AN EXPLORATION OF A SAMPLE OF SOUTH AFRICAN CAREGIVERS’ EXPERIENCES OF APARTHEID.

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Keywords: apartheid, socialisation, adolescent, caregiver, family context, ecological systems theory, thematic analysis

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Declaration

I declare that An exploration of a sample of South African caregivers’ experiences of apartheid is my own work, and that it has not been submitted before for any degree or examination at any other university, and that all the sources I have used or quoted have been indicated and acknowledged by complete references.

Jené Pretorius
Acknowledgements

“Aan God, die Vader van ons Here Jesus Christus, kom al die lof toe! Hy is die Vader wat Hom ontferm en die God wat in elke omstandigheid moed gee.” 2 Korintiërs 1:3

I dedicate this body of work to my father and mother who have sacrificed all to put me and my brothers on the best possible path to ensure our futures. Thank you for being living examples of God-fearing, selfless and unconditionally loving individuals. In all that I set out do, my biggest goal is to make you proud.

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To my Father in Heaven all the honour, praise, and thanks.

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Definition of Terms

Adolescence: Early adolescence is a developmental period that occurs between the ages of 10 and 14 years, it is a formative period during which youth explore a variety of personal and social adaptations which in turn influences their identity development (World Health Organisation [WHO], 2004).

Apartheid: A system of racial discrimination imposing separation or segregation of blacks and whites in the areas of government, labour market, residency and everyday life which in South Africa officially started in 1948 and continued until 1994 (Mhlauli, Salani, & Mokotedi, 2015).

Caregiver: A person who parents a child, or meets the criteria of: 1. being a family member or helper, who 2. regularly looks after a child, has significant responsibility for managing the behaviour and well-being of another individual who is a minor, and 3. is designated as such by the child’s parent or legal guardian (Nesmith Library, 2015).

Ecological systems theory: Theoretical framework that describes the individual context as an interactively created organisation of external influences that is mediated by a variety of direct systems that simultaneously influence the individual as developed by Urie Bronfenbrenner (Ben-David & Nel, 2013).

Family context: In this study family context refers to a primary social group consisting of caregivers, their offspring and extended family, with the principal feature of this group being to provide for its members on a physical, emotional and material level (Breen et al., 2019).

Primary socialisation: Socialisation is the process whereby individuals learn behaviour through experiencing the behaviour and teachings of those within their family context (Miller-Slough & Dunsmore, 2016).
Thematic analysis: A widely used qualitative data analysis technique as developed by Braun and Clarke (2006), which focuses on identifying patterns of meaning (themes) within collected transcribed data.
Abstract

Apartheid created deep-rooted emotional scars of inequality, discrimination, and racial tension within the South African population. Literature regarding the population of contemporary South Africans remains, to some extent, divided by racial lines (Naidoo, Stanwix, & Yu, 2016; Harris, 2016). Since caregivers are the main socialisation agents influencing adolescents this research study sought to explore caregivers’ experiences of apartheid as a means to create an understanding of the views and perspectives of apartheid that are relayed by South African caregivers to their children.

Available literature on apartheid experiences is largely focused on specific groups, whereas this study included a demographically diverse sample. Additionally, limited information is available on the specific apartheid experiences of individuals who are now caregivers themselves. The aim of the research study was, firstly, to explore caregivers’ experiences of apartheid and, secondly, to explore these experiences that caregivers share with their adolescents. A qualitative research approach which was exploratory in nature was employed. Semi-structured individual interviews were conducted and the data collected was analysed utilising thematic analysis. This research study gained approval from the University of the Western Cape’s Humanities and Social Sciences Research Ethics Committee and ethical guidelines were strictly adhered to throughout the research process. A total of eight participants were purposively recruited from a variety of communities in the Cape Town Metropole region.

The themes arising from thematic analysis include the following: participants had similar definitions of apartheid but the experiences that they shared differed drastically; young adolescents are incredulous of the apartheid history and convey a sense of disbelief about the occurrences of apartheid according to their caregivers; generational progress became evident as it was reported that the younger generation is “blind” to colour; and lastly,
Caregivers experience difficulty in discussing emotionally laden topics, such as apartheid, with their adolescents. This study provides a fresh perspective of contemporary South Africa, the social progress made, and also the areas where improvement is still needed. In conclusion the findings of this research study, in conjunction with recent statistics (South African Institute for Race Relations [SAIRR], 2018), create an encouraging picture of the future of South Africa, and indicate that the problem of racism is less acute than what is portrayed and propagated through main stream media and social media.

**Author note:**

Please take note that this research study was accepted and presented as a poster at the 6th Southern African Psychology Students Conference hosted at the University of Johannesburg in June 2019.
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List of Abbreviations and Acronyms

AIDS: Acquired Immunodeficiency Syndrome
ANC: African National Congress
BCM: Black Consciousness Movement
BEE: Black Economic Empowerment
HIV: Human Immunodeficiency Virus
HSSREC: Human and Social Sciences Research Ethics Committee
NGO: Non-Governmental Organisation
NP: Nationalist Party
NPO: Non-Profit Organisation
PAC: Pan African Congress
SAIJR: South African Institute for Justice and Reconciliation
SAIRR: South African International Race Relations
TRC: Truth and Reconciliation Commission
WHO: World Health Organisation
Chapter One

Contextualisation

Background

The apartheid era in South Africa can be described as a critical and complex national period characterised by inequality, discrimination, and the gross infringement of a multitude of human rights (Seekings & Nattrass, 2008; Jensen & Zenker, 2018). The South African apartheid laws were introduced around 1948 and officially continued until 1994 (Nnaemeka, Nkechi, & Michael, 2019; Seekings & Nattrass, 2008). This set of laws ordained the advancement of a specific racial group within all domains of living, and in contrast, the grossly unequal lack of personal and community development for the rest of the South African racial groups. Apartheid as a social system thus severely discriminated against the majority of the population based on their skin colour (Seekings & Nattrass, 2008).

Apartheid ended 25 years ago, however, literature reports that the aftermath still affects contemporary South Africa. Recovery from apartheid’s systematic and racial discrimination is an ongoing process, and post-apartheid tensions continue to make up part of the daily societal life in many South African contexts (Amoateng, Barber, & Erickson, 2006; South African International Race Relations [SAIRR], 2018). The deep-seated emotional scars of inequality, discrimination and racial tension caused by apartheid remain evident as the aftermath remains pertinent within contemporary South African society (Amoateng et al., 2006; Jensen & Zenker, 2018).

A caregiver is defined as a person who parents a child, or meets the criteria of being a family member or helper, who regularly looks after a child, has significant responsibility for managing the behaviour and well-being of another individual who is a minor, and is designated as such by the child’s parent or legal guardian (Nesmith Library, 2015).
African caregivers face the challenging task of assisting their child/ren in making sense of and creating an understanding of the country’s tumultuous past. One way through which caregivers influence and inform their child/ren is socialisation (Vorster, Sacks, Amod, Seabi, & Kern, 2016). Socialisation is the process of integrating enduring social skills, orientations, and perceptions, and the influence of the family is integral to this process (Raj & Raval, 2013). Subsequently individuals within the early adolescence development period are tasked with defining their identity, both as an individual and as part of a bigger group of culturally and geographically grouped individuals. In developing a sense of identity the influences and understanding as relayed through the socialisation process are integrated into an adolescent’s identity (Peck, Brodish, Alanchuk, Banjee, & Eccles, 2014).

Thus by sharing their experiences caregivers assist their children in making sense of and understanding complex experiences in order to not only understand, but also cope with, and integrate these into their identity (Langlier & Peterson, 2004). Therefore, caregivers’ experiences and the experiences shared with adolescents impact on the forming of a child’s understanding of apartheid, which in turn influences their identity development, especially that of ethnic and racial identity (French, Siedman, Allen, & Aber, 2006).

**Apartheid Experience**

According to Marschall (2010), the majority of individuals who experienced and were disadvantaged because of apartheid, might still be living with the trauma and related emotional and psychological effects of traumatic events brought about by the apartheid rule. Research indicates that a violent and impoverished past intrudes into the present day life of many trauma survivors (Botros, Hodgins, & Nemeroff, 2019). Also, it is not only the individuals who experienced direct overt violence and trauma that are negatively influenced, but also those individuals who were exposed to more covert forms of trauma such as disruption and oppression (Watson-Seeighe, 2013).
Apartheid is demarcated as an era rife with violence of various natures, the most prominent being political violence, which posed a constant threat of societal chaos, physical injury, fear and disruption (Vorster et al., 2016). Violence has been found to traumatisé individuals by the engraving of violent memories, leading to the longstanding retention of traumatic experiences (Humphrey, 2000). Similarly the traumatic experiences lived through during apartheid have been found to have a significant impact on individuals’ lives, thus the experiences of apartheid have resulted in a longstanding occurrence of trauma (Amoateng et al., 2006). Research on the influence of early-life traumatic experiences indicates long term psychological effects such as post-traumatic stress disorder, increased likelihood of developing personality disorders and long term anxiety and depression, to name only a few (Dar et al., 2015). Vast amounts of literature thus depicts the definite influence of traumatic experiences on later-life and it is this notion that contributed to a great extent to the conceptualisation of this research study into exploring caregivers’ experiences of apartheid.

The apartheid experience of the majority of individuals that were unfairly disadvantaged and discriminated against on the basis of their skin colour remains relevant in post-apartheid contemporary South Africa (Cochrane & Chellan, 2017). Caregivers who experienced apartheid first hand are now responsible for the upbringing of the younger generations. And the experiences of apartheid are relevant within the caregiving context in that they influence the perspectives, attitudes and memories of the caregiver, and these are shared with their early adolescents (Cochrane & Chellan, 2017).

Apartheid’s racially driven injustice has profoundly influenced South Africans of colour to the extent that Adonis (2016) states that apartheid has left all black South Africans intensely traumatised. Adonis (2016) further emphasises the long-term traumatic effect of violence, this idea is supported by Davidson and Mellor’s (2001) work that echo’s stated literature, and the fact that traumatic events of the past are rarely forgotten. Moreover trauma

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brought about by apartheid has been found to have an effect on successive generations who did not experience apartheid first hand, a notion termed the transgenerational transmission of trauma (Davidson & Mellor, 2001). Distress and emotional disruption experienced in reaction to continued contact with individuals who experienced primary traumatisation, either recently or in the past, also makes up part of the transgenerational transmission of trauma (Bride, 2007), making this concept relevant to the current research study on caregivers’ experiences of the trauma brought about by the apartheid rule. Particularly important to the current research study is the concept of secondary traumatisation. Secondary traumatisation is defined as traumatisation via an indirect exposure, which may develop from merely hearing about a traumatic event or caring for someone who has experienced such an event (Meadors, Lamson, Swanson, White, & Sira, 2010). This definition thus includes the children of caregivers who experienced apartheid and the traumatic events during this era. Research has found that individuals who have endured secondary traumatisation may experience some of the same symptoms as those who were primarily traumatised, including nightmares, heightened startle response and anxiety (Botros, Hodgins, & Nemeroff, 2019). Thus, making secondary traumatisation and the transgenerational transmission of trauma a pertinent issue which needs to be addressed within the South African context (Marschall, 2010).

The apartheid experiences of South Africans are vastly different, depending on a variety of demographic factors. The most important of these dividing demographic factors is that of race, as confirmed by available literature (Nnaemeka et al., 2019), and also in the findings of this research study. The experiences of black South Africans include stories of violence, trauma, and forced removal from their houses and communities (Amoateng et al., 2006). Throughout the functioning of the Truth and Reconciliation Commission (TRC), a mechanism employed by the newly elected African National Congress (ANC) in 1995 to help deal with the atrocities that occurred during apartheid, a vast number of experiences and
stories of apartheid were shared publicly by South Africans from all demographic backgrounds (Grunebaum, 2017). The TRC showcased the vast difference in experiences of individuals from different demographic backgrounds as echoed by the findings of this research study.

Throughout the literature overview process (see chapter 2) the stark contrast between the experiences of individuals of colour and that of the minority is evident. Black South Africans’ accounts of apartheid experiences, which are marked by violence, trauma, disrespect, and a disregard for basic human rights, are ample within literature (Nnaemeka et al., 2019). In contrast to this white South Africans’ experiences during this era are under-reported, possibly indicating a sense of indifference, as substantiated by the findings of this research study.

Throughout the process of conceptualising this research study and conducting the literature overview the researcher experienced strong emotions of resentment, repulsion, and even some disbelief that the South Africa of yesterday operated according to the apartheid laws. Upon reading the experiences within literature and expressly hearing the experiences of participants first-hand, the researcher felt sadness and was overwhelmed with feelings of shock and incomprehension. It was especially the traumatic stories of young children, who are now caregivers, who at the time were unaware of the political agenda behind apartheid, which baffled the researcher. Throughout data collection the trauma and emotional hurt caused by these experiences was further amplified by the facial and emotional expressions of the participants, which were often challenging to witness.

**Caregiver Socialisation**

The impact of caregiver socialisation makes up an integral part of this exploratory research study due to the experiences of caregivers being relayed to adolescents and as a
result influencing the socialisation of said adolescents (World Health Organisation [WHO], 2004). Therefore, caregiver socialisation, with regards to apartheid, can be argued to have an influence on the understanding and perception that adolescents have about apartheid, race and other related factors.

Caregivers play an important role in the socialisation of adolescents (Huntemann & Morgan, 2012). Caregivers, amongst other socialisation agents, socialise the youth in their care according to the norms, standards and customs of their society and additionally also to their personal values, attitudes, beliefs and perceptions (Raj & Raval, 2013). The history of apartheid in South Africa represents an era which the younger generation, individuals born after 1994, do not have first-hand experience of. However the aftermath and turmoil subsequent to apartheid remains evident in contemporary South Africa (Amoateng & Richter, 2007). From this the notion that caregiver socialisation, specifically related to the sharing of apartheid experiences is relevant as it has an influence on the socialisation process of born-free South Africans.

Moreover, a distinct connection is made within literature between socialisation and the formation of identity. Huntemann and Morgan (2012) explain that identity is actively shaped and moulded through the social interactions that adolescents have with their family, peers and all others they are in social contact with, including the media and social values to which they are exposed. Thus, meaning that the community and neighbourhood in which an adolescent finds themselves has a further influence on their socialisation (Carvalho-Maleke, 2015). According to Luke and Kale (2017) individuals’ cultural identity is influenced by socialisation, and through socialisation children acquire and explore their specific cultural identity and the manner in which they respond to said identity. Luke and Kale (2017) further argue that one’s identity emerges from the childhood transactions in sociocultural and
historical contexts, which are made up of the individuals’ experiences with family, culture, community, media and peers, amongst others.

In the context of this research study caregivers were focused on as the primary socialisation agents of adolescents, as motivated by literature stating that caregivers in conjunction with friends make-up the most important role players in adolescent identity development (Miller-Slough & Dunsmore, 2016). Caregivers’ racial socialisation of adolescents is strongly linked to the messages that are shared by caregivers (Hughes & Johnson, 2001). Hughes and Johnson (2001) classify these messages into five major categories, arguing that caregiver racial socialisation could:

i. Promote cultural knowledge and traditions in a way that exemplifies cultural pride;

ii. Be done in a manner that prepares the adolescent for bias. For example when focus is placed on awareness creation about racism, how to respond to discrimination and teaching adolescents coping strategies should they ever be confronted with racism;

iii. Promote a sense of mistrust that creates wariness within adolescents for interracial interactions and relationships;

iv. Engage in the advancement of adapting to, and fitting into the dominant culture. And in doing so rather focus on individual qualities as opposed to racial group membership, and thus avoid discussions on race-related topics;

v. Silence and a reluctance to discuss race or any race-related issues. Silence as an attempt to protect or shield adolescents from the reality of racial discrimination and discernment (Carvalho-Malekane, 2015; Hughes & Johnson, 2001).
All five themes as described above could be identified to some extent throughout data collection and analysis, thus motivating for the transferability of these categories as developed by Hughes and Johnson (2001).

**Rationale**

Caregivers’ experiences impact on their children’s understanding, perception and the sense that they make of the social world in which they live and function daily (Morrow, 2011). Caregiver socialisation influences adolescents’ perceptions and understanding on a wide array of topics. The experiences and stories shared with adolescents on specific topics, such as apartheid, impact on adolescents’ perceptions and understanding of race, ethnicity, culture, and the integration of these factors into their identity (Peck et al., 2014). Research delineates that the consequences of racial inequality such as racial disparity, inferiority/superiority, stigmas, racial bias and discrimination continue to have a detrimental impact on the South African population (Sejas, 2007).

From reviewing the literature it can be determined that exploring the apartheid experiences of caregivers and the experiences they choose to share with their adolescents is significant as it influences the identity development of South African youth (Peck et al., 2014). Literature on the experiences of caregivers during apartheid and the experiences that are shared with early adolescents is limited. Additionally the information available with regard to the impact of socialisation on early adolescents’ understanding of apartheid is limited, and the research that is available is out-dated in that it dates back to the 1990’s or early 2000’s (Stevens & Lockhat, 1997; Norris et al., 2008). The findings of this research study thus contribute to creating a contemporary understanding of adolescents’ understanding of apartheid as influenced by caregivers’ shared experiences of apartheid.

The research questions explored throughout this study is as follows:
• What were caregivers’ experiences of apartheid?
• What are the experiences of apartheid that caregivers share with their early adolescent children?

**Significance**

A study by Holborn and Eddy (2011) highlighted South African families as being distinctively challenged because of contextual, social and economic circumstances such as poverty, unemployment and single-parenthood. All challenges which can be regarded as a direct result of apartheid (Maylam, 2017). Within literature information on the experiences of caregivers during apartheid and the experiences that caregivers share with their children is limited, this gap in the literature thus led to the conceptualisation of this research study.

The significance of this research study lies in the fact that it allows for a fresh perspective on apartheid experiences, as remembered 25 years after the demise of apartheid. The findings allow readers the opportunity to understand the experiences of caregivers as well as the experiences that caregivers choose to share with early adolescents about apartheid. Additionally, information on the South African family and the influence that apartheid had and still has on the family functioning of all South Africans was brought to the forefront throughout this research. Awareness with regards to the importance of shared experiences and perspectives and the crucial impact this has on early adolescent identity development specifically is highlighted throughout the study findings. The study thus aimed to advance literature on families within South Africa, and to inform future efforts to support and educate families about how to share experiences and talk about emotionally laden and sensitive topics such as apartheid.

With regards to literature on apartheid the current research study contributed to the available literature on apartheid experiences. Moreover information with regards to the
aftermath of apartheid experiences and the traumatic influence and impact it continues to have within contemporary South Africa became evident throughout this research study, as echoed by literature cited within the literature overview section.

This chapter outlined the methodology employed in conducting this research study. The following chapter thus continues to present the findings derived from the described data collection and analysis, as well as an in-depth discussion of these findings.

Aim of the Research Study

The aim of this research study was to explore caregivers’ experiences of apartheid and to explore the apartheid experiences caregivers share with their early adolescent children.

Overview of Thesis Chapters

This mini-thesis is presented in a series of chapters for the sake of maintaining a logical flow of information as well as comfortable reading. Below the information contained in each chapter is briefly outlined.

Chapter 1: Contextualisation of the research study, setting the background, and defining the main concepts. Also the rationale and aims for the study are outlined.

Chapter 2: A literature overview of all relevant concepts of this study as well as a discussion on the ecological systems theory as a framework for explaining the contextual setting within which the research population find themselves.

Chapter 3: The methodology, and specific research design, setting, research participants, data collection procedure and analysis are outlined in detail in order to ensure the replicability of this study. Ethics, reflexivity and trustworthiness are also encompassed in this chapter.
Chapter 4: The outcome of the data analysis is discussed within this chapter. This includes defining identified themes, and an in-depth discussion of these themes.

Chapter 5: Reflection and conclusion with regards to the findings, methodology, strengths, weaknesses and recommendations that were concluded from the study.

Chapter Two

This chapter includes a comprehensive literature overview of all the relevant concepts, namely the South African apartheid history, caregiver experiences of apartheid, early adolescence, caregiver influence during early adolescence, and the context of the South African family. The literature overview allows for an extensive understanding of the concepts within this research study, and permits the reader a wider contextual understanding of how each of the concepts relates to the research questions.

Towards the end of chapter two a discussion on the ecological systems theory is also included as a framework for explaining the contextual setting within which the research population find themselves.

Literature Overview

South African Apartheid History

The development of racism and apartheid within the South African context is commonly attributed to the expansion of European colonialism as part of the “scramble” for Africa which occurred during the early and mid-nineteenth century (Sooryamoorthy, 2016). With colonialism came the notion of Western society aiming to civilise natives who were viewed as inferior (Sooryamoorthy, 2016). Colonialism is loosely aligned with Darwinist theories of hierarchy, power and evolution, as applied to human beings and the hierarchical power structures within society (Legassick, 2013). It is reported that this theory of Darwinism...
led specifically white individuals to believe that they were evolutionary superior to native individuals of colour in that they were advancing technologically and increasingly expanding their imperial stronghold (Mhlauli, Salani, & Mokotedi, 2015).

Apartheid emerged during the early 1930’s and the apartheid notions increased in popularity among “Afrikaners” throughout the 1940’s (Sooryamoorthy, 2016). The origin of systematised racial discrimination in South Africa did not originate with the inauguration of the Nationalist Party (NP) in 1948. Rather it occurred as a result of many contributing factors including the mentioned ongoing British colonialism, and increasing racial segregation sanctioned by law long before 1948 which marked the official start of apartheid. Important to mention, is that systematised racial discrimination is not a phenomenon unique to South African history, but can be traced back to the preindustrial period in Europe, Asia and America. In South Africa, more specifically, racial discrimination first became evident during the colonial rule period when the Dutch arrived at the Cape in 1652 (Mhlaul et al., 2015). In the early 1650’s the Dutch established a fort at Table Bay and this marked the commencement of discrimination and desolation for local inhabitants of the area (Sooryamoorthy, 2016). Some of the wrongs recorded during this early time period already include local KhoiKhoi and San members being denied access to essential resources such as water and access to grazing pastures for their cattle and in some cases being robbed of their cattle (Maylam, 2017). The future of South Africa from that point onwards remained mainly influenced by the European settlers and their two polities, namely the Dutch-descended Afrikaners and the British-descended English (Sooryamoorthy, 2016). The formation of apartheid as a system of rule and legalised racial discrimination was mainly brought about by Afrikaner nationalism, as driven by the Dutch-descended Afrikaners (Legassick, 2013). Afrikaner nationalism as an ideology endorsed Afrikaner supremacy, and conditioned the
majority who would, throughout the apartheid era, sporadically attempt to resist subordination (Legassick, 2013).

The Afrikaner nation and its ideology were sustained through two main pillars, namely maintaining their cultural identity through the use of Afrikaans as the official language, and religion within the Dutch Reform Church (Legassick, 2013). Through the employment and upholding of these two pillars a sense of group Nationalism was cultivated and maintained (Clark & Worger, 2016). Thus when the NP gained political power of South Africa in 1948 this party and its supporters found themselves in the ideal position to steer the future of South Africa in any way they desired (Maylam, 2017). The first step in this process was for the NP to take control of all major institutions including the economic, political and educational systems (Clark & Worger, 2016). South African history between 1948 and 1994 is characterised by systematised racial discrimination, thus leading to the term apartheid being coined/introduced, which translates to “separateness” or “apartness” in English (Ramsamy & Ramsamy, 2012). The apartheid ideology was characterised by systematised and rigid racial segregation through which the NP attempted to create separate cultural, political, and social spaces for individuals based on their skin colour (Ramsamy & Ramsamy, 2012). The rules of apartheid went beyond mere demographic segregation and imposed and promoted further racial discrimination on South African citizens through the separation of individuals according to race within the government, labour markets, demographic areas and residency, going as far as instating laws pertaining to interpersonal relationships and marriage specifically (Cooper, 2019). The apartheid era was thus one of pervasive segregation defined by rules deeply embedded within the entire structure and organisation of living within South Africa at that time (Sooryamoorthy, 2016).

In light of the colonial history of South Africa apartheid drew a sharp distinction between citizen and subject. In contrast to white citizens enjoying the rights and benefits of
being citizens, non-white individuals were subjected to economic exploitation, disregarded human rights and civic death (Ramsamy & Ramsamy, 2012). The apartheid regime repressed and imposed dire consequences upon the non-white population of South Africa at both the group and individual levels (Sooryamoorthy, 2016). All spheres of life were affected at all spatial scales, to the extent that recreational spaces such as beaches and play parks were reserved for whites only in most cases, unless otherwise demarcated for other racial groups (Gonzáles, 2017). In order to implement the law and rules of the NP a series of laws was put in place, some of the most prominent laws will be included in the following discussion.

The year 1953 marked the implementation of the Bantu Education Act, a policy which outlined different and separate schooling based on race (Cooper, 2019). Bantu education provided only limited and practical education for Africans of colour, further disrupting equality for years to come as children of colour received education of a destitute nature (South African History Archive, 2018). The curriculum of Bantu Education was inferior to that of the main stream curricula, leaving the children within this education system subjugated and rendering them as inferior in terms of education, cognition, and employment opportunities for many years to come (Clark & Worger, 2016). The Bantu Education system thus ensured oppression and the disempowerment of Africans of colour in more ways than one (Clark & Worger, 2016).

The Immorality Act infringed upon human rights as it postulated that interpersonal and intercultural relations such as “mixed marriages” and sexual relations between whites and non-whites were prohibited (Cooper, 2019). The Immorality Act further specified the placement of blacks and whites in segregated residential areas. The conception of these segregated residential areas caused a myriad of disruption, trauma and sorrow, as people of colour were forcibly removed from their residences and communities, and were ripped apart often resulting in grave violence (Cooper, 2019). Tens of thousands of “Indians” and
“coloureds” were forcibly removed from their homes and relocated to their designated “group areas” where infrastructure was commonly lacking and the sense of community and one-ness was disturbed (Ramsamy & Ramsamy, 2012). In 1953 the notion of segregation was increased by the Reservation of Separate Amenities Act, which enforced segregation within public spheres (Saint, 2012), and facilities such as grocery stores, restaurants, beaches and even transport (Saint, 2012).

The laws and regulations instated by the NP however, did not seamlessly continue as black resistance movements continuously attempted to rise up and empower themselves and their people through resistance and uprisings in the form of protests, boycotts, civil disobedience and strikes (Clark & Worger, 2016). In the move towards equality and the struggle toward democracy leaders and support of liberation movements such as the African National Congress (ANC) and the Pan African Congress (PAC) started making headway and gaining an ever increasing following and support for their cause (Clark & Worger, 2016). These resistance movements and uprisings were continuously countered with violence, assaults and force on behalf of the then ruling party (Posel, 2010). Despite the force encountered during uprisings the ANC in particular kept thriving and continuously established collaborations with likeminded liberation movements (Posel, 2010). These anti-apartheid political movements were met with increased control, force and stricter laws by the NP. The police force was further increased by the 1960’s and the power of state control became increasingly brutal (Clark & Worger, 2016). One of the renowned examples of the ruthless and cruel force of state control is that of the Sharpeville massacre of 1960 (Clark & Worger, 2016; Zukas, 2007). The historically memorable Sharpeville protests were one of the first points of victory for the anti-apartheid movement. Following the Sharpeville protests, the Soweto uprising took place in 1976 which was followed by the murder of Steve Biko who was the popular leader of Black Consciousness (Clark & Worger, 2016; Zukas, 2007). These
and similar historical events created increased awareness and uprising among the repressed South African population (Zukas, 2007). Increased international awareness was also created which led to the international seclusion and sanctions imposed on South Africa (Welsh, 2009). Subsequent to the Sharpeville massacre the leaders and drivers of liberation movements were targeted and brutally silenced, through either life imprisonment and/or the banning of individuals and entire movements by the NP government (Posel, 2010).

The resistance and fight for freedom through liberation movements continued throughout the 1970’s regardless of the imprisonment of influential ANC and PAC leaders. The period from 1970 to the liberation in 1994 is marked by brutality, increased violence and attempts at crippling the liberation abilities of these movements (Maylam, 2017). It is also during this period that the Black Consciousness Movement (BCM) arose, coupled with a strong surge of student activism and protesting specifically against the Bantu Education system (Abel, 2015). The 1970’s were thus marked with detainment, fleeing liberation leaders and the strong violent hand of the NP ferociously trying to maintain its stronghold (Maylam, 2017). In the 1980’s South Africa was expelled from the United Nations due to the continued violation of human rights, and the Soweto massacre where more than 600 students were killed, which also took place during this time period (Maylam, 2017). South Africa in 1980 to 1990 was thus hostile and increasing pressure internationally was placed on South Africa to diminish apartheid and progress toward a free and equal democratic nation (Clark & Worger, 2016). The continuous struggle on the part of the BCM and influential leaders such as Nelson Mandela continued well into the 1980’s (Snail, 2008). When FW de Klerk became president in 1989 leaders both within the NP and the ANC began to recognise that a deadlock had been reached and neither side could win, this led to both parties facing sharp internal divisions (Clark & Worger, 2016; Maylam, 2017; Snail, 2008). Violence and international pressure kept increasing until 1990 when President de Klerk lifted the ban on the ANC, and

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essential negotiations for a free and democratic South Africa began, leading to the release of Nelson Mandela from prison in the year 1990 (Snail, 2008). The following four years saw a painfully negotiated settlement eventually being reached in 1994 with De Klerk and Mandela becoming key figures in the lengthy negotiations toward an officially democratic South Africa in 1994 (Welsh, 2009). Nelson Mandela and the ANC went on to win the election in 1994 where both non-white and white South Africans were awarded the opportunity to vote in the national elections for the first time, and democratic South Africa was established (Abel, 2015).

This account only provides a glimpse of apartheid South Africa and there are many more social and political injustices that were at the heart of apartheid than the above mentioned Acts and historical happenings. However, the mentioned occurrences aim to exhibit the discrimination and grossly unequal circumstances and structural inequality that the political rulers of apartheid instated in South Africa (Clark & Worger, 2016).

**Caregiver Experiences of Apartheid**

Despite the fact that apartheid ended 25 years ago writers argue that even though the laws and regulations have changed, the attitudes and thinking of the majority of the South African population have not transformed completely (Harris, 2016). Although South Africa has improved in terms of laws, equity and segregation, the population of South Africa continues to deal with the aftermath of apartheid and the deep-seated problems it created within the country (Harris, 2016). Apartheid within South Africa thus not only influenced individuals during the apartheid era itself, but the long-lasting effects of apartheid remain evident within contemporary South Africa (Naidoo, Stanwix, & Yu, 2016).

Apartheid experiences remain vividly engraved in the memory of many a South African, and this was again was proved during the data collection of this research study. Upon asking
Participants to share an experience of apartheid that they vividly remembered, not a single participant hesitated to answer or did not have an experience to share. What was interesting though was the stark contrast in the experiences shared by participants from different demographic backgrounds (see theme 1 for a full discussion on these contrasting experiences).

**Early Adolescence**

Early adolescence is a developmental period that occurs between the ages of 10 and 14 years (Paulo, 2005; Pettit, Laird, Dodge, Bates, & Criss, 2001; World Health Organisation [WHO], 2004). The traditional stereotype of adolescence being a stage of unmitigated turmoil in contemporary literature has been replaced with researchers and educators recognising early adolescence as unique and distinct from late childhood and late adolescence or adulthood (Curtis, 2015; United Nations Children’s Fund, 2011). Early adolescence is characterised by rapid physical, cognitive and social changes. Due to these rapid changes multiple stressors bring about endless possibilities for growth and exploration (Sawyer, Azzopardi, Wickremarathne, & Patton, 2018). Early adolescence is a formative period during which youth explore a variety of personal and social adaptations which in turn influence their identity development (Pettit et al., 2001). Decisions made during early adolescence have the chance to influence prominent future personal, social and career outcomes, therefore sufficient support and caregiver influence during this time is emphasised throughout literature (United States Department of Education, 2005).

Identity development makes up a key process of adolescent well-being (Sawyer et al., 2018). The physical, cognitive, and emotional changes that take place during early adolescence commonly leave the individual questioning their self-identity and searching for answers to the question of “who am I?” (Arnold, 2017). Finding an answer to this and related questions is critical to lifelong psychosocial health and well-being (Arnold, 2017). Identity is

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regarded as a multi-dimensional concept, thus it is continually changing as an adolescent progresses from one developmental task to the next (Côté & Levine, 2016; Sawyer et al., 2018). Identity development is usually located at the forefront of the adolescence developmental period, however research has indicated that identity development occurs across the lifespan in a continuous cycle of appraisal, re-appraisal and confirmation (Arnold, 2017; Côté & Levine, 2016).

Thinking regarding human identity dates back to ancient times when philosophers first pondered and debated human existence and being (Côté & Levine, 2016). One of the most prominent theorists who brought identity development to the forefront in the 1950’s is Erik Erikson. Erikson highlighted identity development within his psychosocial developmental theory as a crucial and necessary step in reaching healthy maturity and full human potential (Kroger, 2017). Identity, as Erikson proposed, has been accepted, adapted and transformed by various academics throughout the years. However, literature is synonymous in stating that the context and environment in which an individual finds themselves makes up one of the main influencers of identity. In addition the physical characteristics of an individuals’ close interpersonal relationships and caregivers remain prominent influencers of identity development (Arnold, 2017).

During early adolescence identity formation and self-development is believed to take place in parallel. Identity formation is focused on the stability of the self over time, defining the perceptions, attitudes, values and, most importantly, the identified social roles that remain relatively unchanged over time (Côté & Levine, 2016). Making up part of identity development, is a construct called ethnic identity (French, Siedman, Allen, & Aber, 2006). The development of ethnic identity is especially important within contexts such as the culturally diverse South Africa which is ridden with a longstanding history of ethnic conflict (Nelson, Syed, Tran, Hu, & Lee, 2018). The process of ethnic identity development in most
respects follows the process of identity development in general, and caregivers play a central role in the development of adolescents’ ethnic identity (French et al., 2006; Peck et al, 2014). Caregivers vary in the role they play in this development and may explicitly attempt to teach their adolescent/s about their ethnic identity by either telling them or exposing them to a variety of experiences (Hughes & Johnson, 2001). Or, in contrast when caregivers are of the opinion that adolescents are to explore their identity for themselves they tend to remain objective and allow adolescents to reach a conclusion on their own (French et al., 2006). These different approaches that caregivers employ were identifiable within the data collection and analysis of the current research study.

Family, and specifically caregivers, play an important role in assisting their early adolescent child to develop a strong sense of identity by communicating and also modelling beliefs, values, norms and behaviours as highlighted above (French et al., 2006; Peck et al, 2014). Thus because of the formative nature of this developmental period caregiver influence is an important contributing factor to the identity development of an early adolescent (Nelson et al., 2018).

The extent to which peers and parents’ influence adolescents has been under investigation for the past 50 years, with research focusing on the conflict between parents and peers and also the linkages between these two important contributors and influencers of an adolescents’ life and development (Meeus, Oosterwegel, & Vollebergh, 2002). Literature is unanimous in affirming that parent-peer influence is situational, meaning that in some contexts parental influence is greater, and in others the influence of peers is greater. More specifically for issues pertaining to the future, such as school and career choices, parental influence has been found to carry greater weight (Meeus et al., 2002). And for issues pertaining to the present, such as leisure time and friendships, peer influence was found to be more significant (Meeus et al., 2002). As mentioned the influence of peers on adolescent
Identity development is widely researched and recorded, this is mainly because adolescents prefer to spend more leisure time with peers than with family and caregivers (Lerner, Phelps, Foreman, & Bowers, 2009). Adolescents draw closer to peers who share similar activities and have similar interests, and adolescents’ notions of friendship are mostly focused on the trusted exchange of thoughts and feelings (Lerner et al., 2009). During the adolescent developmental period peer groups evolve from primarily single-sex to mixed-sex groups, this also plays a role in adolescent sexual identity development (Lerner et al., 2009; Meeus et al., 2002). Adolescent peer groups tend to be similar with regards to behaviour and attitudes, and as such the individuals within these peer groups influence and shape each other’s behaviours and attitudes (Meeus et al., 2002; Vietze, Juang, & Schachner, 2019). Peers can thus have either a positive or negative influence on each other during adolescence. With negative influence and peer pressure possibly leading to risky decision making and engaging in problematic behaviour (Vietze et al., 2019), and alternatively positive influence which can lead to congruent identity formation and a feeling of belonging to a group which supports and positively motivates the adolescent (Vietze et al., 2019). Peers thus serve as an important source of social support and companionship for the adolescent, with positive peer relationships leading to adolescents being happier and better adjusted than those who are socially isolated or have conflicted peer relationships (Lerner et al., 2009). Literature enforces the notion that parental and peer influence need not be in conflict with one another. Therefore the caregiver focus of this research does not dismiss peer influence on the identity development of early adolescents, rather peer influence is just situated outside the scope of this research study.

Caregivers are tasked with the obligation to positively influence their adolescent child’s identity development. It is evident based on the research that behaviour modelling is a big contributor to adolescent identity development. Caregivers portray important behaviours,
attitudes, and instructions to their adolescent through a process termed modelling. For example, the behaviours exhibited by caregivers encourage imitation from the adolescent, and by self-disclosure, for example, important personal life lessons are relayed to adolescents (Côté & Levine, 2016).

**Caregiver Influence during Early Adolescence**

Research indicates that relationships with parents/caregivers remain the most important social and emotional resources throughout childhood, adolescence and even well beyond the childhood years (Collins & Steinberg, 2008). The influence caregivers have on the learning, social and attitudinal development of adolescents has been defined as socialisation, as discussed in previous sections of this body of work. The following paragraphs venture into discussing the role of caregivers as the primary socialisation agents of early adolescents specifically.

**Caregiver socialisation during early adolescence.** Broadly socialisation is defined as the process by which youth acquire the necessary skills to contribute and function successfully as members of their social and cultural groupings (Laursen & Collins, 2009). Families make up the main source of adolescent socialisation and encompass the primary setting in which adolescents acquire beliefs, perceptions, attitudes, values and behaviours (Morrow, 2011). Socialisation thus enables individuals to participate actively and effectively within their social, political and economic environment (Baferani, 2015). This transpires through a reciprocal process which starts at birth, continues throughout the lifespan, and is dynamic in nature (Frones, 2016). The various agents of socialisation as identified within literature range from education, religion, parents and peers, however for the sake of focus within this research study, socialisation will be attributed mainly to caregivers as socialisation agents.

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Parenting and caregiver-child relationships are delineated within literature to encompass the main developmental and socialisation processes influencing a variety of adolescent developmental outcomes (Maccoby, 1992; Baferani, 2015; Frones, 2016). Through caregivers sharing their experiences with their adolescent children the discussed events are re-visited, often as a family, and research has found clear relations between children’s emotional understanding of a topic and the sharing of experiences within the family dynamic on that topic (Ochs, Taylor, Rudolph, & Smith, 1992; Reese, Bird, & Tripp, 2007).

Through the socialisation process culture is transmitted and reproduced within each new generation as caregivers hope to instil cultural continuity and competence within their children (Nelson et al., 2018). However, the socialisation process is not necessarily characterised by positive fortifying practices and outcomes, rather inadvertent outcomes such as harsh and neglectful parenting practices often make up part of children’s socialisation processes (Reese et al., 2007). These inadvertent outcomes are often found within the South African context where poverty and poor home and neighbourhood environments are common, this concept and the South African family context will thus be discussed in great detail within the next section of this body of work. Negative environments, parenting practices and exposure to harmful behaviour have the potential to send children on negative trajectories of antisocial behaviour, and poor achievement and adjustment during later life (Kalmakis & Chandler, 2015). As mentioned previously caregivers within the South African context have an important role to play in assisting their adolescent child/ren to develop a strong sense of identity. Additionally caregivers face the burden of assisting their children in developing positive racial and ethnic identities within a societal context of stigma and discrimination surrounding issues of ethnicity and race (Eccles, Wong, & Peck, 2006). Caregivers are thus tasked with not only helping their adolescent/s understand their race and
ethnicity, but also to cope effectively with discrimination and conflict should this arise, and this occurs through socialisation efforts (Hughes et al., 2006). Juang and Syed (2010) report that family cultural socialisation is related to greater ethnic identity exploration and commitment among emerging adults, meaning that caregivers’ role in socialisation extends beyond adolescence. Caregivers’ cultural socialisation influence on adolescents have been found to lead to a variety of different outcomes for the adolescent child, and this has been linked to greater psychological and behavioural adjustment later in life (Juang & Syed, 2010).

Context of the South African Family

The institution of the family is inherently multidimensional, as it affects and is affected by various social, economic, cultural, and political institutions which together form the social structure of any society (Minniear & Soliz, 2019). Thus, changes in the family’s environment constitute changes in the internal family dynamics and interaction (Amoateng & Richter, 2007). The South African family context is different to that of other countries, in that South Africa is unique in its racial and ethnic diversity and also the history and background of apartheid which differentiates the family context in South Africa from that of other countries (Roman, Makwakwa, Lacante, & Tidwell, 2016).

Family as a construct within this study refers to the smallest, organised, durable network of kin and non-kin who interact daily, providing the domestic needs of children and assuring their survival (Roman et al., 2016). South African families are diverse with regards to culture, race, ethnicity and socio-economic status to name only a few, and furthermore the ideas, values and morals imposed on children vary across cultures and races (Roman et al., 2016). As such children from different backgrounds grow up in varying contexts and with differing influences. Within South Africa factors such as poverty, single-parenthood, unemployment and child-headed households are widespread, to the extent that many of these factors are accepted as the norm within communities (Holborn & Eddy, 2011). The context of
family with regards to children within the Western Cape, where this study was conducted, is characterised by high rates of hunger, malnutrition, Foetal Alcohol Syndrome, family violence and unemployment (Western Cape Government: Social Development, 2013).

Kalil (2017) reports that poverty increases the difficulty of caregiving (Katz, Corloyn, La Placa, & Hunter, 2007; La Placa & Corloyn, 2016; Steele et al., 2016). Additionally caregiving that is harsh and inconsistent can increase the risk of young individuals continuing to live in poverty, leading to a cycle of poverty and the continuation thereof within entire communities (La Placa & Corloyn, 2016). Statistics from 2008 indicated that about 5.6 million South African children between the ages of 0 and 17 were living in overcrowded households due to poverty (Statistics South Africa, 2017). Households that are overcrowded are defined as one where there are more than two people for each room in the house, and this figure is constantly rising (Holborn & Eddy, 2011). Two thirds of children in South Africa are growing up in a household where nobody is employed, relying solely on the child support grant in order to endure and cover all living costs (Statistics South Africa, 2017). Caregivers within the South African context thus face considerable barriers in their efforts to fulfil their caregiving tasks, with poverty increasing the difficulty of trying to provide for and protect children, often leading to harsh parenting methods or emotionally distant relationships between caregiver and child (Steele et al., 2016). Additionally, caregivers who are impoverished are likely to be poorly educated, reducing their ability to support and enhance their children’s educational development, for example by helping them with their homework and related educational tasks (Holborn & Eddy, 2011).

South African communities are faced with high HIV/AIDS prevalence which has an undeniable effect on family life. One of the leading causes of children being orphaned is parental HIV/AIDS (Statistics South Africa, 2017). This pandemic often results in child-headed- or single-parent households which are common in South Africa, with statistics
indicating that in 2015 about 90 000 children were in 50 000 child-headed households, additionally in 2008, 859 000 double orphans were reported (children both of whose parents have died) (Statistics South Africa, 2017). These households are at an increased risk of having to cope without adult supervision, monitoring or mentoring, the absence of regular income, and commonly these households are located in areas where services are poor. Single parenthood is common with a total of 55.2% of children under the age of 12 being raised without a father, and 23.1% of children under the age of 13 being raised without a mother (Statistics South Africa, 2017). According to Le Roux-Kemp (2013) the chances of children missing out on schooling, having deficient food security, suffering from depression and anxiety, and being exposed to HIV infections is drastically increased when residing in a child-headed or single-parent household (Statistics South Africa, 2017). The family structure and circumstances has a pertinent influence on children, and both mothers and fathers have crucial roles to play in caring for and bringing up a child, making the discussed statistics a reason for concern.

In connecting the discussion of the typical South African family and the apartheid history of South Africa it is impossible to not consider the significant gap in socio-economic status of South Africans due to previous advantage, and on the other side of the coin, previous discrimination due to the apartheid rule (Botha, 2010). In the South African context structural legacies and socio-economic inequalities were inherited from the decades of colonial and apartheid rule, and as a result the majority of South Africa citizens have been marginalised in terms of access to monetary resources, economic opportunities, proper education and even political participation (Meiring, Kannemeyer, & Potgieter, 2018). The high levels of racism, lack of social mobility, high economic inequality, economic insecurity and exclusion from opportunities and resources that persist even within post-apartheid South Africa are some of the reasons why the experiences of apartheid of white South Africans
differed so drastically from that of other South Africans (Meiring et al., 2018). This notion became apparent throughout reviewing the literature and in data collection and analysis, echoing stated literature on this topic.

Apartheid as described within this body of work, was a period marked by violence, discrimination, and economic and social hardship, and so many more negative connotations can and have been made to apartheid. Important for this research study however is to emphasise the aftermath of these traumatic apartheid experiences, and the long-term consequences and emotional scars that experiences such as these leave. Trauma and a strong theme of loss and having being wronged is still very much evident within the lives and attitudes of the majority of South Africans, as a direct implication of the apartheid rule.

**Theoretical Framework**

This study is located within the social constructivist research paradigm (Chen 2012; MacFralane & O’Reilly-de-Bruin, 2012). However in order to allow for a comprehensive understanding of the contextual aspects influencing the applicable population of this research study the ecological systems theory of Bronfenbrenner is utilised.

Bronfenbrenner’s ecological systems theory as developed by influential theorist Urie Bronfenbrenner is aimed at explaining the interaction between the individual and the environment (Ben-David & Nel, 2013). This theoretical framework describes the individual context as an interactively created organisation of external influences that is mediated by a variety of direct systems that simultaneously influence the individual (Bronfenbrenner, 1978). This ecological systems model provides a departure point for understanding the contextual aspects influencing individuals and is applicable to the population of this research study in that it allows for the incorporation of several systems and key players in the life of the
individual, and incorporates the different interconnected systems that influence the experiences, perceptions and family context sharing that is integral to this research study.

The ecological environment according to Bronfenbrenner is made up of a set of structures that are each nested inside the other. The influence of the environment is described as bi-directional in that individuals are influenced by the environment and in turn individuals influence the environment through their interaction with it (Ben-David & Nel, 2013). At the core of this system is the microsystem which makes up the immediate setting of an individual, thus incorporating the systems that are closest to the individual. For the purpose of this research study the microsystem includes the family context which comprises of children and caregivers, furthermore the microsystem includes the extended family, school and community environment (Bronfenbrenner, 1979; Veléz-Agosto, Soto-Crespo, Vizcueondo-Oppenheimer, Vega-Molino, & García Coll, 2017).

Bronfenbrenner termed the interaction between the different microsystems the mesosystem, the importance of this lies in the fact that an individual’s ability to thrive within their immediate environment such as family, school and community is dependent on the relationships and interactions between and within these systems (Swart, Engelbrecht, Eloff, Pettipher, & Oswald, 2004).

The ecological environment, also known as the exo-system is the third system described by Bronfenbrenner. This extends beyond the individual’s immediate environment, and is defined as one or more settings that do not involve the developing person as an active participant, but within which events occur that influence or affect the individual (Landsberg, Kruger, & Swart, 2011). An example of the exo-system influencing children specifically could be that of the parental workplace, where circumstances within a parent’s employment
do not fall within the immediate environment of the child but nevertheless indirectly impact the child.

The outermost system is the macrosystem, this system is not a specific framework, but rather comprises of cultural values, customs, laws, social roles, and economic structures that influences all the other systems (Bronfenbrenner, 1979). The apartheid rule is an example of a macrosystem, in that apartheid affected and still affects the South African population and the interactions between the different systems. Thus the principles defined by the macrosystem have a cascading influence throughout the interactions of the other layers (Ben-David & Nel, 2013). Apartheid made up part of the macrosystem determining the specific rules of the exo-, meso and microsystems that occur at the level of everyday life and steered the course of behaviour and development (Donald, Lazarus, & Lolwana, 2010).

The chronosystem refers to the timeframe within which all the above described systems interact, and it involves the chronological change in all the systems. The chronosystem thus includes the historical context, and the apartheid system is a good example of this dynamic and how the history of apartheid has affected many individuals in a variety of different ways (Swick & Williams, 2006).

Caregivers within contemporary South Africa experienced the turbulent years of apartheid first hand, and even though their children were born into a democratic South Africa, their experiences cannot be separated from the historical past of the country, and even within the lives of early adolescents the historical context affects their personal perspectives and meaning-making (Soudien, 2007). From the above statement it can be deduced that when conducting research on the topic of apartheid the incorporation of all systems within the individuals’ environment, such as with Bronfenbrenner’s theory, is important because

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apartheid had, and still has, an influence within and between these systems (Ben-David & Nel, 2013).

This chapter outlined the findings of the literature overview, and allows for a background understanding of all the relevant concepts of this research study. Next the methodology employed within this study is discussed.
Chapter Three

Methodology

Research Approach

This research study utilised a qualitative research approach which was explorative in nature. Qualitative research allowed for an in-depth exploration of apartheid experiences and for the gathering of explorative, subjective information on experiences and descriptions as gathered from the participants themselves (Pietkiewicz & Smith, 2014). Exploratory research does not aim at defining and testing hypotheses, but rather seeks to provide new explanations and accounts of experiences (Reiter, 2017), which enabled the researcher to gain familiarity with the topic (Stebbins, 2001). Because minimal literature is available on the topic of caregiver experiences of apartheid an exploratory qualitative research approach was suitable for this research study in that it assisted in gaining insights and familiarity within the subject area.

Qualitative research has much to offer when exploring individuals’ feelings or asking participants to reflect on certain lived experiences. Because qualitative research employs the use of words, language and meaning making this type of research embraces intersubjectivity, as opposed to the use of numbers and statistics within quantitative research, allowing the qualitative researcher to explore shared understanding, emotion, perception or feeling regarding a situation or phenomenon. In essence qualitative research sets out to make sense of social phenomena and the meanings that individuals attach to different social phenomena (Biggerstaff, 2012).

Within qualitative research emphasis is placed on the richness of participants’ descriptions, thus favouring data collection methods such as interviews, observations and focus groups where detailed descriptive data can be gathered. The perspective of the individual is what qualitative research aims to capture, and in doing so the individuality of
each participant is included in the findings of the research (Howitt, 2016). This type of research is characterised by its examination of the constraints and phenomena of everyday life, meaning that great detail about the lives of individuals and their meaning making processes with regards to everyday social phenomena is captured within qualitative research (Howitt, 2016). The researcher thus makes up an integral part of the research process and as such is not an objective observer of this process but rather an active participant. It is for this reason that a section on trustworthiness is commonly included in qualitative research studies (Connelly, 2016).

With regards to philosophical orientation, qualitative research promulgates a disregard toward positivist thinking and rather advocates for the use of post-modern perspectives, meaning that qualitative researchers are of the view that multiple versions of reality exist. It is based on this premise that the generalisation of knowledge is dismissed, because in reality the generalisation of any knowledge/experience is rarely ever possible. This type of research adheres to post-modern sensibility, meaning that the methods used in conducting research are chosen and employed in a specific manner so as to get closer to the real-life experiences of individuals (Denzin & Lincoln, 2002). This sensibility is believed to allow for a more empathetic approach to research which allows for empowerment, activism and participation in the research process (Howitt, 2016).

In considering the above characteristics of qualitative methodology it can be deduced that by employing qualitative methodology to the current research topic, the researcher was best able to answer the set out research questions.

**Research Design**

The research conducted in this study was exploratory in nature. This specific design was chosen because limited focus and research on the topic of caretakers’ experiences of
apartheid and the subsequent experiences that they share with their early adolescents, is available.

**Research Setting**

The research study was conducted in the Cape Town Metropole region. Participants were recruited from a variety of non-profit organisations, community-based organisations, religious institutions and general businesses and organisations which represent culturally, racially and socio-economically diverse settings. These organisations were identified as they commonly attract individuals from low, middle and middle to upper income communities, allowing for a demographically diverse sample as explained in detail below.

It was important for the researcher to remain mindful in acknowledging the diversities that exist within differing communities, as well as the resources and services available. The researcher identified these organisations and institutions situated in the communities of Tableview and Athlone as these communities attract people residing in low-income communities. Research indicates that low-income communities can consist of environments that are characterised by high levels of unemployment, poverty, substance abuse, crime and low levels of education (Evans, 2004).

To ensure a diverse sample, the researcher also identified organisations and institutions situated in Rondebosch and Bellville as these communities attract individuals from middle and middle-upper income communities. These communities are well resourced, have higher levels of education and higher levels of employment. These communities are situated between 10 to 20 kilometres from Cape Town’s central business district.

These organisations and institutions from lower, middle and middle-upper classes were chosen to accommodate for a diverse group in terms of race and socio-economic status. The outcome would not be used for comparative purposes, but to include a more heterogeneous sample (Patton, 2005).
**Data Collection and Procedure**

Data collection commenced upon obtaining ethics approval from the University of the Western Cape’s Human and Social Sciences Research Ethics Committee (HSSREC). After recruitment procedures as described above took place the contact details from prospective participants were collected. A contact session with each prospective participant was arranged allowing them an opportunity to ask questions about the research study, and information sheets were handed out (Appendix B) providing further details of the research study. Caregivers who expressed an interest to participate in the research study were then asked to avail themselves for an interview.

Written informed consent from all participants was obtained (Appendix C). Once informed consent from participants was obtained, the practicalities surrounding the data collection procedure were discussed with participants and finalised. The details about the location, date and time of the interviews were arranged according to the participants’ schedules in a manner that was convenient and comfortable for the participants. Before the commencement of any data collection, sufficient time was spent on building rapport and techniques such as self-disclosure were utilised in order to ensure that participants were comfortable with the researcher and the data collection process. The researcher aimed to be mindful and authentic throughout the research process so as to create an environment that ensured participants’ freedom of expression, and which was conducive to the participants feeling comfortable in expressing their views and experiences freely. The researcher also made a conscious effort of treating each participant with respect by demonstrating empathy and refraining from a patronising or intimidating attitude.

The researcher wants to again acknowledge the gross unequal and disadvantageous nature of apartheid, and through using terms such as black, white and coloured the labelling of individuals is not in any form being justified or encouraged. However, for the purpose of
this study the racial categorisation, as described by Black Economic Empowerment consists
of two racial categories, black and white. These terms were thus utilised in describing the
diverse sample which represents the racial categories as embodied within South Africa (South

The first step of the data collection process was that of collecting demographic
information from the participants (Appendix D). Thereafter, individual semi-structured
interviews were conducted by the researcher, these interviews were audio-recorded after
receiving written informed consent, additionally the researcher again verbally confirmed
permission to audio-record the interviews before the commencement of each interview. An
interview schedule (Appendix E) guided the interview process. Semi-structured interviews
consist of some structure in that the planned interview schedule is worked out beforehand
(Kallio, Pietila, Johnson, & Kangasniemi, 2016). This schedule included questions exploring
the general themes and topics which the researcher aimed to cover, and the range of questions
were set out to include open-ended questions which allowed the participants to provide
detailed responses.

The interview questions were of an explorative nature comprising of open-ended
questions. Questions were developed in such a manner that participants’ subjective
experiences of apartheid could be elicited. Where needed further probing questions on the
experiences that caregivers share with their early adolescents on apartheid were included
throughout the interviews. Interview questions were formulated by available theory and
literature on apartheid experiences and socialisation between caregiver and adolescent,
additionally these questions were guided by the research questions of this research study.
Interviews lasted approximately 30-40 minutes, and were audio recorded (as per informed
consent form, Appendix B). After data collection took place the anonymity of participants
was ensured during the write-up of the findings by replacing participants’ names with a

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participant number, also no identifiable information was requested in either the demographic information sheet or during the interview.

Participants

Purposive sampling was employed in recruiting participants for the purpose of this research study. Purposive sampling is a non-probability sampling technique meaning that participants are gathered in a process that does not give all individuals within the population an equal chance of being included in the research. Purposive sampling is the deliberate choice of including a participant in the research study due to specific qualities that the participant possesses (Etikan, Musa, & Alkassim, 2016).

The inclusion criteria were thus as follows, participants had to be the caregiver of an adolescent between the ages of 10 and 14 years old, at the time of data collection, and the participant had to have experienced the apartheid era in South Africa. The rationale behind the inclusion criteria was that because early adolescents are influenced by the perspectives and attitudes of their caregivers, those caregivers who have experienced apartheid in South Africa will influence their adolescent’s identity development, more specifically their ethnic and racial identity development through the process of socialisation as explained in the literature overview section. The exclusion criteria outlined that caregivers of young adolescents below the age of 10 or older than 14, at the time of data collection; caregivers who do not reside in the Western Cape, and caregivers who did not experience apartheid first hand, were not legible to partake in this research study.

Participants were recruited by the researcher visiting the abovementioned community centres, non-profit organisations, community-based organisations and general businesses located within Cape Town communities, seven of the participants were recruited in this manner. Additionally, the researcher placed participant recruitment pamphlets (Appendix A) on noticeboards at the various recruitment sites, however only one participant was recruited
via the pamphlet. The aim was to recruit a diverse sample of individuals that are representative of the diverse South African population (The South African Department of Trade and Industry, 2004). Three of the participants identified their race as “black”, two as “white” and three as “coloured”. Additionally the participants were diverse with regards to socio-economic status and areas of residence.

Fetters, Curry and Creswell (2013) recommend using a small sample as it enables the researcher to gain an in-depth perspective and understanding of the phenomenon under study. Making the total of eight participants included in the research adequate. It should however be mentioned that this was not the original aimed sample size; the researcher experienced difficulty in recruiting participants, when individuals were approached with the invitation to participate in the research study they expressed that they would rather not participate, due to various reasons. The most prominent reason being the racially laden topic of the research and being cautious of saying the wrong thing or upsetting someone by participating.

**Table 3.1**

*Participant Demographics*

<table>
<thead>
<tr>
<th>Participant number</th>
<th>Gender</th>
<th>Age</th>
<th>Race</th>
<th>Place of Residence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant 1</td>
<td>Female</td>
<td>29</td>
<td>Black</td>
<td>Nyanga East</td>
</tr>
<tr>
<td>Participant 2</td>
<td>Female</td>
<td>52</td>
<td>Black</td>
<td>Goodwood</td>
</tr>
<tr>
<td>Participant 3</td>
<td>Male</td>
<td>55</td>
<td>Black</td>
<td>Goodwood</td>
</tr>
<tr>
<td>Participant 4</td>
<td>Female</td>
<td>46</td>
<td>White</td>
<td>Stellenberg</td>
</tr>
<tr>
<td>Participant 5</td>
<td>Female</td>
<td>37</td>
<td>Coloured</td>
<td>Elsies Rivier</td>
</tr>
</tbody>
</table>
Participant 6  Female  39  Coloured  Mannenberg

Participant 7  Female  43  Coloured  Delft

Participant 8  Female  49  White  Tygervalley

Participant narratives. In order to provide the reader some context and insight into the research participants and the data collection process a short narrative of each participant and their attitude throughout the interview process is included. These narratives are informed by the researcher’s personal journal that was kept throughout the data collection phase of the research study, and also by participants’ disclosure of information throughout the audio-recorded interviews.

Participant 1 is a 29 year old, educated black female, she had her son when she was very young and is now a single mother. While she is a committed mother she is adamant to be a successful career woman and to create the best possible future for her and her family. Her son’s behaviour at school worries her as he has had an altercation recently with a boy of a different race who called him degrading names. She tries her best to support her son and to encourage him to not get involved in any fights or disputes of any nature, but she feels he is at quite a difficult developmental stage, which leaves him not wanting to open up and discuss his personal life with his mother. Participant 1 was very relaxed and open to discussion during the interview, the conversation flowed freely and an open and sincere atmosphere was present throughout the interview.

Participant 2 is a 52 year old, black woman who has a successful career despite being disadvantaged with regards to educational opportunities in the past. She has four children, two of whom are between the ages of 10 and 14 years old. She is happily married, and in her
personal life she tries to not expose her children to racial conflict or discussions as she feels that they should make up their own minds based on the experiences that they have with others. The interview with Participant 2 started off feeling very rigid, and she expressed her concern of saying something wrong or offending others. However, after the initial rigidity wore off the interview continued in a more comfortable manner with the participant giving lengthy answers as well as justification for the responses given to the set of interview questions.

Participant 3 is a 55 year old business man. When discussing the topic of apartheid, a sense of bitterness and blame was experienced by the researcher, as the participant took on a confronting stance throughout the interview. However, this reaction was expected at the outset and conceptualisation of this research study due to the researcher coming from an advantaged background and as such the necessary reflection and disclosure followed. With regards to sharing apartheid experiences with his children participant 3 expressed that he only shares the truth of what happened with his children, and they are then free to decide what they want to do with that information. This interview left the researcher feeling emotionally exhausted, and in need of reflection, which is where the journaling process proved to be particularly valuable.

Participant 4 is a white, 46 year old, recently divorced mother of two children, one of whom is between the ages of 10 and 14 years old. Participant 4 at first was hesitant to openly discuss apartheid, and expressed her fear of saying something “wrong” or stepping on toes. The interview’s initial discomfort faded as the interview continued and the participants realised that there really was no wrong answer to the interview questions. With regards to sharing apartheid experiences with her children participant 4 expressed that when asked about apartheid by her children she always responds truthfully, but other than that she tries to not
discuss matters of a racial nature, in an attempt to allow her children to construct their own opinions and attitudes regarding racial matters.

Participant 5 is a 37-year-old woman of colour from a disadvantaged background. She has one daughter of 12 years old, and she says that her daughter is disinterested in discussing apartheid, so they rarely ever discuss any topics of a racial nature. She shared some traumatic apartheid experiences with the researcher, however the researcher got a sense that the participant wasn’t fully comfortable or at ease in discussing this topic with the researcher and only shared selective experiences and opinions which she felt would be acceptable to share.

Participant 6 is a 39-year-old coloured female from Mannenburg, she was very open to the discussion and participated whole heartedly in the interview. She comes from an impoverished community ridden with crime and other social concerns. She was very open and honest and expressed opinions and concerns surrounding the topic of apartheid, and a sense of acceptance, comfort and ease of disclosure was experienced during this interview by the researcher.

Participant 7 is a reserved 43-year-old female who is the legal guardian and thus caregiver of a 13 year old boy. She is a soft and calm lady who, even though she was severely disadvantaged during apartheid, portrays forgiveness and reconciliation. Matters of a racial nature do not seem to interest her and in her opinion discussions of apartheid should be something of the past and focus should rather be placed on bettering the current South Africa. Overall this participant seemed to have only participated in the current study not because she had a specific opinion she wanted to get across but rather because she would have felt too bad to decline the invite to participate. The interview flowed comfortably and an accepting attitude toward both the researcher and the topic being researched was experienced.
Participant 8 is a 49 year old white female from a privileged background. She was the only participant who responded to the pamphlet recruitment, and upon meeting her she seemed quite hesitant, and concerned of saying the wrong things, but nonetheless was interested in participating in the study. Her experiences and memories of apartheid were very vague, as according to her apartheid did not influence her personally, and she is of the opinion that her children are to create their own attitudes and perceptions regarding race and apartheid and that she does not have the right to influence them in this regard in any way. Whenever her children ask questions about apartheid she would refer them to Google, because she believes she does not have all the facts.

Data Analysis

After conducting the interviews, the researcher transcribed the audio-recorded interviews verbatim so as to enable data analysis. Each participant was given a number during the transcription process, which was then used throughout analysis and the discussion of findings in order to ensure the anonymity of the participants. The transcribed data was analysed using thematic analysis as described by Braun and Clarke (2006), this type of analysis is a qualitative analytic method widely used within psychological and sociological research, and it allows for the identification, analysis and reporting of patterns as identified within gathered qualitative data (Braun & Clarke, 2006).

Braun and Clark’s (2006) six phases of thematic analysis will be outlined next. The first phase consisted of organising, transcribing and collating gathered information, and in this first phase preliminary themes and possible answers to the research question arose. Through the process of transcription, the researcher kept comprehensive notes on patterns of meaning and potential interests within the collected data as they came to the forefront (Braun & Clarke, 2006). The second phase was to generate initial recognisable codes, and a search for themes was launched where different codes were sorted into potential themes. Following
the identification of themes, a refinement of themes commenced where all information that cohered together meaningfully was identified which then informed the next phase of defining and naming themes. Each individual theme was then analysed in detail and written up (Braun & Clarke, 2006). Finally, a coherent analysis of the themes as a whole commenced where the aim was to find answers within the themes to the research questions. The final report and write-up of the thematic analysis endeavoured to provide a concise, coherent, logical, truthful and non-repetitive account of the experiences that the data revealed, both within and across themes (Braun & Clarke, 2006).

**Trustworthiness**

Trustworthiness in qualitative research is the evaluation of the quality of the research and output that is brought about by research that is qualitative in nature (Merriam & Grenier, 2019). Guba (1981) identifies the four criteria substituting a trustworthy study as credibility, transferability, dependability, and conformability. Trustworthiness is important in qualitative research because it ensures the credibility of the findings, as qualitative researchers aim to design and incorporate methodological strategies in order to ensure the trustworthiness of the findings through incorporating the four criteria as stated above in both the design of and methods employed in conducting research (Aguinis & Solarino, 2019). Trustworthiness is thus the manner through which rigor is ensured within qualitative research (Maher, Hadfield, Hutchings, & de Eyto, 2018).

Credibility refers to whether a study measures what it sets out to measure (Shenton, 2004). Credibility in this research study was ensured by depicting the clear and authentic views and opinions of participants, and also the primary researcher was in constant consultation with both the research supervisor and an independent coding assistant throughout the data analysis process so as to confirm the outcome of data analysis and the findings. Transferability refers to the generalisability of the research findings to other settings.
or groups of individuals (Guba, 1981). Transferability was ensured by providing sufficient
details about the researcher, the interview schedule used, context, procedures and participants
in the final research document allowing the research study to be replicated in future.

Dependability refers to the replicability of the study, and similar results should be
obtained if this study is repeated (Shenton, 2004). The researcher ensured dependability by
keeping a detailed account of the research activities and procedures. Lastly, conformability
refers to the objectivity of a research study. Objectivity was achieved through strictly
adhering to the research process and protocol as outlined within the initial research study
proposal, the use of an independent coding assistant, as well as the management of
subjectivity through practices of reflection, supervision and journaling (Morrow, 2005).

**Reflexivity**

Within qualitative research, reflexivity is used by researchers to validate their research
processes and practices (Pillow, 2003). Reflexivity refers to the continuous reflection of the
researcher on their own values, actions and perspectives and how these influence the research
setting, data collection, analysis and final write up (Gerrish & Lacey, 2006).

One way of remaining reflexive is journaling and recording one’s feelings, thoughts,
and activities linked to the process of research (McGhee, Marland, & Atkinson, 2007). The
researcher kept a reflexive journal throughout the research process, and attempted to remain
reflexive and aware of the emotional influence that the research process had on a personal
level. The content within the reflexive journal was often discussed and reflected on during
supervision, additionally the following paragraphs touch on the researcher’s experience of the
research process as accounted for within the journal.

In being a white female from a privileged background the researcher acknowledges
the possible implications this could have had, not only on perceived bias but also on

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participants’ responses. The demographic background of the researcher was thus acknowledged and taken into account throughout data collection, analysis and interpretation. Upon reflecting on the research process the researcher acknowledges the fact that their demographic profile possibly hindered the honest and truthful accounts and experiences that were shared by participants because of a possible perceived power dynamic. Overall the research process was one of facing and overcoming discomfort in discussing apartheid as it remains a racially laden topic, and also one of embracing a degree of discomfort in exchange for a glimpse into the personal lives of participants which the researcher would never have gotten the opportunity to explore otherwise. The experience for the researcher personally was one of caution and the researcher often found herself having to remind herself of her role as researcher and interviewer as many of the participants constantly sought validation and after responding to certain questions they would wait or ask the researcher to express how she felt about the given topic. This was possibly because of the caution and wariness experienced by participants, and they thus sought validation from the researcher before continuing in expressing and sharing their experiences.

The rapport building process for the researcher was very important in that she felt the discomfort herself, and could only imagine the discomfort and uncertainty that participants were experiencing, thus the researcher often used self-disclosure as a technique to build rapport with the participants and make them feel more comfortable. Also the researcher did not rush the process and allowed sufficient time for answering questions, and allowed the participants the opportunity to ask questions before starting with the audio recording of the interviews.

Ethics

Upon receiving ethics approval from the University of the Western Cape’s HSSREC the participant recruitment process was initiated. Firstly written informed consent as
discussed within the data collection section was sought. The participants were informed with regards to confidentiality, and it was explained to the participants that the interviews would take place in a private space, and that the researcher would practice discretion throughout all the steps of the research process. With regards to anonymity no identifiable information was made available and only the researcher and supervisor of the project have access to original gathered information. To ensure confidentiality the demographic information and transcribed interviews were then, and still are, stored in locked filing cabinets and storage areas within the Psychology Department of the University of the Western Cape. Only identification codes were used on data forms, and computer files which are password-protected.

After five years these documents and files will be permanently destroyed. Hard copies will be destroyed by shredding, and computer files will be permanently deleted. The anonymity of participants was further ensured during the write-up of the findings by replacing participants’ names with a participant number, also no identifiable information was requested in either the demographic information sheet or during the interviews. Also it was explained to participants that they have the right to withdraw from the research study at any time with no negative consequences.

It was required of the participants to give written informed consent for the audio recording of the interviews, this was included within the consent form. Care was taken to protect participants against any adverse emotional reactions and sensitive interviewing was ensured by maintaining a code of ethics throughout the semi-structured interviews. Referral and containment measures were put in place should any participant have had an adverse reaction, in which case referral to an appropriate professional would have been made (Appendix F). However no adverse reaction on the part of the participants was experienced throughout data collection thus no referral was necessary.

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Chapter Four

Findings and Discussion

The diverse experiences discussed within the findings are presented not as contested truths, but as unique individual perspectives that arose from the specific contexts and experience descriptions of each participant. As a result, statements that may appear to be in conflict, or contradict one another are not to be viewed as problematic, rather as multiple valid experiences of diverse complex individuals. Once more the researcher wants to stress her complete condemnation of labelling and racial categorisation, the truthful experience and quotes of participants are included so as to contribute to the richness and sincerity of the research study and not to justify or enhance racial categorisation.

Table 4.1

Themes Derived from Thematic Data Analysis

<table>
<thead>
<tr>
<th>Theme number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Theme 1</td>
<td>Similar definitions, and an abundance of varying experiences</td>
</tr>
<tr>
<td>Theme 2</td>
<td>Incredulous adolescents</td>
</tr>
<tr>
<td>Theme 3</td>
<td>Generational progress</td>
</tr>
<tr>
<td>Theme 4</td>
<td>Caregiver reluctance to discuss emotionally laden topics such as apartheid</td>
</tr>
</tbody>
</table>

Theme 1: Similar Definitions, and an Abundance of Varying Experiences

Throughout data collection it was interesting to note that all eight participants defined apartheid in a similar manner. This definition essentially highlighted separateness, and the separation or segregation of individuals based on their race and skin colour. The similar
definitions of apartheid were given by all participants, regardless of their race, socio-economic status, age, or any other demographic factor. This notion can be clearly identified within the following participants’ answers to being asked: “What do you understand by the term ‘apartheid’?”

Participant 1: “Uhm... my understanding about the term apartheid, it is about racial segregation, uhm for me when I hear the word apartheid, for me it’s like oh okay, whites and blacks.”

Participant 5: “It is the separating of races, I don’t want to say races because...there is no race, but ja, separating it.”

Participant 7: “It is the separation and, apartheid is just the separation of people. And people were judged by their skin colour, your background, your hair-type which area you come from the language you speak, your family, if you are rich or if you are poor. That is basically what is keeping the minority one side and ja.”

These quotes embody participants’ understanding of apartheid as characterised by separateness and segregation of individuals based on their race. This research study’s participants and South Africans at large are reported to be familiar with the topic and definition of apartheid (Maylam, 2017).

The irony within this theme is the stark contrast found between the similarity in participants’ definitions of apartheid and their vastly different experiences of apartheid. This theme became pronounced throughout data analysis and during the interview process this contrast was interesting for the researcher to note. This theme highlights the profound influence apartheid had, and continues to have, on some South Africans, and in contrast the seemingly insignificant impact it had on the lives of others. In order to demonstrate these
contrasting experiences of apartheid see the below participant responses to the request to share an apartheid experience with the researcher:

Participant 2: “Yoh I remember this one night the police came, they didn’t even knock on the door, I was roundabout more or less 9, 10 years old, it was the same year I think. So they just kicked down the door, it was roundabout 10 maybe 11.”

Participant 4: “I will never forget the beating my mom got from the police officers, that is the one….She didn’t know where he was (her brother) but according to them she knew and she was hiding him, they destroyed everything in the house and here the three, me and my two sisters, we were sitting in a corner we can’t protect our mom, because there is this big guy just coming, big white cops are coming and they just beating my mom, I mean I’m not saying slapping I’m saying beating.”

Participant 5: “There was a lot of resources that I didn’t have, and also access was limited for me and my family in terms of education and we weren’t that well off.”

In contrast to the above traumatic experiences indicating severe violence, discrimination and disadvantage are the following experiences indicating a sort of indifference when being asked to share an apartheid experience:

Participant 4: “When I was small I didn’t really notice or think anything of it, but the farm workers had for example their own cutlery, and we never even questioned our parents on why... that was just the way it was. Their mugs and plates were always in the one cupboard, and then our stuff were in the kitchen.”

Participant 8: “Well the only thing for me is, obviously when we were at school, in the 80’s and early 90’s we didn’t have any people of colour in our schools, and then probably I think it was 1990, ’91 then they opened up the schools for everyone, so that is the only thing
that I can really remember, but it wasn’t a bad thing you know, it was a good thing, it was good to have people of colour in the schools. ”

When comparing the above accounts of apartheid experiences the stark contrast in experiences is undeniable. Ironically the same participants who had these varying experiences defined apartheid similarly. This indicates a type of discrepancy between the understanding and memories individuals from different demographic backgrounds have of apartheid. This theme did however, not come as a surprise. From the historical happenings discussed within the literature review section one can denote the vast difference in the apartheid experiences of the majority versus that of the minority South Africans. This theme highlights the unfair and discriminatory nature of the apartheid era again, and the continued consequences that apartheid experiences have on many South Africans, even in contemporary times. The majority of South Africans who were previously disadvantaged remain to some extent affected by the memories of traumatic experiences and the repercussions thereof (Naidoo et al., 2016), while the minority seems to be unaffected in the aftermath of apartheid.

One example of the continued aftermath of apartheid and also one of the experiences which impacted me as the researcher personally is that of a participant sharing a childhood experience where, as a little girl her mom was gravely assaulted by police, in the presence of her three young daughters (all under the age of 10 at that time). The participant’s strong emotions of regret and being self-patronising because of her inability to protect her mother at that time remains with the researcher.

Participant 4: “I will never forget the beating my mom got from the police officers, that is the one....She didn’t know where he was (her brother) but according to them she knew and she was hiding him, they destroyed everything in the house and here the three, me and my two sisters, we were sitting in a corner we can’t protect our mom, because there is this
big guy just coming, big white cops are coming and they just beating my mom, I mean I’m not saying slapping I’m saying beating...... My mom was very shorter than me so she was just lying there in the corner getting kicked, it is your mom come on man you obviously want to help, but you are so afraid you can’t do anything. And the neighbours are coming too, standing around outside, but they also can’t do anything, because ooh nobody can stand up against... nobody could stand up against them. They have beaters... hitting... my mom was full of blood I remember...

The above quote demonstrates a traumatic experience and memory, similar to that of numerous other South Africans who found themselves on the wrong side of the apartheid rule.

Theme 2: Incredulous Adolescents

Incredulity is defined as the inability to believe something because it is very surprising or shocking (Collins English Dictionary, 2018). All participants of this research study had this theme in common: the perception that their adolescent displays a kind of disbelief, scepticism or incredulity towards the happenings of apartheid. Participants reported that their adolescents would react with shock and disbelief in response to being told stories of apartheid. It is, however, important to mention that South African school children, including those within the early adolescent stage are taught the history of apartheid as part of their school curriculum, this was confirmed by the caregivers participating in this research study.

Regardless of being taught the facts regarding South African history and apartheid the reality of the experiences of the majority of South Africans during apartheid comes as a shock to the youth and they are sceptical and incredulous of the truth of what life in South Africa was like during this era. The incredulity of early adolescents can be easily identified in
the following verbatim quotes caregivers gave in answering the question: “How does your child/ren usually react to discussions on the topic of apartheid?”:

Participant 4: “She...it’s always astonishing because she can’t, she can never imagine a world where people were treated that way, where a minority treated a majority that way, and the minority allowed the majority to treat them that way.”

Participant 5: “She is always in disbelief because to her it is not even possible, it can’t be possible it is maybe like a movie that can be watched. It is far-fetched to her, to her it is far-fetched.”

Participant 7: “Then my children’s eyes are this big and they can’t believe what I’m telling them. Yes they can’t believe these things really happened.”

Participants reported that upon being told stories about apartheid their adolescents would react with emotions of shock and disbelief. These emotions are in reaction to the unfair and discriminatory treatment of individuals of colour, and adolescents are described as being unable to fathom how the apartheid rule was upheld, or even instated in the first place. The sharing of apartheid experiences often led to curiosity on the part of adolescents, resulting in them mostly asking questions about the logistics and practicalities of the apartheid rule.

Interestingly caregivers stated that even though their adolescents reacted with shock and disbelief to the happenings of apartheid, the adolescents did not display any further spontaneous curiosity regarding the apartheid history of South Africa. Only when presented with the topic would adolescents continue to ask a few questions on how and what happened, but other than that adolescents did not have questions about apartheid. This might be because of a variety of reasons, one being that the school curriculum provides South African children with a general understanding of apartheid, the origins of apartheid, and what happened during apartheid. Also adolescents’ lack of curiosity can possibly be ascribed to the availability of

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knowledge and the fact that if they ever have questions regarding a certain matter they can make use of the internet and other knowledge sources which are generally easily accessible.

The conceptualisation of this theme lends the researcher some hope with regards to the future of South Africa and its younger generations. The argument can be made that if the younger generation have difficulty in believing that the horrendous actions of apartheid really happened it indicates a type of generational progress, which leads to the discussion and inclusion of the subsequent theme; generational progress.

**Theme 3: Generational Progress**

Caregivers frequently reported that their child/ren do not “see race”. They argued that even though their adolescent/s are aware of the apartheid past and the racially tense social environment within South Africa, this new generation embodies a sense of generational progress.

Generational progress in the sense of tolerance and respect, where the increase of friendships and romantic relationships across racial lines are widely accepted and encouraged, became evident in the discussions with caregivers, thus creating a sense of hope and optimism for the future of South Africa. The following quotes display this notion of generational progress:

Participant 3: “*they (participant’s children) have no discrimination against any children of another colour that are maybe with them in school or whatever, absolutely no discrimination.*”

Participant 4: “*I think they (children) are past apartheid, they don’t consider it as much as we used to, our children I think really don’t see colour, my children have knowledge about apartheid because we often discuss it, and they really don’t have any issues or problems with regards to individuals from another race.*”
Participant 7: “Our children don’t see colour, they do not see colour, my children are friends with coloured kids, black kids, Indian kids…”

This theme is in line with recent statistics released by the South African Institute for Race Relations [SAIRR] (2018). The SAIRR reports that 72% of South Africans, and 77% of “black” people say that they have never personally experienced racism directed at them. The findings of this research study in conjunction with recent statistics thus create an encouraging picture, and indicate that the problem of racism seems to be less acute than what is portrayed and propagated through mainstream media and social media. Similar to the participants in the study, the SAIRR (2018) also reports that 63% of “black” people think that race relations have improved since 1994.

The disregard for race and colour within friendships and other relationships as reported by the participants in this study is thus supported by recent research findings on race relations within South Africa. These findings and statistics indicate progress with regards to tolerance and a significant increase in relationships regardless of race indicates generational progress and a positive shift in racial relations.

Thus delineating this theme and related happenings as an important and positive phenomenon which indicates the perceptiveness and willingness to cooperate and integrate from the majority of South Africans, regardless of demographics. Providing the country and those invested in the future of the country an important, and much needed reason for optimism.

**Theme 4: Caregiver Reluctance to Discuss Emotionally Ladened Topics such as Apartheid**

Caregivers displayed a reluctance to discuss a topic this emotionally ladened. However, the motivation or reason for the reluctance on the part of the caregivers stemmed
from a variety of reasons, differing from one caregiver to another. The reasons why caregivers were reluctant to discuss apartheid included the following: the perceived challenging developmental stage of early adolescents which complicates communication between caregiver and adolescent; other caregivers argued that they do not want to influence the opinions and perspectives that their adolescents have through telling them about their apartheid experiences, and some caregivers felt that they did not want to burden their adolescent with the emotionally laden history of South Africa, and thus rather refrained from discussing apartheid with them.

The following quotes showcase the various motivations caregivers gave for their reluctance to discuss apartheid with their adolescent/s:

Participant 5: “But she’s not, I don’t think she grasps the seriousness, but I don’t think I would want her to focus on it because then she would probably, I don’t want... I think I want to shield her from hating white people and hatred or hating any people for that matter”

Participant 3: “And also I don’t want to give them my opinion, I can’t because then I’m just as bad, then I am teaching them the wrong thing, so my children they can ask me at any time, they can ask me what it was like, I can give them how I saw it or how I lived it, but I don’t want to give them the wrong opinion, so I generally don’t discuss politics.”

Participant 7: “Okay so this is the honest truth I don’t discuss politics with my children, uhm I don’t discuss it, like I said I am not very interested in these things and also I don’t know much about it so I don’t have the facts, so I can’t teach my children, almost the right thing.”

The reluctance of caregivers to discuss racially laden topics with their adolescent is frequently reported within literature (Ginsburg, 2001; Sillars, Koerner, & Fitzpatrick, 2005; Laursen & Collins, 2009). Laursen and Collins explain that the communication challenge
between caregiver and adolescent stems primarily from the changing nature of this relationship, and that emotionally laden or serious topics often pose even more of a challenge for communication. This challenge is denoted by the re-negotiation of the caregiver-child relationship, and the identity search that adolescents embark on throughout this developmental stage. The current theme links back to the literature review discussion on socialisation and the various manners in which caregivers influence the ethnic and racial identity development of their adolescents (French et al., 2006). From the theory on the themes as developed by Hughes and Johnson (2001) the participants in this research study align with themes 4 and 5 as outlined in the literature review. Theme 4 explains that caregivers engage in the advancement of adapting to, and fitting into the dominant culture, and in doing so rather focus on relaying and sharing individual qualities as opposed to racial group membership, and thus avoid discussions on race-related topics. Also theme 5 can be identified within the above quotes, which as described by Hughes and Johnson as a silence and hesitancy to discussing race and race-related issues. Silence is thus employed as an attempt to protect or shield adolescents from the reality of racial discrimination and discernment (Carvalho-Malekane, 2015; Hughes & Johnson, 2001).

**Discussion**

The aim of this research study was to explore caregivers’ experiences of apartheid and to explore the apartheid experiences caregivers share with their early adolescent children. From the above findings and discussion it can be deduced that the aim of this research study was reached, and through the discussion of the themes the research questions have been answered.

With regards to the research question on caregivers’ experiences of apartheid, a variety of different experiences were voiced by participants, with the most prominent threads of these experiences being either trauma, or on the opposite side of the spectrum, indifference. The outcome of this study thus sheds light on the apartheid experiences of caregivers, and as was
anticipated the experiences of apartheid which were shared differed drastically between racial
groups. This finding echoes literature mentioned within the literature overview arguing that
traumatic experiences have long-lasting effects on individuals (Botros, Hodgins, & Nemeroff,
2019; Dar et al., 2015; Humphrey, 2000).

With regards to the apartheid experiences that caregivers share with their adolescents the
caregivers unanimously shared the opinion that their adolescent is “unbothered” by apartheid
and commonly they do not have questions regarding apartheid other than how the logistics
around apartheid operated. Thus the answer to the research question on which apartheid
experiences are shared by caregivers with their adolescents is that apartheid is not a common
point of discussion within the homes of the participants of this study. The participants’
adolescents did however seem incredulous and communicated their disbelief when the topic
of apartheid came up. Hence, theme 3, which outlines the generational progress that has been
made within democratic South Africa since 1994, resonates with literature and statistics
released by the South African Institute for Race Relations in 2018, depicting a hopeful and
rosy coloured future for South African race relations and the road forward.

Overall the outcomes of this research study are positive, however what is alarming is the
quality of caregiver-child relationships expressed throughout data collection, and the
difficulty caregivers experienced in discussing emotionally laden topics with their children.
In light of the literature overview and the defined importance of caregiver-child relationships
in the formation of identity, and socialisation theme 4 is thus grounds reason for concern.
Because emotionally laden topics can consist of an entire range of important themes these
findings are distressing and it is clear that caregivers are in need of direction and intervention
with regards to effective communication with their child/ren.
Chapter Five

Conclusion

This research study explored caregiver experiences of apartheid and provides a fresh perspective of contemporary South Africa, the social progress made with regards to racial relations, and also the areas where serious progress is still needed, can be identified throughout this research study’s findings. The methodology applied deemed appropriate and useful, and the researcher is satisfied with the outcome in that the aim of this research study was answered throughout the findings.

The aim of this research study was to explore caregivers’ experiences of apartheid and the experiences that they share with their adolescent children with regards to apartheid. In responding to the research aim the above discussed themes highlight the following. Caregivers within South Africa have diverse personal experiences and recollections of the apartheid era, and as can be expected these experiences differ drastically from one race to another. To the extent that the majority of individuals who were disadvantaged during apartheid express experiences of a traumatic nature, in contrast to the minority’s experiences which can be described as indifferent or apathetic. With regard to the experiences that are shared with adolescents the caregivers synonymously explained that apartheid is not a topic of frequent discussion between them and their adolescent/s, however the motivation for this from one parent to the next, differed.

Even though this research study provides new information on apartheid experiences and adolescents’ perspectives of apartheid, a gap in literature still exists, this notion is discussed in more detail under the recommendation section. In conclusion the findings of this study in conjunction with recent statistics (South African Institute for Race Relations [SAIRR], 2018) create an encouraging picture of the future of South Africa, and indicate that
the problem of racism is less acute than what is portrayed and propagated through mainstream media and social media.

Reflecting on the Methodology

The methodology used within this research study proved useful and efficient in gathering the data needed to answer the set out research questions. The qualitative research approach allowed the researcher to gain in-depth information-rich data on the apartheid experiences of caregivers. Also the semi-structured interviews offered the interview guidance and rigidity, to the extent that the interviews flowed naturally and the researcher and participant could have a natural and comfortably flowing discussion. The open-ended nature of the interview questions permitted participants to openly discuss and divulge more information on the topic, and also it made probing questions possible in response to the answers given by participants.

Even though the methodology is deemed successful, the researcher experienced some of the interviews as challenging in that emotional experiences were shared and to a certain extent the dialogue was difficult to steer. Additionally, it seemed as if some participants utilised the interview as a session to vent and share their politically oriented frustrations on the current political and economic situation within South Africa, which falls completely outside of the scope of this research study. Regardless of these isolate occurrences the methodology allowed for the collection of sufficient quality information and detail rich data which contributed to findings in a significant manner making the experience worthwhile.

Strengths and Limitations

The strengths of this research study include the detailed account provided of the methodology followed, which permits for the replicability of this study within other contexts. The comprehensive literature overview allows the reader a contextual understanding of the
research concepts before venturing into conducting the study and the outcomes. Another major strength is the multiple voices of a diverse group of South Africans which is echoed throughout this body of work, presenting an authentic representation of the participants’ experiences and perspectives.

The limitations of this research study include the sample size and the lack of diversity with regards to gender. The researcher originally set out to recruit an aimed sample size of 10 individuals, however many individuals were hesitant to participate because of the racially laden topic, and motivated their decision to not participate on the basis of the current political climate where racial tension was at a high. This led to only eight participants being included in the research study, however it has to be mentioned that the participants who did partake in the study were from diverse cultural and demographic backgrounds contributing to rich and diverse perceptions and a variety of experiences shared with the researcher.

Only one male was willing to participate in the research study. This could have been because of the recruitment locations being mostly NPO’s and NGO’s which are often mainly managed by females. Additionally a limitation with regards to limited information regarding participants’ level of education is present within this study, the researcher did not anticipate that obtaining the level of education of participants would allow for further interpretation of the collected data, and only realised this far later in the research process.

**Recommendations**

The following recommendations can be made for future studies within this field of research interest: A bigger sample would yield more detailed and diverse responses; however this topic remains racially laden within a sensitive South African population. It can be recommended that more focus be placed on exploring young adolescents’ perspectives and

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understanding of apartheid, as this is a research area that remains mainly unexplored and minimal research on this topic is available.

Additionally, research focused on the resiliency and strength displayed by the older generation South Africans who experienced apartheid, can be recommended. Throughout data collection and analysis the researcher identified that many participants displayed great resiliency in overcoming the adversities and wrongdoings of apartheid and continued to create success for themselves regardless of the limitations placed on them.
References


Ben-David, B., & Nel, N. (2013). Applying Bronfenbrenner’s ecological model to identify the negative influences facing children with physical disabilities in rural areas in


Retrieved from https://scholar.ufs.ac.za/xmlui/handle/11660/2982


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Appendices

Appendix A: Participant Recruitment Pamphlet

Are you the caregiver of an adolescent aged between the ages of 10 and 14?

Were you a South African resident during the Apartheid years?

You are invited to participate in a research study. The study aims to explore the experiences of caregivers during apartheid.

In order to participate in this study you need to currently be the caregiver of an adolescent, and have experienced the apartheid era in South Africa.

You will be asked to participate in an interview of approximately 45 minutes.

If you are interested in learning more about this study please contact the researcher on the details below.

This study will be conducted under the auspices of the Department of Psychology at the University of the Western Cape.

For more information, contact:

**Researcher:** Jené Pretorius  
**Supervisor:** Dr. Athena Pedro

3824219@myuw.ac.za  
aspedro@uwc.ac.za

http://etd.uwc.ac.za/
Appendix B: Information Sheet

UNIVERSITY OF THE WESTERN CAPE
Private Bag X 17, Bellville 7535, South Africa
Tel: +27 21 9592825
E-mail: 3824219@mywc.ac.za

Project Title: An exploration of a sample of South African caregivers’ experiences of apartheid

What is this study about?
This is a research project being conducted by Jené Pretorius at the University of the Western Cape. We are inviting you to participate in this research project because you hold relevant information on the topic under investigation. The purpose of this study is to address the lack of existing research on caregivers’ experiences of apartheid and the experiences that caregivers share with their adolescents on apartheid.

What will I be asked to do if I agree to participate?
You will be asked to avail yourself for an interview of approximately 45 minutes. The interview questions will explore your experiences of apartheid and also the experiences that you share with your adolescent on the topic of apartheid. This interview will be scheduled at a time and held at a place which is convenient for you. Your permission and consent for audio recording of the interview will also be sought.

Would my participation in this study be kept confidential?
The researcher undertakes to protect your identity and the nature of your contribution. To ensure your anonymity your name will not be included in any collected data and will be replaced with a pseudonym within the collected data and analysis write-up. Through the use

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of the pseudonym the researcher will be able to link your interview to your identity, and only the researcher will have access to the identification key.

To ensure confidentiality the demographic information and transcribed interviews will be stored in locked filing cabinets and storage areas, using identification codes only on data forms, and using password-protected computer files. If a report or article is produced about this research project your identity will be protected.

**What are the risks of this research?**

There may be some risks from participating in this research study. Social, emotional, psychological adverse reactions may result from participating in the research in that the topic is of a sensitive nature. Some risks may include feelings of discomfort, embarrassment or fatigue.

All human interactions and talking about self or others carry some amount of risk. We will nevertheless minimise such risks and act promptly to assist you if you experience any discomfort, psychological or otherwise during the process of your participation in this study. Where necessary, an appropriate referral will be made to a suitable professional for further assistance or intervention.

**What are the benefits of this research?**

This research is not designed to help you personally, but the results may help the researcher explore caregivers’ experiences of apartheid and the experiences that they share with their adolescents on apartheid within South African and specifically Western Cape, families. We hope that, in the future, other people might benefit from this study through improved understanding of caregivers’ experiences of apartheid.

The findings of the proposed study will add to the literature on apartheid experiences and early adolescent socialisation within the family context.
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 penalised or lose any benefits to which you otherwise qualify.

What if I have questions?

This research is being conducted by Jené Pretorius from the Psychology Department of the University of the Western Cape. If you have any questions about the research study itself, please contact Jené Pretorius at: 082 737 4164 or 3824219@uwc.ac.za

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

Dr Maria Florence: Head of Department: Psychology, University of the Western Cape
Private Bag X17
Bellville 7535
mflorence@uwc.ac.za

Prof Anthea Rhode: Dean of the Faculty of Community and Health Sciences, University of the Western Cape
Private Bag X17
Bellville 7535
chs-deansoffice@uwc.ac.za

This research has been approved by the University of the Western Cape’s Humanities and Social Sciences Research Ethics Committee.
Appendix C: Written Informed Consent Form

UNIVERSITY OF THE WESTERN CAPE
Private Bag X 17, Bellville 7535, South Africa

Tel: +27 21 9592825
E-mail: 3824219@mywc.ac.za

Title of Research Project: An exploration of a sample of South African caregivers’ experiences of apartheid

The study has been described to me in a language that I understand. My questions about the study have been answered. I understand what my participation will involve and I agree to participate of my own choice and free will. I understand that my identity will not be disclosed to anyone. I understand that I may withdraw from the study at any time without giving a reason and without fear of negative consequences or loss of benefits.

This research project involves making audiotapes of you. The audio recording of interviews is done in order for the researcher to refer back to the information discussed and to conduct data analysis on the gathered information. Only the researcher and supervisor of the project will have access to the audiotapes and transcriptions, and it will be stored in locked filing cabinets and storage areas, using identification codes only on data forms, and using password-protected computer files. Also all data gathered for this project will be securely kept for five years where after it will be destroyed.

Please indicate below whether you agree to be audiotaped, and whether you consent to participate in this project

___ I agree to be audiotaped during my participation in this study.

___ I do not agree to be audiotaped during my participation in this study.

http://etd.uwc.ac.za/
Participant’s name…………………………..

Participant’s signature……………………………….

Date………………………….
Appendix D: Demographic Information

UNIVERSITY OF THE WESTERN CAPE
Private Bag X 17, Bellville 7535, South Africa
Tel: +27 21 9592825
E-mail: 3824219@mywc.ac.za

Please complete the following:

Gender: __________
Age: ___
Race: ___________
Location of residence: ___________________________
Appendix E: Interview Schedule

Exploring caregiver experience of apartheid

What do you understand by the term apartheid?

Can you please share with me an experience of apartheid that you remember clearly.

Do you think the influence of apartheid is still evident within South Africa today, please elaborate.

Exploring the experiences shared by caregivers with adolescents on the topic of apartheid

Tell me about the discussions you have with your adolescent about apartheid.

Share with me some of the specific discussions you have with your adolescent child about apartheid.

How do you think the experiences you share with your adolescent child about apartheid influence their understanding of apartheid?

Does your adolescent ever ask you questions about apartheid?

Does your adolescent show interest in the topic of apartheid?

How does your adolescent typically react when apartheid topics are discussed?
## Appendix F: Counselling Services Contact Information

**UNIVERSITY OF THE WESTERN CAPE**

Private Bag X 17, Bellville 7535, South Africa

Tel: +27 21 9592825  
E-mail: 3824219@mywc.ac.za

<table>
<thead>
<tr>
<th>Counselling Services Contact List</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pearson Institute of Higher Education Counselling Unit</td>
<td>021-914 8001</td>
</tr>
<tr>
<td>Ruyterwacht</td>
<td>021-534 4361</td>
</tr>
<tr>
<td>Bishop Lavis</td>
<td>021-934 6050</td>
</tr>
<tr>
<td>Durbanville</td>
<td>021-444 7421/2</td>
</tr>
<tr>
<td>Goodwood</td>
<td>021-590 1620</td>
</tr>
<tr>
<td>Elsies River</td>
<td>021-931 0211</td>
</tr>
<tr>
<td>Kleinvlei</td>
<td>021-904 4416</td>
</tr>
<tr>
<td>Kraaifontein</td>
<td>021-987 0080</td>
</tr>
<tr>
<td>Parow</td>
<td>021-444 0918</td>
</tr>
<tr>
<td>Location</td>
<td>Phone Number</td>
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<tr>
<td>--------------------------</td>
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</tr>
<tr>
<td>Ravensmead</td>
<td>021-936 8758</td>
</tr>
<tr>
<td>Reed Street/ Kasselsvlei</td>
<td>021-946 3790</td>
</tr>
<tr>
<td>Delft</td>
<td>021-954 2282</td>
</tr>
<tr>
<td>Belhar/St Vincent</td>
<td>021-953 6200</td>
</tr>
</tbody>
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