente wees gelaat weens MIV/Vigs, geldigverklaring van riglyne.



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LIST OF ABBREVIATIONS

AIDS	Acquired immunodeficiency syndrome
CIE	Conduct Impact Evaluation
COE	Conduct Outcome Evaluation
CPE	Conduct Process Evaluation
DPSA	Department of Public Service and Administration
EGC	Eastern Gauteng Council
HGS	Health Goal Selection
HIV	Human immunodeficiency virus
MATCH	Multilevel Approaches Toward Community Health
MTCT	Mother-to-child transmission
NGO	Non-governmental organisation
RDP	Reconstruction and Development Programme
SANC	South African Nursing Council
STD	Sexually transmitted disease
TB	Tuberculosis
TUT	Tshwane University of Technology
TV	Television
UK	United Kingdom
WHO	World Health Organization