

**AN EXPLORATIVE STUDY OF FACTORS THAT HINDER PARENTS'
INVOLVEMENT IN THE HIGH FIVE PROGRAMME
FOR AT RISK CHILDREN**

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Submitted in fulfilment of the requirements for the degree of
Master of Arts, Social Science, in the subject of Social Work
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WESTERN CAPE

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November 2018

ABSTRACT

A qualitative study was conducted to explore and describe the factors that hinder parent involvement in the High Five Life Skills Programme for at risk children. Parent involvement remains a challenging phenomenon, which affects not only the child, as an individual, but also the family in society. However, although parenting children is perceived to be an important responsibility, parents do not receive any formal training on how to be good parents.

An explorative and descriptive research design was utilised. Data collection was done by means of semi-structured interviews and focus group discussions, with the parents/guardians and children in the High Five Life Skills Programme, as well as the teachers, who refer children to the programme. The method of non-probability sampling, employed in this study was purposive sampling. The sample was selected on the basis of the researcher's own knowledge, as well as the purpose of the study. Data were analysed using the nine steps proposed by Creswell.

The results highlighted six barriers that hindered parent involvement in the High Five Life Skills Programme, namely, Low self-esteem of parents/caregivers and children; Lack of communications between all relevant parties - caregivers, teachers and the facilitators of the High Five Life Skills programme; Lack of role models; Parents' not being role models as their own negative behaviour hindered their involvement; Lack of an emotional bond between parents and children, coupled with absent fathers; Lack of parents' parental skills and support networks; and the lack of resources and support with transport to and from meetings, as well as child care for younger siblings. The participants, especially the children, freely expressed themselves, and contributed to the results; thereby assisting the researcher to explore the barriers that hinder parent involvement in the High Five Life Skills Programme.

It is anticipated that the results of this current study will form a basis for the High Five Life Skills Programme to develop strategies that respond to the needs of the parents and children involved in the programme.

KEYWORDS

Barriers

Caregiver

Child

Communication

Emotional bond

Family

Family Approach

High Risk Behaviour

Hinder

Inclusive learning communities

Low Self-esteem

Parent

Parent involvement

Parental responsibility

Parenting styles

Parents/Caregivers

Parental skills

Relationship

Role models

School-family Partnership



Social capital

Social networks

Social skills

Vulnerable families



ABBREVIATIONS

- DSD** - Department of Social Development
- F** - Female
- FG** - Focus group
- Gr** - Grade
- HSRC** - Human Science Research Council
- M** - Male
- NGO** - Non-government organisation
- PTA** - Parent Teacher Association
- SACSSP** - South African Council of Social Service Professions
- SAIRR** - The SA Institute of Race Relations
- SASA** - The South African Schools Act of 1996
- SES** - Socio-economic status



DECLARATION

I, Yolandi Lizette Afrika, Student Number: 3211397, declare that the thesis, *An Explorative Study of factors that hinder parents' involvement in the High Five Programme for at risk children*, is my own work and that all the sources that I have used, or quoted, have been indicated and acknowledged by means of complete references.

Name: Yolandi Lizette Afrika

Date: November 2018

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YLAfrika



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ACKNOWLEDGEMENTS

Firstly, I thank the Lord God Almighty for His grace, mercy and strength, and most of all the encouragement and perseverance that He bestowed on me. He was faithful and helped me through it all to continue with the race, challenging as it was. Most difficult for me was to balance work responsibilities and studies.

My sincere thanks goes to my supervisor, Prof. C. Schenck, who was very patient with me, and gave me very good guidance. I always left her office positive and encouraged.

Special thanks to my daughter, Astrid-Anne Valentyn, who encouraged me to start this journey, and even took leave to accompany me, to register every beginning of the year.

Thanks to my husband, Timothy Afrika, for the encouragement and on-going support.

Thanks to my spiritual family at the West Coast Lighthouse in Vredenburg.

A big thank you to my colleagues at Mfesane and the staff of the High Five Life Skills Programme, who helped me to find the addresses and families for the interviews.

I am grateful for the participants of the High Five Life Skills Programme for their full co-operation and willingness to be interviewed.

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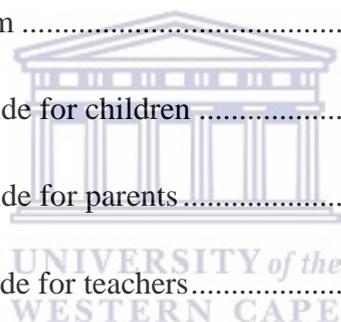
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CHAPTER ONE

CONCEPTUALISATION OF THE RESEARCH

1.1. Background of the study

The family is an important asset to the members of the family, as well as the community. The integration of family members into social life, community life and community structures, such as the church, support groups, youth groups and sports clubs, is a key role of the family. (Belsey, 2005). This is confirmed in the White Paper on Families in South Africa (Republic of South Africa [RSA]. Department of Social Development [DSD], 2013: p. 5) “the family is indispensable for education. We could also say that the family is the most important source of education”. The researcher agrees with Ziehl (2003) and Belsey (2005) that the family is the most significant unit and institution, which constitutes the functioning of a society. A society consists of families, both organised and disorganised families. Strong and healthy families, therefore, could positively influence the way a society is structured, organised, or functions. While the inverse also applies, it could be deduced that the most valuable asset of a society is its families and households (Bezuidenhout, 2008).

The involvement of parents, or other family members, in children’s education (formal and informal), enable the children to improve their academic performance, live a healthy lifestyle, attend school regularly, as well as be good role models, well-mannered and disciplined (RSA. DSD, 2013; Desforges & Abouchaar, 2012). Supervising their children’s educational homework is one way in which parents/caregivers could become involved in their children’s education (Hoover-Dempsey & Sandler, 1995). This could also be a useful tool for parents/caregivers to assess what their children are learning, afford them and their children occasions to talk, as well as enable parents/caregivers to provide feedback to teachers about children’s learning and progress.

Family members, as role models, could shape and guide their children’s behaviour, positively or negatively (Desforges & Abouchaar, 2012; Ferhman, Keith & Reimers, 1987; Perrino, Gonzalez, Pantin & Szapocznik, 2000). Children with positive role models, lean towards positive behaviour and tend to be less involved in high risk behaviour, or disciplinary actions, at school, or in general. Desforges and Abouchaar (2012) highlight the issues that place the

family unit under immense strain. Families are vulnerable because of crime, violence, inadequate health and social services, poverty, the increased number of female headed households, migration, substance abuse and illnesses, which they exposed to daily, on an ever increasing basis.

When parents are not actively involved in the development and education of their children, the children are forced to function independently from a very early age, while they still need their parents to create a home environment that encourages learning, and nurtures their physical, mental, social and spiritual education (Breiner, Ford & Gadsden, 2016). This observation was confirmed by staff working with youth and children at risk, at the Mfesane Community Development organisation [hereafter referred to as “Mfesane”] (Mfesane, 2016/2017). The following three focus areas pave the way of the Mfesane Community Development organisation for the next five years, namely:

- Health education and care services that include all health screening, health awareness and promotion, health rights, as well as other health-related services;
- Care, support and education of youth, children and families. Family strengthening, youth programmes, orphans and vulnerable activities are examples of existing programmes; and
- Training, development and job links. Both hard and soft skills training fall under this category, for example, welding and construction, community health training, child and youth care training, job readiness, among others (Mfesane, 2016/2017).

Throughout the Saldanha Bay Municipal area, teachers are concerned about the escalating prevalence of children at risk. Children from primary schools are increasingly being referred by teachers to programmes such as those of Mfesane, for high risk behaviour (Mfesane, 2016/2017).

It is encouraging and inspiring to community organisations, such as Mfesane and the High Five Life Skills Programme (hereafter referred to as High Five), that, according to the White Paper on families in South Africa (RSA, DSD, 2013), the South African government currently recognises that many social ills in South Africa are the consequences of either weak family systems, or non-existent family systems. It is also understood that families are facing a crisis that requires immediate remedying, to create a new dispensation, which deliberately supports

and strengthens families in the country, by eliminating all conditions eroding the family, inter alia, poverty and inequality, unemployment, Human Immunodeficiency Virus (HIV), Acquired Immunodeficiency Syndrome (AIDS), gender inequality and gender-based violence, domestic violence and child abuse. This places the family at the centre of national policy discourse for development and implementation, by advocating for rights-based policies and programmes that support family life and strengthen families in South Africa (RSA, DSD, 2013).

1.2. Motivation for the study

Mfesane, a Community Development Agency, is a registered NGO (registration number 1975/000041/08), working in underserved and informal settlements of the Saldanha Bay Municipal area. The projects of Mfesane involve working with children and youth at risk. The High Five Life Skills Programme is one of the projects of Mfesane that was implemented since 2008. It commenced as a programme of Mfesane and grew to such an extent, that it was eventually registered as an NGO. High Five, therefore, became an affiliate of Mfesane that had to support and build the capacity of the board, in order to become independent and self-sufficient. This current study's research question focusses on the High Five Life Skills Programme, to explore the barriers that hinder parents' involvement. During 2011, the High Five Life Skills Programme, as well as Mfesane, were evaluated by Bliss and Durno (2011), who highlighted the following recommendations in their final evaluation report:

- “Mfesane and High Five should follow a family-centred approach, instead of only focussing on the children.”
- “The current strategy of involving parents in the programme through home visits is not working. If parent involvement is a real priority, creative methods of attracting them need to be incorporated into the programme activities. Since the camps are so popular with the learners, perhaps it would be possible to invite parents to a camp either together with their children or separately so that they can learn more about the work of High Five and see their role in helping them achieve their goals.”
- “Parents need to be made aware of the importance of their involvement in the education and development of their children.”
- “Communication with parents should be improved and the factors that hamper their involvement should be determined.”

In response to the report, High Five changed its strategy to a family-centred approach, by incorporating home visits into its activities, and facilitating parent meetings; however, this has not yet led to improved communication with, as well as the involvement or participation of, the parents. This information was shared by the facilitators of High Five in an interview conducted on March 27, 2013, with High Five staff, Evoleen Felix (facilitator), and Avrell Barends (lead facilitator). The High Five Life Skills Programme was registered as an NGO in 2005 (registration number NPO 045-208). Hard copies of its Constitution and other legal documents are available for scrutiny in High Five governance file. High Five does not have a website. However, High Five targets primary school children, aged 10-to-15 years, with high risk behaviour, such as substance abuse, absenteeism, fighting, as well as disruptive and disrespectful attitudes towards teachers and their peers. Some of these learners struggle academically and are, ultimately, transferred to the next grade because of their age.

The High Five programme aims to positively influence children, who are at risk and have low self-esteem. The children are identified and referred to the programme by teachers. However, parent involvement in the High Five Programme is poor, and the facilitators of the High Five programme constantly strive to engage the parents' active participation in project activities. A few parents, though, and mostly grandparents, do attend the feedback meetings and parent workshops. The reasons for the parents/caregivers' lack of involvement, though, remain undetermined. The motivation of this study, therefore, is to explore the reasons for the lack of parent/caregiver involvement.

1.3. Problem statement

The researcher gained a better understanding of disorganised families from the definition, or explanation, of Bezuidenhout (2008: p. 3), "family disorganization includes the weakening, maladaptation or dissolution of the ties that bind the members of the family as a group. A family, in which the members do not function as a close knit unit and therefore not adequately meet each other's needs, is viewed as a disorganized family." According to Walsh (2003: p. 11) "External environmental factors resulting from violence, unemployment, imprisonment, and natural catastrophes make it difficult or impossible for members in the family to collectively fulfil their roles", are contributing factors that result in disorganized families. In addition, there are life changing events, such as the death of the breadwinner, serious illness,

impairment due to an accident or illness, and divorce that cause serious disruption to the functioning and structure to the family (Walsh, 2003).

The above statements of Bezuidenhout (2008) and Walsh (2003) indicate that there are factors that hinder parent involvement in child education and development. According to Epstein (2001), as well as Landsberg, Kruger and Nel (2005), it is apparent that inclusive education (a partnership between the school, community and parents), can contribute to strengthen and support parents in creative ways, to get involved and see parent involvement as an asset. Hill and Taylor (2004), as well as Kernan (2012) focus their research on parent involvement in education, while Waterman (2006) and Epstein (2001) discuss ways to improve parent involvement in the education of children. However, more research is needed to explore the barriers that hinder parent involvement in the formal and informal education of their children.

Despite the family-centred approach, followed by the High Five programme after the evaluation, the staff, working with the children and youth, still observe that parents do not participate in the discussions and planning of development projects and activities, which are aimed at changing the behaviour of their children. In addition, the staff observed that the children, referred to the High Five Programme, originate mostly from disorganized families, characterized by family violence, absence of a father figure, substance abuse by parents, single parenthood (unmarried, death or divorce) and the lack of vision, or motivation, for their children. According to the referral letters provided by the teachers to the High Five programme, the reasons for the referrals include, fighting, smoking dagga and crystal meth (“tik”), disrespectful behaviour towards parents and teachers, stealing and breaking into people’s houses, lack of vision and low self-esteem. This current study aims to fill the gap, by exploring the factors that may hinder parent involvement in the High Five programme.

1.4. Research Question

What are the factors that hinder parents’ involvement in the High Five Programme for at risk children?

1.5. Aim of the study

To explore and describe the factors that hinder parents’ involvement in the High Five programme for at risk children.

1.6. Objectives of the study

- To explore and describe the factors that hinder parent involvement in the High Five programme for at-risk children, as perceived by the children.
- To explore and describe the factors that hinder parent involvement in the High Five Programme for at-risk children, as experienced by the parents.
- To explore the needs of the parents, to improve their involvement in the development of their children.
- To explore the gaps in the High Five Programme activities and strategies that hinder parent involvement, as perceived by teachers.

1.7. The position of the researcher in the research process

When a researcher investigates a phenomenon, it transpires within a specific knowledge framework, which, subsequently, forms the framework within which the investigation is conducted (Denzin & Lincoln, 2005). The researcher gathers empirical material related to the topic, analyses it and composes a report on the material (Denzin & Lincoln, 2005). According to Paton (2002: p. 64), the context of the findings, is part of the new perspective that the researcher adds to the research.



The High Five programme is an affiliate organisation of Mfesane. The researcher's role as programme manager at Mfesane, provides project management, monitoring and evaluation support to the staff of the High Five Programme. In recent years, the researcher has also assisted with funding proposals and donor reports. The children referred to the programme attended, participated and offered their full cooperation. Their parents, however, did not display much interest, and were seldom involved in the programme activities, as identified by the evaluators (Bliss & Durno, 2011: p. 59).

During project activities and feedback meetings, the lack of parental participation always surfaced. Programme staff have tried various creative measures to involve the parents, but it seldom proved to be successful. The researcher, therefore, is researching the organisation that she is part of. The supervision process was used to reflect on the research process, and not to be biased.

1.8. Research Methodology

The research methodology of this current study includes the description of the research approach, design, population and sampling, data collection, data analysis, trustworthiness of the study and the ethical considerations to be applied in systematic processes of conducting the study.

1.8.1. Research Approach

The researcher has selected a qualitative research methodology for this current study. De Vos, Strydom, Fouché and Delport (2005: p. 74) state that “in qualitative research the researcher attempts to gain a first-hand, holistic understanding and exploring of the phenomena of interest by means of flexible strategy. Qualitative methodology rests on the assumption that valid understanding can be gained through accumulated knowledge acquired at first hand by a researcher.” Fortune, Reid and Miller (2013: p. 94) concur with De Vos *et al.* (2005), and from this qualitative standpoint, the researcher aims to explore the factors that hinder parents’ involvement, as perceived and experienced by the parents, children and teachers. Creswell, (2014: p. 32) state that “qualitative research is an approach for exploring and understanding the meaning individuals or groups ascribe to a social or human problem. The process of research involves emerging questions and procedures, data typically collected in the participant’s setting, data analysis inductively building from particulars to general themes, and the researcher making interpretations of the meaning of the data.” From this qualitative standpoint, the researcher aims to explore the factors that hinder parents’ involvement, as perceived and experienced by the parents, children and teachers.

1.8.2. The Research Design

Research designs are types of inquiry within qualitative, quantitative, and mixed methods approaches that provide specific direction for procedures in a research design. Creswell (2014: p. 32). The process of research involves emerging questions and procedures, data typically collected in the participant’s setting, data analysis inductively building from particulars to general themes, and the researcher making interpretations of the meaning of the data. Creswell (2014: p. 32). The researcher chose an *explorative and descriptive research design* for this current study. *Exploratory research* is conducted to gain insight into a situation, phenomenon, community or individual (Bless, Higson-Smith & Kagee,

2006). Therefore, the researcher included the explorative strategy of inquiry, as part of the research design, as the aim was to start a process of building knowledge about the factors that hinder parent involvement.

A *descriptive strategy* of inquiry was used as part of the research design for this current study because it allowed, according to Rubin and Babbie (2001: p. 125), “a more thorough investigation of the problem and their deeper implications.” Through descriptive research the researcher was able to *visualise*, *why* parents were uninvolved and detached, as well as *how* this situation could improve and change (Neuman 2000: p. 22).

Through this current study, therefore, the researcher aims to explore and describe the perceptions and the reasons, why parents are not involved in the development programmes for their children.

1.8.3. Population and Sampling

Babbie and Mouton (2001) defines the population for a study as a group of people about whom the researcher wants to draw conclusions. In this current study, the population was the 60 children, who were in the High Five programme for six months at that particular time (October 2012 until March 2013), from the two schools in Vredenburg, in the Western Cape (Panorama Primary and Masiphatisane Primary), as well as their parents and the relevant teachers, who could inform the study about the lack of parent involvement.

Purposive sampling was followed to recruit parents, who could explain the phenomenon clearly, in terms of their own responses to the programme, as well as their lived experiences. The inclusion criterion of the sample was that all the children had to be involved in the High Five programme (60), and consequently, only their parents/ caregivers were included in the study sample, as well as 6 relevant teachers (2 from each Panorama Primary and Masiphatisane Primary, as well as 2 from St Andrews Primary in Saldanha, instead of Diazville Primary, in the same area). St Andrews Primary also referred children to the High Five Programme, but only their 2 teachers formed part of the study and not their children.

The researcher obtained a complete list of the children's names from the facilitators of the High Five Programme, and made contact with the children after school, to introduce herself, explain the purpose, as well as the procedure of the research, and invite the children to participate. Subsequently, the researcher visited the homes of 35 parents to obtain permission for their children to participate in this current study. The researcher introduced herself and explained the study until they understood the value of their contribution and support. These 35 parents signed assent forms for their children to participate. Although the population for this current research study included 60 children, not all of them were available for the data collection phase, because some children changed schools, as it was the beginning of a new school year. Therefore, only 30 learners were recruited for the study.

The researcher invited the parents, by means of a letter, hand-delivered to them by the High Five facilitators, to focus group (FGs) discussions in the evenings, to accommodate the working parents. Eventually, only 19 parents were recruited for the study. The rest of the 60 parents/care-givers did not attend the focus group discussions, for various reasons, and were not available to be interviewed. Additionally, as mentioned previously, six teachers (2 each from Panorama Primary and Masiphatisane Primary, as well as 2 from St Andrews) were purposively recruited as part of the study sample.

1.8.4. Method of Data Collection: Preparation for data collection

The data collection method for the *parents* and *children* were focus group discussions and individual semi-structured interviews. The data collection method for the *teachers* was semi-structured individual interviews. The researcher explained the purpose and process to the participants before each focus group discussion or interview. Each participant also received an information letter (Appendix A), as well as a consent form (Appendix C), which had to be signed prior to their participation (Greeff, 2005). The parents of the children interviewed, signed assent forms (Appendix H) on their behalf, copies of which the researcher has on file, and also completed biographic information sheets. In addition, permission was sought from all the participants for the use of an audiotape recorder, as well as the taking of notes, during the focus groups discussions and interviews. Ultimately, the participants were informed about who would have access to the information, namely, the researcher, the facilitators of High Five, who would assist with the focus group discussions, and the study supervisor.

Interviewing is a predominant mode of data, or information, collection in qualitative research. Kvale (1996) defines qualitative interviews as endeavours to understand the issue and context, from the participant's viewpoint, as well as unpack the meaning and impact of people's experiences. Additionally, the researcher is able to follow up particular interesting avenues that emerge in the interview, and the participant is able to provide a fuller picture.

In semi-structured interviews the researcher used a set of predetermined, open-ended questions, as an interview schedule, focusing on answering the "what" question, to guide, rather than dictate, the interview. In this instance, the same focus group discussion guide was used as the interview guide (Appendix D, E & F). In this relationship, the participants are perceived as the experts on the subject, and, therefore, are allowed the maximum opportunity to tell their story (Smith, 1995).

Five focus group discussions were conducted with the children (5, 5, 7, 7, and 5 children, respectively) during a youth camp. Unfortunately, one child missed the transport provided to the camping site; therefore, the researcher visited the home of this learner, for an individual interview. Altogether, 29 learners participated in the focus group discussions, while one was interviewed individually, representing a total of 30 learners, who participated in the data collection phase.

One focus group discussion was held with the parents/caregivers at the home of a parent (not at the school), which only six individuals attended. It was anticipated that not all parents/caregivers would attend the focus groups; therefore, the researcher, subsequently, made home visits and conducted one-to-one semi-structured interviews with the parents, who did not attend the FG. A total of 19 parents were involved in the data collection phase, six parents were part of a focus group, while 13 were interviewed individually in their homes, until data saturation. The individual interviews with the parents/caregivers also provided the researcher with the opportunity to observe them in their natural setting.

Additionally, four of the six teachers were interviewed in their offices, at the schools. The researcher continued with data collection from the participants until no new insights or views were forth-coming. The remaining two teachers, who were employed at the

same school, were not interviewed, as the researcher had already reached data saturation, after the interviews with the four teachers. The researcher was also of the opinion that, as the school was in the same geographical area, similar challenges would have been experienced. The researcher recorded the data in a systematic manner that was appropriate to the setting, participants, and which facilitated data analysis.

1.8.5. Method of Data Analysis

During the data analysis process, the researcher brought order, structure and meaning to the collected data. “Qualitative data analysis is when the researcher examine or explore for related statements about barriers among themes and categories of data” (Marshall & Rossman, 1999: p. 150). For the purpose of this current study, the researcher followed the eight steps proposed by Creswell, for the data analysis process (De Vos *et al.*, 2005: p. 334-339).

- The researcher transcribed the data, after completion of the data collection process;
- After transcription, the researcher organised the data into an inventory of what was available, identified the gaps in the information, and collected additional information to fill the gaps, before analysing the data;
- After the organising the data, the researcher read the transcribed data to become more familiar with the data. During the reading process, the researcher listed on paper, the data available, wrote memos in the margins of field notes, and generally “cleaned up” what seemed overwhelming;
- The researcher identified significant themes, and as part of this process, reduced it to a small, manageable set of themes, before writing it into the final narrative;
- The researcher, subsequently, applied codes to the themes, using abbreviations of key words. The researcher assessed this preliminary organising scheme to see whether new categories and codes would emerge;
- The researcher determined how useful the data were in clarifying the question being explored, as well as how central they were to the story that was unfolding, regarding the social phenomenon being studied;

- The researcher searched for alternative explanations, identified them, described them, and demonstrated why the explanation offered was the most acceptable;
- In the final phase, the researcher presented the data, packaging the findings in a report, and disseminated the information to the relevant people.

Based on the findings, the researcher made recommendations to contribute to a Family Centred Approach in High Five and Mfesane.

1.9. The value of this study

This current study attempts to determine the hindering factors that prevent parent involvement, in order to improve the services to be more inclusive, comprehensive and family-centred for the benefit of the children.

1.10. Trustworthiness

In a qualitative research design, trustworthiness is a criterion for good research and comprises the concepts of credibility, transferability, dependability and conformability (De Vos *et al.*, 2005: pp. 345-346).

1.10.1. Credibility

For credibility, the researcher aims to demonstrate that the study was conducted in such a manner as to ensure that the subject was accurately identified and described (De Vos *et al.*, 2005). The researcher established credibility through prolonged engagement with the subject matter and allowing the participants to validate that the reported findings represented their experiences (De Vos *et al.*, 2005). In addition, the researcher shared the draft findings with the High Five staff, although they were not part of the study, for the purpose of reviewing the validity of the researchers' interpretation, because of their years of experience in working with the children. The final and approved thesis findings were shared with the 4 teachers involved in the study, as well as other teachers not involved in the study, but who were engaged in teaching at similar schools in the area. Credibility is defined as the confidence that can be placed in the truth of the research findings (Holloway & Wheeler, 2002). Credibility establishes whether or not the research findings represent plausible information drawn from the participants' original data (Graneheim &

Lundman, 2004). The researcher strove to formulate correct interpretations of the participant's original views and data collected.

1.10.2. Transferability

According to Babbie and Mouton (2011: p. 277), transferability relates to the extent to which the findings can be applied to other informants, settings and situations. The researcher referred back to the original theoretical framework to confirm how data collection and analysis will be guided by concepts and models (Babbie & Mouton, 2011). Qualitative writing tends to be rich with description and narrative. The researcher captured and collected data from conversations, experiences, perspectives, voices and meaning. Referring back to the concepts of the theoretical framework enabled the researcher to find meaning in the participants' communications, in their natural setting, as well as to describe the phenomenon (De Vos, Strydom, Fouché & Delport, 2011). The researcher used data from multiple informants, as well as more than one data gathering method, to strengthen the study's usefulness. According to Lincoln and Guba (1985), transferability in qualitative research is synonymous with generalizability. Transferability is established by providing readers with evidence that the research study's findings could be applicable to other contexts, situations, times and populations. In this study, the researcher provided evidence, which makes transferability judgements possible.

1.10.3. Dependability

The researcher accounted for changing conditions in the phenomenon chosen for the study, as well as changes in the design created by refined understanding of the setting (De Vos *et al.*, 2005: p. 346). The researcher recorded an audit trail in field notes (interview reports and forms), which are available for a dependability audit, to assess whether the techniques for meeting the credibility and transferability standards had been followed. The dependability of a qualitative study is confirmed by assessing whether the researcher had been careless, or erred in conceptualizing the study, collecting the data, interpreting the findings and reporting the results. The more consistent the researcher has been in the research process, the more dependable the results will be (Lincoln & Guba, 1985).

1.10.4. Conformability

Lincoln and Guba (1985) emphasise the need to interrogate whether the findings of the study could be confirmed by another. By doing so, the evaluation is removed from the characteristics of the researcher, and placed squarely on the data collected. Therefore, the researcher focussed on the data and was objective during data collection and analysis (De Vos *et al.*, 2005: 347).

1.11. Ethical considerations

The researcher followed ethical guidelines by approaching the Research Ethics Committee of the University of the Western Cape, for permission to conduct the study. The participants were informed about the research study, as well as what was expected of them, should they agree to participate in this current study. In addition, they were informed that participation was voluntary, and they were free to withdraw from the study at any given time, without prejudice (Martens & Ginsberg, 2009). Printed information sheets (Appendix A) about the study were also disseminated and the other ethical considerations and guidelines about their participation in the study were explained, namely, their rights to privacy, confidentiality and respect (Martens & Ginsberg, 2009). Subsequently, the participants were requested to sign individual consent forms (Appendix C), as well as the focus group confidentiality binding forms (Appendix G), with parents signing assent forms (Appendix H), as well, on behalf of their under-age children. The researcher ensured that every attempt was made to keep all the information obtained in this study, strictly confidential.

As a social worker, the researcher is also bound by the South African Council of Social Service Professions (SACSSP) Code of Ethics, which stipulates that the research should be conducted in such a way that the participants are not at risk (RSA DSD, 2011b). The researcher ensured that the participants were not exposed to any potential harm or danger.

1.12. Clarification of key concepts

The following concepts will be used throughout the research:

- **Parent:** “A parent, as describe in The Children’s Act Chapter 1 (Republic of South Africa [RSA], No. 38 of 2005), in relation to a child, includes the adoptive parent of a child, but excludes: (a) The biological father of a child conceived through the rape of

or incest with the child's mother; (b) Any person who is biologically related to a child by reason only of being a gamete donor for purposes of artificial fertilization and; (c) A parent whose parental responsibilities and rights in respect of a child have been terminated”.

- **Caregiver:** “A person who provides direct care as for children or the chronically ill.” Hunt, C.K., (2003: p. 27-32).
- **Child:** A child, according to The Children's Act (RSA, No. 38 of 2005), means a person under the age of 18 years.
- **Guardian:** “This means a parent, or other person, who has guardianship of a child” (RSA, Act No 38 of 2005).
- **A Family-centred Approach:** “A comprehensive coordinated care approach that addresses the needs of both adults and children in a family and attempts to meet their health and social care needs, either directly or indirectly, through strategic partnerships and/or linkages and referrals with other service providers.” (Kent, Iorpenda & Fay, 2012: p. 7).
- **Family strengthening:** This means a deliberate process of giving families the necessary opportunities, relationships, networks, and support to become functional and self-reliant. The strengthening of families is driven by certain core areas, namely: family economic success, family support systems, as well as thriving and nurturing communities (RSA, DSD, 2013).
- **A Family:** “The family constitution is a small kinship structured group with the key function of nurturing socialization of the new-born.” (Thorne & Yalom, 1982: p. 27)
- **Family:** “A societal group that is related by blood (kinship), adoption, foster care, or the ties of marriage (civil, customary or religious), civil union or cohabitation, and go beyond a particular physical residence” (RSA, DSD, 2013: p. 3).
- **Healthy family:** “A family characterized by good interpersonal relations and in a good state of physical, mental, and social well-being among all its members” (RSA, DSD, 2013: p. 3).
- **Parent involvement:** Refers to any way in which an adult is involved in the education of the child (Cotton & Wikelund, 1989). This can entail talking to the children about

their day at school, helping with homework, purchasing writing and reading materials, visiting the school, attending parent meetings and school functions, and serving on the SGB (Cotton & Wikelund, 1989).

- **Barrier:** “Something that blocks or is intended to block. A natural formation or structure that prevents, or hinders movement or action, something (such as a fence or natural obstacle) that prevents, or blocks movement from one place to another. A law, rule, problem, etc., that makes something difficult, or impossible. A barrier is something that makes it difficult for people to understand each other” (Merriam-Webster’s collegiate dictionary, 1999).
- **Family support:** Refers to actions that aim to consolidate support for children’s normal development, in all the contexts of their lives, for example, peer group, school, the family, church and sport codes. Family support may also be offered by professionals, or para-professionals, for example, educational, social or health services. It can be organized through informal systems of kin, support groups, neighbours and friends.
- **High risk behaviour:** High-risk behaviours are those that can have adverse effects on the overall development and well-being of youth, or that might prevent them from future successes and development. This includes behaviours that cause immediate physical injury (e.g., fighting), as well as behaviours with cumulative negative effects (e.g., substance use)” (De Guzman & Bosch, 2007: p. 1).
- **White Paper:** A document used as a means of presenting government policy preferences, prior to the introduction of legislation. Its publication serves to test the climate of public opinion regarding a policy issue, and enables the government to gauge its probable impact (RSA, DSD, 2013).

1.13. Summary

Chapter 1 served firstly as an orientation of the study, and secondly to present the study direction. The researcher sought to understand the context of families and parents of the children in the High Five programme. Organised and disorganised families as described by Bezuidenhout (2008), were discussed, as the researcher sought to explore the barriers that hinder parent involvement and the relationship between disorganised families and absent parents.

The research problem was presented and the researcher introduced the aim of the research study, the motivation of the study and the reasons for choosing the selected population and sampling. The researcher also discussed the research approach, research design and a qualitative research methodology, which was found most suitable for this current study. According to Brock and Edmunds (2010), it is clear that “The degree to which parents are involved in their children’s education is one of the most important factors affecting children’s success in school, Practices such as helping children with homework, establishing academic goals, and discussing students’ progress with teachers are important because these indicate to children that parents care and support their efforts at school.”

In the next chapter, the researcher critically summarises the key literature, which informs the barriers that hinder parent involvement. The reasoning behind this is to examine the main theoretical perspectives that are significant in comprehending why parents are not involved in the development activities for their children in the High Five Programme.

CHAPTER TWO

LITERATURE REVIEW

2.1. Introduction

The purpose of this chapter is to critically review and condense the key literature that informs the barriers that hinder parent involvement, in order to examine the main theoretical perspectives, which are significant in understanding why parents are not involved in the development activities of the High Five Program for their children. The researcher anticipates that the reader will become acquainted with the knowledge, regarding the research problem.

Bowlby, J. (2008) developed the attachment theory and attachment behaviour after research into the emotional difficulties of young people (particularly infants) raised in institutions. He found that many of these children struggled to build strong, close relationships with others. He believed that they were unable to love because they had missed the opportunity to form a firm attachment to a mother-figure in early life. In other words, a disrupted relationship with the primary (main) caregiver (usually the mother) in infancy resulted in future difficulties in relationships with others. The child's relationship with his parents will then influence the relationships he will form socially and romantically when he or she is an adult and ultimately with his/her own children. Parenting practices, according to Nanu and Nijloveanu (2015) is directly linked to adult attachment.

The children referred to the High Five Programme display limited self-control and socially incompetent behaviour; therefore, it is possible that they could have been exposed to a disrupted relationship or permissive parenting style, which plays a role in their development. The researcher is of the opinion that more research could be conducted in this respect. Parenting occurs within the context of the family and family life and therefore the researcher adopted three family theories that support and inform the research study.

A research study of Matejevic, M., Jovanovic, D. & Jovanovic, M. (2014) confirm that parent involvement relates to parenting styles. The research study was conducted with the aim to determine a correlation between a parenting style, involvement of parents in school activities and success of adolescents in schools. The results of the research showed that an authoritative

parenting style was characteristic for mothers, which was correlated with a higher involvement in school activities and a greater success of adolescents. An authoritarian parenting style is dominant for fathers and it is correlated with a lack of time necessary for involvement in school activities. The given results indicate a problem concerning involvement of fathers in school activities of children and the indifference of school to establish a partner relationship with parents. The study recommended that relevant information about effects of various parenting styles on achievements of students within collaborating between school and a family and establishing a partnership between school and a family.

In the researcher's opinion, teachers, as educators, and other service providers, have a responsibility to support families in their roles related to positive parenting, family values and parenting styles.

Parenting styles in relation to parent involvement

Louw, Shaw, Camerer and Robertshaw (1998: pp. 351-352) mentions the three parenting styles, identified by Baumrind (1971), namely, the authoritative, authoritarian and permissive styles, which play a role in adolescents' social development. According to Louw *et al.* (1998: p. 351) the way in which parents rear their children is considered a parenting style.

- *Authoritative* parents encourage adolescents to behave independently, within boundaries. These parents set rules and provide reasons why; therefore, children of these parents mature socially responsible, affectionate and caring. Parents with such a parenting style are most likely to be active and involved.
- *Authoritarian* parenting is a restrictive and punitive style, where the parents set limitations and exercise strict control. This type of parenting style is associated with socially incompetent behaviour in adolescents. It can be assumed that this parenting style could place negative pressure on the teacher-parent relationship, or hamper the building of such a relationship.
- *Permissive* parenting occurs when no control is exercised over adolescents' behaviour, and they are left to make their own decisions. These adolescents show socially incompetent behaviour, as well as limited self-control, because they never learnt to control their behaviour. Such caregivers might be invited to school

more than once, to discuss the behaviour of their children, and the impact thereof on their academic progress. It can become a barrier for parent involvement, as caregivers could experience visiting the school as an embarrassment.

2.2. Review of the Literature

The literature review places a research project in context, as it shows the path of prior research, as well as how the current project is linked to the former projects. Through a literature review, the researcher is able to study how others have described similar problems (Kreuger & Neuman, 2006: p. 461; Mouton, 2001: p. 87; De Vos et al., 2011: p. 134).

The four broad functions in qualitative studies are well summarised by De Vos et al. (2011: p. 302):

- (1) The researcher can identify gaps in previous research studies, and therefore,
- (2) Improves and redefines the research questions;
- (3) Validates the underlying assumption behind the general research question; and
- (4) Proves that the researcher is knowledgeable about related research.

Regarding the above discussion of the purpose of a literature review, the researcher intends to explore and describe the factors that hinder parent involvement, as well as the challenges faced by families that could lead to no, or poor, parent involvement; the impact of good relationships between parents, teachers and children on parent involvement; and what makes parent involvement difficult, or what could make it easier for parents to be more involved. In addition, the external factors that influenced families to become organised or disorganized families will also be explored. The researcher begins with the conceptual understanding of parental responsibility, as well as other concepts in becoming accustomed with the knowledge regarding the research problem.

2.3. Conceptual understanding of parental involvement

2.3.1. Parental Responsibility

Parents, hereafter referred to as caregivers (to be inclusive), have a parental responsibility towards their children, or children placed in their care. This responsibility can be referred

to as a set of rights and privileges that children receive from their caregivers. Rights & responsibilities are unpacked in Chapter 3 of the Children’s Act (RSA, No. 38 of 2005). The Act stipulates that caregivers must:

- “Take care of their child”
- “Maintain contact with the child”
- “Be a guardian to the child”
- “Make sure that the child has financial support”

According to the South African Schools Act (Republic of South Africa [RSA]. Act No. 84 of 1996: p. 4), “every caregiver must encourage every learner, for whom he or she is responsible, to attend school”. In order to understand the concept of parental responsibility better, the concept parental involvement will be explored.

2.3.2. Parental involvement

Children grow up and spend most of their childhood years in the systems of caregivers, family, school and community. These systems create the total environment in which the education and development of children occur (Onwughalu 2011: pp. 3 & 4; Epstein, 2001). Therefore, it can be deduced that children’s educational development will benefit most, with both parental and community involvement. It is against this background that Riley (1999) asserts that the best hope of setting all children on the correct educational path, is to increase the parental and community involvement. Similarly, Brandt and Robelen (1998) are of the opinion that it will be very difficult for schools to meet the challenges of true reform (better educational outcomes and benefits) without first doing a better job of connecting with caregivers and the public. The school, as one of the institutions in society, are not the only institution in which teaching and learning occur. The family is a critical institution in this regard, and caregivers are also educators of their children. Parenting is the mechanism through which a child observes and learns appropriate or inappropriate behaviour, experience right or wrong decision-making, acquire skills and understand the values, roles and norms of a community (Epstein, 2001; Martinez *et al.* 2010).

In view of the above, it is important to mention that the family, the primary unit of protection, education and care, is in crisis. The Department of Social Development

(Republic of South Africa [RSA]. Department of Social Development [DSD], 2011a) warns that the family, perceived as the primary point of socialisation, care and nurture, is at risk, as indicated in the following direct quotation: “The South African family is under threat from a host of societal forces such as high levels of poverty, high unemployment, high levels of unwanted pregnancies, HIV and AIDS, absent fathers and mothers, domestic violence and other factors that weaken families and undermine their stability. Despite this, South Africa does not have a family policy that specifically pays attention to the family unit and co-ordinates different efforts aimed at uplifting its living standards. Such a policy should holistically address all the circumstances of the family and provide guidelines towards the realisation of this goal to the Government and other stakeholders.” A number of issues, such as poverty, illness and illiteracy put families at risk. This does not take away the fact that they care well for the children, but in terms of educational and nutritional support, families struggle to assist their children (Makunga 2015). According to September, Rich and Roman (2015), warm, responsive, consistent parenting is a prerequisite for optimal child development outcomes, while adverse family experiences, such as family dysfunction, harsh discipline practices and parental psychopathology, result in an increased risk of child and adolescent psychopathology.

The term *parental involvement* in this current study refers to any way in which an adult is involved in the education of the child. This could entail appreciating the importance of education, talking to the children about their day at school, helping with homework, buying writing and reading materials, visiting the school, attending parent meetings and school functions, and serving on the School governing board [SGB] (Cotton & Wikelund, 1989). *Parental responsibility* differs from parental involvement in one sense that parental responsibility towards an education for their children is enforceable by law, while parental involvement is not (Cotton & Wikelund, 1989). Goodall and Vorhaus (2011), as well as Sheridan (2010) use the term *parental engagement*. This term refers to learning at home, school-home and home-school communication, in-school activities, decision-making and collaborating with the community.

Relationships are also very important, and without a relationship between caregivers and practitioners, learning and sharing may be negatively affected. A willingness and positive attitude from both caregivers and practitioners is a prerequisite for relationship building. Both parties need to maintain a positive attitude and mind-set, focussed on the

development and growth of the child (Orkin, Abebe & Woodhead, 2012; RSA, The Children's Act, Act No. 38 of 2005; RSA, The South African Schools Act, Act No. 84 of 1996). Caregivers and practitioners may need support to build and make these learning partnerships/relationships work. Family support service providers need to support, particularly, families dealing with stressful circumstances, such as poverty, unemployment, family breakdown or addiction (Garfat & Charles, 2012). Without the much needed support, these challenges might contribute towards poor parent involvement, and need to be explored further (Orkin, Abebe & Woodhead, 2012; RSA, The Children's Act, Act No. 38 of 2005; RSA, The South African Schools Act, Act No. 84 of 1996).

In order to understand why caregivers do not adhere to this responsibility, the barriers that hinder parent involvement have to be explored.

2.3.3. The challenges faced by families that may lead to poor parent involvement

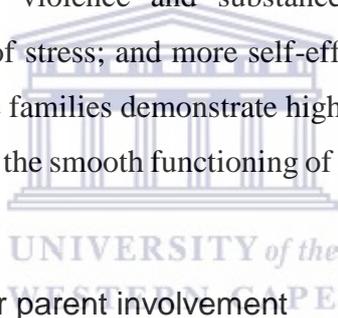
According to Bezuidenhout (2008), in every society there is a standard and accepted way in which people may live together and rear children. This socially accepted network of people is known as a family. A small family unit, consisting of the parents and their biological children, and/or adopted children, and/or children placed in their care, is known as the nuclear family. It can be anticipated that the smaller size family may have a better chance of increasing the bonds of affection; however, this actually makes the nuclear family more vulnerable in times of crisis. The family that stays together, despite difficulties, and maintains healthy relationships, is often referred to as a stable and smoothly functioning social unit, known as an organized family (Bezuidenhout 2008).

The burden of demands experienced by members in nuclear families may not be as demanding as in the extended family structure. Extended families can be more complex, as the extended family consists of two or more families, affiliated to one another by the extension of the parent-child relationship (Steyn 1993a; 1993b). The members of an extended family usually share a household. Additionally, in extended families mutual assistance and support (also financial) are culturally compulsory (Louw & Louw, 2014).

A family, in which the members do not function as a close knit unit, and, therefore, do not adequately meet each other's needs, is viewed as a disorganized family.

Bezuidenhout (2008) defines family disorganization as the weakening, maladaptation or disbanding of the ties that bind the members of the family, as a group. External environmental factors, such as violence, unemployment, imprisonment, and natural catastrophes, also make it difficult or impossible for members in the family to collectively fulfil their roles.

Literature from Walsh (2003), Bezuidenhout (2008) and the White Paper on families (RSA, DSD, 2013) cite how families are in a crisis due to the demands of parenthood, as well as the external factors that disrupt family relationships, resulting in a disorganized family that cannot meet all the needs of their members. The researcher is aware that for most of the caregivers and children in the High Five Programme, the previous statement, is relevant. Amatoeng Heaton and Cardell (2004) assert that research evidence has revealed that stable and supportive families are associated with several positive outcomes for its members. These include higher levels of self-esteem; lower levels of antisocial behaviour such as crime, violence and substance abuse; higher levels of work productivity; lower levels of stress; and more self-efficacy to deal with socioeconomic hardships. Therefore, stable families demonstrate high levels of social capital, as well as resilience, and contribute to the smooth functioning of society and social cohesion (Ziehl, 2003).



2.3.4. Barriers that hinder parent involvement

The following barriers that may hinder parent involvement, as identified by The National PTA USA staff, are individually discussed: Time, not feeling valued, feeling unwelcome, not knowing how to contribute, not understanding the school system, caregivers in need, child care, language, special needs, transportation, snobbery and exclusion, resistance to change, and lack of sufficient training (National PTA, 2001).

- **Time:** Caregivers often cite time as the single greatest barrier to volunteering, attending meetings and joining decision-making committees at their children's schools. These activities often are scheduled at times that interfere with work, community or household obligations.
- **Not feeling valued:** Some caregivers are not sure that they have anything of value to contribute. They may feel intimidated by principals, teachers, and PTA leaders. These caregivers may have had unpleasant school experiences, or may

have limited education, or low literacy levels. Caregivers, who have had negative experiences with the law, also may be reluctant, or embarrassed.

- **Feeling unwelcome:** Caregivers may feel they are unwelcome in the school. Staff interactions, attitudes, and the physical appearance of some schools may convey an unwelcoming environment.
- **Not knowing how and where to contribute:** Some caregivers believe they have talents, but do not know whether they are needed, or how to contribute them to the school, or the PTA.
- **Not understanding the school system:** Many caregivers are unfamiliar with the system and, therefore, do not know what their rights are, or how they can become involved.
- **Caregivers in need:** Caregivers, without adequate resources, often feel overwhelmed by the school's demands. Families suffering from economic stress must address their own needs for food, clothing, and shelter, before they can see their way clear to become more involved in their children's education.
- **Child care:** Child care may not be offered at meetings, or school functions. In addition, caregivers may be discouraged from bringing their children to events.
- **Language:** Caregivers, who do not speak English, may not understand newsletters, fliers, or speakers at meetings.
- **Special needs:** Caregivers with disabilities may find it difficult, or feel uncomfortable attending and contributing at meetings.
- **Transportation:** Lack of transportation, or access to parking at the schools, keep caregivers from visiting schools, or attending school activities.
- **Snobbery and Exclusion:** Many caregivers still view PTA, or other parent groups, as isolated and established cliques that exclude minorities and newcomers.
- **Resistance to change:** Some PTA members, school administrators, and teachers may resist the idea of PTAs functioning in different roles, other than providing hospitality and financial support for school needs.

- **Lack of sufficient training:** Many present PTA leaders come into their positions with little, or no advocacy, or leadership experience.

However, it has been stated that other factors, such as *caregivers' beliefs about parent involvement, caregivers' current life contexts, caregivers' perceptions of invitations for involvement, and class, ethnicity and gender* are seen as barriers to parent involvement (Hornby & Lafaele, 2011). Literature provides a strong, convincing message on the advantages of parent involvement for children of all ages (Cox, 2005; Desforges & Abouchaar, 2003; Eccles & Harold, 1993; Epstein, 2001). This includes home-based parent involvement, such as listening to children read, and supervision of homework, as well as school-based parent involvement, such as attending parent education workshops, and parent-teacher meetings (Fan & Chen, 2001; Henderson & Mapp, 2002; Jeynes, 2005; Pomerantz, Moorman & Litwack, 2007).

According to Christenson and Sheridan (2001: p. 18), "... there is still more rhetoric than reality about family and school working together as genuine partners". This view is reinforced by the findings of two surveys. Firstly, in a survey with 1035 secondary school teachers in the United States of America (USA), 83% of teachers considered that the level of parent involvement in their schools needed to be increased (Binns, Steinberg & Amorosi, 1997). Secondly, in a survey with parents in the United Kingdom (UK), 72% of mothers wanted more involvement in their children's education (Williams, Williams & Ullman, 2002). Many caregivers, however, indicate that they are unacquainted with the terminology used in their children's education. Parents want to be involved in their children's education, but experience that they are unable to assist, as the "teaching methods are different today", while some parents fear they would help in the "wrong way" (Christenson & Sheridan, 2001: p. 18).

Therefore, it could be reasoned that caregivers' beliefs about various issues could act as barriers to effective parent involvement. How caregivers' view their role and abilities to assist their children is crucial.

- **Caregivers' beliefs about parent involvement:**

Caregivers, who believe that their role is only to get children to the school that assumes the responsibility for their education, will not be willing actively

participate in either school-based, or home-based parent involvement. The belief that caregivers have in their own ability to help their children succeed at school, is the second belief that is crucial to parent involvement. Hoover-Dempsey, Whitaker and Ice (2010) highlight that those caregivers with a low level of belief in their ability to help their children, are likely to avoid contact with schools, because of their perception that such involvement will contribute to positive outcomes for their children.

For some caregivers, the lack of confidence to help their children may be because the language of instruction is not their first language; therefore, they assume they are unable to communicate effectively with the teachers. The lack of confidence may also emerge because caregivers suppose that they have not developed sufficient academic competence to effectively help their children, as well as interact with the teachers (Hoover-Dempsey *et al.*, 2010).

- **Caregivers' current life contexts**

Several aspects of caregivers' life contexts could act as barriers to parent involvement. Caregivers with low levels of education, or caregivers who do not value education as important, will be influenced by their mindset, attitude and knowledge to engage in different aspects of parent involvement (Green, Walker, Hoover-Dempsey & Sandler, 2007). For example, caregivers, who did not complete high school, or primary school, may be insecure about helping their children with homework, and may not value schooling (Makunga 2015).

Family circumstances could be major barriers to parent involvement. Single caregivers with no support system, families with small children, or large families, may find it more difficult to get involved, because they cannot afford babysitting, or manage their other caretaking responsibilities (Catsambis, 2001; Green *et al.*, 2007).

Caregivers' work situations could be a barrier. When caregivers are unemployed, they may not be able to afford transport to get to school meetings. For caregivers with jobs, long working hours, and no, or little flexibility for taking time off for school-based parent involvement, may also create challenges. Caregivers may stay far from the work place, and at the end of the day, may be too tired to help their children with their homework. When meetings are arranged in the evenings,

it may be unsafe for caregivers to walk long distances from home to school (Catsambis, 2001; Green *et al.*, 2007).

Finally, caregivers' overall psychological and physical resources may be barriers. For example, caregivers with poor physical or mental health, or without an effective social support network, including extended family members, may find it difficult to engage effectively (Eccles & Harold, 1993).

- **Caregivers' perceptions of invitations for involvement**

Another potential barrier to parent involvement is the caregivers' perceptions of the level of explicit and implicit invitations for involvement. When caregivers think that their involvement may not be valued by the teachers, or the schools, they are less likely to get involved (Hoover-Dempsey *et al.*, 2010). Therefore, caregivers' perceptions of invitations from schools are considered crucial for the development of effective parent involvement.

Teachers need to be positive towards caregivers, and employing special efforts to invite caregivers, would make them feel special and valued. Improved parent involvement, requires improved measures and processes by teachers, to invite caregivers, and increase effective ways of involving caregivers.

Epstein (2001) asserts that caregivers are most effectively involved, when teachers actively encourage parent involvement. When caregivers perceive that teachers are open to involving them, they will feel valued. The schools that are welcoming to caregivers, and demonstrate that they value parent involvement, develop more effective parent involvement, than schools that do not appear inviting to caregivers (Eccles & Harold, 1993).

- **Class:**

Desforges and Abouchaar (2003), as well as Nechyba (1999), summarised three possible mechanisms, through which social class might operate. Firstly, working class families may not prioritise education as much as middle class families, and, therefore, would seem less inclined to be involved in their children's school activities. Secondly, it is also assumed that working class families have less social capital, in terms of social networks, extended families and skills. In addition, working class caregivers may feel that they are not sufficiently equipped to

deliver on the demands of schooling. The third mechanism refers to institutional barriers. In this sense, schools are perceived as middle class institutions. Schools often accept, or expect involvement, on their own terms, which are non-negotiable. Working class parents, who do not conform to these values, are quickly reprimanded.

- **Ethnicity:**

It is also important to reference barriers related to ethnicity and culture. There is an emphasis on titles and social class within cultures and communities, with a perception that culture is the family's territory, while education is the schools' territory (Hornby & Lafaele, 2011).

In another study, Young (1998) examined the impact of cultural issues in the development of trust between Mexican-American caregivers and schools in the United States. The study determined that the "existence or absence of trust between the home and the school affects the development and sustenance of meaningful parental involvement" (Young 1998: p. 1). This author's finding that cultural roles, expectations and values play a pivotal part in how trust is perceived and developed, is further evidence of the need to be aware of the context of culture and ethnicity. Not understanding the impact of ethnicity, and not implementing programmes that include all cultures, is another barrier to effective parent involvement (Young, 1998).

- **Gender:**

The term parent involvement in itself is a contradiction, according to Reay (1998). The factual reality is that mostly mothers are involved; they show up for meetings, church gatherings, sport days, fundraising events etc. Mothers, primarily, respond to invitations and opportunities for involvement; therefore, reference is made to the term *mothers' involvement*, rather than *parent involvement*. Despite the many and increased roles and responsibilities of mothers, they seem more likely to make time for engagement, than fathers do (David, Keane, Shelton & Calkins, 2010). It is clear that most parental involvement comes from mothers, rather than from fathers. Waanders, Mendez and Downer (2007), in their study, focused exclusively on mothers, to measure parental involvement.

Additional barriers, such as *child factors* are also highlighted by Hornby and Lafaele (2011), focusing on the *age of the children, learning difficulties and disabilities, gifts and talents*, as well as *behavioural problems*. When behavioural problems become so severe that schools begin to consider suspension or expulsion, conflict between schools and caregivers is almost inevitable, and presents a formidable barrier to meaningful parent involvement.

- **Child factors: Age**

The age of children can be a barrier to the involvement of parents. It is widely recognized that parent involvement decreases as children grow older, being at its highest in preschool and primary school, and at its lowest in secondary school level (Eccles & Harold, 1993). Therefore, it can be presumed that parents of younger children are more involved because younger children are more positive about their parents' involvement at school. Older children are less keen about their parents' involvement in, for example, class trips, which is partly due to adolescents wanting to be independent of their parents (Eccles & Harold, 1993). Teachers often misinterpret this behaviour and assume that older children do not want their parents to be involved in their education, which can be a barrier to effective parent involvement.

However, adolescents still desire, as well as benefit from, their parents' involvement in various ways, such as, helping them with their homework, and making subject choices. Deslandes and Cloutier (2002), in their study of 872 14-year-old children in the United States, determined that adolescents do indeed want their parents to be involved in one form or another.

- **Child factors: Learning difficulties and disabilities**

Children's performance at school can be a barrier for parent involvement. Parents tend to be more motivated towards involvement when their children are experiencing school work challenges, due to learning difficulties or disabilities (Eccles & Harold, 1993). In fact, many authorities on special needs education consider that involving parents is an essential aspect of effective education for children with disabilities or learning difficulties (Hornby, 1995; Seligman 2000). In contrast, there are many possible areas for disagreement between schools and parents of children regarding learning difficulties or disabilities. If these disagreements are not successfully

managed by the school and the parents, they could act as barriers to effective parent involvement (Seligman 2000).

- **Child factors: Gifts and talents**

Children being gifted or talented are usually an enabling factor for parent involvement since it is a pleasure for parents to attend award evenings and parent–teacher meetings if their children perform well and achieve outstanding results. However, when parents consider their children as academically gifted and this view is not shared by teachers, it can be a barrier to effective parent involvement (Montgomery 2009).

- **Child factors: Behavioural problems**

Parents can be reluctant to go into schools when requested to discuss their children negative behaviour out of fear for getting more bad news. When behaviour problems become so severe that schools begin to consider suspension, conflict between schools and parents is inevitable and presents a tough barrier to meaningful parent involvement (Parsons 1999). It can be assumed that, the more disruptive the behaviour and the more caregivers are called to school for this reason, the less caregivers are inclined to be involved with the school. This is the case with some children in the High Five Programme.

Caregivers, mostly mothers and grandmothers even if they are illiterate have a sense of responsibility towards their children. It is when it comes to the educational support and aspirations that caregivers may lack in giving guidance. Hough (2014) however emphasise that a mother’s literacy skills can translate into creating healthier children as they have educate their children and share information which can result into a closer bond with their children (Hough, 2014).

Family structures, and the political, economic and historical context in which mothers’ involvement occurs have been changed significantly over the past few years. Single mothers are forced to enter the job market and face balancing issues of working with schools, house chores, increased workload, participation in the labour market, as well as the effects of class, marital status and ethnicity. These issues contribute to the reasons for the poor parent/mother involvement (Hornby & Lafaele, 2011).

2.3.5. The factors in the parent-teacher partnership that can hinder parent-involvement

There is a strong focus on the teaching of essential pedagogical skills and knowledge at teaching colleges and universities. When teachers are confronted with real school life, they promptly realise that they require more skills to work with parents and the community, which they learn as they teach. These facts are supported by Landsberg *et al.* (2005: p. 225), Epstein *et al.* (2002: p. 11), as well as Epstein and Dauber (1991). According to the researcher's experience, most teachers would like to involve parents, but many do not know how to, and, subsequently, are afraid to take action.

A number of barriers to the facilitation of a conducive climate, in which caregivers could participate, has been identified, which are particularly relevant in the South African schools' context. The following barriers prevent parents from participating, and educators from reaching out:

- “It was found that policies tend to concentrate primarily on what the parents can offer and not what schools and teachers can provide for parents.”
- “Parents are often unsure about school policies concerning homework and discipline and other important procedures.”
- “Parents and teachers often have anxieties about working together”

Landsberg *et al.* (2005: p. 85).

Teachers often fail to advise parents on the various ways in which they can become involved. Similarly, various studies have revealed the limited effort by schools to encourage parent involvement, inviting parents only to contribute in certain activities, such as sports and funds raising (Mannathoko & Major, 2012; Macleod, Hookey, Frier & Cowieson, 2000). The above identifies the inconsistency in the education of parents on how they could assist and support their children's academic progress (Wade & Moore, 1993). According to the researcher, more research on the partnership between teachers and caregivers is crucial, as well as its influence on the development of children. A good relationship between caregivers and teachers could contribute to increased parent

involvement, which could facilitate positive outcomes in the child's development (Wade & Moore, 1993).

Venter and Rambau (2011) affirm that in unhealthy relationships, where children do not receive support from their parents and others, children are likely to develop negative responses toward the self and others. Children who experience unhealthy relationships with their parents are negatively affected, influencing their scholastic progress, as well as emotional distress in childhood and adulthood (Venter & Rambau, 2011). Eberstadt (2001), in the article, *Home-alone America*, indicates that negative behaviour occurs during the after-school hours in the parent-free home. This implies that parental absence may be detrimental to learners' scholastic performance and emotional well-being. According to Desforges and Abouchaar (2003: p. 44) "It was argued that parent's views of their role as a teacher and their degree of comfort in communicating with teachers might in part be a reflection on their own education experience." Therefore, parents with low levels of education may feel inept to support their children.

These studies suggest that a poor parent teacher relationship could be a barrier that hinders parent involvement. It also confirms that caregivers experience barriers, which hinder their involvement, and not that they do not care. Therefore, it should not be concluded that caregivers are not interested in their children's education or development, but efforts should be to enable caregivers to become involved in their children's education and development.

2.3.6. Parental involvement in the formal and informal education of children

Most of the research and information considered for this current study aimed at identifying the barriers that hinder parent-involvement in the education and academic performance of their children. Less information is available on research of parent-involvement in non-formal education, such as the High Five Life Skills Programme, which occurs after school. It could be assumed that research places more emphasis on parent-involvement in the formal education of their children, than on informal education, such as life skills programmes. In addition, it could be reasoned that caregivers, who are not involved in their children's formal education, are probably not involved in their informal education.

A study conducted by Lefevre and Shaw (2012) examines the effects of formal (school-based) and informal (home-based) Latino parent-involvement. Both forms of support were significant predictors of student achievement, with the impact of informal support being nearly as great as that of formal support. It was suggested that Latino students benefit from both methods of involvement, and both formal and informal parent-involvement should be acknowledged and supported. The study of LeFevre and Shaw (2012) views Latino parental-involvement as a strength, instead of something that is lacking. Caregivers should be educated on the value of their involvement as a strength or asset, and not as something that they are unable to do. Formal and Informal support refers to parent involvement in formal and informal education. Fordham (1993) define Formal and Informal Education as follows:

Formal Education: “The hierarchically structured chronologically graded ‘education system’, running from primary school through the university and including, in addition to general academic studies, a variety of specialized programmes and institutions for full-time technical and professional training”.

Informal Education: “The truly lifelong process whereby every individual acquires attitudes, values, skills and knowledge from daily experience and the educative influences and resources in his or her environment – from family and neighbours, from work and play, from the market place, the library and the mass media”.

The distinction made is largely administrative. Formal education is linked with schools and training institutions, while non-formal education is linked with community groups and other organisations, and informal covers what is left, for example, interactions with friends, family and work colleagues. High Five is regarded as a registered Non-Profit Organisation providing non-formal education, such as life skills and personal development to young people and their families.

Okeke (2014) describes a case study in London, UK. The results of the study revealed that parents care about their children’s education, and want to become involved. However, the results also revealed that most parents do not always know how to become involved, and some are even intimidated by the operational structures within the school.

“The study concludes that to effectively involve parents in the affairs of the school, as well as in their children’s education, certain strategies must be popularised within the school.” Okeke (2014: p. 1). The literature and case studies of Bouakaz and Persson (2007), Comer and Haynes (1991), as well as Okeke (2014) affirms that parents do not know how to get involved, while some are even overwhelmed, as they lack knowledge of the school system and its practices.

In summary of this section, the researcher highlights three major factors that determine parental involvement in the education of their children (Michigan Department of Education, 2002).

- Parents’ beliefs about what is important, necessary and permissible for them to do with and on behalf of their children;
- The extent to which parents believe that they can have a positive influence on their children’s education; and
- Parents’ perceptions that their children and school want them to be involved.

Using this background, the researcher seeks to explore parent-involvement through school-family partnerships.

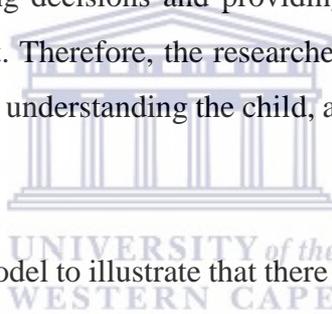


2.3.7. Inclusive Education: Parental-involvement through School-Family Partnerships

Inclusive education is broader than formal schooling and also incorporates the roles of the home (caregivers) and the community (Republic of South Africa [RSA], Department of Education [DoE], 2001). The South African Education White Paper 6 (RSA, DoE, 2001), in particular, acknowledges the contributions of the family and the community. Other authors, namely, Sands, Kozlesky and French (2000), as well as Bauer and Brown (2001), also emphasise the right of parents to participate in their children’s education. In addition, the collaborative roles of communities are formally recognised, which promotes the idea of creating inclusive learning communities, as proposed in the South African Education White Paper 6 (RSA, DoE, 2001).

According to Landsberg *et al.* (2005), inclusive learning communities recognise that every child can learn, and belongs in the mainstream of both school and community life. The authors further assert that a sense of belonging is needed for children to become positive contributors of a community. To establish such a sense of belonging and an emotional sense of community with children, principles of respect, belonging, love, trust and caring is needed. To reach this ideal requires the collective and cohesive effort of every child, family, peer, school professional and community member as equal members of an inclusive community. Such community members are characterised by open and honest communication, a shared commitment to care for each other, enjoy each other's presence, and celebrate, as well as grieve together (Landsberg *et al.*, 2005).

Additionally, Landsberg *et al.* (2005) declare that, when any child needs support, the whole learning community responds to meet the need. In these communities, children, their families and community members have a culture of joint participation, with the school personnel, in making decisions and providing resources to support the child's education and development. Therefore, the researcher draws on the ecological systems theory, as it is significant in understanding the child, as well as the family, in its contexts (Landsberg *et al.*, 2005).



Epstein (2001) devised a model to illustrate that there are overlapping spheres of activity or influence between families, schools and communities, which could be incorporated to generate an area of partnership. In this current study, High Five represents the community as a community youth development organisation. In Figure 2.1, Epstein (2001) illustrates, by means of three spheres, the areas of overlapping, signifying areas of interdependence and independence. Some activities in families, schools and communities are performed independently, as indicated by the sections of the spheres that do not overlap, while others are performed interdependently, as indicated by the intersections of the three spheres. The internal model of interaction of the three spheres also demonstrates how and where complex interpersonal interactions occur between school, family and community. The school may, for example, invite all families and community members to the school, or alternatively, a specific family, when it concerns an individual child. This model, therefore, has the best interest of the child as its main focus and purpose in child development (Landsberg *et al.*, 2005).

The significance of the family being together as a unit, is clearly highlighted, in order for it to engage confidently, dependently or interdependently, to strengthen the development and achievement of the children. Consequently, the researcher explores the significance of the strong family relationships.

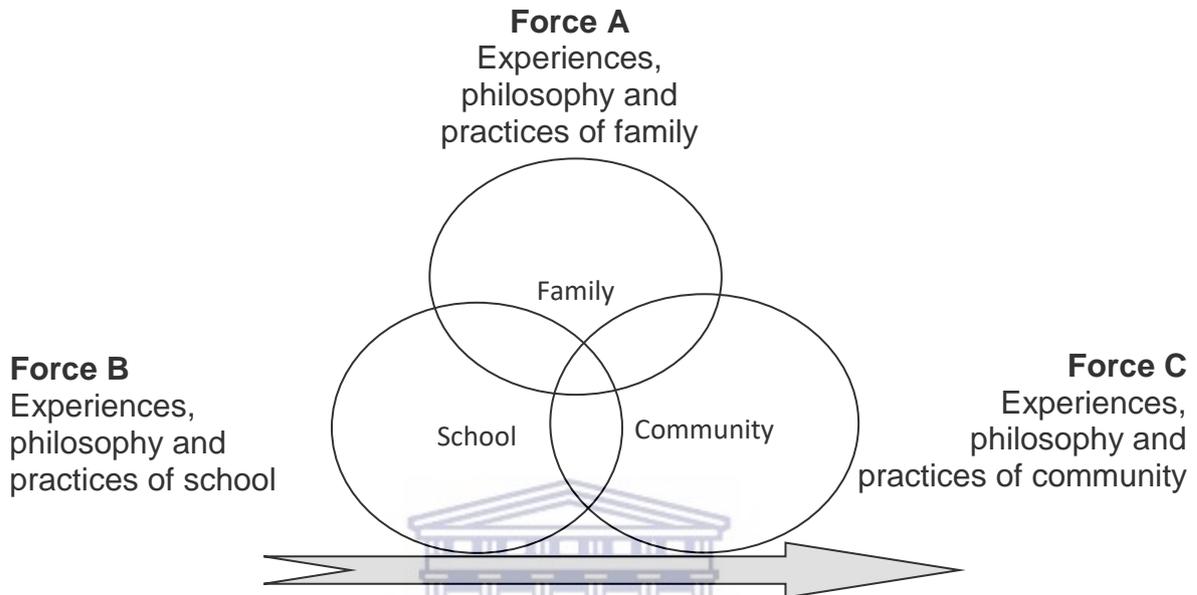


Figure 2.1: External Model

Source: Epstein (2001)

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2.3.8. The significance of strong family relationships

Based on all the literature reviewed, the researcher is of the opinion that strong and healthy family relationships is a prerequisite for the healthy development of children. According to Walsh (2003: pp. 13, 50, 51), “as our world grows increasingly complex and unpredictable, families face unprecedented challenges and families and the world around them are changing at an accelerated pace.” Walsh (2003) is shifting the focus from how families fail, to how they can succeed. The focus has shifted from deficits, limitations and pathology to a competency-based, health-orientated paradigm, recognizing and amplifying family strengths and resources (Walsh, 2003). In addition, Sanders, Turner and Markie-Dadds (2002); Chamberlain and Patterson (1995); Patterson (1982); as well as Sanders and Duncan (1995), emphasise that the quality of family life is fundamental to the well-being of children.

The value of the extended family support networks, for advice, baby-sitting, as well as listening to, contribute to strong and healthy families. The absence thereof increases the demands of parenthood on parents, when they experience stress or trauma (Lawton & Sanders, 1994; Sanders, Nicholson & Floyd, 1997). According to Sanders, Turner and Markie-Dadds (2002: p. 5), caregivers should become self-sufficient; implying that caregivers should become more connected to social support networks. Families may be well-linked with the local schools, shops, as well as the community centre, but still lack access to social resources and supports (Edwards, 2003). Families should be able to join in and reach out to the networks that are available.

The first responsibility of parents is to provide a loving and happy home (Campbell 1987). The most important relationship in the home is the marriage bond, which takes primacy over the parent-child relationship (Campbell 1987: pp. 18, 69). “Stable, healthy families are at the heart of strong societies. It is within the family environment that an individual’s physical, emotional and psychological development occurs. It is from our family that we learn unconditional love, we understand right from wrong, and we gain empathy, respect and self-regulation. These qualities enable us to engage positively at school, at work and in society in general. The absence of a stable, nurturing family environment has a profoundly damaging impact on the individual, often leading to behaviour which is profoundly damaging to society” (RSA, DSD, 2013: p. 5). According to the researcher, therefore, it could be concluded that the lack of a warm, positive relationship with caregivers, increases behaviour and emotional problems in children.

2.4. Types of parent involvement

Desforges and Abouchaar (2003) identified six types of parental involvement. The types of involvement, described briefly below, clarify how schools can work together with families and communities, to assist them to become, or stay, informed, as well as involved in children’s education at home, and at school (Epstein, 2001: p. 43).

- **Parenting** “has to do with assisting families with child-rearing skills and family support, understanding child and adolescent development, and setting home conditions to support learning at each age and grade level” (Epstein, 2001:43).
- **Communication** with the caregivers goes far beyond simply sending letters home. More importantly, it involves opening channels of communication, so that caregivers

can reach and contact school officials effectively (Epstein, 2001: p. 44; Glanz, 2006: p. 40).

- **Volunteering** – Principals can contribute, by allowing community volunteers, with different expertise, to work at the school. Expertise, such as tutoring, assisting with lunches, as well as individuals to help with office work, may be useful (Glanz, 2006: p. 40).
- **Learning at home** implies that the families are involve in learning activities at home, including homework, extra mural activities and decision-making (Epstein, 2001: p. 44).
- **Decision-making** – Including families in decision-making, governance and advocacy activities through school governing bodies (Epstein, 2001: p. 44).
- **Collaborating with the community** implies strengthening school programmes, family practices, as well as student learning and development, through networking with resources from the community businesses, tertiary institutions and other groups (Epstein, 2001: p. 44).

The National Youth Policy 2009-2014 (Republic of South Africa [RSA], Office of the Presidency, 2013) further highlights the authoritarian child-rearing attitude as harsh, lax or inconsistent disciplinary practices; low parental involvement; and low emotional attachment to caregivers, as a few factors that could be detrimental to the positive development in children. Therefore, parenting style plays an important role, together with parent-involvement, which should be accompanied by a supportive and caring parenting style.

2.4.1. The role of the caregivers in parent-involvement

Caregivers have to take responsibility for parent-involvement. Caregivers tend to wait for educators to tell them how, when, and why, they should get involved. Caregivers and teachers could support each other, by learning and sharing experiences and lessons learnt of child development. Caregivers could form support groups and encourage each other to work together towards achieving common goals. Continuous parental contact and support is needed, to allow children to develop and grow up in a context of peaceful surroundings (Landsberg *et al.*, 2005).

The parental role of the parent/caregiver is not the only factor that determines their involvement, in terms of child education. Their parental sense of efficacy is also implicated, which refers to the belief that their personal actions will help their child to succeed in school. Caregivers, who have *can do* attitudes and beliefs will be at the forefront in parental involvement. Parents, who do not have *can do* attitudes, might be expected to be less involved and unsuccessful with their children's progress and development. Caregivers demonstrate different capacities for parental-involvement in the education of their children; capacity inferring a combination of skills, values, motivations and opportunities (Desforges & Abouchaar, 2003).

Desforges and Abouchaar (2003) conclude their research on the processes of parental-involvement by adding that the effect of parental involvement is derived from parents' values and ambitions, which are displayed through their positive parenting style and eagerness to be involve with their children's education. This affects the students' self-perception, their motivation, self-esteem and educational aspirations. Consequently, parental-involvement frames how students perceive education and school work, which bolsters their motivation to succeed.

2.4.2. Role of the school in parent-involvement

Appropriate role constructs and a strong sense of personal efficacy will, inevitably, come to nothing, if the opportunity to be involved is absent. The realisation of a willingness to be involved depends on the invitations, demands and opportunities generated by the school, and the child. Teacher-parent interactions are shaped and influenced by pupils, who consider themselves to be playing a significant mediating role. This role is rarely recognised and could be enhanced (Desforges & Abouchaar, 2003).

Therefore, caregivers, teachers and children need to understand the benefits of parental-involvement, and should have a positive mind-set, as well as willingness towards it.

2.4.3. Benefits of parental involvement

Children, whose parents are involved, show greater social and emotional development (Allen & Daly, 2002), including more resilience to stress, greater life satisfaction, greater self-direction and self-control, greater social adjustment, greater mental health, more supportive relationships, greater social competence, more positive peer relations, more

tolerance, more successful marriages, and less delinquent behaviours (Desforges & Abouchaar, 2003). Research, conducted by the CDC (USA, HHS & CDC, 2012), reveals that students, whose parents are involved in their education, are more likely to have positive health and education outcomes, than those whose parents are not involved.

2.5. Parent-involvement through Inclusive Education (see figure 2.1)

Parents are ultimately responsible for rearing their children. This experience can be challenging and most parents would welcome support from practitioners and educators, who have broader experience (Landsberg *et al.*, 2005: p. 85). “Involvement in school activities and governing bodies provides parents with the opportunities to build their own skills and empowers them to speak for themselves within the schooling system. Involvement in school activities brings parents together, which enables them to interact and share common joy and sorrows. By actively participating in school activities parents can gain access to additional social networks to facilitate access to further resources in the community” (Landsberg *et al.*, 2005: p. 85).

Effective collaboration is the cornerstone for forming partnerships with families and communities. This process requires a collaborative ethic, time and effort of every partner involved (Landsberg *et al.*, 2005: p. 226). Draper and Duffy (2001: p. 151), as well as Kernan (2012) emphasise that parents should be involved in planning, problem solving and decision-making regarding their children’s education.

2.6. Engage parents in activities towards sustainable parent-involvement

Opportunities to motivate and encourage parent-involvement should be created by schools and community organisations. The following activities that can strengthen parent-involvement was listed by the CDC (USA, HHS & CDC, 2012).

- Schedule meetings and activities to match varying parent schedules.
- Provide incentives to encourage parents to attend at-school meetings and events.
- Provide alternative ways for parents to access information and communicate with school staff, aside from attending meetings and activities on school grounds.
- Provide transportation.

- Hold events off site or online. Go to places where families will already be, such as community centres, community organizations, neighbourhood centres or housing projects, libraries, and churches.
- Provide opportunities for parents to get to know about the school and school staff in non-threatening ways.
- Implement programmes that are culturally sensitive and that reflect the social and environmental aspects of a community, influenced by race/ethnicity, socio-economic status, locale and culture.
- Provide translation services for non-English speaking parents.
- Provide professional development opportunities for school staff that focus on strengthening parent-engagement.
- Develop strategies for working through staff resistance to change, turf issues and power struggles that might hinder parent-teacher interactions.

Although relatively little is known about what factors motivate caregivers to become engaged in their children's education, the primary motivation for caregivers to become involved appears to be a belief that their actions will improve their children's learning and well-being (USA, HHS & CDC, 2012). Consequently, High Five staff should demonstrate to caregivers how their children's behaviour and education could be enhanced by their engagement in the programme.

2.7. Learning Communities

Learning communities is a collective of activities that corporately strive for continuous learning and improvement of education and outcomes of students/learners. Learning communities is the shared collective responsibility for the learning of all students in the school or school system. Accountability is a characteristic of Learning Communities. "Learning community members are accountable to one another to achieve the shared goals of the school and school system and work in transparent, authentic settings that support their improvement" (Bolam *et al.*, 2005: p. 60). Students benefit from the strengths and expertise, when educators learn together, and are supported by communities, whose members value education for all students (Bolam *et al.*, 2005).

According to the researcher, the learners in the High Five Programme could benefit greatly from the Learning Communities concept, as well as how this concept could be integrated into the High Five Programme, which could be explored further, collectively, with teachers, caregivers, families and communities. Caregivers do not have to feel inferior in a partnership with the school and should be seen as equal partners, who could add much value to the partnership and child development. The South African Schools Act [SASA] (RSA, Act 84 of 1996) provides formal power in education to caregivers, as well as communities. Parent-involvement is emphasized in the SASA, as a key ingredient for children to perform well. Learning communities highlight that children benefit from the strength and expertise, when all parties come together for education (Bolam *et al.*, 2005).

The researcher selected the Family Life Cycle Theory of Carter and McGoldrick (1989), The Life Course Approach of Hutchison (2005), and the Ecological Systems Theory of Bronfenbrenner's (Bronfenbrenner & Morris, 1998), to guide the literature review.

2.8. Summary of the chapter

In this chapter, the key literature regarding the barriers to parent-involvement, were critically reviewed and condensed. The definitions of parental-involvement and parental-responsibility provided a clear understanding of the role, as well as responsibilities of caregivers regarding parent-involvement. Caregivers must provide for their children's needs. Every caregiver is responsible for the children in their care; to provide love, nurturing, education and, among others, attend school. Unfortunately, most caregivers face multiple challenges in their family life cycle, at different ages and stages of their life course, which hampers their ability to respond positively to the needs of their children.

Therefore, the topic of learning communities was included; the shared collective responsibility that brings together the entire education community, including teachers, support systems, extended family members, families and family services for effective learning. A quote by Mother Theresa: "We think sometimes that poverty is only being hungry, naked and homeless. The poverty of being unwanted, unloved and uncared for is the greatest poverty. We must start in our own homes to remedy this kind of poverty."

CHAPTER THREE

CONCEPTUAL FRAMEWORK

3.1. Introduction

The conceptual framework is the recipe, or blueprint, that provides the outline on how the researcher will conduct the research for the thesis. Additionally, it positions the study within the larger field of research (Miles & Huberman, 1994). Miles and Huberman (1994: p. 440) define a conceptual framework as a visual or written product, one that “lays out the key factors, constructs, or variables, and presumes relationships among them.” The researcher adopted three theories that support and inform the research study. This section starts with a general understanding of the theories, as well as the reasons for the choice of theories.

3.2. Family Life Cycle Approach

The family as a unit is exposed to continuous change, in a changing society, and the impact of change on the family and its members, cannot be ignored (RSA, DSD, 2011a). “The family life cycle approach assumes that family life is changing continually and is influenced by psychosexual development and rites of passage such as marriage, divorce, child-rearing or retirement. During each of these stages of development, people modify their roles and relationships, and also alter the division of labour and their level of satisfaction. The life-cycle approach will allow for a comprehensive analysis of life events, family crises, processes and challenges relating to age, gender, and roles and responsibilities of each family member. It will further help to promote an understanding of an ideal and desirable progression through life’s stages. This approach will also guide the provision of services and resources, by relevant actors, that are appropriate for specific developmental stages and ages of family members.” (RSA, DSD, 2011a: p. 34).

Carter and McGoldrick (1989: pp. 2 & 7) “identify six stages of family development, all of which address nodal events related to the comings and goings of family members over time. These stages include: the unattached young adult, the new couple, the family with young children, the family with adolescents, the family which is launching children and the family in

their later life. These stages do not occur in exactly the same way in all families. To master these stages, families must successfully complete certain tasks. In all the stages, problems are most likely to appear when there is an interruption or dislocation in the unfolding family life-cycle, signalling that the family is “stuck” and having difficulty moving through the transition to its next phase.”

3.2.1. Reasons for the choice of theory

- It could be used as a framework to research the parental involvement of caregivers, whose children are in the High Five Programme, due to their behaviour difficulties and low self-esteem.
- It could be used as a lens to view the family in context, against life events/phases that influence the functioning of the family as a unit. The different phases that the family lives through cannot be ignored, as it could influence the level of parental involvement, as well as the relationships between caregivers and children (RSA, DSD, 2011a).
- It allows the researcher to link challenges in the family functioning with the barriers that hinder parental involvement.

According to Sanders, Markie-Dadds and Turner (2003), the breakdown of family relationships could be a result of mental health, social and economic problems. Broken homes and relationships are a common occurrence in the areas where the children, involved in this current study, reside.

3.3. The Life Course Perspective

The Life Course Perspective places the family in the context of all the stages and life events, for example, death, illness, divorce, which the family experienced, at the various ages and phases of the family members. Families with low social capital might struggle to transit through life events, successfully (Hutchison, 2001). Such families might become disorganised families, with the members not staying together and supporting each other. Therefore, it is important to view families and their members against their Life Cycle development, and interpret their behaviour in that context. For example, it cannot be assumed, merely, that caregivers are not involved, because they do not care about their children. The parents’ involvement has to be viewed against their own development and environment, throughout their life (Hutchison,

2001). According to Hutchison (2001: p. 3), “The Life Course perspective recognizes the linkages between early life experiences and later experiences in adulthood.” In addition, Hutchison (2001: p. 9) defines the Life Course perspective as, “A useful way to understand this relationship between time and human behavior is the life course perspective, which looks at how chronological age, relationships, common life transitions, and social change shape people’s lives from birth to death. Of course, time is only one dimension of human behavior; characteristics of the person and the environment in which the person lives also play a part.”

3.3.1. Reasons for the choice of theory

- It could be used as a framework to understand an individual’s life history, as well as the sequence of significant events and experiences (from birth to death) that effects change in that individual’s life.
- It could be useful in recognizing the influence of historical changes on human behaviour.
- It allows the researcher to observe the ways in which humans are interdependent, as special attention is paid to the family, as the primary arena for experiencing and interpreting the wider social world.
- It allows the researcher to observe that humans are capable of making choices and creating their own life journeys, within systems of opportunities and limitations (Hutchison 2001).

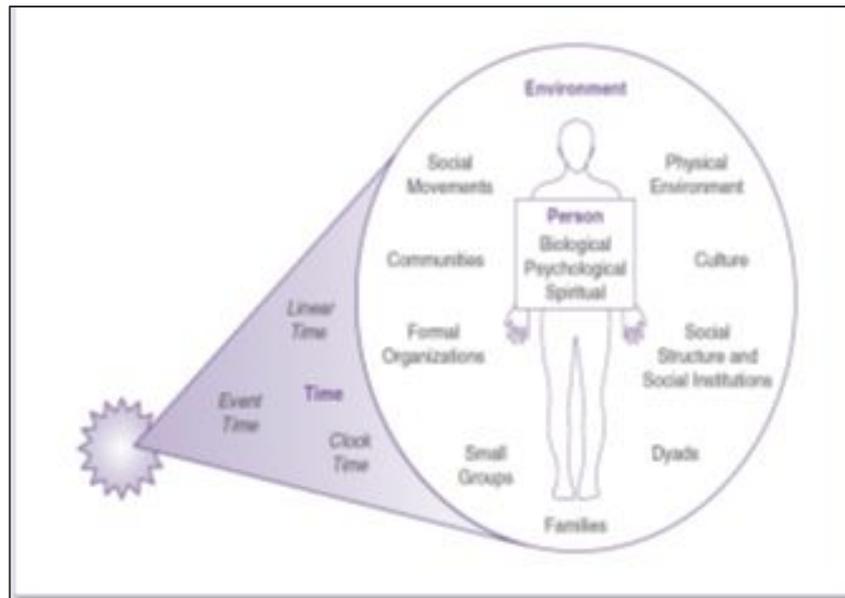


Figure 3.1: A pictorial demonstration of the Relationship of Person, Environment and Time, in the Life Course Perspective of a person, or family (Hutchison, 2001: p. 9)

The diagram above demonstrates that the Life Course Perspective recognizes the importance of timing in life, not only in terms of chronological age, but also in terms of biological age, psychological age, social age, and spiritual age. Bengtson and Allen (1993: p. 470) state that the Life Course perspective elaborates the importance of time, context, process, and meaning on human development and family life. The family is perceived as a micro social group, within a macro social context, a “collection of individuals with shared history who interact within ever-changing social contexts across ever increasing time and space.” The family plays an important role of supporting its members to successfully transit through these life events, at the different times and stages of their lives. Therefore, it can be presumed that the Family Life Cycle Approach and the Life Course Perspective both emphasise the impact of life’s experiences and events on the individuals’ lives. Consequently, families and caregivers must be viewed within their larger cultural contexts, to understand poor parental involvement, as well as the barriers that hinder parental involvement.

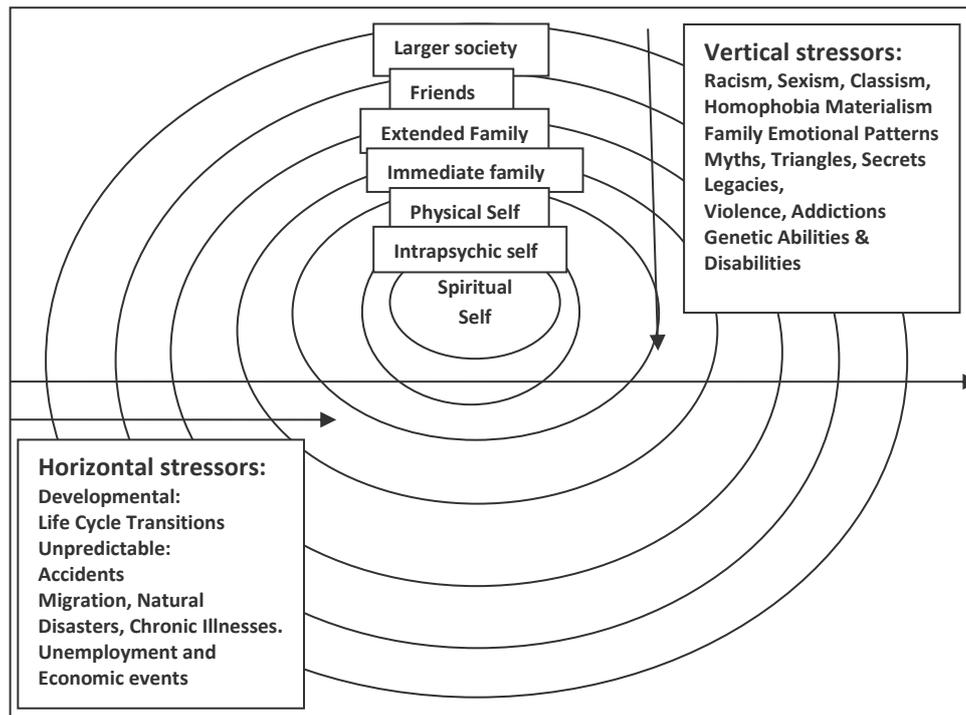


Figure 3.2: Understanding of the Life Cycle: The Individual, the Family and the Culture in context: The context of assessing problems

Source: Walsh (2003)

To understand the Life Cycle, as demonstrated in Figure 3.2, consider that each system (individual, family and cultural) can be represented schematically, along with two time dimensions - one is historical (the vertical axis), and the other is developmental and unfolding (the horizontal axis). At the family level (Carter, 1978), the vertical axis includes the family history and the patterns of relating and functioning transmitted down through generations. The horizontal flow at the family level, describes the family, as it moves through time, coping with the changes and transitions of the family's life cycle. This includes both the predictable developmental stresses, and those unpredictable events, which may disrupt the life cycle process, for example, untimely death, chronic illness, or job loss (Walsh, 2003).

3.4. Ecological Systems Theory

Bronfenbrenner and Morris's (1998: p. 998) Ecological Systems Theory "represents the family as a system, nested in a number of other societal systems and highlights the interaction between individuals and their immediate associates (microsystem), indirect (ecosystem) and wider social (macrosystem) environments." "The developing child and the family unit are embedded in the broader meso-systems, consisting of peers, extended family, educators, neighbours and

close personal acquaintances with which the child actively interacts.” “Families, caregivers with a lack of social capital may therefore find parent involvement challenging due to the demands of parent responsibilities.”

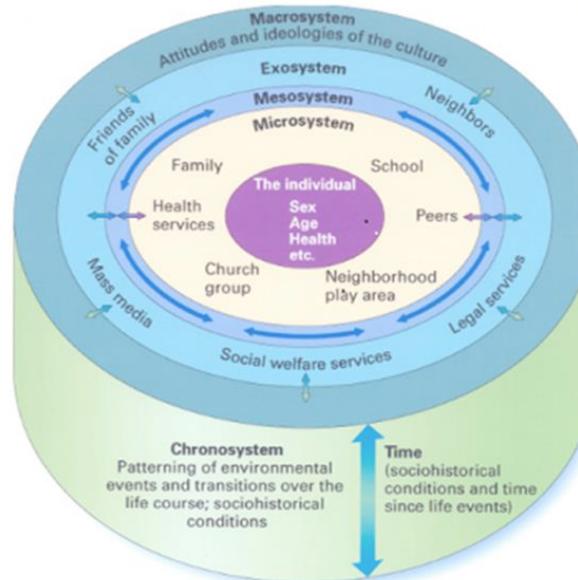


Figure 3.3: Bronfenbrenner's Ecological Theory

Bronfenbrenner suggests five levels, which he believed to be interrelated, and which could affect a person's development, namely (a) microsystem, (b) mesosystem, (c) exosystem, (d) macrosystem, and (e) chronosystem (Bronfenbrenner, 1993).

The following is a discussion of the five levels of Bronfenbrenner's Ecological Systems Theory.

- **The microsystem** is closest to the child and contains the structures with which the child has direct contact. The microsystem encompasses the relationships and interactions a child has with his/her immediate surroundings (Berk, 2000). The structures in the microsystem include, family, school, neighbourhood, or child care environments. At this level, relationships have impact in two directions - away from the child, as well as toward the child. For example, a child's parents may affect his beliefs and behaviour; however, the child also affects the behaviour and beliefs of the parent. Bronfenbrenner refers to these as bi-directional influences, and shows how they occur among all levels of the environment.

- *The mesosystem* provides the connection between the structures of the child's microsystems (Berk, 2000), for example, the connection between the child's teacher and his parents, or between his church and his neighbourhood.
- *The exosystem* defines the larger social system, in which the child does not function directly. The structures in this layer impact the child's development, by interacting with some structure in his/her micro system (Berk, 2000). Parents' workplace schedules, or community-based family resources, are examples. The child may not be directly involved at this level, but he does feel the positive, or negative, force involved in the interaction with his own system.
- *The macrosystem* may be considered the outermost layer in the child's environment. While not being a specific framework, this layer is comprised of cultural values, customs, and laws (Berk, 2000). This affects the structures in which the parents function. The parents' ability, or inability, to carry out that responsibility toward their child, within the context of the child's microsystem, is similarly affected.
- *The chronosystem* adds the useful dimension of time, which demonstrates the influence of both change and constancy in the child's environment. Therefore, the chronosystem may include a change in family structure, address, parent's employment status, in addition to immense society changes, such as economic cycles and wars. By studying the different systems that simultaneously influence a child, Bronfenbrenner's (1990) Ecological Theory is able to demonstrate the diversity of interrelated influences on the child's development. Awareness of contexts can sensitize us to variations in the way a child may act in different settings. For example, a child, who frequently bullies smaller children at school, may portray the role of a terrified victim at home. Due to these variations, adults, concerned with the care of a particular child, should pay close attention to the behaviour in different settings or contexts, as well as to the quality and type of connections that exist between these contexts.

The developing child and the family unit are embedded in the broader mesosystem, consisting of peers, extended family, educators, neighbours and close personal acquaintances with whom the child actively interacts. Bronfenbrenner's theory also informs other theories, such as Joyce Epstein's theory of overlapping spheres of influence that emphasise the importance of the family-school relationship, and the mutual responsibility for children's learning and development (Epstein *et al.*, 2002). Therefore, the understanding is that children are best

supported, when schools, families and community (different systems) work together, in a partnership to reach shared educational goals (Landsberg *et al.*, 2005: p. 216).

Garfat and Charles (2012) support Bronfenbrenner's model and suggest that for caregivers to provide better support to their children, a general connectedness among family members, is necessary. Without connections, effective intervention is impossible, since the family in the first level of microsystem has potential to teach their children how to interpret things.

3.4.1. Reasons for the choice of the theory

- It allows the researcher to observe a rich picture and understanding of the family as a unit, nested in other systems, as well as the influence of these systems on the child and the family.
- It allows the researcher to observe how the different systems can be an asset to strengthen the family, or a negative influence.
- It allows the researcher to observe that the environment shapes the life of an individual. In this current study it has significant value, as the family and children are observed in their natural setting, as no one lives in isolation.
- It allows the researcher to link the challenges of the environment with the barriers that hinder parent involvement.

According to Carter & McGoldrick (1978: p. 7), "There is the strong implication that emotional issues and developmental tasks that are not resolved at appropriate stages will be carried along and act as hindrances in future transitions and relationships. Give enough stress on the horizontal, developmental axis, any individual family will appear extremely dysfunctional." Even a small horizontal stress on a family, in which the vertical axis is full of intense stress, will create great disruption in the system. How family members support one another, is the key determinant of how well the family will manage its transitions through life.

The main value in families is the relationships, which are irreplaceable. Specifically, the affection and close bonds among family members are significant for the functioning of the whole family. The presence of any kind of abuse, absent parents, divorce, death, alcohol and drug abuse within the family, may severely affect the family's ability to

maintain such bonds, where the members feel safe, and where they can develop to their full potential (Walsh, 2003: pp. 379-381).

The findings of the following studies by Kernan (2012), Blatchford *et al.* (2011), and Strydom, Wessels & Strydom (2010) have confirmed the importance and value of relationships, closeness, commitment, emotional support, engaged parents and *at home* good parenting. Blatchford *et al.* (2011), explored, in a study, why certain children *succeed against the odds*, while others fall further behind. In the homes of children who *succeed against the odds*:

- The parents engaged their young children in learning processes, reading, cooking, and playing computer games together, and talked to them about school.
- They valued these activities as opportunities to develop cognitive skills that prepared their children for school.
- Child-centred emotional support was also observed to be important, and the parents set high standards for behaviour, as well as academic aspirations for children, and explicitly expressed their high esteem for education.

Parent-child interaction is the first, and one of the most crucial reciprocal relations in the child's life (Ralph & Eddowes, 2002: p. 111). The interaction can be positive, or negative. Positive interaction with parents is supportive, and offers the child a sense of security and well-being, whereas negative interaction with parents is linked to risky behaviours, such as delinquency, sexual experimentation, experimentation with harmful substances, and various forms of peer pressure (Eberstadt 2001: p. 15).

Healthy relationships start at home, when the environment is conducive to healthy development, the atmosphere is pleasant, and parents offer support, love, comfort and security (Ralph & Eddowes, 2002: p. 61). According to Sohnge (2003, cited by Venter & Rambau, 2011: p. 349), supervised children get more support and help from their parents and other adults, than unsupervised children, and, as a result, their scholastic progress improves, while unsupervised children's progress may deteriorate. In unhealthy relationships, where children do not have a supportive environment from their parents and others, children are more likely to develop negative responses to the self and others. If children experience continual feelings of failure in their relationships, they withdraw

from the situation, and may experience social and emotional distress. Children, who experience an unhealthy relationship with their parents, are negatively affected, which has a bearing on their scholastic progress, as well as emotional distress in childhood and adulthood (Sohnge 2003, cited by Venter & Rambau, 2011: p. 349).

Ronicle and Kendall (2010) state that the family level services should be extended to the whole family, to offer support to all members of the family, including family group conferencing, providing parenting support, positive activities for the whole family, and drawing in support from other services. Strengths, values, and practices that are transmitted across generations, family life cycle stages, intergenerational support, and current cultural context, are central to this perspective (Waites, 2008). It provides a framework for understanding the past, exploring the current environment, and using culturally relevant strategies and practices to empower families. Bengtson (2001: p, 7) state that “intergenerational bonds are more important than nuclear family ties for well-being and support over the Life Course”. With increased longevity, caregivers can be available to serve as resources for younger generations.

It would seem that the children in the High Five Programme could benefit more, if a family strengthening approach was followed, instead of a child-centred one, with the focus on identifying and strengthening the assets in the family, to build up its resilience, to move through the different stages, successfully, along with the associated problems. Walsh (2003: pp. 13, 50, 51) shifts the focus from “how families fail, to how they can succeed.” “The focus has shifted from deficits, limitations and pathology to a competency-based, health-orientated paradigm, recognizing and amplifying family strengths and resources.” It seems more likely that when applying an asset-based approach in working with families, change and a positive impact can be expected. Families are under pressure to meet the needs of the individual family members in a constantly changing environment. For this reason, families need support to find unity within difficult circumstances. Walsh (2003) urges service providers to encourage families to carry on with the process of learning and changing throughout their life-cycle.

3.5. Chapter Summary

In this chapter, the researcher examined the literature dealing with the phenomenon of the barriers that hinder parent involvement. In addition, the underlying aspects that hinder parent involvement, as well as the aspects that can improve parent involvement, were explored. The researcher adopted a conceptual framework, to provide the outline for the research process. The researcher adopted three theories that supported and informed the research study, namely, The Family Life Cycle Approach, Life Course Perspective and The Ecological Systems Theory, and presented a general description of the theories, as well as the reasons for their selection.

The literature study revealed that the caregivers' role was crucial for the enhancement of learners' success and development. Families face crises, and lack social capital to address the needs of family members. Therefore families need assistance to find coherence within complexity. The literature review revealed that the lack of parent involvement was not necessarily due to caregivers not caring, but because they were uninformed, and did not appreciate the value of their involvement. More research should be conducted on community learning, as well as the relationship between caregivers (community), teachers (school) and children, in a partnership towards development and education. Therefore, the understanding is that children are best supported, when schools, families and community work together, in a partnership to reach shared educational goals.

The following chapter comprises the research methodology, used to explore and describe the factors that hinder parents' involvement in the High Five programme for at risk children.

CHAPTER FOUR

RESEARCH METHODOLOGY

4.1. Introduction

In this chapter, the researcher describes the research methodology that was followed in this current study. The qualitative research approach, employed to explore and describe the barriers that hinder parent involvement in the High Five Programme of Mfesane, in the Saldanha Bay Municipal area, is discussed. In addition, the research design used to achieve the aim and objectives of the study, the processes utilized for data collection and analysis, the methods employed to ensure trustworthiness, as well as the ethical standards adhered to during the study, are described. Finally, the researcher followed the eight steps of Creswell (2007: pp. 150-155) to analyse the data, and confirmed that the participants of this study were treated with the necessary respect and worth.

4.2. Research question

The research question asked was, “What are the factors that hinder parents’ involvement in the High Five Programme for at risk children?” Careful conceptualization and phrasing of the research question is critical, because whatever the researchers undertake in the remainder of the research process, will be aimed at answering that research question (De Vos *et al.*, 2011: p. 90). The research question also guides decisions about the objectives, research approach, methodology, data analysis and the type of research.

4.2. Aims and objectives

The aim of this current research was to explore and describe the factors that hinder parents’ involvement in the High Five programme for at risk children. Babbie and Mouton (2001: p. 270) state that three of the most common and useful purposes of research are exploration, description and explanation. The primary goal of studies, using the qualitative approach is defined as describing and understanding, rather than explaining human behaviour. In particular, in this current study, the researcher attempted to understand the factors that hinder parents from being involved in their children’s lives.

The following objectives were set:

- To explore and describe the factors that hinder parent involvement in the High Five programme for at-risk children, as perceived by the children.
- To explore and describe the factors that hinder parent involvement in the High Five Programme for at-risk children, as experienced by the parents.
- To explore the needs of the parents, to improve their involvement in the development of their children.
- To explore the gaps in the High Five Programme activities and strategies that hinder parent involvement, as perceived by teachers.

4.3. Research Methodology

Regarding the research question, to answer the “what”, requires a qualitative research process. Qualitative researchers start with a general research question, collect data from a small number of participants, organise and analyse that data, and use verbal descriptions to portray the situation they have studied (De Vos *et al.*, 2011; Babbie & Mouton, 2001).

The research method is the strategy of the survey, which moves from the underlying assumptions to research design, and data collection (Myers, 2013). Research method is the way in which data are collected and analysed, as well as the type of generalizations and representations derived from the data. In qualitative research, different knowledge claims, enquiry strategies, data collection methods and analysis are employed (Creswell, 2003). Qualitative data sources include observation and participant observation (fieldwork), interviews and questionnaires, documents and texts, and the researcher's impressions and reactions (Myers, 2013). Data are derived from direct observation of behaviours, from interviews, from written opinions, or from public documents (Sprinthall, Schmutte & Surois, 1991: p. 101). Written descriptions of people, events, opinions, attitudes and environments, or combinations of these, could also be sources of data.

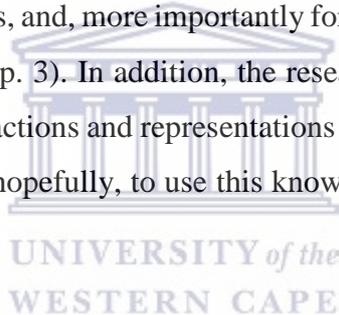
Qualitative research tries to study the everyday life of different groups of people and communities in their natural setting. Qualitative research includes a real-life revealing approach to the topic, or research question (Denzin & Lincoln, 2003)

According to Domegan and Fleming (2007: p. 24), “Qualitative research aims to explore and discover issues about the dimensions and characteristics of the problem at hand”. In addition, Myers (2013) asserts that qualitative research is designed to help researchers understand people, and the social and cultural contexts within which they live.

For this current study, the researcher selected explorative and descriptive research designs, which are described in the next section.

4.4. Research Approach

A qualitative research approach was employed for this current study. According to Babbie and Mouton (2001: p. 273), “The qualitative researcher begins with an immersion in the natural setting describing events as accurately as possible as they occur or have occurred and slowly but surely building second-order constructs, a hypothesis and ultimately a theory that will make sense of the observations”. In qualitative research the researcher seeks to determine what happens, as well as how it happens, and, more importantly for this current study, why it happens the way it does (Henning, 2004: p. 3). In addition, the researcher wishes to provide the most clear and detailed account of the actions and representations of actions, in order to gain a better understanding of the world, and hopefully, to use this knowledge to bring about a measure of social change.



This research study aimed to understand parents’ behaviour, in terms of their lack of parent involvement. De Vos *et al.* (2011: p. 42) confirm that “research in the social sciences involves the study of people’s beliefs, behaviour, interaction and institutions in order to test hypotheses acquire information and solve problems pertaining to human interrelationships.” The qualitative approach, according to De Vos *et al.* (2011: p. 65) is classified as unstructured, because it allows flexibility, and is more appropriate to explore the nature of a problem.

The researcher selected the qualitative research approach for this current study because of the following characteristics of this approach, as described by Babbie and Mouton (2001: pp. 270-273):

- *Qualitative research is conducted in the natural settings of social actors.* Qualitative research is especially appropriate to the study of those attitudes and behaviours, best understood within their natural setting, as opposed to the somewhat artificial settings

of experiments and surveys. De Vos, *et al.* (2011: p. 65) state that a qualitative researcher tends to collect data in the field, at the site where participants experience the issue, or problem, under study. The researcher gained first-hand understanding of the barriers that hinder parent involvement in the High Five Programme, through focus group discussions and interviews with the parents, their children and teachers during visits to the schools, home visits, as well as observation in their natural settings of schools, homes, youth camps and workshops.

- *Qualitative research focuses on process rather than outcome.* The emphasis on the natural setting, indicates that qualitative research is well suited to the study of social processes over time. Henning (2004: p. 4) asserts that in a qualitative study the “variables” are usually not controlled, as it is exactly this freedom and natural development of action and representation that the researcher wishes to capture. De Vos *et al.* (2011: p. 65) state that, in the entire qualitative research process, the researcher should concentrate on establishing the meaning that the participants attach to a problem, and not the one that the writers in literature convey. The researcher attended a number of events and activities of High Five; conducted focus group discussions and interviews with the participating children, their parents, and some of the teachers; and observed the various interactions attentively, in a concerted effort to view the phenomenon under study through the eyes of the participants.
- *In qualitative research, the primary aim is in-depth descriptions and understanding of actions and events.* The researcher prefers to use categories and concepts, used by the actors themselves, as a further attempt to stay true to the meanings of the actors themselves. Through the focus group discussions, interviews, observations, home visits and the literature review, the researcher was able to provide a thicker description of the phenomenon, as facts were confirmed by the participants in this study.
- *In qualitative research, the main concern is to understand social actions, in terms of the concrete, natural context, in which they occur.* The aim of this current research study was to describe and understand events in this way. De Vos *et al.* (2011: p. 65) suggest that qualitative researchers should gather multiple forms of data, rather than rely on a single data source. Therefore, the researcher employed focus group discussions, one-to-one semi-structured interviews and observations as multiple forms of data collection.

- *In qualitative research, the researcher is more interested in an idiographic research strategy.* This is the understanding of specific events, or behaviours, in its own context. De Vos *et al.* (2011: p. 65) assert that “qualitative research is a form of inquiry in which researchers make an interpretation of what they see, hear and understand”. Throughout this study the researcher employed an exploratory and descriptive research design, as it was evident that the lack of parent involvement in the High Five Programme needed to be dealt with, and the reasons had to be heard from the parents and the children. Therefore, the need to explore the barriers to parent involvement was identified, which exploration helped the researcher to gain insight and understanding.
- *In qualitative research, an inductive approach is followed, because the researcher describes the events as accurately as possible, as they occur, or have occurred, and from the data collected, builds new interpretations, themes, categories and theories that relate to the research problem.* Data were collected by means of focus group discussions, interviews, and observations, while audio-tape recordings and copious field notes were utilised as additional supportive measures for data analysis.
- *In qualitative research, inter-subjectivity during the research process suggests getting close to the “research subject”, in order to generate legitimate and truthful “insider” descriptions, by gaining trustworthiness and credibility.* Babbie and Mouton (2001: p. 276) state that “the key criterion or principle of good qualitative research is found in the notion of trustworthiness: the neutrality of its findings or decisions”. In this current study the researcher collected data from the participants until data saturation was reached, employing various methods.

De Vos *et al.* (2011: p. 64) suggest that the qualitative approach is used to answer questions about the complex nature of the phenomena, with the purpose of describing and understanding the phenomenon from the participants’ perspectives. The researcher explored and described the phenomenon, “barriers that hinder parent involvement”, by using evidence from the data collected and from literature to gain a first-hand, holistic understanding thereof.

In the next section, a brief discussion on the research design, population and sampling for the study are presented.

4.5. Research Design

Creswell (1998: p. 2) defines research design in the qualitative context as the “entire process of research from conceptualizing a problem to writing the narrative”. Henning (2004: p. 36) asserts that research methodology focuses on the research process, as well as the types of tools and procedures used, while research design focusses on the end product. De Vos *et al.* (2011: p. 341) state that the purpose of the research, guides the researcher to choose the most effective design. Babbie and Mouton (2001) further describe a research design as a plan, structured framework, or blueprint for the implementation of the research process, in order to solve the research problem. De Vos *et al.* (2005) assert that some authors refer to “design” as all those decisions a researcher makes in planning the study.

Babbie and Mouton (2001) explain that the most common and useful purposes of research are exploration, description and explanation. For this current study, the researcher chose an explorative and descriptive research design, an empirical study, using primary data. Babbie and Mouton (2001) assert that studies in which the researcher collects new data, through focus group discussions, interviews or observations, are referred to as primary data. Focus groups could be useful, especially in the case of a new topic, or when trying to introduce a new topic to a population. Data not likely to emerge from one-to-one interviews, are more likely to emerge in focus group discussions, as group dynamics could be a catalytic factor in bringing information to the fore (De Vos *et al.*, 2011).

According to Babbie and Mouton (2001), the researcher increases the level of knowledge and understanding of a phenomenon, situation, community or individual, through exploratory research. Therefore, the researcher included the explorative strategy of inquiry, as part of the research design, and started a process of building knowledge about the factors that hinder parent involvement in the High Five Programme. The researcher identified the need to explore the factors that hinder parent involvement in the programme because of a lack of insight and information about the root causes of this phenomenon. The answer to a “what” question would, according to Mouton (2001), constitute an exploratory study. The researcher was particularly interested in hearing from the parents, why they were not involved in their children’s lives, and what hindered their involvement. Babbie and Mouton (2001: p. 80) confirm that exploratory studies are also appropriate for more persistent phenomenon, and that they usually lead to insight and comprehension, rather than the collection of detailed data. Exploratory studies are

most typically conducted to “satisfy the researcher’s curiosity and desire for better understanding, to test the feasibility of undertaking a more extensive study and to develop the methods to be employed in any subsequent study”.

A descriptive strategy of inquiry was utilized as part of the research design for this current study, since it allows, according to Rubin and Babbie (2001: p. 125), a more intensive examination of phenomena and their deeper meanings. Through this design the researcher could describe, record and capture the concepts and expressions used by the participants, in an attempt to stay true to the participants’ understanding, which included suggestions on what could be done to encourage parents to become involved with their children in the High Five Programme.

Exploratory and descriptive research designs have some similarities, but also differ in many respects (De Vos *et al.*, 2011: p. 95). Exploratory research is conducted to gain insight into a situation, phenomenon, community or individual. Although they might blend in practice, descriptive research presents a picture of the specific details of a situation, social setting or relationship and focuses on the “how” and “why” questions (Neuman, 2000: p. 22). Babbie and Mouton (2001: pp. 271, 272) and Henning (2004: pp. 6, 8) refer to a thick description as a lengthy description that captures the sense of actions as they occur. It places events in contexts that are understandable to the actors themselves. The description gets “thicker” as the data becomes richer. A thick description gives an account of the phenomenon, not only the facts and empirical content, but also, that it interprets the information.

4.6. Population

According to Babbie *et al.* (2001: pp. 173,174), a study population is that aggregation of elements from which the sample is actually selected. A population is the totality of persons, events, organisation units, case records or other sampling units with which the research problem is concerned (De Vos *et al.*, 2011: p. 223).

The main part of the population for this current study was 60 children, who had attended the High Five Life Skills Programme for approximately six months (October 2012 to March 2013), and had been referred by teachers from two schools (Panorama Primary and Masiphatisane Primary) in Vredenburg, in the Western Cape. Their ages were between 9 and 16 years. They

had presented with high risk behaviour, such as substance abuse, absenteeism, fighting, disruptive and disrespectful attitudes towards teachers and their peers, while some also struggled academically, and were being transferred to the next grade because of their age. In addition, the population for this current study included the parents of the 60 children, as well as the teachers who referred learners to the High Five Life Skills Programme, who could inform the study on the phenomenon under scrutiny.

The High Five Programme is designed in such a way that the children referred, stay in the programme for a period of six months. Thereafter they exit the programme, and a new group is referred and registered. The High Five programme aims to positively influence these at risk children, with low self-esteem. The researcher decided on one “intake” as part of the population for this current study. The period for this intake was extended by two months (April and May), to make up for time lost during the school holidays and examinations. The problem statement of this current study was that parent involvement in the High Five Programme was poor, since the parents/caregivers were not involved in project activities, except for some, who attended the feedback meetings and parent workshops, mostly grandparents and mothers.

4.7. Sampling

De Vos *et al.* (2005: p. 174) suggest that sampling means taking a portion of a population that is representative of the whole population. This definition (as well as others in literature) highlights an important fact; the term sample “always implies the simultaneous existence of a population or universe of which the sample is a smaller section or a set of individuals selected from a population” or universe (Gravetter & Forzano, 2003: p. 465). The use of samples, therefore, may result in more accurate information, than might have been obtained, if the entire population had been studied. De Vos *et al.* (2011: p. 391) state that there are no rules for sample size in qualitative inquiry. “Sample size depends on what you want to know, the purpose of the inquiry, what is at stake, what will be useful, what will have credibility and what can be done with available time and resources”. De Vos *et al.* (2005: pp. 198, 328) further emphasize that two major groups of sampling procedures exist, probability sampling, based on randomization, and non-probability sampling, which is done without randomization. In probability sampling, each person in the population has the same known probability, or chance of being selected (Gravetter & Forzano, 2003: p. 118).

4.7.1. Non-Probability sampling

De Vos *et al.* (2005: p. 328) declare that, in qualitative studies, non-probability sampling methods are utilized, particularly purposive sampling techniques, rather than random sampling. Non-probability sampling was chosen in this current study, firstly, because it involves the selection of a sample from a population by means of a non-random process, and secondly, the researcher would be able to extract an “inside view” from the selected participants. The method of non-probability sampling employed in this current study was combined with purposive sampling. The researcher selected the sample on the basis of personal knowledge, as well as the purpose of the study, according to certain selection criteria. The researcher selected all available and accessible children (60) in the High Five Programme, as well as their parents/caregivers at that particular time (between October 2012 and May 2013), who could provide in-depth knowledge and a rich description of the phenomenon of parent involvement in the programme. A selection of teachers, who referred the children to the High Five programme, were also included in the study.

4.7.2. Purposive sampling

Babbie and Mouton (2001), as well as De Vos *et al.* (2005: p. 202) regard purposive sampling as a type of non-probability (non-random) sampling method. Additionally, De Vos *et al.* (2005: p. 328) declare that purposive sampling can be used when the researcher has chosen a particular case that is of interest for a particular study, and add that, “Clear identification and formulation of criteria for the selection of respondents is therefore of cardinal importance”. Additionally, the authors assert that, “The purposeful selection of participants represents a key decision point in a qualitative study. The search for data must be guided by processes that will provide rich detail to maximize information obtained from and about the context” (De Vos *et al.* 2005: p. 239).

Considering the above, the researcher decided on purposive sampling for the following reasons:

- The researcher approached the staff of the High Five Programme, introduced the research topic, and explained that the children, or beneficiaries of the programme, and their parents, had been identified as the population of this study, and that a sample of this population would be selected to collect data, as well as suggestions

related to the phenomenon in this current study. The following reasons were provided for the choice of the High Five Programme in this current study:

- Firstly, an external evaluation of the programme had been conducted, after which a final report was prepared and submitted by Sarah Bliss and the Research Centre on 12 October 2011 (Bliss & Durno, 2011). The fact that parent involvement was non-existent in the programme was highlighted in the report. Sarah Bliss (Bliss & Durno, 2011: p. 68) stated that the current strategy of involving parents in the programme, through home visits was not successful. If parent involvement was a real priority, creative methods of attracting them needed to be incorporated into the programme's activities. The results of the evaluation confirmed that parent involvement was a challenge and that this phenomenon could not be disregarded.
- Secondly, it was necessary to explore the barriers to parent involvement in this specific programme, from the children's, and their parents' perspectives.
- Thirdly, the results of this current study, including the participants' recommendations, would be shared with the staff of the High Five Programme, in an attempt to improve parent involvement, as well as the quality of service.
- The researcher, however, did not have accurate knowledge of how many children, or parents, who had benefited from the High Five Programme for the period of October 2012 to May 2013 would be available.

4.7.3. Selection Criteria

The following criteria were used to select the sample of children, parents and teachers:

Criteria for children:

- The participants had to be children referred to the High Five Programme, for a 6 month intervention programme, between October 2012 and May 2013. In this current study, however, a few children might have been in the programme previously, as they might have been referred to the programme once again, because of the lack of improvement in their behaviour.

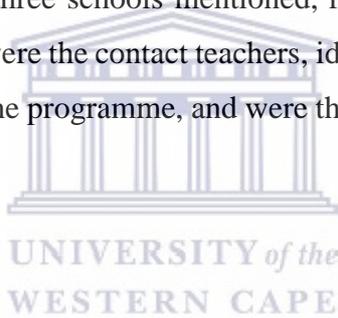
- The children should be available and willing to be interviewed. It was an important criterion for the sampling, to obtain the views of the children, although the focus of the study was on the barriers that hinder parent involvement.
- The children's ages should be between 11 years and 16 years (although one of the participants was 9 years old, and allowed to participate).

Criteria for parent/caregivers:

- These participants should be parents, or primary care givers of the children participating in the High Five Programme between October 2012 and May 2013.
- The parents/caregivers should be available and willing to be interviewed. It was an important criterion for the sampling, to obtain the views of the parents.

Criteria for teachers:

- Teachers from the three schools mentioned, referred children to the High Five Programme. They were the contact teachers, identified by the school headmaster, at the inception of the programme, and were the links between High Five and the schools.



4.8. Data Collection

A qualitative approach methodology rests on the assumption that valid understanding can be gained through accumulated knowledge acquired first-hand by a researcher (De Vos *et al.*, 2005: p. 74). In this study, the researcher employed the following data collection methods: focus groups discussions, semi-structured interviews, and participant observation.

4.8.1. Focus group discussions

Krueger and Casey (2000: p. 5) defines the focus group discussion as a “carefully planned discussion designed to obtain perceptions on a defined area of interest in a permissive, non-threatening environment”. Morgan (1997: p. 6) describes focus group discussions as a research technique that “collects data through group interaction on a topic determined by the researcher.” Focus groups create a process of learning, sharing and comparing among the participants. Kairuz, Crump and O’Brien (2007: pp. 371-377) highlights an important aspect of focus group discussions, as “discussions should be perceived by the

participants as non-threatening and they should feel free to express any kind of opinion, whether or not this opinion is shared by the other participants.”

4.8.2. Semi-structured individual interviews

Semi-structured, one-to-one interviews are used by researchers to gain a detailed impression of a participant’s beliefs about a particular topic (De Vos *et al.*, 2011: pp. 351, 352). This method gives the researcher and participant much more flexibility. The researcher is able to follow up particular interesting avenues that emerge during the interview, and the participant is able to provide a fuller portrayal. Additionally, De Vos *et al.* (2011: p. 352) suggest that with semi-structured interviews, the researcher would have a set of predetermined questions in an interview schedule; however, the interview will be guided, rather than dictated, by the schedule. During the interviews the participants are perceived as the experts on the subject, and are allowed the maximum opportunity to relate their story.

4.8.3. Participant Observation

De Vos *et al.* (2005: p. 281) assert, “In participant observation the gathering of data boils down to the actual observation and the taking of field notes.” These authors also refer to “four ways in which participants observation can take place, namely the total observer; the observer as participant; the participant as observer and the total participant.” (De Vos *et al.*, 2005: p. 280). The researcher observed non-verbal communication and made field notes of the responses of the children, parents/caregivers, and teachers during the focus group discussions and individual interviews.

4.8.4. Preparation for data collection

Initially, the High Five staff, who are known to the researcher, were approached and introduced to the research problem/phenomenon that would be studied. The researcher explained why the High Five Programme participants would be the best informants for this study. The study commenced with a search of relevant literature, to expand the researcher’s knowledge, and explore what others researchers have expounded on the subject under scrutiny. The researcher studied literature on interviewing techniques and guidelines, as provided by De Vos *et al.* (2011: pp. 343-345).

The three staff members of the High Five Programme were positive and supportive of the study. In addition, they clearly understood the purpose and value such a study would bring to the programme. They were very helpful and provided the names of the participants, as well as the parents/caregivers' names and addresses. The researcher's first contact with the parents/caregivers was to explain the study, and to request permission to interview their children. Since the parents/caregivers were familiar with the staff of High Five, the researcher thought it best that they be present, when the initial introductions were made. The parents/caregivers, who were visited (35), were supportive and prepared to sign the assent forms, giving consent for their children to participate in the study.

With the assent forms signed by the parents, the researcher made contact with the children at a High Five Life Skills weekend camp. The researcher performed the necessary introductions, explained the purpose and process of the research, and invited them to participate in focus group discussions to collect data for the study. Firstly, the researcher explained the focus group confidentiality binding form (Appendix G) and the biographic information form, which they, subsequently, completed and signed, with the help of the researcher, and a scribe, who also recorded notes. The scribe was a youth facilitator in the LITNUM (Literacy and Numeracy) Programme in Primary Schools, employed to facilitate literacy and numeracy support to learners, who needed tutoring, during and after school, in Vredenburg, Louwville. The facilitator was known to the principals and teachers. The researcher explained the role of the facilitator, as scribe in the focus groups, to the children and they consented. The researcher explained and stressed the importance of confidentiality to the scribe, who verbally agreed to keep all information and names confidential. The scribe's only role was to take notes, to ensure that all the information was recorded. Five focus groups (FGs) were conducted with only 30 children in total, even though 35 parents/caregivers had signed assent forms. The researcher apologises for the oversight that, although most of the participants were Afrikaans speaking children and adults, all the forms were created in English only. However, the researcher maintains that the forms were thoroughly explained in Afrikaans to the participants, who confirmed that they had understood completely.

The data collection process with the parents of these children was the following step in the study. The researcher went back to the homes of the parents, whose children were

participating in the study, shared the information sheet and again explained the purpose of the study, as well as the value that their experiences, feelings and ideas about the High Five Programme could contribute to it. It was explained that because their children were involved in the study, they had also been selected to participate in the study. The researcher followed the information sheet for parents' document, as a guide. However when going back for the consent forms to be signed, not all 35 caregivers could be contact, and subsequently only 19 consented to be interviewed. One focus group was conducted at the home of one of the caregivers, while the majority of caregivers were interviewed individually, due to their unavailability and inopportune working hours. The researcher continued the interviews, data saturation was reached.

The final step was the data collection process with the teachers (See section 4.8.1.3 for detailed information).

4.8.4.1. Data collection with children

The researcher compiled a focus group guide (Appendix D) with questions that focussed on answering the “what” question. The focus group guide included open-ended questions that were formulated and used in the focus group discussions with the children in the High Five Programme. Five focus group discussions (each with 5, 5, 7, 7, 5 children) were conducted in Afrikaans with 29 children, while one child was interviewed individually, as he had missed the transport provided to the camping site. Four focus group discussions were conducted at the youth camp and one at the school, after hours. The researcher obtained permission to utilize the venues and prearranged the seating, so that it was conducive to communication. The participants gave permission for the interviews to be audio-tape recorded and for field notes to be documented. Each focus group discussion lasted for 45–60 minutes, and the researcher continued with data collection until no new insights, or views, came to the fore (De Vos, *et al.*, 2005: p. 330; Neuman, 2000: p. 200).

Although the population was 60 children, not all of them attended the focus group discussions, due to their unavailability, or that of their parents/caregivers, who needed to sign the assent forms. In addition, some children had changed schools, as it was the beginning of a new school year.

4.8.4.2. Data collection with parents/caregivers

The researcher compiled an interview guide (Appendix E) with questions focusing on answering the “what” question. The interview guide with open-ended questions was formulated and used during the interviews with the parents/caregivers of the children in the High Five Programme. The participants signed consent forms (Appendix C), and completed biographic information sheets. One focus group discussion was conducted with 6 parents/caregivers. The focus group discussion was aimed at determining the barriers that hindered parent involvement; however, during the discussion the parents, who attended, realised that others were experiencing similar challenges to what they were (Krueger & Casey 2000: pp. 24-25). In addition, they were more relaxed in the focus group discussion, away from their homes, and the quiet parents sensed that it was safe to share. They also shared their need to come together as a group, to share and support each other, an issue that would not emerge in the individual interviews. It was anticipated that not all caregivers would attend the focus groups, due to illness, being tired from working and arriving home late, or caring for small children; therefore, the 13 parents/caregivers were visited at their homes and interviewed in Afrikaans, until data saturation. This gave the researcher the opportunity to observe the parents in their natural settings. The researcher respected their privacy by agreeing to conduct the interviews, wherever the parents were most comfortable. During the interviews, the researcher ascertained that for some parents it was difficult to express what they thought and experienced; therefore, probing was needed to obtain more detail, depth and clarity. Since all the participants (parents and children) had been asked the same questions, their responses could be compared, and similarities could be identified. When responses “lack sufficient detail, depth or clarity, the interviewer puts out a probe to complete or clarify the answer or to request further examples and evidence” (De Vos *et al.* 2005: p. 293). Conducting the interviews at the parents’ homes highlighted the difficulties that parents/caregivers experience, when they have to attend meetings at the schools. The rest of the parents of the original population of 60 children did not attend the focus group and were not available to be interviewed.

4.8.4.3. Data collection with teachers

The researcher compiled an interview guide (Appendix F) with questions focusing on answering the “what” question. The interview guide with open-ended questions were used to interview the teachers, who referred children to the High Five Programme. Two teachers from Panorama Primary and Masiphatisane Primary, respectively, as well as 2 from St Andrews Primary in Saldanha, in the same area, were selected. St Andrews Primary also referred children to the High Five Programme, but only their 2 teachers formed part of the study, and not their children. The teachers were interviewed in Afrikaans, in their offices at their respective schools. The teachers, interviewed, were the contact teachers at the schools for the High Five Programme. They acted as the link between the school and High Five. The teachers referred the children to the High Five Programme by completing a referral form, and submitting it to the High Five staff. The High Five staff held regular feedback meetings with the teachers to discuss progress, or challenges. The teachers, interviewed, were informed about the study and signed a consent and confidentiality forms (Appendices C & G).

4.9. Data Analysis

Merriam (2009) emphasises the fact that data collection and analysis are inseparable; they occur together. Data refers to information of facts and figures, from which conclusions can be inferred. According to De Vos et al. (2011), qualitative data analysis refers to the categorisation, ordering and summarising of data, to obtain answers to the research questions. De Vos *et al.* (2005) aver that analysis refers to the dissection of the whole into its component parts, for the specific purpose of ascertaining its nature. Nieuwenhuis (2007: pp. 99-117) captures the essence of data analysis well, in the following definition of qualitative data analysis that serves as a good working definition: “...qualitative data analysis tends to be an ongoing and iterative process, implying that data collection, processing, analysis and reporting are intertwined, and not necessarily a successive process”.

De Vos *et al.* (2011: pp. 403,404) and Creswell (2007: pp. 150-155) assert that the process of data analysis and interpretation can best be presented by a spiral image – a data analysis spiral. De Vos *et al.* (2005: p. 334) assert, “The researcher moves in analytic circles rather than using a fixed linear approach. One enters with data made up of text or images (e.g. photographs and

videotapes) and exits with an account or a narrative. In between, the researcher touches on several facets of analysis, circling around and ‘upwards’ towards completion of the process. Also bear in mind that steps such as these can never be followed rigidly like a recipe. They are meant as guidelines. Often some of these steps overlap, or some steps are carried out before some others mentioned in any of the descriptions of the process found in the literature.”

In order to conduct a comprehensive data analysis, this current study followed Creswell’s thematic data analysis. Creswell (2007: p. 75) suggests that qualitative data analysis involves an analysis of themes. After data collection, the researcher transcribed all the individual interviews, focus group with parents, and focus groups with children, with the assistance of a scribe. The researcher read them thoroughly, with the reference field notes, in order to gain an understanding of the overall information collected. The researcher listened to the audiotaped recordings of all the data, to ensure that the data collected were transcribed verbatim by the scribe. All the participants were Afrikaans speaking and, to stay true to what they said, the researcher conducted the interviews in Afrikaans and captured the data in Afrikaans. When identifying the themes and categories, what was submitted by the participants was detailed in Afrikaans, and translated into English beneath.

The following are the proposed eight steps of analysis, according to Creswell (1998, cited in De Vos *et al.*, 2005: pp. 334-339), which were used to analyse the data, and the results were scrutinised by the study supervisor.

- **Step 1: Planning for recording of data**

Creswell (1998, cited in De Vos *et al.*, 2005: p. 334) asserts, “The researcher should plan for the recording of data in a systematic manner that is appropriate to the setting, participants, or both, and that will facilitate analysis, before data collection commences. The researcher should demonstrate an awareness that techniques for recording observations, interactions and interviews should not intrude excessively on the ongoing flow of daily events.” The researcher learned about previously planned activities in the High Five Programme, and utilised some of these ideas in data collection with focus group discussions and observations. The researcher saved all the data collected in a file, according to the different methodologies utilised (focus groups, semi-structured interviews and observations), and the different participants (children, caregivers and teachers) involved in the research study.

- **Step 2: Data collection and preliminary analyses:**

Creswell (1998, cited in De Vos et al., 2005: p. 335) states, “Data collection and analysis thus typically go hand in hand in order to build a coherent interpretation of the data.” Patton (2002) state that data analysis begins while still in the field, making sense of the data that emerge, and the field notes recorded. Creswell (1998, cited in De Vos *et al.*, 2005: p. 335) views data analysis as a twofold approach, “The first aspect involves data analysis at the research site during data collection. The second aspect involves data analysis away from the site, following the period of data collection.”

The first part of data analysis was mainly the researcher doing home visits and observing and analysing the participants’ behaviour, such as, attitude towards the research study, body language and facial expressions in their natural setting. At a later stage, after the interviews, observations and focus group discussions, the data were analysed in a more in-depth manner, by reading the field notes and making additional notes. Analysing the data on site provided the researcher with a better understanding of what the caregivers were experiencing, regarding the barriers that hinder their involvement in their children’s development. The data analysis conducted on site, assisted the researcher to gain a deeper insight of the residing context of the caregivers.

- **Step 3: Managing (organising data)**

This is the first step in data analysis away from the site. The researcher organised the data into a file folder, dividing the data according to the different focus groups and the different methodologies. The researcher made an inventory list of what data were available, and from whom, in order to identify what still needed to be done. The researcher transcribed the recorded interviews conducted, as well as the notes of the observations made during the various data collection phases. According to Creswell (1998, cited in De Vos et al., 2005: p. 336), “doing all or some of your interview transcription, provides an opportunity to get immersed in the data, an experience that usually generates emergent insights.” The original copies of all the semi-structured interviews and focus group discussions with the caregivers were placed in plastic sleeves, filed and stored in a safe place. A backup copy was made of the typed notes and data of the focus group discussions conducted with the children, as well as the observations.

- **Step 4: Reading and writing memos**

After organising the data, the researcher continued with the analysis to acquire an image of the whole database. Agar (1980: pp. 34-50) asserts, “Read the transcripts in their entirety several times. Immerse yourself in the details, trying to get sense of the interview as a whole before breaking it into parts.” Marshall and Rossman (1999: p. 153) aver, “Reading, reading and reading once more through the data forces the researcher to become familiar with the data in intimate ways.” During the reading process, the researcher listed, in table format, the themes and sub-themes that emerged from the data. The researcher used colour dots and highlighters on the hard copies to identify the themes, and made side notes to “clean up”, or narrow down, the responses to the main themes and sub-themes. Creswell (1998: p. 143, cited in De Vos *et al.*, 2005: p. 337) states, “Writing memos in the margins of field notes of transcripts, or under photographs helps in this initial process of exploring a database. These memos are short phrases, ideas or key concepts that occur to the reader.”

- **Step 5: Generating categories, themes and patterns**

The next step consists of moving from the reading and memo writing in the spiral to describing, classifying and interpreting the data. In this loop, forming codes, or categories represents the heart of qualitative data analysis. According to Marshall and Rossman (1999: p. 154), this is the most difficult, complex, ambiguous, creative and enjoyable phase. The process of category generation involves noting regularities in the setting, or people chosen for study. In this stage, the researcher looked for themes and sub-themes in the qualitative information, and began to make sense of the data.

- **Step 6: Coding of data**

According to Marshall and Rossman (1999: pp. 155-157), coding data is the formal representation of analytic thinking. As researchers code the data, new understandings may well emerge, necessitating changes in the original plan. The researcher applied a coding scheme, in this current study, to the identified themes and sub-themes, using the first letters of key words and numbers, for example, *P1* (*parent participant*). The process of coding is central to qualitative research, and involves making sense of the text collected from the interviews, focus group discussions and observations. Coding involves aggregating the text, or visual data, into small categories of information,

seeking evidence for the code from different databases being used in the study, and, finally, assigning a label to the code (Creswell, 2013: p. 190).

- **Step 7: Testing emergent understandings & searching for alternative explanations**

Researchers engage in interpreting the data, when they conduct qualitative research. Interpretations involve making sense of the data, the “lessons learned”, as described by Lincoln and Guba (1985). Patton (2015) maintains that this interpretation process requires both creative and critical faculties, to make carefully considered judgements about what is meaningful in the patterns, themes and categories, generated by the analysis. The researcher used tables as a way of visually presenting the relationships among concepts. As part of the iterative interpretative process, Marshall and Rossman (2015: p. 228), encourage qualitative researchers to be attentive for alternative understandings, using such strategies as challenging personal interpretations, through comparisons with existing data, relevant literature or initial hypotheses.

- **Step 8: Writing the report**

In the final phase of the spiral, the researcher reports and writes up of research, which entails putting words on paper, in the form of a report, constructing an argument, based on the findings of what had been done, what had been seen and heard, the participants who were interviewed, and the information that emerged from the process of data analysis. Ultimately, the conclusions and recommendations drawn from the information should contribute to the body of knowledge, and represent new meanings and insights in the research question (Creswell, 2013: p. 361).

4.10. Data Verification

4.10.1. Trustworthiness

De Vos *et al.* (2011) declare that qualitative research is not concerned with generalising, validity or reliability. Instead, the trustworthiness of the research is crucial. Qualitative researchers search for a rich, thick account of the voices of the participants, implying that the data must be rich in description of the people and places/settings involved (Schurink 1998: p. 253). Lincoln and Guba (1985), therefore, propose four alternative constructs that reflect the assumptions of the qualitative model, more accurately. In a qualitative

research design, trustworthiness comprises the strategies of Credibility, Transferability, Dependability and Conformability (De Vos *et al.* 2005: pp. 345,346).

The researcher gave attention to triangulation of data by means of applying different methodological approaches as a validation strategy. Data was drawn from different sources (parents, children and teachers), through different methods (focus group discussions, semi-structured interviews and observations) and at different times, utilising the same interview guide. The data collected from the different sources is matching and therefore trustworthy.

According to Guba (1981: pp. 75-91), researchers seek to satisfy the four criteria mentioned above, as follows:

- In addressing credibility, researchers attempt to demonstrate that a true picture of the phenomenon is being presented.
- To allow transferability, researchers provide sufficient detail of the context of the fieldwork, to enable readers to decide whether the prevailing environment is similar to another situation.
- Dependability is difficult in qualitative work, although researchers should, at least, strive to enable a future investigator to repeat the study.
- To achieve conformability, researchers must take steps to demonstrate that the findings emerge from the data, and not their own predispositions.

4.10.1.1. Credibility

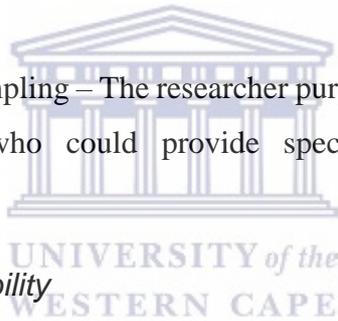
The researcher can demonstrate that the subject of the study can be accurately identified and described. Shenton (2004: p. 63) states that one of the key criteria, addressed by positivist researchers, is that of internal validity, in which they seek to ensure that their study measures what it was actually intended to do. The researcher interviewed the parents and their children until data saturation was achieved, when no additional, new information was forthcoming from the one-on-one interviews and focus group discussions. Each participant had the opportunity to refuse participation in the study; therefore, the data collected involved those who were genuinely willing to participate, and prepared to provide data, freely. The researcher utilised different methods of data collection – participant observation,

focus group discussions and individual, semi-structured interviews. In the interest of maintaining credibility, the researcher shared the findings with the participants of the research study after data analysis, for them to review the accuracy of the researchers' interpretation of their experiences (De Vos *et al.*, 2005: p. 346)

4.10.1.2. *Transferability*

External validity "is concerned with the extent to which the findings of one study can be applied to other situations" (Shenton 2004: p. 69). Babbie and Mouton (2001: p. 277) discuss the following strategies for transferability:

- Thick description – As transferability in a qualitative study depends on similarities between sending and receiving contexts, the researcher collected sufficient detailed description of data in the contexts, and reports them. The researcher collected data from multiple informants, as well as through more than one data gathering method, to strengthen the study's usefulness.
- Purposive sampling – The researcher purposely selected the participants, or informants, who could provide specific information, regarding the phenomenon.



4.10.1.3. *Dependability*

A research study must also provide evidence that, if it were to be repeated with the same (or similar) participants (subjects), in the same (or a similar) context, its findings would be similar (Babbie, 2001: p. 278). According to Babbie and Mouton (2001), since there can be no validity without reliability (and, therefore, no credibility without dependability), a demonstration of the former is sufficient to establish the existence of the latter. The researcher achieved dependability by combining several research methods, such as the focus group discussions, observations and individual semi-structured interviews (Babbie & Mouton, 2001).

4.10.1.4. *Conformability*

Steps must be taken to ensure that, as far as possible, the study's findings are the result of the experiences and ideas of the informants, instead of the characteristics and preferences of the researcher (Shenton 2004: p. 69). De Vos *et al.* (2005: p. 347), as well as Lincoln and Guba (1985) emphasize the need to assess whether the

findings of the study could be confirmed by another. The evaluation, therefore, would be removed from the characteristics of the researcher, and placed squarely on the data collected.

The researcher was objective, and focused on the data during the data collection and analysis processes. The researcher achieved Conformability in the following ways:

- a. The data procedure collection procedure was clearly explained and understood by all involved;
- b. The researcher followed a clear method of data collection;
- c. Evidence from field notes and audio-tape recordings of the interviews were used to support findings. The services of an independent scribe was engaged for the focus group discussions;
- d. The data were transcribed and analysed by the researcher; and
- e. The participants reported their own views and opinions, based on their context.

4.11. Limitations of this study

One limitation in this current study was the availability of most parents/caregivers, as they were only available after-hours and on weekends. Some parents, initially, experienced difficulty with expressing their experiences, and divulging their views on parent-involvement in the High Five Programme. The researcher, therefore, had to probe for more information, posing questions in a simplistic and understandable manner, to encourage parents to share their views. The researcher emphasised that there were no wrong answers, only their most valuable opinions. The researcher was mindful that these parents/caregivers had never been asked these questions before; therefore, it was their first attempt at responding in a coherent manner. Some parents were unaware of the importance of voicing their opinions, and that it could affect the service delivery of High Five. Another limitation was the fact that parents from only one programme participated in this current study. This implies that the findings of this current study were not representative of all parents, and could only be used as guidelines. One more limitation is the English information and consent forms that were created for Afrikaans speaking children and adults. Hence the researcher had to thoroughly explain the wording on the forms in Afrikaans

to the participants, who confirmed that they understood it completely. The interview guides were conducted in Afrikaans. The dated of some literature could also be indicated as a limitation. Finally, High Five does not have a tracking, referral and follow up system in place, which was yet another drawback.

4.12. Ethical Considerations

Ramos (1989, cited in Orb, Eisenhaner & Wynaden, 2001) describes three types of ethical problems that could affect qualitative studies, namely, the researcher/participant relationship, the researcher's subjective interpretations of data, and the design itself. The dignity, rights, safety and well-being of the participants were of primary concern in this research. Banks (2006) asserts that the concept of ethics refers to moral philosophy, including the norms and standards of behaviour, employed by individuals to do what is right. Most ethical issues in research fall into one of four categories, namely, not to be exposed to any form of risk or danger, approval of participation by means of a written agreement, confidentiality and trustworthiness (Leedy & Ormrod, 2010). For the purposes of this current study, the researcher, in agreement with the above submissions, deemed the following ethical conditions relevant, according to Welman, Kruger and Mitchell (2005).

4.12.1. Informed consent

Neuman (2006), as well as Monette, Sullivan and De Jong (2008) describe informed consent as a written agreement to participate, given by people after they have been informed about the research procedure. Informed consent is seen as a fundamental ethical principle of social research, as no individual should ever be coerced into participating in a research study; it should occur on a voluntary, consensual basis (Neuman, 2006). The researcher obtained written permission to conduct the study from the Senate Research and Ethics Committee of the University of the Western Cape at the Department of Social Work (Appendix B), after submitting the research proposal. In addition, voluntary, informed consent was obtained from all the participants, after an information letter (Appendix A), containing information pertaining to the research project, was distributed and explained to them, after which they voluntarily signed the consent form (Appendix C).

As the participants were all Afrikaans speaking and the information sheet was in English, the researcher explained the purpose and significance of the study to the participants,

children, parents and teachers, in Afrikaans. The parents were visited at their homes and given the choice to participate in a focus group, or to be interviewed at home. The parents also provided consent, and signed assent forms, for their children to participate in the study (Appendix H). The participants were provided with sufficient information about the study to allow them to decide for, or against participation. Teachers were visited and interviewed at school in privacy.

4.12.2. Ethical consideration with regard to Confidentiality

Berg (2007) and Neuman (2006) define “confidentiality” as the ethical protection of those who are being studied, by holding research data in confidence, or keeping them secret from the public, or not releasing information in a way that links specific responses to specific participants. The participants were assured that the data would be used only for the stated purpose of the research, that their names would not be mentioned, and their privacy would be maintained. The records of the interviews were safely stored away in a locked cupboard in the researcher’s office, to which only the researcher had access.

The assurance was given to the participants that their views would be treated confidentially. De Vos *et al.* (2011) emphasise that every individual, participating in interviews, has a right to anonymity, privacy and voluntary participation. All the participants gave consent for the interviews and focus group discussions to be audiotape recorded during the data collection process. The participants were informed of their right to choose whether or not to participate, that their participation was voluntary, and that they had a right to withdraw at any stage, during the study process, without negative consequences.

4.12.3. Scientific integrity of the research

The researcher applied for ethical clearance, and adhered to the ethical clearance requirements of the UWC Faculty Board Research and Ethics Committees, and the UWC Senate Research Committee. In addition, as a social worker, the researcher was bound by the South African Social Service Professions (SACSSP) Code of Ethics to conduct the research, in such a way that the participants were not at risk.

4.12.4. No deception or plagiarism

All the data were derived from the responses of the research participants' focus group discussions, individual interviews and observations obtained from the various sites. Additionally, the data were not manipulated to support a personal position or bias. The data from the literature were not plagiarised; all sources were adequately referenced and authentic.

4.13. Chapter Summary

In this chapter, the researcher discussed the research design and methodology employed in this current research study. The researcher employed a qualitative research method to explore and describe the phenomenon of the factors that hinder parents' involvement in the High Five Programme for at risk children. The research design involved purposive sampling, to select a sample from a specifically identified population, to provide the researcher with an inside view of the phenomenon under scrutiny, through the eyes of the selected participants. One-on-one, semi-structured, face-to-face interviews, focus group discussions and participant observation were the instruments used to collect data from the participants (30 children, 19 parents and 6 teachers). The eight steps of Creswell (1998, cited by De Vos *et al.*, 2005: pp. 334-339), were followed for data collection and data analysis. The themes and sub-themes were identified as they emerged from the collected data. Data verification was conducted, by applying the strategies of Trustworthiness, namely, Credibility, Transferability, Dependability, and Conformability, as proposed by Lincoln and Guba (1985).

Chapter 5 comprises the research findings and the discussion of the findings.

CHAPTER FIVE

RESEARCH FINDINGS AND DISCUSSION

5.1. Introduction

In this chapter, the researcher presents the research findings, as well as a detailed discussion of the processes that underscored the analysis of the actual problem for research, and the specific themes and sub themes that were identified as critical issues, related to the barriers that hinder parent involvement. The findings emanate from the interviews and focus groups discussions with all the participants, namely, the children, their parents and teachers involved in the High Five Programme.

According to De Vos *et al.* (2005: p. 333), as well as Patton (2002: p. 432), the purpose of conducting a research study is to produce findings. Burns (1997: p. 12) asserts that the task of a qualitative researcher, therefore, is to “capture what people say and do, as a product of how they interpret the complexity of their world, to understand events from the viewpoints of the participants”. This process involves the reduction of the volume of raw information, sifting significance from trivia, identifying significant patterns, as well as constructing a framework to communicate the essence of what the data reveal. Each of the themes identified will be used as the basis for an argument in a discussion, as well as to report on the findings (Patton 2002: p. 432).

In order to provide a broader view of the data collected, the researcher prepared a demographic profile of the participants, which is discussed in the next section.

5.2. Demographic data of the participants

The demographic profile of the participants as parents and beneficiaries of the High Five Programme informs the reader on who the participants were, and provides a description of the observations made during the home visits conducted by the researcher. The demographic data of the participants are presented in table form, with a subsequent discussion of the demographic data.

A total of 60 children, 60 caregivers and 6 teachers were purposively selected for participation in the study. However, only 35 parents signed assent forms, thereby giving permission for their children to be involved in this current study. Ultimately, only 30 children signed a group confidentiality form and participated in the research, while only 19 caregivers signed consent and confidentiality forms to participate. The researcher assured them that their names would not be mentioned, or linked to information provided by them.

The demographic data, presented in Table 5.1, reflect the children's gender, race, school grade, number of siblings and relationship with the adult/s they live with.

Table 5.1: Biographical data of grade 5 children

Participant	Gender	Age and Grade	Number of other siblings and ages	Relationship with caregiver they stay with
C1	M	13yrs, Gr 5	None	Grandmother
C5	M	11yrs, Gr 5	1 female, 1 male	Grandparents, both
C6	F	11yrs, Gr 5	3 Females, 3 males	Both parents
C25	M	11yrs, Gr 5	1 brother 15yrs, 1 sister 8yrs	Both parents

Source: Research data

Table 5.2: Biographical data of grade 6 children

Participant	Gender	Age and Grade	Number of other siblings and ages	Relationship with adult/guardian or parent they stay with
C3	M	13yrs, Gr 6	1 male	Father
C4	M	13yrs, Gr 6	2 males, 7 & 5yrs	Grandmother and Father
C9	M	12yrs, Gr 6	2 males 19 & 10yrs	Both parents
C14	M	14yrs, Gr 6	1 stepsister, 1 sister	Mother
C16	M	13yrs, Gr 6	7 brothers aged 1, 5, 8,12, 13, 21, 26; one sister 16yrs	Both parents
C17	M	13yrs, Gr 6	1 sister 26yrs	Mother

Source: Research data

Table 5.3: Biographical data of grade 7 children

Participant	Gender	Age and Grade	Number of other siblings and ages	Relationship with caregiver they stay with
C2	M	12yrs, Gr 7	1 male, 1 female	Mother
C10	M	14yrs, Gr 7	2 males, 21 & 14yrs	Aunt
C13	M	14yrs, Gr 7	2 sisters	Both parents
C21	M	14yrs, Gr 7	1 sister, 1 brother	Both parents
C24	M	15yrs, Gr 7	2 brothers 7, 17yrs and 1 sister 2yrs	Mother and stepfather
C26	M	14yrs, Gr 7	3 brothers 12, 14, 17yrs	Both parents

Source: research data

Table 5.4: Biographical data of grade 8 children

Participant	Gender	Age and Grade	Number of other siblings and ages	Relationship with caregiver they stay with
C7	M	14yrs, Gr 8	2 females, 16 & 7yrs	Mother
C8	M	15yrs, Gr 8	2 females, 1 male	Mother and Stepfather
C11	M	15yrs, Gr 8	None	Mother
C12	M	14yrs, Gr 8	2 sisters, 2 brothers	Mother
C19	F	14yrs, Gr 8	1 sister	Parents and grandfather
C20	F	13yrs, Gr 8	3 sisters	Mother and stepfather
C22	F	15yrs, Gr 8	1 brother, 2 sisters	Both parents
C23	F	13yrs, Gr 8	1 sister, 2 brothers	Both Parents
C27	F	14yrs, Gr 8	1 brother 7yrs, 2 sisters 8, 4yrs	Mother and stepfather
C28	M	14yrs, Gr 8	1 sister 13yrs, 1 brother 14	Mother
C29	F	14yrs, Gr 8	2 brothers 16, 10yrs and 1 sister 17yrs	Mother
C30	M	16yrs, Gr 8	1 brother 16yrs	Mother

Source: Research data

A discussion of the demographic information of the participants is provided in the section below:

5.2.1. Gender distribution of participants

The gender representation of the 30 child participants was 22 boys/males and 8 girls/females. The gender distribution of this current study's sample reveals that the majority of the participants referred to this particular High Five Programme was males/boys. This was not surprising, as this unequal distribution between genders reveals that males/boys are dominating the High Five Programme, as more males than females were being referred to the programme through their schools. (**Source:** Referral forms and attendance registers of weekly life skills sessions, which are available for scrutiny, if required)

Block, J. & Block, J.H. (2014) and Louw (1998: p. 287) state that the main difference between boys and girls is behaviour. Boys are more aggressive than girls are, boys have better ability to mentally manipulate than girls do, and girls are better at interpreting social messages from non-verbal signals. In recent years, teachers have referred more boys to the High Five programme than girls, based on their high risk behaviour, as boys appeared to show more aggression in acting out behaviour, than girls in similar situations (Referral forms completed by the teachers, which are available for scrutiny, if required).

5.2.2. Age distribution of the participants

The age distribution of the child participants, according to Tables 5.1 to 5.4, ranged between 11 - 16 years, with one participant at 9 years old. A total of 11 participants were 14 years old, 7 were 13 years old, 4 were 15 years old, 4 were 11 years old, two were 12 years old and one was 16 years old. Fourteen participants were in the early adolescence phase, and 16 in the middle adolescence phase. Louw (1998: p. 385) states that many authors are inclined to describe adolescence in terms of three phases:

- Early adolescence, approximately between 11 and 14 years;
- Middle adolescence, approximately between 14 and 18 years; and
- Late adolescence, approximately between 18 and 21 years.

The reasons for the referrals of children to the High Five programme are summarised in the paragraph below. The children referred to the High Five Programme, present with disruptive and high risk behaviour that interferes with teaching and learning in the classroom. These behaviours, for example substance abuse, absenteeism from school, fighting or bullying, disruptive and disrespectful attitudes towards teachers and their peers, distracting other learners during lesson presentation, refusing to follow instructions, constant teasing and being outside of class instead of inside, create a challenge for the teachers and other learners in the classroom. In addition, some learners in the High Five Programme struggle academically with reading and writing, and are transferred to the following grade because of their age. Some learners, who were referred, were older for the grade they were in, due to failing and repeating grades. The source of this information is the referral forms that were completed by the teachers, who referred the children, based on their behaviour in the classroom and school (High Five Referral forms, which are available for scrutiny, if required)

5.2.3. School grade distribution of the participants

Most of the participants were in grade 8, followed by grades 6, and grade 7. Twelve (12) participants were in grade 8, six (6) in grade 7, six (6) in grade 6, four (4) in grade 5, and two (2) in grade 4. According to the education system, most of these learners had recently transited from the intermediate phase to the senior phase, from primary school to secondary school. Most of them were referred to the High Five Programme, while in their

last year of primary school. Over the years the programme has predominantly targeted primary school learners.

5.2.4. Number of other siblings

Tables 5.1 to 5.4 also reveal that two participants have no siblings, three participants have 1 sibling, and 25 have two and more siblings living together. It is important to be aware that the parents/caregivers of the beneficiaries in this current study, also have other children; their responsibility stretches to more than the one child that is involve in the High Five Programme, and it may influence their involvement.

5.2.5. Relationship with parent/primary caregiver the participants live with

Nine participants (30%) were living with single mothers; ten participants (33.3%), with both parents; five participants (16.6%), with the biological mother and stepfather; one with an Aunt; two participants, with grandparents; one with the grandmother only; one with the grandmother and the father; and one participant was living with the father only. Only ten of the 30 participants (one third/33.3%) were living with both their parents. This correlates with Stats SA (2011, cited in Makiwane & Berry, 2013), which suggests that 32.64% of children live with both parents. The following data, sourced from Stats SA (2011, cited in Makiwane & Berry, 2013), indicates the level of co-residence of children with their parents, up to the age of nine years.

Table: 5.5: Level of co-residence of children with their parents, up to 9 years of age

Family type	Number	%
Both parents	583 341	32.64
Father only	40 674	2.27
Mother only	584 963	32.73
Both parents absent	577 893	32.34

Source: Calculations by Makiwane from Stats SA (2011, cited in Makiwane & Berry, 2013)

In addition, the Department of Social Development (Republic of South Africa [RSA], Department of Social Development [DSD], 2008) determined that, in South Africa, single parents are in charge of more than 40% of households. headed The SA Institute of Race Relations (Makiwane & Berry, 2013), in its recent survey, revealed that only a third of the country's children lived with their parents, while the rest lived with single parents,

on their own, with relatives or in foster care. Just over 39% of children lived with their mothers only; about 4% lived with their fathers only; and 8% lived with their grandparents, great aunts or uncles, but without their own parents (Makiwane & Berry, 2013).

The Western Cape Youth Development Strategy (2013: p. 5) states, “Families are one of the primary contexts impacting on a young person’s life. Family composition is a key feature of family life and one that has regularly been linked with risk-taking behaviour. In the Western Cape, 40% of young people at school live in two parent households, compared to just 26.8% of learners across South Africa. 32% of learners in the province live with a single parent (compared to 35.2% in South Africa) and 24% with another family member. A remarkably high percentage (4%) lives with a non-family member compared to just 0.5% across the rest of the country”.

In the following section of this chapter, the demographic data of the parents are presented. It reflects the parents’ gender, age, employment status, marital status, number of children and the number of people they live with.

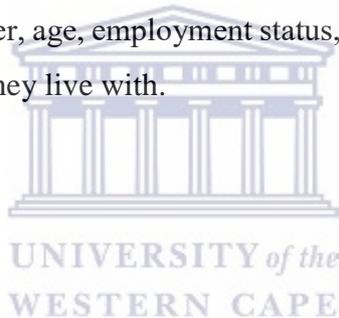


Table: 5.6: Demographic data of the parents

Participant	Gender	Age	Marital status	Current employment	Number of children	Number of people living with participant
P1	F	45	Unmarried	Unemployed	1	7 extended family
P2	F	29	Unmarried	Cleaning services	1	3
P3	F	45	Married	Domestic worker	7	8
P4	F	41	Married	Cleaner	4	5
P5	F	43	Married	House wife	3	7 extended family
P6	F	40	Unmarried	Shoprite	5	6
P7	F	56	Married	Domestic worker	5	3
P8	F	43	Widow	Domestic worker	3	5
P9	F	38	Married	Unemployed	2	4
P10	F	44	Co-habitat	Disable	3	4
P11	M	49	Married	Unemployed, All pay ¹	4	5
P12	F	58	Astray husband	Disable all pay	1 son, 2 grandchildren	3
P13	F	39	Married	Unemployed	3	4
P14	F	59	Unmarried	Domestic worker	2	3
P15	F	54	Widow	House wife Unemployed	2	2
P16	F	43	Unmarried	Domestic worker	2	2
P17	F	53	Married	Domestic worker	2	3
P18	F	37	Married	Youth worker	2	3
P19	F	34	Unmarried	Cleaner	3	8 extended family

Source: Research data

5.2.6. Gender distribution of participants (parents/caregivers)

Table 5.6 illustrates that the gender of the caregivers interviewed was eighteen females and one male. The gender distribution of this current study's sample reveals that the majority of the participants were female. This was not surprising, as the attendance registers of parent meetings and workshops revealed that more mothers attended. In the HSRC policy brief document, towards the development of a Family Policy, Makiwane and Berry (2013) articulate their concern that approximately 60% of children, younger than 10 years, do not live with their biological father. The absence of fathers is a real concern, as stated in the Department of Social Development's, The Fatherhood Strategy

¹ "All Pay" refers to the government grants

(Republic of South Africa [RSA], DSD, 2013: p. 6), “South Africa has a high rate of absent fathers, with only one third of pre-school children living at home with both their parents” (Statistics South Africa [Statsa], 2011).

5.2.7. Age distribution of the participants (parents/caregivers)

The age distribution, according to Table 5.6, reflects that the participants represented, were between 29 - 58 years old. One participant was 29 years old; four were between 30 - 39 years; nine, between 40 - 49 years; and five, between 50 - 59 years of age. Most of the parents/caregivers were younger than 50 years of age.

5.2.8. Marital status of the participants

As illustrated in Table 5.6, six participants were unmarried, nine were married, one participant was co-habiting, one participant was separated from her husband, and two were widowed. During the home visits to the married couples, most of the husbands were unavailable for the interviews, due to work constraints, or one due to illness, while the few that were home, suggested that their wives participate in the interviews. One father came from work and went straight to his room. Another father sat in, after he arrived home from work, and listened, but his wife responded to the questions; he did not say much, although he was invited.



5.2.9. Employment status of the participants

The employment status of the participants, according to Table 5.6, reflects that thirteen participants were employed; four were unemployed (one being a recipient of a government grant); two participants were disabled, unfit for work and recipients of a disability grant; and in two families the mothers are unemployed, but the fathers were employed as the sole breadwinners. Additionally, in Table 5.6, almost all the participants who were employed, worked as domestic workers in cleaning services, and would, therefore, be relatively low skilled, and low paid.

Landsberg *et al.* (2005: p. 221) states that the parental socio-economic status (SES) and the level of education are particularly relevant in South Africa, a country with vast inequalities. Therefore, the effects of poverty, unemployment and high illiteracy rates should be considered, when working with families and communities. School-based family involvement, for example, is significantly related to SES, whereas home-based

involvement is not. This means that some parents may find it difficult to attend school activities, but are still involved in their children's learning at home. Parents of low SES are observed to be less involved in the teaching of new learning skills and cognitive-intellectual activities, such as preparation for examinations (Landsberg *et al.*, 2005).

5.2.10. Number of children of the participants

In Table 5.6, three participants had one child each, while the other sixteen participants had two or more children in their care. In some cases, grandchildren were included, and it was the grandchild who was a participant in the High Five Programme. Additionally, in Table 5.6, some participants had four, five, or seven children. Being employed as domestic workers, could be stressful for the participants, as caregivers, as they may not be able to meet all their children's basic needs. Donald, Lazarus and Lolwana (2010: p. 158) assert that under such stress, the primary caregivers may become physically and emotionally exhausted, feel that they cannot cope, and become more and more demoralised and depressed. As a result, they may neglect and stop responding to the physical and psychological needs of the children in their care.

5.2.11. Number of people living with the participants

In Table 5.6, most of the families lived on their own, with the mother, father (if married or present) and with children. Only a few families had extended family members living with them. Extended family members could either be a support network for the nuclear family, or an additional drain/strain, if they were all dependent on the employed caregiver.

Landsberg *et al.* (2005: pp. 220-221) refers to, what has become much more common in recent years, children growing up in homes, where both parents are employed outside of the home. Adverse economic circumstances and technological changes often result in over-demanding jobs, as well as long working hours to earn money for the household, leaving the parenting to siblings, or members of the extended family. Parents, therefore, often have little time and energy to be involved in their children's learning at home, or at school.

5.3. Overview of main themes and sub-themes

The following table contains the main themes and sub-themes that emerged from the data analysis of the focus group discussions with children and caregivers, as well as the semi-structured interviews with caregivers, children and teachers.

Table 5.7: Main themes and sub-themes of the FGDs and semi-structured interviews

Main themes	Sub-themes
Barrier 1: Low self-esteem of the parents and children.	1.1. Children referred to the programme have low self-esteem. 1.2. Caregivers lack self-esteem and think they do not have a voice or opinion.
Barrier 2: Lack of Communications between all relevant parties.	2.1. Lack of communication between parents, teachers and High Five staff. 2.2. Children are referred by school teacher to High Five without parents' consent.
Barrier 3: Lack of role modelling of/by parents/caregivers.	3.1. Caregivers' own negative behaviour that cause them to withdraw, has been identified as a barrier that hinders their involvement.
Barrier 4: Poor relationships between children and caregivers	4.1. Absent fathers. 4.2. Lack of emotional bond between parents and children.
Barrier 5: Parenting skills and support networks	5.1. Caregivers need information and support on parenting. 5.2. Involvement of fathers in parenting skills workshops. 5.3. Caregivers need the support of other parents, who share the same experiences.
Barrier 6: Lack of support networks and resources	6.1 Caregivers work long hours and lack spending quality time with their children. 6.2 Caregivers have no one to care for their younger children during meetings. 6.3 Too many responsibilities outside the home. 6.4 Caregivers stay far from the meeting venues, and walking to and from is unsafe.

Source: Research data

5.4. Discussion of the main themes and sub-themes, in relation to literature

In this section, the various themes and sub-themes are discussed, as they emerged from the analysis of the collected data. Before the researcher commenced the analysis process, the data were transcribed, which simply means that the texts from interviews, observational notes or memos were typed into word-processing documents. Six themes with sub-themes emerged from the gathered data of the focus group discussions and semi-structured interviews during data analysis.

5.4.1. Main theme 1: Low self-esteem of the parents and children

The findings revealed that the children referred to the programme had low self-esteem, and their parents lacked self-esteem. Self-esteem is described as the value that a person places on him/herself (Louw & Louw, 2007). Rosenberg (1986, cited in Louw & Louw, 2007) identified different aspects of self-esteem; the baseline self-esteem and barometric self-esteem. Barometric self-esteem is “the fluctuating sense of worth and wellbeing people have as they respond to different thoughts, experiences and interactions in the

course of the day” (Rosenburg, 1986: pp. 107-135). Most adolescents experience barometric self-esteem. The individuals with low baseline self-esteem, “usually have poor opinions of themselves even though they have days when things go right” (Rosenburg, 1986: pp. 107-135). Low baseline self-esteem is seen as a risk factor for uninvolved parents, who have children with high risk behaviour. Hoover-Dempsey and Sandler (1997) assert that parents with a low level of belief in their own ability to help their children are likely to avoid contact with schools, because of their view that such involvement will not bring about positive outcomes for their children. The following sub-themes emerged from this main theme: Children referred to the programme have low self-esteem; and, Caregivers lack self-esteem and think they do not have a voice or opinion.

5.4.1.1. Sub-theme 1.1: Children referred to the programme have low self-esteem

In this current research, the teachers highlighted that the children that they refer to the High Five Programme lack positive self-esteem. They, therefore, would join other children who are acting out negative and attention seeking behaviours, in order to feel good about themselves. To authenticate this sub-theme, the following quotations refer, as one child expressed, after completing the high five programme:

“My self-confidence improved. I learnt more about myself and know myself better, now I believe in myself.”

A parent disclosed:

“The teacher said my child has a low self-esteem. He referred her to the High Five Programme, since the programme is not only for rude children. It boosted him, his self-esteem.”

A teacher articulated:

“Children with low-self-esteem and high risk behaviour are referred to the program.”

The above quotations confirm that the participants referred to the High Five Life Skills Programme had low self-esteem, which indicates, they did not believe in

themselves. They are, therefore, at risk of being easily influenced to become involved in negative behaviour, to feel accepted, and to belong to a group. Landsberg *et al.* (2005: pp. 33, 34) assert that the disintegration of family life causes a lack of love, acceptance, care, interpersonal communication and belongingness. Under such circumstances there is little hope for the fulfilment of esteem needs, such as respect, recognition and self-esteem. Only through dynamic involvement, positive experience and sufficient attribution of meaning to the life/world, will the child be capable of forming a positive self-image, which, in turn, leads to adequate self-actualisation.

Bezuidenhout (2008: p. 87) asserts that, when the adolescent suffers from low self-esteem, it is probable that s/he will oppose norms and rules, as a way of establishing the self-concept. Louw (1998: pp. 285, 286) states that the degree of self-acceptance plays an important role in children's personality development, influencing all aspects of their development. Children with a negative self-concept usually have high anxiety levels, and later display poor school performance, as well as social adjustment. Venter and Rambau (2011), state that some children cope well without supervision, when left alone for less than three hours. However, children who are left alone for more than three hours daily, often present with low self-esteem, low academic efficacy and high levels of depression. They are maladjusted, compared to their peers, and often present with behavioural problems.

Murray Bowen (1978) tracks patterns through the family life cycle, over several generations, focusing on transition points, to understand dysfunction at the present moment. There is a strong implication that emotional issues and developmental tasks not resolved in the appropriate stages, will be carried along as hindrances in future transitions and relationships (Carter & McGoldrick, 1999; Walsh 2003).

5.4.1.2. Sub-theme 1.2: Caregivers lack self-esteem and think they do not a voice or opinion

In a study conducted by Landsberg *et al.* (2005: p. 225), the parents reported that they were frequently viewed as incompetent, and the problems that their children were experiencing, were often ascribed to their negligence, as well as their

distortion of reality, such as denial or displaced anger. They were, therefore, often judged, analysed, criticised, and regarded as defensive, as well as demanding by the school and community. These attitudes contributed towards feelings of guilt and frustration in families, and adversely affected participation.

Ralph and Eddowes (2002: p. 111, cited in Venter & Rambau, 2011: p. 349) add that parent child interaction is the first, and one of the most crucial reciprocal relations in the young child's life. The interaction can be positive or negative. As previously mentioned, positive interaction with parents is supportive, and offers a child a sense of security and well-being, whereas negative interaction with parents is linked to risky behaviours, such as delinquency, inappropriate sexual activities, experimentation with harmful substances, as well as various forms of peer pressure. (Eberstadt, 2001: p. 15).

In this current study, the participants perceived that the parents were lacking self-esteem, and without a voice, which prevented them from being involved in the High Five Programme. A parent expressed the following:

"I can say that High Five must go to the parents with low self-esteem that think they are nothing.....but they don't know what to say."

One of the children shared the following about parents:

"....so that they can feel better. They feel bad.so that they can come out of the house."

The following extract was taken from the teachers:

"Parents have low self-esteem"

"Parents want to be friends with their children and allow anything."

"Parents are afraid of their children" and

"Parents shy away from meetings".

The above quotations indicate that the low self-esteem of the parents was a barrier to their involvement with the High Five Programme, as they did not believe that they could make a valuable contribution.

According to the Hornby (2006), self-esteem is the feeling an individual has about him/herself. A good self-esteem is being at ease with your own character and abilities. Self-image is similar to self-esteem, and encompasses the opinion, or idea, an individual has of his/her appearance, character and abilities. Everyone has either a good or bad, positive or negative, high or low, self-image, as well as self-esteem. Landsberg *et al.* (2005: p. 33, 34), as well as Makunga (2015), state that the legacy of education, during the apartheid years, left millions of parents illiterate, and therefore, unfamiliar with the routines, structures and expectations of schools. These particular parents had no role models, or experiences, to draw on, and may feel inadequate and unwelcome in the school environment. Some may lack confidence in their own ability to support and participate in their child's learning. Landsberg *et al.* (2005: p. 85), therefore, suggest that parents also need to develop themselves through school activities and opportunities, to build their confidence and skills, as well as empower them to be more assertive. Bezuidenhout (2008: p. 41) asserts that it is through interaction with significant others (for example, parents or caregivers) that a self-image is created. If the interaction between the teenager and the significant others is positive, the teenager will develop a positive self-image. Donald *et al.* (2010: p. 199) assert that, when children cannot find security, support, meaning and identity in the family, they will seek it elsewhere, which puts them at risk. Therefore, it can be deduced that the parents, of children with a low self-esteem, may also have a low self-esteem.

5.4.2. Main theme 2: Lack of communication between all relevant parties

The information shared by parents, children and teachers identified the lack of communication between the caregivers, educators, and learners, as a barrier that hinders parent involvement. Landsberg *et al.* (2005: p. 85) assert that parents and educators often have anxieties about working together, as past experiences of parents with educators, whom they may have perceived as being evaluative and judgemental, often lead to parents being hesitant to approach educators to discuss issues of mutual concern. Landsberg *et al.* (2005: p. 225) add that problems with learners are frequently allowed to

escalate before parents are contacted. In the process, schools often focus on the problems and deficits of children and their families, while failing to recognise their assets and *expertise* in solving these problems. The following sub-themes emerged from this main theme: Lack of communication between parents, teachers and High Five staff; and Children are referred by school teacher to High Five without parents' consent.

5.4.2.1. Sub-theme 2.1: Lack of communication between parents, teachers and High Five staff

To substantiate this sub-theme, the following quotations from the participants refer, as this parent articulated:

“I am not sure why my son is in the program. My son said he is part of High Five. He is not a problem.” This indicates that she was not informed by the school of the program and why he was referred there.

Children shared the following views on communication as a barrier between them and their parents:

“I think the children are the problem since they do not give the letters to their parents.”

“Parents must listen to their children as children must listen to their parents.”

The voices of teachers heard are in the following excerpt:

“Parents in general are not involved. Parents lay their responsibility on the school to educate their children.”

A school principal revealed the following regarding communication with the parents:

“Teachers can do home visits, but they are cautious and fear violence.”

These quotations indicate a lack of contact, as well as a lack of communication between teachers, parents and children. Being afraid of doing home visits may hamper communication with parents, who do not visit the school when invited. As evidenced during this current research, it was difficult to motivate caregivers to

participate in the focus groups; therefore, the researcher had to do home visits to approach the caregivers for possible face-to-face interviews, instead. Home visits might be one of the most important ways of contact and communication for caregivers to understand, not only the High Five programme, but also their role in the education of their children (Makunga 2015); however, they did acknowledge the value of support groups.

Landsberg *et al.* (2005: p. 225) aver that parents may foster a lack of discipline in their children, as, on occasion, they interfere with the teachers' attempts at discipline, and refuse to allow their children to be punished. It is important for parents to contribute in the way their children are educated; however, they should trust that most teachers are trained and skilled to execute their duties. Often parents perceive their role as peripheral to the school environment, when dealing with the lack of discipline in schools. This causes a rift between the role of the educator, and the role of the parents, which, in turn, influences the behaviour of the learners (Landsberg *et al.*, 2005). Therefore, what could have been a joint approach, between the educators and the caregivers, to address learner behaviour, is ruined by this rift (Kruger & Nel, 2005, cited in Landsberg *et al.*, 2005: p. 451). The researcher observed that the following sub-theme emerged from a lack of communication between the parents, school, and learners, as was describe above.

5.4.2.2. Sub-theme 2.2: Children are referred by school teacher to High Five without their parents' consent.

Using literature to substantiate the previously presented sub-themes and direct quotations from the participants, Landsberg *et al.* (2005: pp. 223, 225) highlight that the logical differences between families' and schools' responsibilities, and therefore, their different perspectives about their responsibilities, have the potential of causing communication difficulties and misunderstandings. Although diversity is an asset in an inclusive community, linguistic and cultural differences can create communication problems, as well as be the reason that some parents feel inept and unwelcome at schools. These differences often lead to distrust and distance between families and schools (Landsberg *et al.*, 2005).

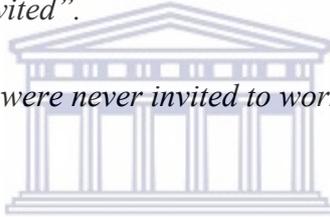
Children often enter the school grounds on their own, and consequently, teachers and parents have scant face-to-face contact. Working with families requires extra time and energy; therefore, without the necessary resources and support of the school system, this could become a burden to the teachers. The traditional *one-shot* back to school parent evenings, at the beginning of the year, and the occasional school functions, are barely sufficient to form a relationship with families. Most teachers would like to involve parents, but many do not know how to, and therefore, are afraid to take action. Teachers receive limited, if any, training in how to work with parents and the community (Landsberg *et al.*, 2005).

In substantiating this sub-theme, the following direct quotations from the participants refer, as parents expressed:

“Do not know why he is involved in the High Five Program.”

“I was never invited”.

“As parents we were never invited to workshops.”



Landsberg *et al.* (2005: p. 214), as well as Makunga (2015), highlight that the three contexts (family, school and community), and the interconnections between them, are important influences in children’s lives. Landsberg *et al.* (2005: pp. 215, 216, 217) emphasise that schools influence families, families influence schools, and both affect, and are affected by the communities in which they are located. This is confirmed by the Joyce Epstein’s theory of overlapping spheres of influence that emphasise the importance of the family-school relationship, as well as the mutual responsibility for the children’s learning and development (Epstein 2001). More effective communication between schools and families benefits all parties, and therefore, can be regarded as social capital (Epstein 2001; Epstein *et al.*, 2002).

Walsh (2003: p. 375) asserts that, to understand how people evolve, their lives should be examined within the context of both the family, as well as the larger cultural context, change over time, according to the family life cycle. Families comprise persons, who have a shared history and future. People are born into

families. They develop, grow and, ultimately, die in the context of their families. The family life cycle is the natural context, within which to frame individual identity and development, as well as account for the effects of the social system (Carter & McGoldrick, 1999). Children referred to High Five Programme must be perceived as part of a system, the family, who have relationships with parents, siblings and other family members, going through transitions, while moving along their life cycles. Open and consistent communication, therefore, always would be helpful to contribute towards an effective partnership between parents and the school community.

5.4.3. Main theme 3: Lack of role modelling of/by parents/caregivers

The family is the most immediate, and perhaps, the most influential system affecting the individual (Walsh & Williams, 1997: xi). The lack of parental guidance and dysfunctional families are continually emphasised as risk factors. Rayment (2006: pp. 31-32) observed that certain parents displayed violent and aggressive behaviour towards school staff, and that their children also displayed signs of violent, aggressive and anti-social behaviour. In addition, the findings of Rayment's (2006) study revealed that 10% of the participants often witnessed their parents arguing verbally or physically fighting. It stands to reason that, if children are exposed to aggressive displays between the adult partners, who are their role models at home, they will carry these experiences with them into the school. Wolhuter and Oosthuizen (2003: p. 454) assert that from a learner's perspective, the lack of parent involvement is the leading cause of disciplinary problems. Carter & McGoldrick (1999) assert that families with adolescents must establish qualitatively different boundaries, than families with younger children. The boundaries must be permeable, as parents can no longer maintain complete authority. Adolescents can, and do open the family to a whole array of new values, as they bring friends and new ideas into the family arena. Families that become derailed at this stage, may be rather closed to new values, and threatened by them, frequently stuck in an earlier view of their children (Carter & McGoldrick, 1999). Walsh (2003: p. 390) emphasises that, at this stage, parents may not realise how much their teenagers need them to communicate information about adult life, to help them to make more informed choices, regarding their education and relationships. The children will identify the negative behaviours of their parents that they are not happy with, and will want them to change. They will challenge their parents' behaviour and values.

There are various home experiences that influence children's behaviour. If parents spend an insufficient amount of time at home, children may seek unsuitable social experiences elsewhere, often with devastating consequences (Edwards & Alldred, 2000). Even when parents are at home, the parent-child relationships may be characterised by conflict, which may be extended to school. Factors, such as divorce, poverty, physical and mental abuse could affect the ability of the children to function properly. The aspects relating to the dysfunctional families include, damage to self-concept, attention deprivation, love deprivation, excessive control, and the socio-economic background (Edwards & Alldred, 2000: p. 5). The following sub-theme was identified under this main theme:

5.4.3.1. Sub-theme 3.1: Caregivers' own negative behaviour that cause them to withdraw, has been identified as a barrier that hinders their involvement.

Of particular interest was the manner in which the participants, specifically the parents, were open and honest about their lack of involvement with their children. However, Bezuidenhout (2008:p. 137) states that children model their behaviour on that of their parents. Parents, who are heavy drinkers, act as role models for their children, who, in turn, become heavy drinkers. In their research, Wolin, Bennett, Noonan and Teitelbaum (1980) assert that the children of alcoholics are more likely to become alcoholics themselves. Lerner and Spanier (1980, cited in Bezuidenhout, 2008: p. 101) observed that adolescents, who have no adequate role models, or who adopt role models that encourage delinquency, are likely candidates for involvement in delinquent behaviour.

Arthur Choga's (2011) book (The rise and rise of Mudavanhu) emphasises the lessons he took from his early childhood, and the value of family, as well as social support structures. Armed with the basic educational qualifications and a dream, he has carved a niche in Zimbabwe's education and construction industry and is poised to grow bigger. According to Choga, his family used to grow cotton and his siblings and he spent early morning in the fields, before running off to school, where they were instructed under trees. He also recalls, when he was tired and

simply needed to sit down, his mother would remind him that if he wanted to go to school and be someone, he needed to get up and work (Choga, 2011).

In a focus group discussion, two grandparents supported the fact that caregivers behaviour contribute to their lack of involvement, as the following extracts convey:

“Parents must be more involved. Many do not have time for their children. There are many parents that drink...”

“The father, now in prison, smuggled with cannabis and he and the mother had many fights. Willy, his son, was smacked many times.”

“Some parents abuse alcohol and do not care about their children.”

“Our parents are different. They embarrass you and scold in front of your friends. It makes me very cross.”

In a focus group discussion, a son expressed the following about his father:

“I will be happy if my father can attend meetings so that he can stop the dagga. He must also change.”

A teacher said the following:

“Parents want to be friends with their children since they do not like to be in conflict with them; they can’t handle it.”

The findings of a study conducted by Donald *et al.* (2010: p. 163) reveal that research has pointed, specifically, to the significant role-modelling that teachers, elders and others, who hold positions of social responsibility in a specific social context, can play. These are people who, in accepting and encouraging relationships with children, can act as mentors, counsellors and role models to them, and have a positive influence on their self-concept, identity and goals (Donald *et al.*, 2010). Louw *et al.* (1998: pp. 281, 282) confirm that caregivers are powerful models. Caregivers, therefore, should ensure that their own interaction styles are not aggressive, as children appear to act towards others, as their caregivers act towards each other and them.

Donald, Lazarus and Lolwana (2010: pp. 197, 198) state that “in any wider community, particular values and practices may be seen as more important than others.” Many of these values and practices may have positive effects on child development, while others may contribute to social problems. The values and practices that a school upholds are equally important. Children are strongly influenced by the models they observe around them. In South Africa, there are many schools where positive values and practices are upheld. However, there are still some schools, where drunkenness occurs among staff, where teachers initiate sexual relationships with their students, where violence is modelled through corporal punishment, and where race, gender and other forms of discrimination regularly occur. In such circumstances, social problems may be directly modelled on such values, as well as those kinds of behaviour (Donald *et al.*, 2010: pp. 197, 198).

5.4.4. Main theme 4: Poor relationships between children and caregivers

This theme emerged from the responses to the following question: How would you describe your relationship with your child?? During the process of data analysis, the researcher identified the following two sub-themes: Absent fathers; and Lack of emotional bond between parents and children.

5.4.4.1. Sub-theme 4.1: Absent fathers PE

The Department of Social Development’s Fatherhood Strategy (RSA, DSD, 2013b) assert that South Africa has a high rate of absent fathers, with only one-third of pre-school children living at home with both their parents. A major issue for men across the world is separation from their children through, either the relatively common breakdown of relationships, or paternal imprisonment. Despite relationship fragility, or discord, more fathers are attempting to sustain relationships with their non-residential children, and may need support when they are met with difficulty in fulfilling their aspirations in this regard (RSA, DSD, 2013b).

Alongside older fathers, young fathers have frequently been portrayed in media as unwilling to take responsibility for their children. In contrast, a recent research study revealed that many young fathers want to be active parents, and have strong

senses of responsibility towards their children (Swartz, Bhana, Richter & Versveld, 2013). However, they are confronted with numerous barriers to fulfilling their parenting roles. The development of the Department of Social Development's Fatherhood Strategy (RSA, DSD, 2013b) is, therefore, timeous and will provide an opportunity for provinces and civil society organizations to address challenges facing fathers in South Africa.

The absenteeism of fathers featured very prominent in this current research, as is obvious from the biographical data. To substantiate this sub-theme, the following direct quotations from the participants refer:

The voices of the mothers:

"No relationship with his father"

"There are many children whose fathers are in prison..."

"...I expects his father to be more involved in his life."

The comments of the children:

"I was a problem for the teachers and my father. It felt as if they don't care for me"

"I think the parents do not want to go with us on camps etc....I do not want parents to go with. It is better for me to be alone."

A comment of one of the teachers:

"Our parents of today do not have meaningful relationships or loving emotional bonds with their children."

The Fatherhood Strategy (RSA, DSD, 2013b: p. 6) states that being an active, involved father, who takes responsibility, is not easy; however, many young men reported various financial, cultural and relational obstacles that they have experienced, in relation to fatherhood. Being able to take responsibility for, as well as financially support a child, are often regarded as synonymous with financial provision, which often overshadows other aspects of fatherhood, such as contact

time, physical care and emotional support ((RSA, DSD, 2013b). The disintegration of family life causes a lack of love, acceptance, care, interpersonal communication and belongingness. Children are traumatised to such extents that, not only are their cognitive development and learning ability negatively influenced, but also their physical, social and normative development. Under such circumstances there is little hope for the fulfilment of esteem needs, such as respect, recognition and self-esteem (RSA, DSD, 2013b).

The Fatherhood Strategy (RSA, DSD, 2013b: p. 6) further states, “Although, the presence of a father in a child’s life does not necessarily lead to positive outcomes, research has shown that generally father absence is associated with negative outcomes for children and women”. Peacock, Redpath, Weston, Evans, Daub and Greig (2008) refer to studies in Central America and the United States, in which it was observed that paternal abandonment or neglect could result in poor educational performance and school dropout (including early entry into the labour market to help families financially), teen pregnancy, as well as drug and alcohol abuse. Children’s psychological, social and cognitive development have also been hampered by paternal abandonment, as well as a lack of emotional and material support (Peacock *et al.*, 2008).

A father’s physical presence alone, however, is not necessarily a desirable outcome in itself. Fatherhood goes beyond a father’s mere physical presence because “a father might well be physically present, but emotionally absent, or physically absent but emotionally supportive” (Richter & Morrell, 2006: p. 18). Father presence can also be negative in some cases, as is the case when it is characterized by abusive conduct (Richter & Morrell, 2006: p. 18). The presence of responsible, caring and supportive fathers, however, can have hugely positive effects on children, families and society; therefore, the high numbers of physically absent fathers is an obstacle to the achievement of broader father involvement. Fatherhood is generally understood as “the social role that men undertake to care for their children” (Richter & Morrell, 2006: p. 18), referring to physical and emotional presence in a child’s life.

5.4.4.2. Sub-theme 4.2: Lack of emotional bond between caregivers and children

Venter and Rambau (2011: p. 349) confirm that healthy relationships start at home. When the environment is conducive to healthy development, the atmosphere is pleasant, and parents offer support, love, comfort and security. According to Bezuidenhout (2008: p. 100), “Travis Hirchi’s theory holds that most people stay out of trouble because they are bonded to society’s norms through their affiliations with, for example, the family. The significance of the bond is that it has the power to shape pro-social behaviour. Based on the strength of the parent-child relationship, children are therefore likely to refrain from doing acts that upset their caregivers more than anyone else”. The following quotes from the participants support this sub-theme:

A teacher said the following:

“Our parents of today do not have meaningful relationships or loving emotional bonds with their children.”

A parent acknowledged, in the following extract, that she and her son do not spend time together.

“He, the son is very quiet. He is not at home a lot.....only come eat and sleep at home.”

A child said:

“Always when I came home, I was rude with my father. I hated my father”

Glueck (1959: pp. 136-137) observed that delinquents were victims of indifference, or actual hostility, from their fathers and mothers, and therefore, were less attached to their parents. Not only did they receive less affection from their parents, they also received less warmth from their siblings. This emotional deprivation was further reflected in a perception by delinquent boys that their parents were not concerned about their welfare.

5.4.5. Main theme 5: Parenting skills and support networks

This theme emerged from the responses to the following question: What support, or help, could the programme offer you as a caregiver? During the process of data analysis, the researcher identified the following three sub-themes: Caregivers need information and support on parenting; Involvement of fathers in parenting skills workshops; and, Caregivers need the support of other parents, who share the same experiences.

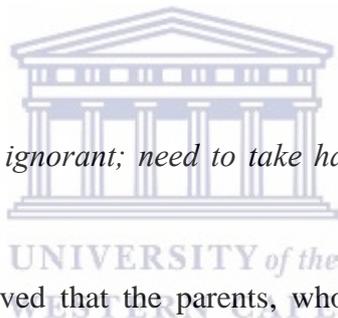
5.4.5.1. Sub-theme 5.1: Caregivers need information and support on parenting

The following interesting comments were submitted by the various participants. One parent expressed:

“We need information and support how to work with the children at home.”

Another parent said:

“...sometimes ignorant; need to take hands and learn how to deal with children.”



The researcher observed that the parents, who participated in the focus group discussion, were visibly relieved, when they realized that other parents experienced the same feelings and problems that they did. The parents (mothers), who participated in the one-to-one interviews expressed similar sentiments about the need for information and support. However, Turner, Markie-Dadds and Sanders (1997) assert that parenting interventions should empower families. Interventions should aim to enhance individual competencies, as well as the family’s ability, as a unit, to solve problems for themselves. Over time, in most instances, families will have a lesser need of support. Parenting interventions should build on existing strengths, as successful interventions build on the existing competencies of the family members. It is assumed that individuals are capable of becoming active problem solvers, even though their previous attempts to resolve problems may have been unsuccessful, most likely due to the lack of essential knowledge, skills, or motivation (Turner, Markie-Dadds & Sanders, 1997).

Turner, Markie-Dadds and Sanders (1997) state that the task of supporting parents is usefully conceived of as a process, which begins with pregnancy and continues until the child leaves home, and becomes a fully independent adult. Parenting support needs to be viewed on a continuum, whereby the informational needs of parents change, as a function of the parents' experience, and the child's developmental level changes. In addition, the strength, or intensity, of the intervention that families require, may change as a function of life transitions (separation, divorce, re-partnering, illness, loss, trauma, or financial hardship). A universal parenthood programme requires greater flexibility, in terms of how they are offered to parents. However, little progress is expected, until parenthood preparation is red as a shared community responsibility (Turner, Markie-Dadds & Sanders, 1997).

Some parents require and seek more support with managing their children, than simply having access to information (Turner, Markie-Dadds & Sanders, 2003). The Triple P-Positive Parenting Programme provides a clear guide to parents on how to deal with their children's challenges. This involves educating parents in their role as their child's first teacher (Turner, Markie-Dadds & Sanders, 2003). The specific prescribed skills are as follow:

1. Self-sufficiency
2. Parental self-efficacy
3. Self-management
4. Personal agency

One of the caregivers expressed the following:

"It can help the father to learn more about parenting."

Walsh (2003: p. 387) states that, in many ways, the traditional family has often, not only encouraged, but also displayed dysfunctional patterns, such as the over-responsibility of mothers for their children, and the complacent under-involvement of fathers. For a child's complete identity and development, a shift in society is required to value, support and reinforce the active inclusion of fathers, as well as

appreciate the contributions of siblings, extended family members and other caregivers, as support, resources, models and mentors. Fathers, who lack experience, need to learn these skills. Often, this requires time alone with the children, for husbands to take primary responsibility, and for mothers to let go of the responsibility. Mothers may need assistance in allowing fathers to make mistakes, giving them the opportunity to construct and discover their relationship. In the adolescent phase, fathers may need help to overcome inhibitions, relating to both sons and daughters, emotionally. The unavailability of fathers for their daughters may lead daughters to develop an image of the male as a romantic stranger, an unrealistic image that cannot be met, when they reach adult life. The unavailability of fathers for their sons may leave sons confused about their identity and have them questioning their masculinity (Walsh, 2003).

According to Walsh (2003: p. 122), single-parent mothers often assume that they have failed at what, traditionally, is perceived as any woman's prime mission, which is, holding on to her partner and maintaining a nuclear family unit; an assumption often reinforced by negative feedback from family and friends. The impact of this personal and social baggage is a backdrop for both never-married and divorced parents, as they enter single parenthood, taking on the constant, primary responsibility. All these factors (namely, parental social or psychological characteristics, the reasons and pathways to single parenthood), contribute to the level of life satisfaction of single parents and their ability to parent. In addition, they influence the psychological health and development of their children.

5.4.5.2. Sub-theme 5.2: Involvement of fathers in parenting skills workshops

This sub-theme also emerged from the responses to the following question: What support or help can the programme offer you as a parent? In the focus group discussion, the caregivers responded that they wanted the fathers to be more involved in their children's lives, as well as be involved in parenting skills training, for them to grow and develop in their role as a parent, be it couple or single parent. One of the guiding principles in the DSD Fatherhood Strategy (RSA, DSD, 2013b) is normalization, meaning that fathers should be exposed to activities and opportunities, which promote participation in their children's lives, as well as the development of their role as a father. The Fatherhood Strategy (RSA, DSD, 2013b)

emphasises the issue of family violence, as many boys and girls endure corporal punishment from fathers and mothers. Educating through dialogue, setting limits without using violence and teaching fathers and mothers the non-violent child rearing skills, are key to breaking the cycle of family violence. The Fatherhood Strategy (RSA, DSD, 2013b: p. 30) also highlights the purpose of conflict resolution, “Fathers or husbands/partners require the ability to deal with partner conflict in a constructive manner. Conflict is not bad in a relationship, as it is often essential to resolve issues, grievances or injustices. Couples, who raise issues with one another constructively, compromise and forgive one another, have happier relationships and happier children.”

5.4.5.3. Sub-theme 5.3: Caregivers need the support of other parents, who share the same experiences

This sub-theme also emerged during the data analysis. One of the caregiver voiced the following comment at a focus group, while other caregivers agreed:

“We can come together like tonight and talk.”

The Bernard van Leer Foundation (Kernan, 2012: p. 22) emphasise that a strong parent community is viewed as a means of support for, not only the upbringing and education of children, but also social cohesion. Regarding stimulating the (informal) parent community, it is advised that the responsibility for parent-to-parent initiatives remain with parents, but that schools could be motivated to play a supportive role in initiating and ensuring the sustainability of these networks or groups. To establish *real partnership*, greater attention should be paid to developing the conditions for meaningful partnership, namely, structure, culture, willingness and skills. The responsibility for this *developmental work* rests largely with schools and parents, and not with government or municipalities.

5.4.6. Main theme 6: Lack of support networks and resources

This theme emerged from the responses to the following question: What would you say makes it difficult for you, as a caregiver, to be involve in the High Five Programme activities your child participates in? The following four sub-themes were identified under this theme: Caregivers work long hours, and lack spending quality time with their children; Caregivers have no one to care for their younger children during meetings; Too

many responsibilities outside of the home; and, Caregivers stay far from the meeting venues, and walking to and from is unsafe.

5.4.6.1. Sub-theme 6.1: Caregivers work long hours, and lack spending quality time with their children

In this current study 50% of the parents were single parents, and in the low income economic group. Walsh (2003: p. 123) avers that, frequently, financial hardship is observed to be the most significant challenge. Many low-income single parents live competently on the edge of crisis, *keeping the balls in the air*, but acutely aware that some emergency need for additional funds, some break in routine, could push a carefully organised, but marginal system, over the edge, into chaos. The parents expressed the following comments about not being involved with their children, due to their jobs and their working hours:

“I will say the parents must get more involved because many parents do not have time for their children.”

“Sometimes parents work long hours.”

“It is difficult for me, since I char for the manager of Transnet and I can’t leave him...”

“You can have the programme later, since parents have other things to do.”

“Some parents come late from work...”

A child stated the following:

“I think if there is transport available for parents, all will be well.”

Another child said:

“I know my father will not come, he works. It is only my grandmother that takes care of me.”

A caregiver articulated the following:

“My programme is full. The father must be more involved in his child’s life.”

In South Africa, problems, such as poverty, the lack of education, as well as economic difficulties, are some of the many factors that could influence parental assistance and involvement. Additionally, most children are exhausted by the time their parents arrive home, and the parents, who have to supervise homework, or spend quality time with their children, after a long and busy work day, may be less efficient, interested, or patient with their children. The results revealed that most of the parents perform manual, low skilled, and low paid work, and would, probably, be tired by the time they arrived back home; therefore, they may have very little inclination, or energy, to attend to schoolwork, let alone spend quality time with their children.

5.4.6.2. Sub-theme 6.2: Caregivers have no one to care for their younger children during meetings

Another noteworthy finding of this study is that caregivers do not have anyone to care for their children during meeting times. One mother expressed the following:

“I work shifts and have a small baby. During the meetings/workshops there is no one to take care of the baby.”

This finding is an indication that single-parent households, families ridden by poverty, without the support of the extended family, or any kind of caregiver are the order of the day (Landsberg *et al.*, 2005: p. 33). Venter and Rambau (2011: pp. 346, 349) assert that self-care is one of the options used by parents in need of after-care for their children. According to Berk (2007: p. 587), the option of self-care refers to those children who have to care for themselves, while their parents are at work, and are regularly left unattended. Leaving children alone at home, could be very risky for children living in low income, dangerous or disadvantaged environments.

These findings indicated that the availability of childcare services for younger children, during meetings or workshops, would address this barrier of parent

involvement. It was evident that some of the parents in this study were not connected, or supported by an extended family, neighbours or friends, who could share parenting responsibilities, such as taking care of a younger child during meetings. Working with families demands a better understanding of their context and the challenges they experience.

5.4.6.3. *Sub-theme 6.3: Too many other responsibilities outside of the home*

The participants (child and caregivers) stated that involvement in the church and church meetings makes it difficult for caregivers to be involved in the High Five Programme activities. A child disclosed the following:

“When my mother comes from work, she must go to church.”

A mother said:

“For me it is difficult since I am a leader at church.....during the week I am not available and during the evening we have meetings.”

For the researcher, regarding this finding, it appears that the caregivers prefer, or choose involvement in other activities, such as the church activities, over activities that could address the development needs of their children. According to Topor (2010), parents who perceive that they are less able to contribute to their child's education, effectively, are more likely to refrain from participating in such activities. Parents are more likely to be involved if they believed that their actions would improve their children's learning and academic performance. It has been established that parent efficacy, required to help children succeed in school, predicts home- and school-based involvement (Green, Walker, Hoover-Dempsey & Sandler, 2007; Walker, Wilkins, Dallaire, Sandler & Hoover-Dempsey, 2005). Parent efficacy, regarding a child's education, incorporates the degree to which parents believe they can exert a positive impact on their children's learning (Hoover-Dempsey & Sandler, 1997). This is an important matter for the children, as one child suggested that High Five write a letter to the church leader, to ask permission for his caregiver to be allowed to attend the High Five meetings.

5.4.6.4. Sub-theme 6.4: Caregivers stay far from the meeting venues, and walking to and from is unsafe.

The participants (parents and children) articulated that transport was a requisite for parents to be involved in the High Five Programme activities. The parents/caregivers resided long distances from the meeting venues, and were too old to walk, while another child disclosed that they were sick, and tired quickly. Therefore, transport problems, limited the opportunities to meet, and contributed to the difficulties in establishing partnerships between educators and caregivers, as well as caregivers and High Five staff (Landsberg *et al.*, 2005). Most caregivers resided in communities with high levels of criminal activity, including drug abuse and gangsterism. The caregivers suggested meeting at a venue where they would be safe, for example, the home of a caregiver in the community, near to their homes. In addition, they expressed that it would be helpful if, in future, they could support each other in this manner, specifically, in small groups to support and listen to each other. This finding that emerged from the study highlighted a lack of logistic support for the caregivers of the participants.

In response to the question: What would you say makes it difficult for you, as a parent, to be involved in the High Five Programme activities your child participates in, the following comments were made:

A mother expressed:

“Transport will help; I can’t walk in the sun due to illness.”

Another parent added:

“I will attend the workshops and meetings when there is transport available.”

A child suggested:

“Organise transport for the parents that really want to come.”

Another child disclosed:

“My grandmother will also come, but she is too old to walk so far.”

Family circumstances can be major barriers to parent involvement. Parents' work circumstances could also be a factor. When parents are unemployed, the availability of money could be an issue, as they may not be able to afford to purchase and operate their own a vehicle, or pay for public transport, in order to get to the meetings.

5.5. Chapter Summary

In this chapter, the researcher presented the research findings. In order to achieve the goal and objectives of this research, as described in Chapter 1, 30 children, 19 parents and 4 teachers were involved in focus group discussions and face-to-face interviews. The perceptions and experiences of the participants were recorded, documented and analysed. Firstly, the researcher provided the demographic data of participants (the children of the High Five Programme and their parents), in order to orientate the reader to the study. Secondly, the researcher collected the data and, subsequently, transcribed, coded, categorised it into topics, and finally presented it as themes and sub-themes. Thirdly, an overview of the six themes (barriers), with related sub-themes, which emerged during the data analysis processes, were presented. Fourthly, the story lines were quoted and compared with relevant literature. The findings of this current study concur with those of other research studies, as discussed in the literature review. The findings revealed the presence of barriers that hinder parent involvement, as well as the parents' need of support and assistance, to facilitate their productive involvement in their children's education and development.

In the following chapter, the conclusions and recommendations are presented, based on the research findings, as well as the research process

CHAPTER SIX

SUMMARY, CONCLUSION AND RECOMMENDATIONS

6.1. Introduction

The aim of this current study was to explore the factors that hinder parents' involvement in the High Five Programme for children at risk. In this chapter, the researcher provides a brief summary of the research findings, followed by the conclusions, as well as recommendations, arising from the qualitative research methodology that guided the study. In addition, the conceptual framework will be applied in the discussion of the study.

The findings of this current study determined that caregivers and families experience barriers to parent involvement. The Family Life Cycle Approach (Carter & McGoldrick, 1989) maintains that family life is changing continually, and moves through various stages over time. In all these stages, problems are most likely to appear, if certain tasks are not completed successfully. Therefore, families become perplexed, and have difficulty moving to the next stage, or prioritising their parental responsibilities.

Although the vast majority of caregivers want their children to be successful at school, many caregivers do not know how to assist their children, in ways that improve school and behavioural performance (Epstein, 2001). Both at home and at school, parental involvement in education is associated with improvements in school behaviour, social competency and school performance (Hill, 2003). Although the positive impact of parent-school involvement on achievement is well documented, the mechanisms through which the process moves, are not well understood by caregivers.

In this current study, it was determined that the High Five Programme lacked the integration of parent involvement strategies and mechanisms into the services offered to their participants. It was suggested that, since the organisation works with children, a holistic approach to strengthen the whole family or household, should be followed. As stated by Bronfenbrenner (1998), the development of the child and the family unit is embedded in the broader meso-system, consisting of peers, extended family, educators, neighbours, and close personal acquaintances, with whom the child actively interacts.

This is an opportunity for High Five to review and change its programme strategies and plans, from a child focussed (micro system), to a family focussed approach (mesosystem), creating barrier-less, parent-friendly strategies and opportunities for parents to be involved, based on the following findings and recommendations from this current study.

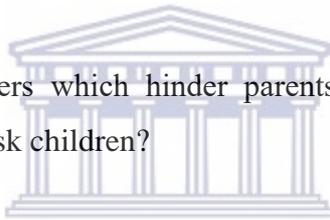
6.2. Summary

In this section, the researcher discusses the summary of the research process and methodology utilised for this current study. In addition, the researcher highlights the conclusions drawn during the various phases of the process. The specific recommendations regarding the methodology that was implemented are also presented.

6.2.1. Summary relating to the qualitative research process

In order to explore the phenomenon of poor parent involvement in the High Five Programme, the researcher formulated the following research question for the purpose of the study:

- What are the barriers which hinder parents' involvement in the High Five Programme for at risk children?



The following goal was set by the researcher to provide a framework for this research:

- The aim of the research was to explore and describe the barriers that hinder parent involvement in the High Five Programme for at risk children.

The researcher achieved the following research objectives:

- Effectively explored and described the factors that hinder parent involvement in the High Five Programme for at-risk children, as experienced by the children.
- Explored and described the factors that hinder parent involvement in the High Five Programme for at-risk children, as experienced by the parents.
- Explored the needs of the parents to improve their involvement in the development of their children.
- Explored the gaps in the High Five Programme activities and strategies that hinder parent involvement.

In order to reach the research goal, the following task objectives were attained:

- Semi-structured one-to-one interviews and focus group discussions were conducted with a sample of children in the High Five Programme and their parents, to explore and describe the barriers that hinder the parents' involvement.
- The researcher conducted interviews with the teachers, who referred the children to the High Five Programme, and explored how, as well as why, they were referred to the High Five Programme.
- The researcher attended parent and child workshops and observed the interaction between children and their parents.
- Ultimately, the researcher analysed the data gathered, according to the eight steps proposed by Creswell (1998, cited in De Vos *et al.*, 2005).

As the researcher sought to explore and describe the barriers that hinder parent involvement in the High Five Programme for at risk children, qualitative research was employed for the purpose of the study. It was relevant for the researcher to employ an explorative and descriptive research design, as an empirical study, using primary data. The researcher included the explorative strategy of inquiry to initiate a process of building knowledge about the factors that hinder parent involvement in the High Five Programme. The researcher wanted to hear, particularly from the parents, why they were not involved, as well as what hindered their involvement.

In this research endeavour, a non-probability sampling method was employed, since the sampling was done without randomization. The researcher collected data from all available and accessible children in the programme, as well as their parents, between October 2012 and May 2013, which provided in-depth knowledge, and a rich representation of the phenomenon, parent involvement, in the programme. Data were collected by means of semi-structured interviews and focus group discussions from both the parents and their children, as well as the relevant teachers, who informed the study. The semi-structured interviews allowed the researcher to gain insight into the research participants' perceptions of, beliefs about, and experiences with, the phenomenon under study. The interviews were documented and recorded, while the participants were assured confidentiality. Home visits allowed the researcher to gain insight into the home

environments of the families and children. It was strategic of the researcher to conduct home-visits with parents, who did not attend the focus group discussions, for f2f interviews, to obtain their input on, and views of the phenomenon under study.

6.2.2. Conclusions relating to the qualitative research process

The researcher arrived at the conclusion that the qualitative research approach adopted for this current study proved to be effective, as it allowed the researcher to gain an in-depth understanding of the participants' perceptions, expectations, fears, needs, as well as the value they attached to the High Five Programme. The use of the qualitative approach, with an exploratory and descriptive design, provided rich data, which afforded the researcher the opportunity to explore and describe the barriers that hinder parents' involvement in the High Five Programme for at risk children. Therefore, the researcher is of the opinion that the research question was answered. The findings indicated that semi-structured interviews, observations, home visits, and focus group discussions indeed allowed the participants to freely express their experiences and opinions, which the researcher was able to record. The research process helped the researcher to understand the parents, as well as the social and cultural contexts, in which they live.

6.2.3. Recommendations relating to the qualitative research process

The researcher recommends the use of semi-structured interviews and focus group discussions to researchers, who aim to obtain rich information about a topic under investigation. The use of focus group discussions allowed the parents to gain confidence to share their experiences. When they realised that others shared the same challenges as they did, it gave them a voice, as well as a safe platform to air their views. The home visits to the parents, to do the interviews, also enabled the researcher to understand the participants' world, as well as the meaning they attached to it.

It is recommended that qualitative researchers, when conducting qualitative studies, create an enabling environment for the participants to share accurate information about their life experiences. The researcher also recommends observation as a method of obtaining information that might not be shared during interviews or focus groups.

6.3. Conclusions pertaining to the research findings

The conclusions and recommendations of the research findings are presented according to the six themes that emerged during the data analysis process.

6.3.1. Summary of the research findings

The data from the semi-structured interviews and focus group discussions were categorised into six main themes, with accompanying sub-themes, which were summarised, and the conclusions, as well as recommendations arrived at on a particular theme, are presented in this section.

6.3.1.1. Theme/Barrier 1: Low self-esteem of parents and children, as a barrier that hinders parent involvement

- Children referred to the programme have low self-esteem.
- Caregivers lack self-esteem and think they do not have a voice, or opinion.

This theme highlighted that not only do the children have low self-esteem, but also their parents. The caregivers assumed that they do not have a voice, or opinion. The researcher observed that, during the interviews, the children were more confident in expressing and sharing their views and opinions, while many parents presumed that they had no say, or voice. One of the significant findings of this current study, was the fact that the parents also suffer low self-esteem, and are in need of care and support, through life skills programmes, to improve and strengthen their self-esteem and self-worth. Both children and parents have the need to belong and feel valuable. It is possible that low self-esteem is generational, and transferred from the parents to their children (Carter & McGoldrick, 1989). Murray Bowen (1978) tracks patterns through the family life cycle, over several generations, focusing on transition points, to understand dysfunction at the present moment. There is the strong implication that emotional issues and developmental tasks, not resolved at the appropriate stages, will be carried along as hindrances in future transitions and relationships (Carter & McGoldrick, 1999; Walsh, 2003: p. 381).

This current research study revealed that the High Five participants presented with low self-belief and self-knowledge; therefore, they could be influenced easily to

become involved in negative behaviour, to be accepted by a group, or a friend. The findings revealed that 30% of the participants were reared by single parents, with a disintegrated family life, which probably caused a lack of love, acceptance, care, interpersonal communication and belongingness. Under such circumstances there is little hope for the fulfilment of esteem needs, such as respect, recognition and self-esteem (Hoover-Dempsey & Sandler, 1995). Low baseline self-esteem is perceived as a risk factor for uninvolved parents, and children with high risk behaviour. Hoover-Dempsey and Sandler (1997) highlight that parents with a low level of belief in their ability to help their children, are likely to avoid contact with schools, because of their assume that such involvement would not produce positive outcomes for their children.

The researcher was mindful of the fact that many of the parents, who participated in this current study, displayed hints of humiliation, worthlessness and hopelessness. These displays of low self-esteem and vulnerability were observed by the researcher, when conducting the home visits and interviews with the parents. In addition, the researcher was aware that many of the parents were summoned to the school, because of their children's negative behaviour.

6.3.1.2. *Theme/Barrier 2: Meso System: Lack of Communications between all relevant parties*

- Lack of communication between parents, teachers and High Five staff
- Children are referred by school teacher to High Five without parents' consent

The participants highlighted several factors, which they perceived were contributing to the poor communication between parents and children, parents and teachers, as well as parents and High Five staff. The parents complained that the school referred their children to an external programme, High Five, without their consent, or any communication. In addition, they asserted that the High Five staff did not invite them to any workshops, or parent meetings. One child participant alleged that the children do not always deliver the letters to their parents, and consequently, they would not be informed of meetings, or workshops. These

communication gaps often led to distrust and distance between families and the schools.

One of the significant findings that emerged from this current study was the lack of good communication between the different parties, which was a certain barrier to parent involvement in child development. The findings indicated that some caregivers were not involved in the development of their children, due to the lack of communication and no face-to-face contact between the relevant parties. The caregivers asserted that they did not know why their children were in the programme, and did not have any knowledge of the High Five Programme. This finding indicated a disconnection between the role of the educators, and the role of the caregivers, which influenced the development of the learners. Therefore, a link between both parties (educators and caregivers) was urgently required, to provide a joint approach in addressing learner behaviour (Landsberg *et al.*, 2005: p. 451).

Landsberg *et al.* (2005: p. 225) assert that it is important for parents to be involved in the way their children are taught; however, they should trust that most teachers are suitably trained and skilled to teach. The findings have revealed that the three contexts, namely, family, school and community, as well as the interconnections between them, are lacking, with no influences on the lives of the children. Landsberg *et al.* (2005: pp. 215, 216, 217) emphasise that schools influence families, families influence schools, and both affect, and are affected by, the communities in which they are located.

Therefore, the researcher is of the opinion that it is important to view the family, and its members, against its Life Cycle development, and interpret their behaviour in that context. Improved communication and contact is required to view parent's involvement against their own development and environment, throughout their life, as suggested by Hutchison (2001).

The findings indicated that there was scant face-to-face contact between the caregivers and the teachers, as well as the caregivers and High Five staff. This finding is an indication that working with families requires extra time and energy, as well as face-to-face contact. The traditional *one-shot home visit*, or sending a

letter with the child, is barely sufficient to form a relationship with families. This could suggest that High Five staff and teachers are eager to involve caregivers, but are unsure how to. Besides, the High Five staff received limited, if any training on how to work with caregivers and families.

6.3.1.3. Theme/Barrier 3: Meso System: Lack of Role modelling of/by parents/caregivers – as a reason for not being involved

- Caregivers' own negative behaviour that cause them to withdraw, has been identified as a barrier that hinders their involvement.

The children highlighted the negative behaviours of caregivers regarding alcohol and drug abuse, not caring for their children, and being absent in their lives. The findings revealed that the children were unhappy with their caregivers' behaviour and wished for them to change. They were challenging their caregivers' behaviour and values. Wolhuter and Oosthuizen (2003: p. 454) assert that, from a learner's perspective, the lack of parent involvement was the leading cause of disciplinary problems.

The findings of this current research study revealed that the caregivers' own negative behaviour caused them to withdraw from parent involvement. However, during the interviews, the caregivers were open and honest about their lack of involvement with their children. The findings revealed that the caregivers of the children may not have realised how much their teenagers needed them to communicate information about adult life, to assist them with making more informed choices, regarding their education and relationships. The findings also highlighted that caregivers do not spend enough quality time with their children, while the children were eager to spend more time with them.

The findings could be an indication that the children modelled their high risk behaviour on that of their caregivers, who are their primary role models. Therefore, caregivers should ensure that their own interaction styles are not aggressive, as the children appeared to interact with others, as their caregivers interact with them. According to Maduvanhu and Schenck (2014), the Ecological Systems Theory maintains that an environment and its immediate settings, actively shape the

outcome of an individual's life. People do not live in isolation, but rather within multifaceted structures, social networks and traditional communities.

The teachers asserted that the parents wanted to be friends with their children, since they disliked being in conflict with them. The children, who were referred to the High Five Programme, were observed by teachers and the High Five staff, as displaying limited self-control, and socially incompetent behaviour; therefore, it is possible that their parents' permissive parenting style played a role in their development. The researcher is of the opinion that further research should be conducted on the parenting styles of the caregivers, whose children are in the High Five Programme.

6.3.1.4. Theme/Barrier 4: Poor relationships between children and caregivers

- Absent fathers
- Lack of emotional bond between parents and children

The Social Development Fatherhood Strategy (RSA, DSD, 2013b) reports that South Africa has a high rate of absent fathers, with only one-third of pre-school children living at home with both their parents (Statistics South Africa [Statsa], 2011). One of the significant findings in this current study was that only 30% of the participants lived with both biological parents. The children and caregivers, who participated in this current study, reported non-existent relationships between most of the children and their fathers, as many of their fathers are in prison. Additionally, the grandparents (caregivers) indicated that they would encourage fathers to be more involved in their children's lives. The absenteeism of fathers featured very prominently in this current research, as was already evident from the biographical data. The researcher is of the opinion that additional research is required to explore the barriers that hinder fathers from being present and active in their children's lives, as the voices of the fathers are not heard in this current study.

The teachers claimed that there was a lack of emotional bonding between the caregivers and the children, as the caregivers, at the time, did not have meaningful relationships, or loving emotional bonds with their children. Therefore, they

presumed that caregivers had no insight and were emotionally blunt. According to Landsberg *et al.* (2005) the disintegration of family life causes a lack of love, acceptance, care, interpersonal communication and belongingness.

During a parent child workshop, the researcher observed how difficult it was for most of the caregivers and children to do an activity together, as well as physically touch each other. A child complained that it felt as if they (the teacher and the father) did not care for him. This significant finding suggests the absence of healthy relationships at home between caregivers and children. Healthy relationships are conducive to healthy child development, as well as a pleasant atmosphere, where caregivers offer support, love, comfort and security (Venter & Rambau, 2011).

The Life Course Perspective places the family in the context of all life events and stages, for example, death, illness, imprisonment of fathers, etcetera, which the family had experienced at the different ages and phases of the family members. Families with low social capital might struggle to transit through life events successfully. Such families might become disorganised families, as with some of the families in the High Five Programme (Hutchison, 2001).

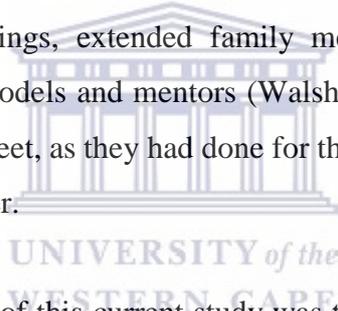
6.3.1.5. Theme/Barrier 5: Parental skills and support networks

- Caregivers need information and support on parenting
- Involvement of fathers in parenting skills workshops
- Caregivers need the support of other parents, who share the same experiences.

The findings of this current study revealed that caregivers need parental skills and support networks to deal with the daily challenges they experience. The researcher observed that the caregivers required information, as well as a platform to share and discuss the challenges of parenting. The caregivers admitted that they needed information on, and support with, how to collaborate with the children in the home. Caregivers also disclosed that they were often uninformed, and in need of *joining hands* with other caregivers, to learn how to collaborate with their children.

This finding indicated that parenting interventions were needed to empower families. These interventions should aim to enhance individual competencies, as well as the family's ability, as a unit, to solve problems for themselves. The researcher was of the opinion that a strength-based approach should be followed, to educate families about their assets, as well as how those assets could be built upon, to address their needs and development areas (Mathie & Cunningham, 2003). Caregivers should become active problem-solvers, and less dependent on programmes, or NGOs, to educate and discipline their children. Therefore, it is important for caregivers to acquire the necessary knowledge, skills and motivation.

The findings revealed that 50% of the learner-participants lived with their single mothers/caregivers, who were primarily responsible for the children, and for whom, the under involvement of the fathers was a challenge. Therefore, for a child's complete identity and development, a shift within society had to be initiated to value, support and reinforce the active inclusion of fathers, and to appreciate the contributions of siblings, extended family members and other caregivers, as support, resources, models and mentors (Walsh, 2003). One of the parents stated that they needed to meet, as they had done for the focus group discussion, and talk and support each other.



A significant finding of this current study was that caregivers needed the support of other caregivers, who shared similar experiences. The demands of parenthood are further complicated when caregivers do not have access to extended family support networks (for example, siblings, grandparents or trusted family friends) for advice on child rearing, do not have partners, or experience the stress of separation, divorce, or re-partnering (Lawton & Sanders, 1994; Sanders, Nicholson & Floyd, 1997). Landsberg *et al.* (2005: p. 216) emphasise that children are best supported, when schools and families work together in a partnership, to reach shared educational goals.

However, caregivers also need support to become self-sufficient caregivers, who have the resilience, resourcefulness, knowledge and skills to parent with confidence. To encourage caregivers to become self-sufficient, implies becoming more connected to social support networks, for example, partner, extended family,

friends and child care supports, care and support services to families (Landsberg *et al.*, 2005).

6.3.1.6. Theme 6: Lack of support networks and resources as a barrier that hinders parent involvement.

- Caregivers work long hours and lack spending quality time with their children.
- Caregivers have no one to care for their younger children during meetings.
- Too many responsibilities outside the home.
- Caregivers stay far from the meeting venues and walking to and from is unsafe.

The Life Cycle Approach allows for the comprehensive analysis of life events, and also guides the provision of services and resources, needed by the relevant actors, which are appropriate for specific stages and ages of family members (RSA, DSD, 2011a). In this study 50% of the caregivers were single and in the low income group. Walsh (2003: p. 123) states that financial hardship, is frequently noted to be the most significant challenge. The findings revealed that most of the caregivers were employed as domestic workers, and due to the long working hours, did not spend quality time with their children. The researcher observed, during the home visits, that caregivers were tired after work, and did not have the strength or time to assist their children with school work. It can be assumed that the children, their school meetings, and High Five meetings, were not a priority for the caregivers. Instead, many low-income single caregivers lived on the edge, *keeping the balls in the air* and putting bread on the table. This finding was an indication that the long working hours of caregivers result in no, or a lack of, quality time spent with their children.

The findings further revealed that the meeting times were not convenient for caregivers to attend, as they did not have anyone to care for their children during meeting times. One mother explained that she worked shifts and has a young baby, with no one to take care of the baby. This finding was an indication that single-

parent households, with families ridden by poverty, without the support of the extended family, or any kind of caregiver, are the order of the day.

Walsh (2003: p. 271) asserts that researchers have documented the widespread pattern of “multiple mothering or fathering,” in which parenting responsibilities are often shared by grandmothers, grandfathers, aunts, uncles, cousins, older brothers and sisters, or *non-blood relatives*, such as ministers, church family members, neighbours, friends and babysitters. These supporters often provide aid and strength to overburdened caregivers; however, the negotiation of these relationships can be complex, and inconsistencies in parenting may develop, since so many individuals are involved. Therefore, the findings indicated that the availability of childcare services for younger children, during meetings or workshops, would address this barrier to parent involvement.

It was evident that some of the parents in this current study were not connected, or supported by extended family, neighbours or friends, who could share parenting responsibilities, such as, taking care of a younger child during meetings. Working with families, therefore, demands from High Five a greater understanding of their contexts, as well as the challenges they experience. A sensitivity to their needs and strategies to assist caregivers to become more involved in the development and education of their children, was sorely needed.

The participants (child and caregivers) further stated that involvement in activities outside the home, makes it difficult for caregivers to be involved in the High Five Programme activities. A child stated that when his/her mother arrives home from work, she has to attend church services. A mother explained that, as a leader at the church, she was not available during the week, and in the evenings, they had meetings. This is an important matter for the children, as another child suggested that High Five write a letter to the church leader, to ask permission for his caregiver to attend the High Five meetings. This finding revealed that the church was not informed about the High Five Programme. The researcher was of the opinion that this finding highlights yet another demand, or activity, which enjoyed parent preference, above the development needs of their children.

However, the researcher considered that the church could play a pivotal in assisting the caregivers and their families with the parenting challenges they were experiencing. The church needs to be relevant and cannot ignore the needs and context of its members. Regrettably, the reality is that many caregivers were not involved in their children's education, and do not view homework and assignments as ways of assisting to improve their children's educational progress.

The participants (parents and children) also expressed that transport was required for parents to be involved in the High Five Programme activities. The parents/caregivers were far removed from the meeting venues, and, while some were too old to walk long distances, another caregiver stated that she was sick, and tired quickly. Transport problems limited the opportunities to meet and contributed to the difficulties in establishing partnerships between educators and caregivers, as well as, caregivers and the High Five staff (Landsberg et al., 2005: p. 85). This finding highlighted a lack of logistic support for the caregivers of the learners.

However, the caregivers experienced the focus group discussion as a positive and safe platform to share their opinions. In addition, the caregivers expressed that it would be helpful if they could continue to support each other, in a similar manner, in the future, to share, as well as listen to each other. It was suggested that the home of a caregiver, as a venue to meet, would be more convenient, safe, and within reach for the other caregivers. The researcher is of the opinion that this was an option for High Five to consider, to meet caregivers, in small groups, in the home of a caregiver, or a venue (such as a church building) closer to their homes.

The following conclusions were drawn from the themes and sub-theme that emerged from the semi-structured interviews and focus group discussions, as highlighted in the above summary of the research findings.

6.4. Conclusions based on research findings

The following conclusions are based on the research findings and indicate the barriers that hinder parent involvement in the High Five Programme for at risk children.

- All the participants in the High Five Programme were referred by the teachers at the schools. The main reasons that children were referred to the programme were, low self-esteem and high risk behaviour, such as absenteeism, aggressive behaviour, fighting, substance abuse, as well as disrespect towards teachers, and their peers. In many instances High Five was a last resort before expelling children from school. This is the niche of the programme, as well as competitive advantage, as it focusses on learners with high risk behaviour, which is not addressed by other NGOs in their geographical area of operation. This programme is funded by Department of Social Development, and previously, the Department of Education.
- The High Five Programme is an important resource for the school, government and the participants since they provide life skills sessions, camps, adventure hikes and support for at risk children. However, there are still some voids that need filling in the programme delivery, for example, the lack of parent involvement, the lack of communication between parents and High Five, as well as the school teachers, the lack of support to parents to become more involved, and lack of a holistic approach.
- The findings have revealed that not all the parents had knowledge of the High Five Programme. In addition, they did not understand why their children were referred to the programme. A number of parents expressed their disappointment in the school that referred their children to an external programme, without communication, or their permission.
- The findings also highlighted that some of the parents/caregivers were not invited, or informed to attend meetings and events arranged by High Five. According to them, they wanted to be involved, but were not informed. The methods utilised to invite, or inform, parents/caregivers to participate, should be reconsidered.
- According to the findings, the parents/caregivers of the children in the High Five Programme suffered from low self-esteem. Such parents/caregivers, with a low level of

belief in their ability to help their children, were likely to avoid contact with schools, because of their view that their involvement would not provide positive outcomes for their children.

- The children highlighted the negative behaviour of their parents, regarding alcohol and drug abuse, not caring for their children, and being absent in their lives, as behaviour that make them unhappy, and wished for their parents to change. It was considered possible that the children's high risk behaviour was modelled on the negative behaviour of their parents. Therefore, the parents/caregivers have difficulty with confronting their children, as they are confronted with their own behaviours. It can be deduced, therefore, that the permissive parenting style contributes to the socially incompetent behaviour of their children.
- The teachers expressed their concern about the lack of emotional bonding between parent/caregivers and their children. The teachers alleged that the parents/caregivers were emotionally blunt, and did not have loving emotional bonds with their children. A caregiver shared that her son performed his house chores in the morning, and thereafter, would leave for the day, to return at night-time to sleep. This confirmed the issue raised by the teachers regarding the lack of emotional bonding between the children and parents.
- The issue of absent fathers was also highlighted. In this current study the voices of the fathers were not heard. The findings revealed that only 30% of the children lived with both their parents. In the focus group discussion it was highlighted that many of the fathers were in prison. There was an outcry from a grandmother/caregiver that the fathers should become more involved in their children's lives, as well as submit to parenting skills training.
- The findings also revealed that parents were in need of parenting skills training and support to deal with child rearing challenges. The caregivers emphasised the need to get together to share challenges and learn from each other. In addition, the caregivers revealed the need for information and support on how to deal with their children in the home.

- The participants (parents and children) expressed their need for support and resources to attend the meeting and workshops of the High Five Programme. The following points were raised by parents and children:
 - ❖ The time of the meetings were not always convenient for parents/caregivers to attend. The parents/caregivers work long hours and are tired when they return home. They also highlighted that the meetings should be held at more convenient times.
 - ❖ Parents work long hours, mostly as domestic workers, as revealed in this current study. The long hours of work, as well as the many demands placed on the parents/caregivers, as the only breadwinners, reduce the time available to build, maintain and cultivate healthy family relationships.
 - ❖ Both the parents/caregivers and children suggested the availability of transport for parents to become more involved in the programme meetings.
 - ❖ The parents/caregivers also disclosed that they had younger children, who were in need of childcare supervision during meetings, or workshops, and could not be left alone at home.
 - ❖ A few single mothers are also very active and involved in activities outside the home. The children revealed that when their parents/caregivers return home, they have to attend church. One of the parents/caregivers mentioned that, as a leader at church, she was not available during the week, since they have evening meetings. Therefore, the researcher considered it imperative to involve the church leaders, so that they could gain more insight into the programme, as well as the need of the parents to be involved in their children's lives. The church could fulfil a more significant role in supporting the parents/caregivers and children in the challenges they are face, providing emotional and spiritual support.
- The current approach that High Five follows, is not inclusive of parents, and therefore, does not have a long-term impact. The current approach limited the impact and quality of the programme. According to the researcher, instead of a child-centred approach, the concept of learning communities should be considered.

6.5. Recommendations based on research findings

Based on the findings, the following recommendations, regarding the barriers that hinder parent involvement, as well as how parent involvement could be improved in the High Five Programme, are proposed in the following section.

6.5.1. Recommendations for the High Five Programme on Policy level.

- It is recommended that the High Five board members and staff review their child-focussed approach, to consider a family-centred approach. The programme strategy, or programme curriculum, needs to accommodate a collaborative approach that supports, not only the child, but also the actors in the micro system, the layer closest to the child, which contains the structures in direct contact with the child.
- High Five should develop a programme specifically for boys, or partner with other service providers, who implement such programme.
- Caregivers/parents should take greater responsibility for their children, and make a commitment to attend the parent support activities arranged by the High Five Programme. It is recommended that parents/caregivers sign a consent form, as well as a commitment form, whereby they grant permission, and agree to support the development of their children.
- It is recommended that a parenthood programme, including the training of parenting skills, is adopted, or developed, to strengthen, and empower parents/caregivers and families. Activities such as family days, and support groups for parents, could add value to such a programme.
- Special consideration and planning is required to include fathers in the programme activities. Action research with the fathers should be conducted, where the fathers will explore what their challenges, strengths and assets are, as well as what they propose to do. In addition, High Five could develop the programme with them, under the banner, *we co-investigate and we co-develop*.
- Staff contracts should make provision for compulsory training of existing and new staff in important aspects, namely, fatherhood, parenting skills, as well as how to involve parents and others, as a requirement to work in this programme.

- The findings revealed that more boys than girls were referred to the programme; therefore, it is recommended that High Five invests in programme development, to offer specific programmes for boys.

6.5.2. Recommendations on Process level

- It is recommended that the process of engagement changes, from communication with teachers and children only, to making contact with the parents/caregivers first, after receiving the referral from the teachers. Face-to-face home visits, instead of sending letters with the learners, would enable both the parents/caregivers and High Five staff to communicate consistently and openly, to build a partnership relationship, through which the development of their children could be improved.
- The staff members need a change of mind-set, from viewing parent involvement as an obstacle, to parent involvement as an asset, and envision a family-centred, instead of child centred approach to the problem.
- The barriers were identified, and it is strongly recommended that the way forward should be a participatory process with the parents/caregivers, to plan and strategize how to overcome these barriers, as well as what to implement, in support of caregivers. Therefore, participatory planning with each new group of children and their parents, is planning based on what is important to them and their needs.
- Based on the research study and the findings, it seems clear that teachers will benefit from capacity building on how to approach and work with parents/caregivers, who have high risk behaviour children. Therefore, it is recommended that High Five advocate for such training with the Department of Education, West Coast branch.
- It is recommended that teachers obtain consent from parents/caregivers before referring their children to the High Five Programme. The parents should be seen as a partner in the development of their children, and should be involved as much as possible from the start.

- A recommendation for teachers is to create opportunities for parents to become involved in the school education of their children.

6.5.3. Recommendations on practice level

- A holistic family empowerment and support programme is recommended. The low self-esteem of the parents/caregivers, not realising that they had a voice, is a barrier, which results in the lack of parent involvement. This programme should be a parallel support programme for parents/caregivers that underscores the interventions, which focus on the children. In addition, the parents/caregivers should be made aware of their strengths and assets, to enhance their self-esteem.
- Teachers should be informed about the barriers that hinder the parents/caregivers' involvement, so that they can understand the parents/caregivers' contexts, and not give up on creating opportunities to involve them.
- Teachers should provide caregivers with practical ideas of how they could support their children's educational development.
- During the support groups, parent/caregivers could be empowered with the following skills/needs that were identified in the study:
 1. Caregivers should be made aware of the negative impact their own negative behaviour have on their children. During support groups, family conferencing and dialogue should be taught and encouraged, to enhance family functioning, and ensure secure families.
 2. Caregivers should receive training in conflict management, since teachers disclosed that parents did not want to be in conflict with their children, as they could not handle conflict.
 3. Caregivers should be taught parenting skills and provided with support networks. Caregivers need information on positive parenting, as well as a safe space to share and learn how to deal with the challenges they experience while raising their children.

- The following practical arrangements are recommended for caregivers to access the High Five activities:
 1. High Five staff should arrange the most suitable time, day, venue and duration of meetings and workshops with parents/caregivers, who have other responsibilities, as well.
 2. High Five staff should provide transport to workshops or meetings, as some caregivers are sick and cannot walk far, and the areas where they reside are unsafe.
 3. Parents/caregivers are in need of child care for younger children during meetings. Therefore, it is recommended that High Five provide child care supervision to parents/caregivers with younger children, so that it is not a barrier to their involvement.
 4. Referring children for trauma counselling is recommended. According to the interviews with the parents/caregivers, the children in the programme experienced trauma and rejection in their families, and at school. The parents/caregivers provided the following answers to the question: Did any trauma occur in your child's life? – *“Separation of parents, alcohol and drug abuse of parents or family members, family violence, bullying at school, imprisonment of fathers and death”*. Many children, referred to the High Five Programme, were reared in broken homes, where the mother is the breadwinner, as a domestic worker, and the father lives elsewhere.
 5. A recommendation for parents/caregivers is that they take responsibility to communicate regularly and openly with the school teachers and High Five staff, regarding the development of their children.
 6. A strong recommendation to parents/caregivers is that they prioritise spending quality time with their children. The systems, in which families are nested, should care for all children in the spirit of Ubuntu, to avoid children being unsupervised. In the community, caregivers and churches should form support structures that could provide a safety net for children, whose caregivers work long hours. Parents/caregivers should support each other. In addition, parents/caregivers should express their love and care for their children to strengthen the emotional bond.

6.6. Recommendations for further research

This current study explored and described the barriers that hinder parents/caregivers of children with high risk behaviour, from becoming involved in the High Five programme activities. The findings cannot be generalised to other contexts and settings, as this study only focussed on the beneficiaries reached by the High Five Programme, as well as the parents/caregivers of these beneficiaries. Therefore, it is recommended that research be conducted in the following areas:

- In this current study it appeared that the permissive parenting style of parents/caregivers contributed to the high risk behaviour of their children, as focussed on being *friends*, to avoid conflict. There is a need for further research, to explore and describe the parenting styles of parents/caregivers, who care for children with high risk behaviour, as well as the impact of their parenting style on the behaviour of their children.
- Research is recommended to explore the barriers that hinder fathers from being present and active in their children's lives. Their voices also count, although not heard in this current study, and needs to be explored further.
- Research needs to be conducted, to explore different approaches, and to identify the most appropriate family approach, which focusses on the development and strengthening of the whole family, and not only the child with the high risk behaviour.
- Research should be conducted on how the concept of Learning Communities could be promoted in development/life skills programmes for children with high risk behaviour.
- The challenges faced by other NGOs, working with caregivers who care for children with high risk behaviour, needs to be researched further.

6.7. Chapter summary

This final chapter concluded the research project by demonstrating how the goal of the study was achieved through the qualitative research approach. The qualitative research process was applied to investigate the research topic under discussion, and is highly recommended for use by other researchers. The chapter comprised a summary, conclusions and recommendations arising from the research findings, according to the themes and sub-themes that emerged during the data analysis process. The chapter concluded by presenting recommendations for the High Five Programme on policy level, practice level and process level. The recommendations were provided for High Five, teachers, caregivers and further research.



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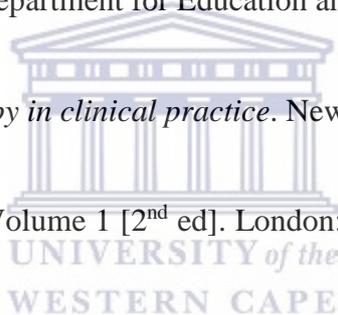
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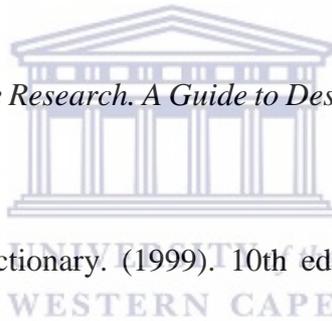
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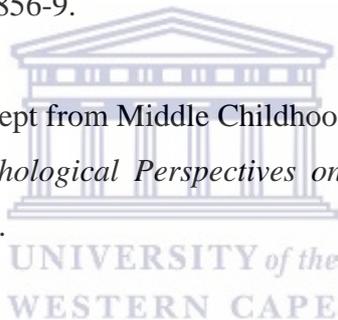
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APPENDICES

APPENDIX A: Research information Sheet for parents and children



UNIVERSITY OF THE WESTERN CAPE

Private Bag X 17, Bellville 7535, South Africa

Tel: +27 21-9592011, Fax: 27 21-959 2845

E-mail: cschenck@uwc.ac.za

The Dean of the Faculty of Community and Health Sciences:
University of the Western Cape
Private Bag X17
Bellville
7535

INFORMATION SHEET FOR PARENTS AND CHILDREN

Project Title: An explorative study of factors which hinder parents' involvement in the High Five program for at risk children.

What is this study about?

This is a research project being conducted by Yolandi Afrika, a master's student at the University of the Western Cape. We are inviting caregivers to participate in this research project since their children are involved in the High Five Life Skills Program. The study is about exploring the factors which hinder parents' involvement in program for at risk children.

What will I be asked to do if I agree to participate?

You will be asked to participate in a semi-structured interview to share the factors that hinders your involvement in the development projects of your child. With semi-structured interviews the researcher will have a set of predetermined questions in Afrikaans and English. Parents will be allowed maximum opportunity to tell his/her story. The questions will be explained clearly to the parents. FG discussions will be

conducted after school and during a life skills camp. FG discussions will be 30 – 60 minutes. Interviews will be conducted at home with parents not attending the FGs, as we do not want to exclude those that do not have the courage or self-confidence. These interviews will not be longer than 60 minutes.

Would my participation in this study be kept confidential?

We will do our best to keep your personal information confidential. To help protect your confidentiality, the researcher will ensure that only she and the study supervisor has access to the data. All data will be stored in a locked cupboard in the office to which the researcher alone has access. Your name will not be mentioned in the recording and you will be assigned a pseudo name when the coding and analysing of the data is done. Therefore, your name will not be included on the data collected; a code will be placed on the data collected, an identification key will allow the researcher to link the data to your identity and only the researcher will have access to this identification key.

If we write a report or article about this research project, your identity will be protected to the maximum extent possible. In accordance with legal requirements and/or professional standards, we will disclose to the appropriate individuals and/or authorities information that comes to our attention concerning child abuse or neglect or potential harm to you or others.

This researcher will request you to audiotape the interview. The tapes will be made to ensure that the researcher is able to record everything that you say. It will also help the researcher to write down the whole interview after it has been conducted by listening to the tapes. The tape will be stored digitally on the researcher's personal computer and it will be protected by a password known only to the researcher. The tapes will be used only for transcribing the interview between the participant and the researcher and will be disposed of once the study has been fully completed.

I agree to be audio-taped during my participation in this study.

I do not agree to be audio-taped during my participation in this study.

The researcher will make use of the services of a High Five facilitator to assist you to express yourself in the best way possible and in the language you most comfortable

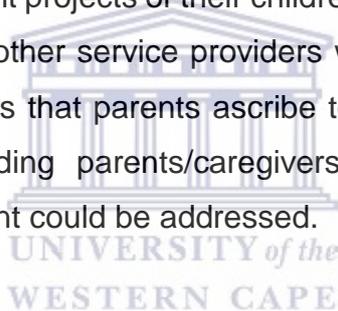
with. The facilitator will be sworn to confidentiality and will not have access to any of the information obtained in the research process.

What are the risks of this research?

There may be some risks from participating in this research study. The research is a reflection of the factors that hinders your involvement as a parent in the High Five program. It may awaken some emotions within you which could cause you to feel embarrassed, uncomfortable, guilty, angry or sad.

What are the benefits of this research?

This research is not designed to help you personally, but the results may help the investigator learn more about the factors that hinder the involvement of parents/caregivers in the High Five program. We hope that, in the future, other people might benefit from this study through improved understanding of how parent involvement in the development projects of their children can be improved. It is hoped that Mfesane, High Five and other service providers will become more cognisant of the experiences and meanings that parents ascribe to the factors that hinders their involvement. By understanding parents/caregivers in their context better, the incidence of parent involvement could be addressed.



Do I have to be in this research and may I stop participating at any time?

Your participation in this research is completely voluntary. You may choose not to take part at all. If you decide to participate in this research, you may stop participating at any time. If you decide not to participate in this study or if you stop participating at any time, you will not be penalized or lose any benefits to which you otherwise qualify. If during the course of the interview you wish to terminate, you may inform the researcher who will ensure that any negative consequences of the study receives the attention of a counsellor or referred for care.

What if I have questions?

This research is being conducted by Yolandi Afrika and the University of the Western Cape. If you have any questions about the research study itself, please contact Yolandi Afrika at: Mfesane, Plein Street, Vredenburg, 022-7132793 or yolandi@mfesane.org.za

Should you have any questions regarding this study and your rights as a research participant or if you wish to report any problems you have experienced related to the study, please contact:

Prof C J (Rinie) Schenck

Head of Department

Dean of the Faculty of Community and Health Sciences:

University of the Western Cape

Private Bag X17

Bellville

7535

This research has been approved by the University of the Western Cape's Senate Research Committee and Ethics Committee.



APPENDIX B: Ethics Clearance

SR1

UNIVERSITY of the WESTERN CAPE**DEPARTMENT OF RESEARCH DEVELOPMENT****UWC RESEARCH PROJECT REGISTRATION AND ETHICS CLEARANCE
APPLICATION FORM**

This application will be considered by UWC Faculty Board Research and Ethics Committees, then by the UWC Senate Research Committee, which may also consult outsiders on ethics questions, or consult the UWC ethics subcommittees, before registration of the project and clearance of the ethics. No project should proceed before project registration and ethical clearance has been granted.

A. PARTICULARS OF INDIVIDUAL APPLICANT	
NAME: Yolandi Lizette Afrika	TITLE: Mrs
DEPARTMENT: Social Work Department	FACULTY: Faculty of Community and Health Sciences
FIELD OF STUDY: Social Work	
ARE YOU:	
A member of UWC academic staff?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
A member of UWC support staff?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
A registered UWC student?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
From outside UWC, wishing to research at or with UWC?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
B. PARTICULARS OF PROJECT	
PROJECT NUMBER: TO BE ALLOCATED BY SENATE RESEARCH COMMITTEE:	
EXPECTED COMPLETION DATE:	
PROJECT TITLE: An explorative study of factors which hinder parents' involvement in the High Five program for at risk children	
THREE KEY WORDS DESCRIBING PROJECT: Parent Involvement Hindering Factors Family Centered Approach	
PURPOSE OF THE PROJECT: An explorative study of factors which hinder parents' involvement in the High Five program for at risk children.	
M-DEGREE: Master Degree	D-DEGREE:
POST GRADUATE RESEARCH:	

C. PARTICULARS REGARDING PARTICULAR RESEARCHERS

FAMILY NAME: Afrika INITIALS: Y. L TITLE: Ms PRINCIPAL RESEARCHER: Y.L. Afrika

OTHER RESEARCH PROJECT LEADERS: None

OTHER CO-RESEARCHERS: None

THESIS: STUDENT RESEARCHER: Yolandi Afrika

THESIS: SUPERVISOR: Prof C J (Rinie) Schenck

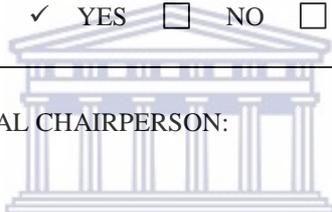
D. GENERAL INFORMATION

STUDY LEAVE TO BE TAKEN DURING PROECT (days): None

IS IT INTENDED THAT THE OUTCOME WILL BE SUBMITTED FOR PEER REVIEWED PUBLICATION?

✓ YES NO

COMMENTS: DEPARTMENTAL CHAIRPERSON:



SIGNATURE OF THESIS STUDENT RESEARCHER – WHERE APPROPRIATE:

DATE

SIGNATURE OF THESIS SUPERVISOR – WHERE APPROPRIATE:

DATE

SIGNATURE OF PRINCIPAL RESEARCHER – WHERE APROPRIATE:

DATE:

SIGNATURE OF DEPARTMENTAL CHAIRPERSON:

DATE:

NOTE: THESE SIGNATURES IMPLY AN UNDERTAKING *BY THE RESEARCHERS*, TO CONDUCT THE RESEARCH ETHICALLY, AND AN UNDERTAKING BY THE THESIS SUPERVISOR (WHERE APPROPRIATE), AND THE DEPARTMENTAL CHAIRPERSON, TO MAINTAIN A RESPONSIBLE OVERSIGHT OVER THE ETHICAL CONDUCT OF THE RESEARCH.

E. DESCRIPTION OF PROJECT AND RESEARCH ETHICS STATEMENT

The aim of the study is to explore the barriers that hinder parents' involvement in program for at risk children. The information gathered through this research will contribute to develop a Family Centered Approach to follow in working with parents to increase their involvement in the development of their children.

Primary data will be collected by means of face-to-face interviews and focus group discussions with the children in the program, their parents or guardians, teachers as well as the social workers from NGOs that implement a Family Centered Approach.

Mfesane as an NGO is a Community Development Agency working in underserved and informal settlements in empowering communities. The High Five Program of Mfesane focus on working with children and youth at risk in the Vredenburg, Western Cape area.

The need arose for a review of Mfesane's Programme in order to ascertain to what degree they are efficient and effective. This review allowed decisions to be made about which relationships to pursue and where adaptations to programme delivery should be made. The High Five Life Skills Program is one of the projects that were evaluated in June 2011 and a final report with recommendations was submitted in October 2011.

The following recommendations regarding parent involvement was highlighted in the final evaluation report:

- Parents need to be made aware of the importance of their involvement in the education and development of their children.
- Communication with parents has also been hampered by reluctance of parents to attend parent meetings.

The poor attendance of the parents cannot be ignored. Instead the reasons why they are not involved needs to be identified and the staff need to understand these reasons. In the program implementation the needs of the parents should be addressed and they should become an active partner in the process of change.

The researcher embarks on this research project with the goal of exploring barriers of parent involvement from the perspective of both the parents and children.

The researcher has chosen to use a qualitative research methodology for this study. The researcher intends to explore and describe the experiences and perceptions of parent involvement of parents/guardians whose children are in the High Five Life Skills Program of the organization.

A descriptive strategy of inquiry will also be used as part of the research design for this study because it allows a more intensive examination of phenomena and their deeper meanings.

The population for this study can be defined as follows:

Purposive sampling will be followed to gather information from parents that could explain the phenomena clearly in terms of their own responses to the program and lived experiences. The inclusion criteria of the sample will be all of the children in the program, therefore 60 children, parents of the 60 children (6 X 10

FGs), 6 teachers (2 per 3 schools) and 3 social workers (1 per 3 organisations in Vredenburg and Cape Town). Semi-structured one to one interviews will be conducted with the teachers and social workers. It is anticipated that not all parents of the children will attend the focus groups so they will be visited at home and the same question from the focus group guideline will be used.

The researcher will pursue ethical guidelines by obtaining permission from the Research Ethics Committee of the University of the Western Cape, to approve and conduct the study. To maintain written informed consent, the participants will be informed about the research study and what is expected of them in terms of their participation. They need to be informed that they are free to withdraw their participation of the study at any given time. The written forms will include information about the study and explain the ethical considerations and guidelines about voluntary participation in the study. The participants will be requested to sign an individual consent form as well as the focus group confidentiality binding form.

The researcher will ensure that every attempt will be made to keep all information obtained in this study strictly confidential.

As a social worker, the researcher is also bound by the South African Social Service Professions (SACSSP) Code of Ethics to conduct the research in such a way that the participants are not at risk. The researcher will ensure that the participants are not exposed to any potential harm or danger, and subsequently ensure the avoidance of harm.



APPENDIX C: Consent Form**UNIVERSITY OF THE WESTERN CAPE**

Private Bag X 17, Bellville 7535, South Africa

*Tel: +27 21-9592011, Fax: 27 21-959 2845***E-mail: cschenck@uwc.ac.za****Social Work Department****Tel: 021 959 2277****Fax: 021 959 2845****CONSENT FORM**

Title of Research Project: An explorative study of factors that hinder parents' involvement in the High Five Programme for at risk children

The study has been described to me in language that I understand, and I freely and voluntarily agree to participate. My questions about the study have been answered. I understand that my identity will not be disclosed, and that I may withdraw from the study, without giving a reason, at any time, and this will not negatively affect me in any way.

Participant's name.....

Participant's signature.....

Witness.....

Date.....

Should you have any questions regarding this study or wish to report any problems you have experienced related to the study, please contact the study coordinator:

Study Coordinator's Name: Prof. C. J. (Rinie) Schenck

University of the Western Cape

Private Bag X17, Belville 7535

Telephone: (021)959-2011

Fax: (021)959-2845

Email: cschenck@uwc.ac.za

APPENDIX D: Interview guide for children**UNIVERSITY OF THE WESTERN CAPE**

Private Bag X 17, Bellville 7535, South Africa

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Social Work Department

Tel: 021 959 2011

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Title of Research Project: An explorative study of factors which hinder parents' involvement in the High Five program for at risk children.

BIOGRAPHIC INTERVIEW GUIDE FOR CHILDREN

The following questions will be used as a guide to collect biographic information from children:

1. Date:
2. Age:
3. Gender:
4. Name of School:
5. Grade:
6. Area of residence:
7. Number and other siblings and ages:
8. Relationship with the adult/guardian/parent you stay with:
9. How many people live with you in the same house?
10. What is their relationship with you?

**INTERVIEW GUIDE FOR CHILDREN**

The following questions will be used as a guide to interviewing the children:

1. Length of being involved in the High Five Program:
2. Tell me how is it for you to be part of the High Five program?
3. What do you like about the program?
4. What don't you like about the program?
5. How do you benefit from the program?
6. What do you share with your parents about the program?
7. What do your parents ask you about the program activities, such as the camps, hikes and life skills sessions?
8. Would your parents like to be involved in the program activities?
9. How can your parents be involved in the High Five Program?
10. What should we do to make it easier for your parents to be involved?
11. What makes it difficult for your parents to be involved?

Is there anything else that you wish to share with me?

Study Supervisor's Name: Prof C J (Rinie) Schenck

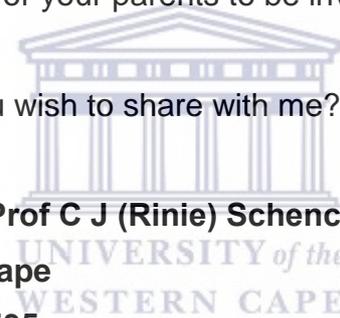
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APPENDIX E: Interview guide for parents/caregivers**UNIVERSITY OF THE WESTERN CAPE**

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Title of Research Project: An explorative study of factors which hinder parents' involvement in the High Five program for at risk children.

BIOGRAPHIC INTERVIEW GUIDE FOR PARENTS

The following questions will be used as a guide to collect biographic information from parents:

1. Age:
2. Current employment:
3. Gender:
4. Area of residence:
5. Number and children and ages:
6. Marital status:
7. What is your relationship with the child? E.g. parent/ grandparent/ aunt/ uncle
8. How many people reside with you?
9. Please mention the relation with the people living with you.

**INTERVIEW GUIDE FOR PARENTS**

The following questions will be used as a guide to interview the parents:

1. What is your relationship with the child?
2. Could you tell me what brought your child to the High Five Program?

3. What kind of behaviour does your child present at home?
4. What has your experience been thus far of the High Five Program?
5. What would you say makes it difficult for you as a parent to be involve in the High Five Program activities your child participate in?
6. How would you like to be more involve?
7. What can make it easier for you as a parent to be more involved in the program activities?
8. How do you think the program has helped your child?
9. How does the program help you as a parent to deal with the challenges you experience?
10. How would you describe your relationship with your child?
11. In what way would you like to support the program?
12. What support or help can the program offer you as a parent?
13. Is there anything else that you wish to share or add?

Thank you very much for your time and participation in this interview. It is greatly appreciated



Signature of ParentDate.....

Signature of

Researcher.....Date.....

Study Supervisor's Name: Prof C J (Rinie) Schenck
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APPENDIX F: Interview guide for teachers



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Title of Research Project: An explorative study of factors which hinder parents' involvement in the High Five program for at risk children.

INTERVIEW GUIDE FOR TEACHERS

The following questions will be used as a guide to interviewing the teachers:

1. Name of the teacher
2. Name of the school
3. Area of residence
4. What is your understanding of the High Five Program?
5. How involve are the parents of the children referred to the High Five Program, in the school activities?
6. How involve are the parents of the children referred to the High Five Program, in the program activities?
7. What are the barriers that hinder parent involvement in the project?
8. What can you as a teacher or the school do to help improve parent involvement?
9. What can High Five do different to improve the involvement of the parents?
10. Do you have any suggestions on the improvement of the program activities to increase the involvement of the parents?

Signature of TeacherDate.....

Signature of Researcher.....Date.....

Study Supervisor's Name: Prof C J (Rinie) Schenck

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APPENDIX G: Focus group confidentiality binding form



UNIVERSITY OF THE WESTERN CAPE

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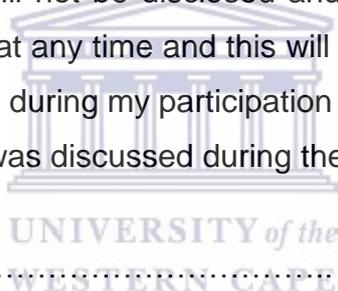
Tel: +27 21-9592011, Fax: 27 21-959 2845

E-mail: cschenck@uwc.ac.za

FOCUS GROUP CONFIDENTIALITY BINDING FORM

Title of Research Project: An explorative study of factors which hinder parents' involvement in the High Five program for at risk children.

The study has been described to me in language that I understand and I freely and voluntarily agree to participate. My questions about the study have been answered. I understand that my identity will not be disclosed and that I may withdraw from the study without giving a reason at any time and this will not negatively affect me in any way. I agree to be audio-taped during my participation in the study. I also agree not to disclose any information that was discussed during the group discussion.



Participant's name.....

Participant's signature.....

Witness's name.....

Witness's signature.....

Date.....

Study Coordinator's Name: Prof C J (Rinie) Schenck

University of the Western Cape

Private Bag X17, Belville 7535

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APPENDIX H: Assent form for parents



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ASSENT FORM FOR PARENTS

Title of Research Project: An explorative study of factors which hinder parents' involvement in the High Five program for at risk children.

I....., the Parent/Guardian of
.....grant permission for my child to participate in the Masters Degree research investigation to be conducted by Yolandi Afrika, a registered student at the University of the Western Cape, under the supervision of Prof C J (Rinie) Schenck (Department of Social Work). The purpose of this study would be to find the factors which hinder parents' involvement in the High Five Program.

The procedure in the study will include the use of semi-structured interviews. The information will be treated as strictly confidential. Interviews will take approximately 30 – 60 minutes and there are no known medical risks to this study.

I agree that the results of this study may be published in Professional Journals but the records or identity will not be revealed and participants will remain anonymous.

I understand what the study is about, how and why it is being done.

Signature of Parent/GuardianDate.....

Signature of Researcher.....Date.....

Study Supervisor's Name: Prof C J (Rinie) Schenck

University of the Western Cape

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APPENDIX I: Editorial Certificate

03 October 2018

To whom it may concern

Dear Sir/Madam

RE: Editorial Certificate

This letter serves to prove that the thesis listed below was language edited for proper English, grammar, punctuation, spelling, as well as overall layout and style by myself, publisher/proprietor of Aquarian Publications, a native English speaking editor.

Thesis title

AN EXPLORATIVE STUDY OF FACTORS THAT HINDER PARENTS' INVOLVEMENT IN THE HIGH FIVE PROGRAMME FOR AT RISK CHILDREN

Author

Yolandi Lizette Afrika

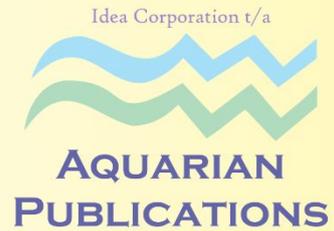
The research content, or the author's intentions, were not altered in any way during the editing process, however, the author has the authority to accept or reject my suggestions and changes.

Should you have any questions or concerns about this edited document, I can be contacted at the listed telephone and fax numbers or e-mail addresses.

Yours truly



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