

**The perceptions and experiences of violence on children in children's  
homes.**

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A mini-thesis submitted in partial fulfilment of the requirements for the degree of MPsych in  
the Department of Psychology at the University of the Western Cape.



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## DECLARATION OF ORIGINALITY

I declare that this mini-thesis, *The perceptions and experiences of violence on children in children's homes* is my own work, that it has not been submitted before for any degree or examination in any other university, and that all the sources I have used or quoted have been indicated and acknowledged as complete references.

Pumza Nkubungu

October 2010

Signed.....



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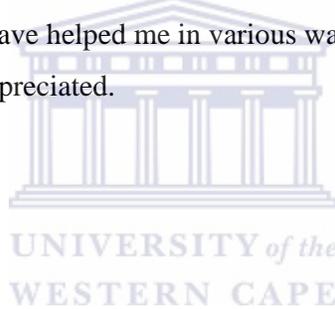
My supervisor, Mr Charl Davids- my most sincere gratitude for providing insightful supervision and your constant support and encouragement. I am aware of the significant amount of time you have invested in this study and thank you sincerely for your generosity.

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## **ABSTRACT**

Violence still remains one of the most challenging factors in South Africa. Statistics show that the violence is on the increase in some parts of the country. Particularly violence towards children is endemic and researchers have reported that this is caused by a number of factors. It has been reported the stressful life events and conditions, such as poverty, unemployment, inadequate housing and violent social situation, are prominent factors that contribute to violence towards children. Bronfenbrenner's systems theory and Frantz Fanon theory of violence have been used in the study. This study aimed at looking at children's perceptions of violence, exploring the experiences on child violence and lastly perceptions of children about intervention strategies in children's homes. The participants were sourced from the rehabilitation centres, at the children's homes in Khayelitsha. A manageable group of between 8 participants was used in the study. The participants were adolescents aged between 14-16 years old. The data was collected through individual interviews and was analysed in terms of thematic analysis. Each interview was tape recorded and transcribed. The ethics was taken into considerations from the onset process of recruitment, and for this reason the consent and assent letters were be provided and signed by both participants and care givers. Counselling support was provided for the participants. The common belief in this study was that the majority of the violence is found in the areas of their origin, which were the townships where they grew up. Generally, the participants held different beliefs on their sense of safety, which was related in the current area in which they live. The ultimate conclusions that have been drawn from the findings, suggest that children experience various difficulties and challenges, in their lives within children's home. Despite these challenges and difficulties that are encountered, participants appear to remain relatively contented with life in the home. Moreover, the participants also appeared to demonstrate a greater preference for living within the home over that of the previous living conditions from which they originate.

**Keywords:** Violence, Children, Rehabilitation, Perceptions, Impact of violence, Children behaviour, Children experiences, Exposure, Poverty, Unemployment.



# CHAPTER 1

## INTRODUCTION

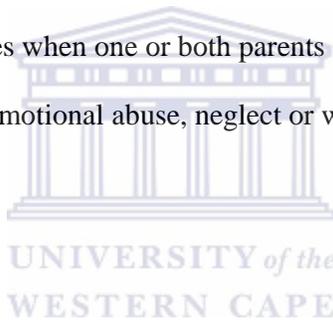
### 1.1 BACKGROUND INFORMATION

South Africa has a history of violence due to its traumatic past of segregationist policies, and other concomitant “isms” (racism and sexism) (Shung-King, Proudlock, & Michelson, 2005). As such, children were and still are at the end-chain of that abuse because they cannot fight back and are mostly dependent on these abusers (Shung-King, Proudlock, & Michelson, 2005). Unfortunately this trend has not shown any signs of decrease, instead it has been recorded as increasing by Naidoo (2006) and Shung-King, Proudlock, and Michelson (2005). Even homes that one would expect to protect and care for children unfortunately are sometimes the places where mistreatment of children takes place. The question then becomes ‘where to for children’. To say that there are no interventions to curb the situation is to tell half the story.

The term child abuse can be very difficult to define, due to its broad nature. It is sparingly rare to find a definition of violence, in particular with relation to children and adolescents, in either the popular research or literature (Flannery & Huff, 1999). Child abuse refers to the physical or psychological/emotional mistreatment of children (Montgomery, Burr & Woodhead, 2003). However Graham-Bermann and Edleson (2002) defined child maltreatment as “any act or series of acts of commission or omission by a parent or other care giver that results in harm, potential for harm or threat of harm to a child. Most child abuse occurs in children’s home; with a smaller number occurring in organisations, schools or communities the child interact with. According to Flannery and Huff (1999), there are four

major categories of violence towards children: neglect, physical violence, psychological/emotional violence and sexual violence.

According to the Medical Research Council (MRC, 2009) almost all children are subjected to physical violence at home. More than one in four children experience physical violence childhood, and this occurs daily or weekly. They further reported that more than a third of girls have experienced sexual violence before the age of 18; those include unwanted touching, forced sex or being exploited to sex by older men. Forty percent of victims according to (MRC, 2009) who report rape to the police are girls under the age of 18, and fifteen percent are under the age of 12 years. They further reported that fifteen percent of children report times in their lives when one or both parents were too drunk to care for them, one in two children experience emotional abuse, neglect or witness violence against their mothers at home (MRC, 2009).



## **1.2 RATIONALE**

It has been found to be true that an abused grow to be an abuser (Shung-King, Proudlock, & Michelson, 2005). This study will attempt first to understand child abuse. Listen to the abused stories so that it does not assume and thus prescribe ill-conceived interventions.

Minimal research has been done on violence towards children, especially within the age group of 14 – 16 years old, at children's homes. The rationale for conducting this study then, is to seek more understanding on the phenomenon of violence towards children, and explore the limitations of the current intervention strategies and how they can be improved.

Child abuse is a very diverse phenomenon. To achieve the goals of this project the researcher opted to look at one aspect of child abuse which is emotional abuse. Emotional abuse is the

corner stone of all the abuses because emotional abuse is always present during physical, neglect and sexual child abuse and it is the only abuse that can stand on its own. It does not have to accompany other abuses.

## **1. 3 AIMS OF THE STUDY**

This study aims to:

- ✓ Explore children's perceptions of child violence.
- ✓ Explore children's experiences of child violence.
- ✓ Explore the perceptions of children about intervention in a children's home.

### **1.4 CHAPTER ORGANISATION**

Chapter 2 provides a review of existing literature on the topic in question. It includes a discussion of theories, themes and definitions identified by previous research. Finally, this section aims to identify the two theoretical frameworks employed by the study and highlights the relevance of this framework in relation to the nature of the study.

Chapter 3 outlines the methodology used to generate, understand, and interpret the data.

Qualitative research is discussed, specifically in relation to thematic analysis and interpretation. The participants selected and the tools of analysis are explained. This chapter explores ethical issues that may arise due to the research, as well as mechanisms to ensure the validity of the findings.

Chapter 4 illustrate the process of data analysis and interpretation. The transcribed interview data is collated into various themes and sub-themes which are outlined. A discussion of each theme is provided. These are related to information gathered from the data as well as that from the past research.

Chapter 5 provides a summary of the thematic findings, outlining the impact the results have on future research and current theory. Recommendations for future research are provided, as well as the limitations of the current study.



## CHAPTER 2

### LITERATURE REVIEW

#### 2.1 INTRODUCTION

According to Angless & Shefer (1997) violence is one of the most serious social problems among youths in South Africa. Abuse of little children comes in many shapes and forms and each hurtful episode is buried deep, often blocked out of the conscious mind entirely (Angless & Shefer, 1997). Bhana and Kanjee (2001) argued that South Africa has the unfortunate distinction of being one of the most violent countries in the world. They further argued that this is fuelled by a number of factors, including widespread poverty, a huge gap between what people have and do not have, increasing hopelessness in the face of lack of service delivery, as people see no way out of their current neglected conditions.

#### 2.2 The impact of violence on children

Goldman, Salus, Wolcott, and Kennedy (2003) argued that the consequences of child maltreatment can be profound and may endure long after the abuse occurs. Margolin and Elana (2000) suggested that children living with violent parents have a number of other adversities such as poverty, poor nutrition, overcrowding, substance abuse, lack of adequate social care, parents unemployment and parents psychopathology. Goldman, Salus, Wolcott and Kennedu (2003) further argued that the effects of abuse can appear in childhood, adolescence or adulthood, and may affect various aspects of an individual's development, for example physical, cognitive, psychological and behavioral. According to Montgomery, Burr and Woodhead (2003) the effects of violence towards children could range in consequence from minor to physical injuries, low-self esteem, attention disorders, and poor peer relations

to severe brain damage, extremely violent behavior and death. Angless and Shefer (1997) argued that the nature and the extent of maltreatment are different for each child and family, and these differences may influence the consequences of violence on children.

Flannery and Huff (1999) stated that not all children who have been maltreated will suffer severe consequences. They argued that there are many factors that might influence the effects of child maltreatment. Those factors include the child's age and developmental status at the time of the maltreatment, as well as the type, the frequency, the duration and the severity of the maltreatment. The research done by Gelles & Harrop (1991) suggested that the protective factors such as child resilience to negative consequences also mediate. The recommendation for a developmental perspective also means viewing childhood exposure to violence in the context of normal developmental processes and identifying the links between disrupted and normal development (Margolin & Gordis, 2000). They argued that at different stages, children face different developmental challenges that can be disrupted by abuse and violence. An understanding of the sequelae of exposure to violence must be informed by an understanding of normal adaptation across developmental stages. Violence, for example, can shatter the essential assumptions fundamental to the developmental task of learning to trust others and form secure attachment relationships (Magwaza, Killian & Pillay, 1993), in turn leading to difficulties in subsequent relationships throughout life.

### **2.3 The physical effects of violence on children**

According to Naidoo (2006) the physical effects can include the immediate effects of bruises, burns, lacerations, and broken bones and also longer term effects of brain damage, hemorrhages, and may be permanent disabilities. Negative effects on physical development according to Goldman, Salus, Wolcott and Kennedy (2003) can result from physical trauma like blows to the head or body, violent shaking or scalding with water. Naidoo (2006) also

noted that infants who have been neglected and malnourished may experience a condition known as “nonorganic failure to thrive”. With this condition, according to Naidoo (2006) the child’s weight, height and motor development fall significantly below age-appropriate ranges with no medical or organic cause.

Margolin and Gordis (2000) suggested that exposure to violence affects children as early as infancy and because of their physical vulnerability, very young children are at risk for physical injury and death when abused or neglected. Although it can be argued that very young children are partially protected from psychological distress because they do not fully comprehend violent episodes and the risk involved, Zinzow and Ruggiero (2009) challenges the belief that very young children are too young to be affected by or react to violence.

Peled and Davis (1995) suggested that in contradiction to common perceptions, the incidence of abuse of adolescents is at least as high as that of younger children. The fact that adolescents often suffer less severe physical injury, coupled with generally negative societal attitudes toward adolescents may lead to perceptions that adolescents do not need as much outside protection as do younger children or that adolescents may be responsible for their own maltreatment. According to Jaffe, Wolfe and Wilson (2000) the emergence of abuse in adolescence often is a function of an authoritarian family system along with the family’s inability to negotiate the transition to children’s increasing need for independence. These authors further speculate that the impact is quite different for adolescents who have been part of an abusive system since childhood versus those who are first abused in adolescence.

Moreover, adolescents may begin to assume an active role in family violence (Goldman, Salus, Wolcott & Kennedy, 2003). Physical abuse directed toward adolescents is associated with them being physically injurious toward parents and siblings (Straus and Gelles, 2000). For adolescents exposed to marital violence, a common reaction, particularly for males, is to

intervene physically in their parents' battles, thereby risking injury to themselves (Richters and Martinez, 2003).

Goldman, Salus, Wolcott and Kennedy (2003) reported that physically abused children in particular tend to have peer difficulties. Physically abused preschool and school-age children have been found to be less prosocial and more aggressive and negative when interacting with peers. The study conducted by Gardner (2006) reveals that physically abused toddlers were more likely to respond with physical distress, fear, and anger to the distress of their peers. Zinzow & Ruggiero (2009) reported that school-age, physically abused children had less interactions than those of non abused children. Physically abused children tend to be rated by their peers as less popular and more rejected, aggressive, and disruptive. Olaw, Tomas & Mae (1996) suggests that abused children tended to have fewer of their positive ratings of peer friends reciprocated, suggesting that they have difficulty distinguishing between potentially supportive and unsupportive peers. Abused children named fewer classmates as best friends in their social networks, and named a greater proportion of younger children in their networks than did the comparison children. Abused children also tend to be rated as more socially rejected by parents, teachers, and camp counsellors (Olaw, Tomas & Mae, 1996). Although some researchers have found that maltreatment accounted for variance in ratings of social competence over and above socioeconomic disadvantage (Gardner, 2006), others have found that abused children had similar ratings to those in a welfare agency (Straus & Gelles, 2000; Margolin & Gordis, 2000).

#### **2.4 The cognitive effects of violence on children**

The current literature differs on findings related to the consequences of maltreatment on cognitive development, verbal abilities, and problem-solving skills. The study conducted by Baldry (2003) suggested that there is evidence of lowered intellectual and cognitive

functioning in abused children as compared to children who had not been abused. The other studies conducted by Bhana and Kanjee (2001) suggested that there is no difference between the two. According to Baldry (2003) maltreatment increases the risk of lower academic achievement and problematic school performance. Baldry (2003) in his research noted that abused and neglected children received lower grades and test scores than did non-maltreated children.

According to Jonson-Reid (1998) abuse and exposure to violence have been linked to delayed cognitive development and poor academic functioning. Whereas early theories implicated brain trauma directly resulting from head injury, head trauma does not account for the observed difficulties of abused children without head trauma (Osofsky, 1999). Recent research provides some evidence for links between abuse and trauma and brain and cognitive functioning. Research on animals, adult humans, and children suggests neurocognitive consequences of exposure to trauma involving hippocampal damage and left hemisphere abnormalities affecting memory functioning and verbal skills (Stacey, 1994). Extrapolating from research with primates and adults, the stress of abuse and violence exposure may result in damage to the hippocampus. Glucocorticoids, which are secreted during stress, have been found to cause damage to the hippocampus among primates (Stacey, 1994). Researchers have found adult survivors of child physical and sexual abuse to have smaller hippocampal volumes (Bhana & Kanjee, 2001). They further suggested that enhanced norepinephrine activity is likely to cause hippocampal damage. Because the hippocampus is involved in memory integration, damage may result in the dissociative, fragmented, incoherent nature of traumatic memories, as well as intrusive, anxiety-provoking, trauma-related thoughts (Baldry, 2003).

Stacey (1994) also present evidence of limbic system dysfunction and left hemispheric abnormalities. In a retrospective study, adults who had been abused reported more symptoms associated with limbic system dysfunction, including brief hallucinatory events, visual phenomena, and dissociative experiences, than those who had not, with the most pronounced effects for those abused before age 18. Stacey (1994) also compared physically and sexually abused children and adolescent psychiatric patients to non-abused patients and found an increased probability of left-sided frontotemporal abnormalities and higher prevalence of left compared to right hemisphere deficits on neuropsychological tests, which suggests compromised verbal performance. The authors also report evidence for reversed hemispheric asymmetry, abnormalities in the corpus collosum, and abnormal cortical development in abused children.

Theoretically, the cognitive problems and the behavioural disturbances associated with exposure to violence and abuse logically would threaten academic performance (Jonson-Reid, 1998). Several studies document links between maltreatment, particularly neglect and physical abuse, with poor intellectual and cognitive performance. Abused and neglected school-age children have been found to score lower than non-abused comparison children on tests of verbal ability and comprehension Cowen, (1991); Short & Meier (1991); McAdams, (1993), overall achievement on standardized tests. However, not all studies have found links between maltreatment and standardized test scores (Werner, 1995). In addition, the relation between physical abuse and grades has not been consistently supported (Cowen 1991; Short & Meier, 1991). Physical abuse has also been linked to missing more school, to parents' and teachers' ratings of lower academic performance and competence (Osofsky, 1999), and to being more likely to repeat grades (McAdams, 1993). Exposure to community violence has also been linked with lower school achievement (Osofsky, 1999).

The effects of sexual abuse on children's academic performance are somewhat less clear. Jonson-Reid (1998) found that controlling for age and ethnicity, sexual abuse was associated with lower verbal ability, lower ratings of being a competent learner, lower classroom social competence, and higher school avoidance, but not with grades. Cognitive ability, perceived self-competence, and behaviour problems associated with abuse, such as dissociative hyperactivity and bizarre destructiveness, predicted various domains of academic performance. This study emphasizes how the deficits that may be caused by abuse are not independent of each other but affect each other, and that problems in one domain can cause problems across other domains as well.

Other research regarding the effects of sexual abuse has produced mixed results. Bhana and Kanjee (2001) found that sexually abused girls had lower IQ scores, and lower school achievement and achievement test scores than did non-abused comparison children matched on age, race, family income, and family constellation. However, Baldry (2003) found no difference between sexually abused and non-abused children receiving public assistance on measures of intellectual ability. In addition, sexually abused children were no more likely to repeat a grade than comparison children, though they scored lower in classes and were more likely to be in special classes and tutoring than were the comparison children. Baldry (2003) compared effects of various types of maltreatment and found that the children who experienced sexual abuse but not other forms of maltreatment did not differ from non-maltreated children on the reading and math portions of the Iowa Test of Basic Skills, on academic success, grades, or likelihood of repeating a grade.

Researchers have also documented links between abuse and exposure to interparental aggression and deficits in social cognition. Abused children have been found to be less interpersonally sensitive and attentive to social cues, less competent at social perspective

taking, less able to identify others' emotional expressions and to understand complex social roles, less able to generate competent, and more likely to generate aggressive solutions to interpersonal problems, and more likely to attribute biased hostile intent McAdams, (1993); Cowen, (1991); Short & Meier (1991). These kinds of social cognitive consequences may mediate between exposure to abuse and aggression (Cowen, 1991).

## **2.5 The psychological effects of violence on children**

According to Goldman, Salus, Wolcott and Kennedy (2003) the psychological consequences of violence on children ranges from behaviors of being passive and withdrawn to active and aggressive. They argued that physical and sexually abused children usually exhibit both internalizing and externalizing problems. Montgomery, Burr and Woodhead (2003) suggested that emotional and physical problems identified among individuals who were maltreated as children include; low self-esteem, depression and anxiety, post-traumatic stress disorder(PTSD), attachment difficulties, eating disorders, poor peer relations and self-injuries behaviors like suicide attempts. Naidoo (2006) noted that maltreated children may experience difficulties in understanding the emotions of others, regulating their own emotions and in forming and maintaining relationships with peers.

Children are potentially quite vulnerable to the effects of violence because violence exposure may alter the timing of typical developmental trajectories (Goldman, Salus, Wolcott & Kennedy, 2003). That is, violence initially may result in primary effects, such as anxiety, depression, or Post Traumatic Stress Disorder (PTSD) symptoms, which cause secondary reactions by disrupting children's progression through age-appropriate developmental tasks. For example, exposure to violence in young children can result in regressive symptoms, such as increased bedwetting, decreased verbalization, or separation anxiety (Bhana & Kanjee, 2001). These symptoms secondarily may affect children's socialization skills or ability to

concentrate in school. Moreover, at a time when children may have difficulty with typical developmental tasks, exposure to violence can result in having to acknowledge and cope with adult issues. As Bhana and Kanjee (2001) notes, “in Western culture, childhood is regarded as a period of special protection and rights” (2001:1). The home and the neighbourhood, generally considered the primary safe havens for the child lose those protective and comforting qualities in the aftermath of family or neighbourhood violence (Benjamin, 2006).

Physiological consequences of abuse appear to be intimately linked with symptoms of posttraumatic stress disorder (PTSD). PTSD is a disorder in response to a recognizable, serious stressor that is characterized by specific behaviours falling into the categories of re-experiencing the event, avoidance and psychic numbing, and increased arousal. Describing children’s responses to trauma, Bhana and Kanjee (2001) presents four specific PTSD symptoms: repeatedly perceiving memories of the event through visualization, engaging in behavioral reenactments and repetitive play related to the event, fears related to the trauma event, and pessimistic attitudes reflecting a sense of hopelessness about the future and life in general. Goldman, Salus, Wolcott and Kennedy (2003) and (Benjamin, 2006) suggest that examining PTSD symptoms rather than diagnoses is more appropriate for children because many children who experience posttraumatic symptoms do not technically earn the PTSD diagnosis.

PTSD and PTSD symptoms have been linked with sexual and physical abuse. Richter, Dawes and Higson-Smith (2004); as well as Gorin (2004) report that researchers have documented PTSD in one-quarter to one-half of child victims of physical and sexual abuse. Effects for sexual abuse have been found more consistently. Richter, Dawes and Higson-Smith (2004) found that in a clinical sample, PTSD was significantly more prevalent among sexually abused compared with non abused children. Gorin (2004) compared physically and sexually

abused psychiatric patients and found that although no differences emerged between groups regarding meeting diagnostic criteria, the sexually abused children exhibited more re-experiencing of symptoms. Goldman, Salus, Wolcott and Kennedy (2003) found increased PTSD among sexually abused but not physically abused psychiatric inpatients. Montgomery, Burr and Woodhead (2003) found no difference in the rate of PTSD among physically abused compared to non-abused adolescents. Researchers have also found elevations on dimensional scales of PTSD symptoms, for example dissociative hyperactivity, intrusive thoughts, ruminative thoughts about the traumas, including difficulty falling or staying asleep, nightmares, and fears related to sex among sexually abused children (Bhana & Kanjee, 2001; Benjamin, 2006). Greater severity, chronicity, and earlier age of abuse appear to increase the risk of PTSD (Benjamin, 2006).

As Richter, Dawes and Higson-Smith (2004) argue, the harsh and uncontrollable punishment and parental rejection found in an abusive home environment may cause learned helplessness, ineffectiveness, anxiety, and depression in the child. Violence exposure can be interpreted by the child to mean not only that the world is unsafe but also that the child is unworthy of being kept safe (Gorin, 2004). Whether related to violence in the home or in the community, these attitudes potentially contribute to negative self-perceptions and internalizing problems (Montgomery, Burr & Woodhead, 2003).

Reviewers of the literature have noted links between depression, anxiety, and physical and sexual abuse (Bhana & Kanjee, 2001; Benjamin, 2006). Elevations of depression and hopelessness in physically abused versus non-maltreated children have been found in psychiatric inpatient samples as well as non-clinic samples of children and adolescents. Bhana and Kanjee (2001); Goldman, Salus, Wolcott and Kennedy (2003); Richter, Dawes & Higson-Smith (2004) found that physical abuse increased risk for depressive symptoms

above and beyond several parenting risk factors among adolescents. Sexual abuse has also been linked with depression and anxiety (Gorin, 2004). Although several investigators have found significant relations between abuse and depression based on mothers' reports, results based on children's self-reports have been less consistent. Gorin (2004) found elevated rates of depressive and anxiety disorders among sexually abused children a year after the abuse was disclosed. Moreover, Bhana and Kanjee (2001) found continued high rates of depression and anxiety among sexually abused children two years after initial assessment.

It is not clear whether physical and sexual abuse have differential effects. Richter, Dawes and Higson-Smith (2004) found increased internalizing symptoms in both groups relative to non-abused children, but no differences between sexually abused and physically abused children. However, Goldman, Salus, Wolcott and Kennedy (2003) found that maltreated children have a tendency to report less depression than non-maltreated children, and that sexually abused children reported significantly more depression than neglected, physically abused, and non-maltreated children. Because both physically and sexually abused children were included in the sexually abused group, it is difficult to disentangle differential effects of the type of abuse.

Related to depression is the impact of abuse on children's self-esteem and perceived self-competence. Several studies document a link between sexual and physical abuse and low self-esteem in both psychiatric and non-clinic samples (Goldman, Salus, Wolcott and Kennedy 2003; Richter, Dawes & Higson-Smith, 2004). Montgomery, Burr & Woodhead (2003) found that maltreated children had lower self-perception scores in all assessed areas. Benjamin (2006) found that sexually abused children rated themselves lower than comparison children on self-concept regarding intellectual and school status, physical appearance and attributes, anxiety, popularity, happiness, and satisfaction. The author reports

a particularly pronounced group difference among girls, who were more likely in this sample to have been abused by a relative or acquaintance. Some researchers have found developmental effects, such that younger maltreated children have exaggerated perceived self-competence, whereas older maltreated children have lower scores (Montgomery, Burr & Woodhead, 2003). Others have not found a link between sexual abuse and self-concept (Gorin, 2004) or perceived school competence (Richter, Dawes & Higson-Smith, 2004).

The connection between internalizing problems and exposure to interparental physical aggression has received some support in the literature as well. For example, Goldman, Salus, Wolcott and Kennedy (2003) found that children, who had been physically abused, had observed spouse abuse, or both did not differ in depression levels, but that all had higher depression scores than did comparison children. Internalizing problems in general have also been documented among groups exposed to spousal physical aggression (Richter, Dawes & Higson-Smith, 2004). Some evidence suggests that the combination of witnessing spousal aggression and being abused puts children at particular risk for internalizing symptoms (Bhana & Kanjee, 2001).

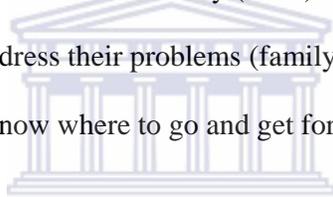
## **2.6 Children's experiences of violence**

Children tend to be the forgotten victims of violence especially in the family setting. De la Rey, Duncan, Shefer and Niekerk (1997) believed that "they are the forgotten victims of family violence, the children of physically abusive marriages. While their parents are caught within the intensity of their own conflicts and struggle for emotional and physical survival, the needs of these children are often overlooked or misunderstood" (p 175).

According to De La Rey et al (1997) children's responses to observing in the family vary considerably and there is no typical reaction, but the range of behavioral and emotional

problems is very similar. The study conducted by Gorin (2004) revealed that, although children's experiences are all very different, there are many common themes that arise when they share their experiences, feelings, and coping strategies. The review of Gorin's (2004) study suggests that children are often more aware of their problems more than their parents realize, however they often do not understand the reasons behind what they are going through. The study further identifies that children worry more about their parents than it is maybe recognized, particularly if they fear for their parent's safety.

According to Gelles and Harrop (1999) some children, particularly boys do not talk to anybody about their problems. This results in some children using avoidance as a coping mechanism. Goldman, Salus, Walcott and Kennedy (2003) listed that children mainly use informal support structures to address their problems (family and friends). They also noted that this is because they do not know where to go and get formal or professional help.



WESTERN CAPE

## **2.7 The perceptions of children about intervention strategies**

The study conducted by Ward, Martin, Theron and Distiller (2007) suggested that children who are less depressed, or who have fewer conduct problems are more able to access support at school. Their findings pointed that, the importance of a safe, supportive school environment for children's development, and suggested that the interventions to improve the school environment will boost the children's resilience.

According to Gorin (2004) children find the involvement in conventional after-school activities to play a significant role in mitigating anxiety. He interpreted this effect by stating that it is usually the less anxious children who are able to be involved in after school activities, which might be because they have the social and emotional capacities for such involvement. He further argues that, children reported that after school programmes do

provide safe environments for them and so mitigate the effects of exposure to violence. Ward et al (2007) stated that children did not give much evidence of parental support, which might be caused by the fact that “the home was the most frequent location for exposure to violence” (p. 182).

## **2.8 Gender differences on violence towards children**

Seedat, Van Niekerk, Suffla and Ratele (2009) reported that South Africa faces a globally extraordinary challenge of violence against women and girls, as well as men and boys. They argue that the rates of homicide, rape childhood and domestic violence are above those compared with other countries. Seedat et. al (2009) believe that these high levels of violence are an enduring legacy of our colonial and apartheid past, which is driven by social dynamics formed during the years of racial and gender oppression, with systematic hardship, under education, out of control violence and distraction of normal family life.

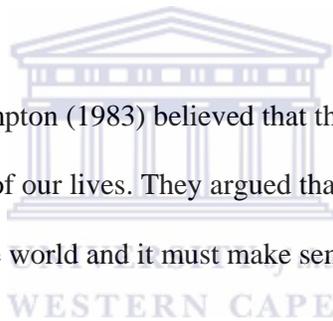
According to Richter, Dawes and Higson-Smith (2004) growing up as a child in a home with both biological parents is not usual in South Africa. That is majority of children are born outside marriage and there is generally no expectation of fathers having social involvement in the lives of these children. They further argued that those fathers do not usually provide financial support. Children are frequently raised by family members who are not their biological parents. Without parents' protection, children are extremely vulnerable to violence and neglect. Elliot (1993) reported that girls exposed to physical, sexual and emotional trauma as children are at increased risk of re-victimization as adults. According to Nyman and Svensson (1995) exposure of boys to violence, neglect or sexual violence in childhood greatly increases the chance of being violent as adolescents and adults; it also reduces their ability to form enduring emotional attachments. They further stated that trauma during

childhood impacts on brain development, enhancing anti-social and psychopathic behavior and reducing the ability to empathize.

Richter, Dawes and Higson-Smith (2004) stated that gender is a crucial factor in child sexual abuse. The study that was conducted by Sobsey, Randall and Perrila (19997) suggested that girls were sexually abused more often than boys; they also reported that according to their study child sexual abuse occurs globally. The research suggests that boys are more likely to experience more severe forms of physical violence while girls are more likely to be sexually abused (Nyman & Svensson, 1995).

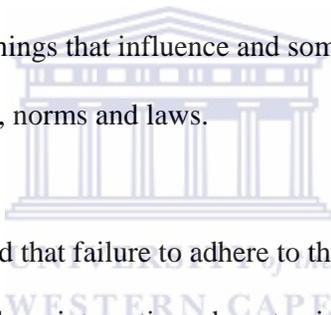
## **2.9 Theoretical framework**

Newberger, Newberger and Hampton (1983) believed that theories are necessary to explain and to contain the complexities of our lives. They argued that a good theory must enable one to operate more efficiently in the world and it must make sense.



For the purpose of this study, the researcher reviewed the systems theory of Bronfenbrenner. The biological system is the combination of the child's biological disposition and environmental forces coming together to shape the child's development. The theory looks at the interaction between aspects in the child's maturing biology, the immediate family or community environment and the societal landscape that fuels and steers the child's development (Boemmel & Briscoe, 2001). According to Swick and Williams (2006) Bronfenbrenner explicates that the world of the child consists of four systems of interactions, namely; microsystem, mesosystem, exosystem and macrosystem. Each system depends on the contextual and sources of growth.

According to Boemmel and Briscoe (2001) microsystem has been described as the child most intimate learning setting, as it offers the reference point of the world. Microsystem consists of the child's most immediate environment (physically, socially and psychologically). The family is regarded as the child's early microsystem for learning how to live, while the caring relations between child and caregivers help to influence personality. Mesosystem is the connection between two or more systems in which child, parent and family live. The mesosystem includes adults beyond primary care givers who engage with the children. The exosystem refers to the social settings that affect the child but do not include the child, such as the parent's workplace or health services in the community. According to Boemmel and Briscoe (2001) exosystem can have a huge impact on the child. Lastly the macrosystem is reported to be consisting of the things that influence and sometimes support the child within the environment such as cultures, norms and laws.



Swick and Williams (2006) stated that failure to adhere to these systems could have a negative impact on the child. If these interactions do not exist within a child's environment their well being is at risk which will further affects their intellectual, emotional, social and moral aspects of their lives. They further state that violence is more likely to happen in the family than any other place in the society. For children and families violence is hazardous not only because it causes immediate harm to someone, but it also has a powerful influence on our future interactions (Swick & Williams, 2006).

The theory of violence by Frantz Fanon was also reviewed in the study. According to Bulhan (1985) Fanon believed that some people use violence as a form of intervention. He further argued that such people are reported to be "regaining their identity, reclaiming their history, reconstructing their bonding, and forging their future through violence" (p.144).

Bulhan (1985) stated that according to Fanon, through violence some individuals, remove the primary barrier to their humanity and they rehabilitate themselves. He further argues that in South African context, the notion of oppression remained at the central part of violence.

Bullan (1985) reported that the frequency of intrapersonal violence in our communities can be shown by the growing threat of suicide, alcoholism and drug abuse. According to him alcoholism is one of those self inflicted human problems that has broad repercussions in a community. He reports that victims are usually the loved ones. Frantz Fanon theory of violence therefore is appropriate for the South African context.



## CHAPTER 3

### METHODOLOGICAL FRAMEWORK

#### 3.1 RESEARCH DESIGN

On the basis of the aims of this study, it is deemed appropriate to use the qualitative research method. The main purpose of qualitative research approach is to explore and gain a deeper understanding about social phenomena (Babbie & Moutin, 2006). According to Willig (2001) the most fundamental characteristic of qualitative research is “around the construction and negotiation of meaning, and the quality of texture of experience” (p.15). This approach allows the formulation of rich descriptions and explanations of human phenomena (Terre-Blanche & Durrheim, 1999).



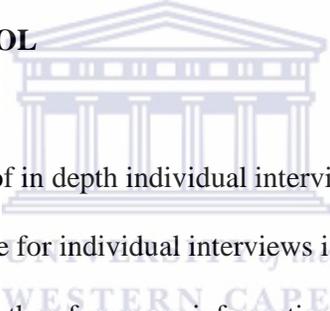
#### 3.2 PARTICIPANTS

For the purpose of this paper, the researcher has used a manageable group of 8 participants in the study. The participants were both males and females aged between 14-16 years old. The participants were conveniently sampled from a children’s home in Khayelitsha. According to De Vos (1998) convenience sampling entails enlisting participants who are easily accessible to the researcher. The motivation for the chosen children’s home was because of accessibility to the researcher because the researcher had a prior interaction and subsequent familiarity with the institutions and staff since her days as a worker in NGO where she had to work with these institutions on various aspects.

### **3.3 PROCEDURES**

The permission to conduct this research was obtained from the University of the Western Cape Senate Research Committee. Permission was also requested from the children's homes. The researcher briefed the participants and the care givers about the study. Assent letters were sent out to all the children interested in participating in the study (Appendix B). Consent letters were sent together with the letters of assent and were signed and returned by the participants as well as their care givers (Appendix C). The caregivers were provided with the researcher's contact details and were able to contact the researcher regarding any queries.

### **3.4 DATA COLLECTION TOOL**

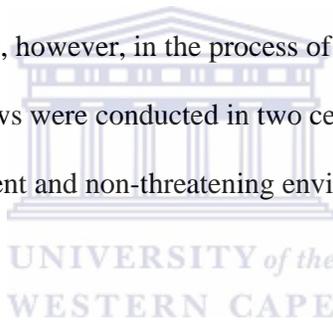


The data was collected in terms of in depth individual interviews, where open ended questions were asked. The motive for individual interviews is because the subject of the study is viewed as a sensitive topic and therefore more information was gathered on an individual basis rather than groups. According to Denzin and Lincoln (1994) in depth interviews are ideal for gathering the subjective perceptions and meanings that an individual attaches to an experienced phenomenon. The reason why such interviews are ideal is that; the perceptions and meanings of the individual are to be found in the language that individuals employ to articulate their experiences (Denzin & Lincoln, 1994).

Developing a deeper understanding of how the person came to develop the beliefs is important within the qualitative research paradigm. According to Silverman (2001) the interview provides a platform from which dominant discourses, which had influenced the development of these understandings to be understood. He further argued that during the

interview, the participants do not only describe the discourses that they have been influenced by, they are actively part of constructing these discourses. The goal of the interview was to understand “how the interview responses are produced” and to understand the circumstances in which these meanings were produced (Silverman, 2001: 97).

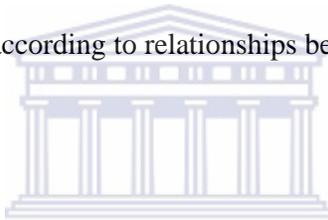
The individual interview was guided by the use of a semi-structured interview schedule (appendix A). The decision to make use of a semi structured interview schedule was based on the value which such a schedule offers in the context of an in depth individual interview. A tape recorder was used to record during the focus groups for transcription and interpretation and discussion of results. Each participant was interviewed separately. The participants were asked nine open ended questions, however, in the process of the interviews the exploratory questions came up. The interviews were conducted in two centres (children’s home), which were viewed as a quiet, convenient and non-threatening environment.



### **3.5 DATA ANALYSIS**

The data was analysed, using thematic analysis. According to Braun and Clark (2006) thematic analysis is a method for identifying, analysing and reporting patterns within data. Braun & Clark (2006) stated that the thematic analysis involves an interpretation and familiarisation of the data, within the individual interviews, then analysis across the interviews. Thematic content analysis therefore aims at identifying themes that are meaningful to the description of the phenomenon being explored. Moore (2003) believes that “it is important to listen to the ‘life stories’ that children tell, as these stories are informed by their interaction within a particular social and cultural context” (p469).

The data was completed through step-by-step process, using themes and codes. Firstly, the recording of the interviews was transcribed verbatim, from which patterns of experiences were noted. The researcher in this phase familiarised herself with the data by repeatedly reading through the transcribed interviews (Braun & Clarke, 2006). Secondly, themes or current ideas were inferred from the data, identified and then organised using clear codes, to each aspect of experience the participants spoke about (Braun & Clarke, 2006). At this stage the researcher was having a good understanding of the data from immersion in the data and was familiar with the extracts and topics that arose. In the third phase the researcher recognised and induced common threads from the data. Induction refers to the process of inferring general rules or classes from specific incidences (Braun & Clarke, 2006). During this process the data was coded according to relationships between one or more of the themes.



The fourth phase of analysis involved further examination of the themes for consistency and coherency (Braun & Clarke, 2006). For each group of meaning units, a word or brief phrase stating the meaning shared in all instances was identified. The theme phrase was revised to fit the overall meaning of the original meaning units. In the fifth phase, a narrative summarising the main issues was created around data quotes, which described the content and relevance to the research question (Braun & Clarke, 2006). In the last phase of the analysis, the researcher wrote up the thematic analysis in the final report which was supported with the theoretical understanding drawn from the literature reviewed (Braun & Clarke, 2006).

### **3.6 ETHICAL CONSIDERATIONS**

The ethical clearance was given by University of the Western Cape for the research to be conducted. As this study involved working with individuals from possibly traumatic backgrounds, the ethics were taken into consideration from the onset process of recruitment, hence the informed consent were provided for both participants and the care givers, because the participants are considered as minors. The participants remained anonymous, that is their identities were protected in the research report.

The participation was voluntary and it was explained to the participants, verbally and in writing, they may withdraw from the study at any point. The participants were ensured of their confidentiality. Counselling was available for participants, where needed, after the interviews. The recorded interviews and transcripts were kept in a locked filing cabinet, accessible only to the researcher. The participants were informed that the documents and recordings will be destroyed at the end of the research process.

### **3.7 REFLEXIVITY**

Throughout the research, the researcher was consciously aware of the ways in which personal values, experiences, interests and beliefs in life could influence the study. Much awareness was considered most in data interpretation, as this may invoke the researchers' personal views, judgements, preconceptions and biases. By doing this, the researcher needed to be aware of her own role within the research process and how she may influence the participants. The researcher needed to be continuously aware of how she projects her own

subjective views onto the research, as not to change the meaning and content of the information.

The data collected may additionally have been affected by the researcher's presence in the interview procedure, prior to the analysis process. The presence of the researcher created a new system within the participants' suprasystem. This systemic shift may have influenced the participants' attitude towards her, affecting the interview process. Additionally, the researcher being a female may have influenced the responses of the participants. The male participants may have presented an inflated sense of self or repressed some of their emotional difficulties in order to be perceived as 'more masculine' to impress the researcher.



## CHAPTER 4

### DISCUSSION AND INTERPRETATION OF RESULTS

#### 4.1 INTRODUCTION

The aim of the study was to explore children's perceptions and experiences of violence and to explore their perceptions about intervention in children's homes. The study sought to determine what children know and understand about violence and whether intervention methods are efficiently responding to the problem of child abuse.

In this chapter, the results of the research process will be presented and discussed. The chapter will conclude with a summary of the key issues derived from the study. In order to gain understanding and knowledge from the vast amount of data obtained through the interview process thematic analysis was utilised. The use of thematic analysis allowed for the dominant aspects within the individual's life to be identified and dominant protective factors to emerge. In the sections that follow, verbatim accounts are provided as verbalised by the participants of the study, which provide support and evidence for the themes. Each theme will be considered in relation to the existing literature as outlined by the literature review.

Four themes have been identified in the study, namely; perception of violence, perception of safety and security in the children's home, substance abuse and poverty.

The data was framed by the theories of Frantz Fanon's theory of violence (1968) and Bronfenbrenner's (1979) ecological systems theory. For the purposes of anonymity and

assuring the protection of the participants' identity, the participants will be referred to as 'P' and the interviewer as 'I'.

## **4.2 CHILDREN'S PERCEPTION ON VIOLENCE**

This theme addresses the participants' perception of violence. The subjects that arose in this specific study were associated with the geographical area in which they live and how they perceive the security of their neighbourhood. Secondly, their perceptions of causes of violence included emotional reactions causing violence and how poverty has influenced the level of crime.



### **4.2.1 Geographical Area**

The participants in this study generally believed that there is a high prevalence of violence in the communities that they grew up in. The following statements illustrate the perceptions held by the participants concerning their neighbourhoods:

*“Staying in townships is not safe, people are robbed every day, some are raped and get killed in the process, it does not feel safe, even if we are staying in the children’s home, the fact that it is located in the township does not make it any safer”.*

(Participant 8)

*“I only feel safe when I am inside the home premises, the minute I get out of the gate I know that anything could happen to me, this area is not safe”.* (Participant 2)

*“It does not feel safe to be living in a township which is well known about crime, I sometimes see criminals walking up and down the street near the gate, and I know that they want to get in but because of the securities they can’t. I believe that there is more crime in our township more than other places.” (Participant 5)*

The responses as depicted above are subjective views of how the participants view their own insecurities. The responses included generally feeling unsafe about their area of residence, although the participants grew up in that area, they still refer to it as unsafe and full of criminals.

These findings are in line with the literature review which shows that children frequently experience violence directly as victims and indirectly via reports of violent encounters provided by their family, peers and community (Farver, Ghosh & Garcia, 2000). The children perceptions of their neighbourhood play a significant role in how they perceive violence. The study conducted by Farver, Gosh & Garcia (2000) reveals that the children were generally found to feel safer at home and in school, but they felt unsafe outdoors when playing in their neighbourhood or travelling to school, regardless of the area in which they lived. It reveals that children in areas with higher incidence of crime were more distrustful of police, showed lower perceived competence and had a lower external locus of control than children living in low violence neighbourhoods and that the exposure of the individuals to the violence may result in negative effects on children’s sense of well being, sense of self over their lives and opportunities to play safely in their neighbourhoods (Farver, Gosh & Garcia, 2000).

Spilsbury’s (2002) studies revealed that regardless of the neighbourhood violence and crime, considerable numbers of the children are exposed to acts of violence and expressed concerns

about becoming victimised. The effects of the insecurities derived from exposure to violence impact on various aspects of children's lives and contribute significantly to the prediction of each school outcome, especially attendance and behaviour (Osofsky, 1995)

#### **4.3 PERCEPTIONS OF SAFETY AND SECURITY IN THE CHILDREN'S HOME**

The work of Abraham Maslow (1954) placed safety and security as secondary only to physiological requirements in his hierarchy of needs. These needs according to him require satisfaction before individuals are able to function optimally. Exposure to violence and perceptions of danger within children's immediate context is likely to threaten the ability of children to fulfil their potential and restrain their sense of psychological well being (Bowen & Bowen, 1999). According to Garbiano (1998) our society is a socially toxic environment, in which children are vulnerable. He further argues that in the context of South Africa, children and adults alike, struggle to maintain a permanent sense of security to the degree of violence to which individuals are exposed in their community and society at large.

According to the Human Science Research Council (HSRC), South Africans have felt increasingly concerned about their own safety during the period of 1994 and 1998, despite the fact that crime has not necessarily become more violent. The statistics from the HSRC reveals that in 1994, 73% of South Africans felt safe and 16% felt unsafe. At the end of 1998 some 54% felt safe and 48% unsafe. South Africans remain exposed to high levels of various forms of violent crime, including community violence, rape, hijacking of cars, infuriated assault, infuriated robbery and murder (Hamber, 1997). He further suggests that the media, combined with report and anecdote, fuel fear and anger about the rising crime in South Africa (Hamber, 1997).

The topic of safety and security was fundamental to commence in the individual interviews, as it illustrates the perception of the participants and how they view violence on a personal level, and ultimately how this affects their psychological well-being. The participants agreed that they have been affected directly by violence. Their perception of safety depends on a variety of factors, which are addressed in accordance with the responses of participants.

#### **4.3.1 Lack of parental support / protection**

When biological parents are not around, children are usually looked after by extended family members. It is usually expected that the family members will nurture the children and almost play a role of parent. However, this is not always the case. It became clear from the study that these children are sometimes abused by the extended family members. The study also discovered that, not only those children who are not staying with their biological parents are abused, but that biological parents, sometimes maltreat their own children.

*“Because they use to beat me at home. My aunt and her daughter, who is 22 years old used to beat me. They accused me of stealing money. They sent me to the shop this other day, when I got to the shop I couldn’t find the money in my pocket. It was windy and I put the money in the pocket of my pant. I went back home, I told them I can’t find the money. My aunt gave me a hiding asking what I did with the money. We went back together to look for it, fortunately we found it on the way, and she then went to buy to the shop. When she came back she gave me a hiding again, she said I’ve stolen it. When her daughter came back from work she was told the story and she gave me a*

*hiding. They continued giving me hiding every day, sometimes they would lock me outside the house...*

*My mother passed away, I was still young, and my aunt told me that she died in 2003.*

*My father is still alive, he does not have a permanent place to stay, I don't know where he lives and he is unemployed.” (Participant 4)*

*“It was because of my father. It was me and my friend, we were sitting at home and my father raped us, we both cried. I told my teacher at school, and then she got him arrested. My mom was not around; I don't know where she went.”(Participant 3)*

The above circumstances have propelled these children to leave their homes and find new home at foster care, with the hope that they will be safe. According to Berrick (1998) foster care is designed to provide temporary care, supervision, and support to children who cannot live at home because they have been abused or neglected by their parents. He further reported that when children are removed from their homes, they may be placed in a variety of settings. In many cases, foster family care has been predominant form of substitute care. Berrick (1998) described foster parents as people who are licensed by the county or state, indicating that their homes have been assessed for basic health and safety standards, and that the care givers have participated in at least minimal training to provide care and supervision for a child.

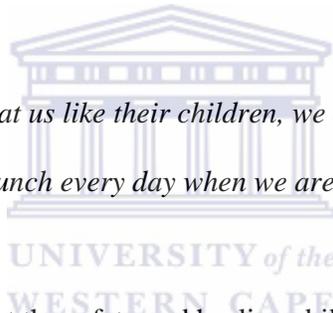
The child welfare system is guarded by the series of national and provincial statutes that reflect basic principles concerning the government's role in child protection, family support and family privacy (Berrick, 1998). According to Berrick (1998) goals of the child welfare services system is to protect children from harm at the hands of their parents or other care

givers. The secondary goal has been identified as forming the basis of a well functioning service delivery system for vulnerable families. The child welfare system therefore should support families and it should promote permanence for children. The third welfare goal is to rehabilitate children.

Some of the participants in the study reported that they feel safe in the children's home and they suggest that they feel healed.

*“It is wonderful, they don't give me hiding like my aunt and her daughter did, and here I eat three meals a day, it's better to stay here than at home.”* (participant 4)

*“I could say that they treat us like their children, we have clothes and they always make sure that we have lunch every day when we are going to school.”* (Participant 8)



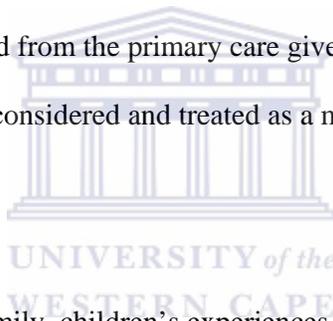
The experiences of children about the safety and healing ability of the place is different for each individual. For instance some have reported that they are maltreated in the same children's home.

*“It's not nice staying in children's home because they don't treat us the same. Sometimes they accuse me of beating other children, and I am not the one who beat them.”* (Participant 3)

*“It is very bad, I don't like the way they treat me. I feel that they are emotionally abusing me. They often remind me that i was dumped in the dust bin when I was a baby”.* (Participant 7)

According to Casey (2000) children are placed in foster care because of society's concern for their well-being. He further stated that anytime spent by a child in temporary care should be therapeutic but may be harmful to the child's growth, development, and well being.

Interruptions in the continuity of the child's care giver are often detrimental. Repeated moves from home to home compound the adverse consequences that stress and inadequate parenting have on the child's development and ability to cope. Casey (2000) reveals that adults cope with impermanence by building on an accrued sense of reliance and by anticipating and planning for a time of greater constancy. Children, however, especially when young, have limited life experience on which to establish their sense of self. He further reports that any intervention that separates a child from the primary care giver who provides psychological support should be continuously considered and treated as a matter of urgency and profound importance.



The studies reveal that in any family, children's experiences about the treatment are rarely the same (Jose, 2009; Berrick, 1998). Expecting that these children would have the same experiences about children's home would be naive and simplistic. That is not to demean the experiences of the vulnerable children who strongly feel that they are also maltreated, rather the point is to attempt understanding these experiences as experiences not devoid of human temperament, which may also influence either the perception of maltreatment or the process.

#### **4.3.2 Children's experiences about intervention strategies**

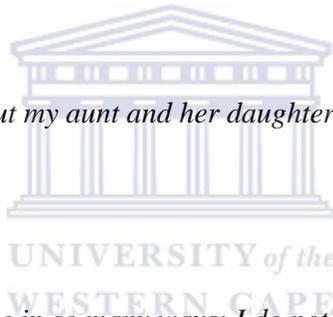
The study conducted reveals that the deeper psychological wounds are not mended in the children's home. Their intervention generally, focuses on workshops and support groups. The

results reveal that care givers do not deal with the deeper wounds and that leads to children growing up with unhealed wounds.

*“I miss my siblings, the other one is older than me and the other one is younger than me, they are staying with my aunt. I last saw them before I came to stay here; I don’t know where my mother is. They don’t visit me here.”* (Participant 3)

*“I miss my younger sister, we were staying together with my aunt, the social workers took her to children’s home in Athlone, and she used to save me when my aunt was giving me a hiding”.* (Participant 4)

*“I sometimes dream about my aunt and her daughter giving me a hiding”.*  
(Participant 5)



*“Violence has affected me in so many ways; I do not have home because of it. It is hurting to think that some children are happily staying with their parents and I don’t have parents. At school sometimes when children are talking about their parents I wish I was them.”* (Participant 8)

According to Casey (2000) the comprehensive assessment should lead to an individualized court-approved treatment plan and on-going monitoring by a multidisciplinary team skilled in working with this population in the context of a children’s home. In home monitoring, placement with a kinship care, or out of home placement should support each child’s psychological and developmental needs. He further stated that parents and foster parents must be well-informed about the importance of the environment in the development of normal

brain function and the specifics needed for the child under care. Children according to Jose (2009) can often be helped by providing predictability, nurturance, support, and cognitive or sight oriented interventions to make them feel safe, comfortable, and loved. He suggested that specific mental health plans must be developed to meet the functional needs of each child.

According to Farver, Ghosh and Garcia (2000) early interventions are key to minimising the long-term and permanent effects of traumatic events of the child's brain. After the first several years of a child's life, patterns of interaction with the world are formed, both psychologically and in the brain structure, making it more difficult, though still possible, to improve a child's physical, cognitive, and emotional abilities (Berrick,1998). Several studies have shown how favourable and stimulating environments for infants and young children can lessen the adverse effects of prior negative environments.

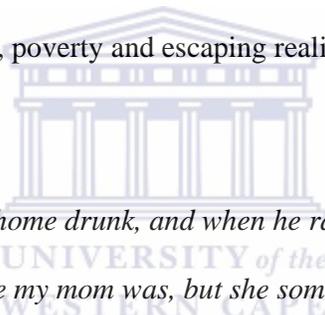
Weldon (2001) reveals that the effects from foster care, focusing on the psychological development of childhood, are severely untreated. Consequently, children placed in foster care suffer from emotional scars that, when left untreated, have great effects on the remainder of the childrens' lives. She further reports that every child undergoes challenges from different stages of psychological development. In addition to the normal obstacles, foster children are faced with other psychological demands to master. Katz (2006) suggested that many foster children are left to grow up without the abilities necessary to become successful in the adult world.

According to Dawson, Hessel and Frey (1994) every child undergoes challenges from different stages of psychological development. In addition to the normal obstacles, foster children are faced with other psychological demands to master. In order to experience all the emotions presented in changing homes, foster children must master and deal with feelings

provoked by separation from their biological parents and the feelings resulting from being presented with new parents. They must process any consequential feelings aroused from separation of any kind from the new parents, and also overcome the fear of developing closeness with the new parents.

#### **4.4 SUBSTANCE ABUSE AS A CONTRIBUTING FACTOR TO VIOLENCE**

In the context of South Africa and the Western Cape specifically, people are witness to significant levels of substance abuse. This research is consistent with the perceptions of the participants in the study. They expressed that there is a high connection between drug and alcohol use and violence. They associate the connection of substance abuse and violence to the altered state of consciousness, poverty and escaping reality, which is depicted in the following verbatim extracts:



*“My father always come home drunk, and when he raped me and my friend he was drunk, I don’t know where my mom was, but she sometimes come home drunk as well” (Participant 3)*

*“Both mom and dad drink alcohol; they sometimes live me my sister alone at home without food, and come back drunk. When my father is drunk he often gives us hiding and he would tell us that he is going to flush our heads from the toilet.” (Participant 2)*

*“when my parents were drunk, they use to beat me up for no reason. They would tell me how useless I am and they do not understand into such a bad child.” (Participant 5)*

These extracts support the previous research which indicates that substance abuse gives rise to violence. However, as mentioned previously, context plays an essential role in any relationship that may exist between substance use and violent behavior, which leads to the next theme and another cause of violence, which is poverty.

Parental substance abuse is reported to be a contributing factor for between one- and two-thirds of maltreated children in the child welfare system (Goldman, Salus, Wolcott & Kennedy, 2003). Research supports the association between substance abuse and child maltreatment. Substance abuse can interfere with a parent's mental functioning, judgment, inhibitions, and protective capacity (Widom & Hiller-Sturmhofel, 2000). They further argued that parents significantly affected by the use of drugs and alcohol may neglect the needs of their children, spend money on drugs instead of household expenses, or get involved in criminal activities that jeopardize their children's health or safety. Studies also suggest that substance abuse can influence parental discipline choices and child-rearing styles (Goldman, Salus, Wolcott & Kennedy, 2003).

In studies by Parker and Auerhahn (1998), several clear conclusions were drawn from an extensive review of the literature concerning drugs, alcohol and violence. Although previous studies have published a number of statements to the contrary, Parker and Auerhahn (1998) have found no significant evidence suggesting that drug use is associated with violence, although they have found that there is substantial evidence to suggest that alcohol use is significantly associated with violence of all kinds. One of the key conclusions drawn from their study is the overwhelming importance of context in any relationship that may exist between substance use and violent behavior.

#### 4.5 POVERTY AS A CONTRIBUTING FACTOR TO VIOLENCE

Poverty and unemployment show strong associations with violence towards children. The participants in this study believed that it is predominantly previously disadvantaged individuals who are more predisposed to acts of violence. Violence towards children has been shown to be a complex and multi-dimensional problem (Beckett, 2003). It has been found to occur in all socio-economic groups, but there is association and an increased risk of emotional and physical abuse.

*“I think if every child had a grant there will be no poverty and there will be no violence”.* (Participant 1)

*“Going a day without food caused us to go and steal other people’s food. I left home due to poverty; there was never enough food at home.”* (Participant 7)

*“Sometimes when I am hungry I would ask my mom and dad for money to buy bread and they would tell me that they don’t have money, because they are not working. They would start becoming angry and beat me up because they say I am causing trouble”.* (Participant 8)

The nature of the link between poverty and violence towards children is unclear from this study, which is partly due to the difficulty in disentangling the casual relationships between poverty, social exclusion, child abuse and other associated social problems such as mental illness and substance misuse. The literature differs in the findings of poverty and child abuse. The study conducted by Leschied, Chiodo, Whitehead and Hurley (2003) reveals that association between violence towards children and poverty does not mean that poverty causes violence. It suggests that the majority of families living in poverty do not abuse their children and parent effectively. However, the study conducted by Beresford (1997) reveals that the

most widely used and accepted theoretical perspective for explaining the relationship between poverty and violence towards children focuses on stress. It is argued that the multitude factors associated with poverty and social deprivation, especially when compounded by mental health problems, negatively impact on parenting by increasing vulnerability to stress.

The stress has been reported by Sedlak (2007) to be increasing the risk of parenting difficulties and breakdown. For example, through reacting to the demands on childrearing with harsh or inconsistent discipline, or by sinking into depression, despair and hopelessness, all of which can impact on parents' capacity to meet their children's needs. Beckett (2003) stated that most families living in poverty 'get by' and copes with the adversity as well as the negative label and stigma of being poor. He further argues that there is a minority of parents who do not manage these pressures so well. The research indicates that there is an association between poverty and parenting difficulties, including emotional abuse and physical abuse.

In a qualitative study examining the relationship between poverty, parenting and children's well-being in diverse social circumstances, Sedlak (2007) found that stress, unless buffered by sufficient social support and mitigated by other sources of resilience, is likely to be significant in the increased risk of some forms of maltreatment among parents living in poverty. Sedlak (2007) findings also highlight a number of issues and concepts associated with this argument that merit more attention. For example, the role of impact of violence in parents' own histories, the role of attachment insecurity care and control conflicts, identities and parenting and the impact of stigma and poverty.

Violence towards children has been found to occur in many forms and across all socio-economic groups. The findings of this study suggest that children who grew up in poverty can be more vulnerable to some forms of abuse. They also have an increased risk of adverse

experiences and negative outcomes, both in short and long term. Children who experience both poverty and violence may in further undermine life chances in the long term.

#### **4.5.1 The emotional effects of violence towards children**

The findings arrived at, in this study, indicates that children who are living in children's home develop emotional problems. The research reveals that children who are staying in children's home face a challenging journey through childhood. In addition to the troubling family, circumstances that bring them into state care, they face additional difficulties within the child interests system that may further compromise their healthy development.

*“I sometimes feel very lonely and not want to play with other children. I just feel like I can go and sleep the whole day”.* (Participant 4)

*“The environment here is different from the outside world, I had to follow rules and what is mine became ours. I have to learn values of togetherness, and all these changes caused feelings of anger and violence because I could not adapt to being under strict controlled rules. I did not want to be seen as weak, I still wanted to be feared like I was on the streets”.* (Participant 6)

*When I first arrived I did not want to be here. I would fight with other children. I was always angry and ready for a fight. I then decided to join sports activities.”*

(Participant 7)

This finding that is concerned with the sense of loneliness and aggression experienced by the youths appears to reiterate those findings put forward by such authors as Barrier (2001) and Gardner (2006) who suggested that almost all children in children's home have experienced

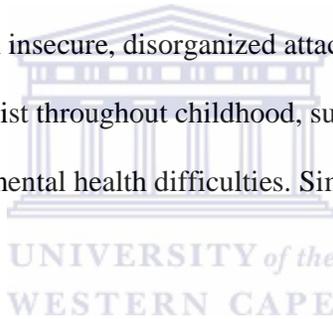
tremendous loss. Even in the very best of foster care placements, children will experience loss of their familiar home surroundings, at least some disruption of daily routines. They further argued that even when the plan is reunification, and there is a good possibility that they will be returned home, children experience profound loss while they are separated from their caregivers.

The findings of this study was in line with the findings of the study conducted by Gil and Bogart (1992) which reveals that at the adolescent stage, children understand permanence and will grieve like an adult. They further reported that complicating the grief process is the adolescent's primary developmental task of forming his or her own identity. Issues of independence, resistance, and separation are already occurring and profound loss adds a tremendous amount of stress to the children's maturation process. Gardner (2006) also reported that when faced with loss, adolescents can turn to destructive behaviors such as substance abuse, eating disorders, aggression and depression. Foster parents can help adolescents deal with their conflicting emotions by helping them maintain their sense of identity, allowing them to make choices, that are not harmful, and by encouraging safe expressions and experiences of freedom and independence.

According to Barrier (2001) foster children are often in a state of indeterminate. He stated that when initially placed into care, it is often unknown whether the child will or will not return home. Until a birth parent's rights are relinquished or terminated, it is difficult for a child to complete the grief process. Gil and Bogart (1992) believed that when separation from the birth family is permanent, it is the foster parents' responsibility, along with the social worker, to help the child feel safe, secure, and prepared for the future. They stressed on the honest, developmentally appropriate communication, of which they refer to as essential.

The findings of this study illustrates clearly that children's home can injure a child's emotional development and can lead to negative development outcomes due to inconsistent nurturing and maternal contact. When placed in children's home, and if maternal care or care provided by the primary caretaker is inconsistent or inadequate, such as in the cases above, children become more insecurely attached and develop abnormal attachments.

This study concluded that children placed in children's home and who received inconsistent nurturing care from the primary caretaker, and who have disrupted attachments to their caregivers, display overly vigilant or overly compliant behaviours, show indiscriminate connection to adults, or do not demonstrate attachment behaviours to adult. It also came out from the study that children with insecure, disorganized attachments may also have many other adverse outcomes that persist throughout childhood, such as poor peer relationships, behavioural problems, or other mental health difficulties. Similar findings have been presented by other scientists.



## **CHAPTER 5**

### **CONCLUSIONS**

#### **5.1 INTRODUCTION**

This chapter will offer a discussion concerning the contributions, which this study offers. Moreover this chapter will also deliver a discussion that examines the limitations of this study. Finally this chapter will also serve in providing recommendations for both the children's home and for further research options.

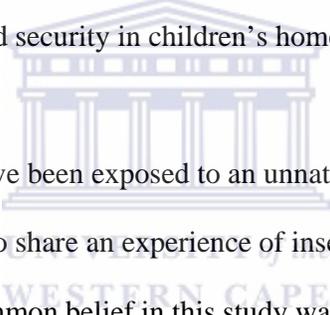
#### **5.2 SUMMARY OF THE STUDY**



The study explored the perceptions and experiences of violence on children who are living in children's home. The study sought to determine what children know and understand about violence and whether intervention methods are efficiently responding to the problem of child abuse. This study highlighted the perspective that is held by these children of their experiences of life in a children's home. Thereby providing a platform through which they were able to give voice to their own experiences. These overall or shared experiences, as individually described by each youth, were synthesised into a single and integrated account. This account served to present the collective meaning that the experience and perception of violence towards children holds, for the participants that were interviewed.

### 5.3 SUMMARY OF FINDINGS AND CONCLUSIONS

Four primary findings were arrived at through the process of data analysis. These findings represented the overall descriptions of children's experiences and perceptions and intervention strategies in children's home as; offered by the children that were interviewed in the study. These findings also represent the subjective interpretations that the researcher has offered in response to the information provided by the participants. It should also be noted that each of the findings, is considered to have equal weighting. That is, the order in which each finding has been sequenced, in no way reflects a hierarchy of importance. The findings that have been arrived at through the process of data analysis include the perception of violence, perception of safety and security in children's home, substance abuse and poverty.



The children of South Africa have been exposed to an unnatural level of violence. The participants in the study appear to share an experience of insecurity to varying degrees in the context of South Africa. The common belief in this study was that the majority of the violence is found in the areas of their origin, which was the townships where they grew up. Generally, the participants held different beliefs on their sense of safety, which was related in the current area in which they live. Some believed that they are completely safe from harm inside the premises of the children's home, but they feared for their lives when they were out in the community. Some of the participants believed that they are not safe even if they are inside the premises because they sometimes see criminals walking right next to their home.

All of the participants expressed that they have been victims of violence either by their biological parents or a relative or even a close family friend. The results support previous literature which suggests that the number of children who suffer abuse by parents or

guardians range from about 1 percent of all children to about 15 percent, and figures are far higher if emotional abuse and neglect are included (Whiting, 2000). The study conducted by Kim and Galvin (2004) reveals that parents were the abusers in 77 percent of the confirmed cases, other relatives in 11 percent. They further reported that sexual abuse was more likely to be committed by males, whereas females were responsible for the majority of neglect cases.

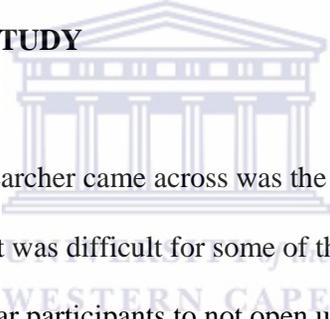
This study is important to recognise how context plays a vital role in how a child forms his/her perceptions of violence. On a systematic enquiry, this study has revealed that children are abused at a microlevel, some of these children have PTSD symptoms as a result of the abuse. Abused children were then taken from microlevel to a mesosystem, with the hope that they are going to be healed. However, this study has discovered that the protection is not guaranteed in the mesosystem as feelings of unsafe did not deteriorate in some children. Feelings of safety in this matter is subjective, some children reported that they feel safe in children's home, whereas some felt they are still not safe even though they are at the children's home. However, it should be noted that all the participants agreed that staying in children's home is better than staying in their homes of origin. This therefore means that, children's home is doing better, despite their shortcomings of effects like resources.

As much as the children's homes are, to a degree, the healthier environment for abused children, their complete safety is also dependent on the greater community as some have pointed that in townships one can never be completely safe. This means that, the fact that these children's homes are placed in Khayelitsha puts it in a position whereby it will compromise the children's safety. That leads to a community having a bigger role to play. For example, if there is a failure at micro level, that needs a very strong meso system and

macro system so that the children's challenges could be mediated. That is, these levels need to work together and be strong in order to intervene in the challenge of child abuse.

The ultimate conclusions that have been drawn from the findings that have been arrived at, in this study, suggest that children experience various difficulties and challenges, in their lives within children's home. Despite these challenges and difficulties that are encountered, participants appear to remain relatively contented with life in the home. Moreover, the participants also appeared to demonstrate a greater preference for living within the home over that of the previous living conditions from which they originate.

## **5.2 LIMITATIONS OF THE STUDY**



The major challenge that the researcher came across was the fact that the topic of the study is a very sensitive topic; therefore it was difficult for some of the participants to open up. What also contributed to those particular participants to not open up was that they felt uncomfortable speaking in front of the tape recorder. The researcher had to translate the questions for three participants into the language that they were familiar with. The questions were initially designed in English and three of the participants did not understand English the researcher therefore had to translate into their home language which is isiXhosa. The translation process was a challenge hence some of the English words does not have a direct translation to isiXhosa, and that resulted to the participants not responding accurately.

Another limitation of the study was the fact that the researcher, initially aimed at interviewing a balanced gender participants, that is, four males and four females, in order to get equal views from both genders. That was however not possible, as the researcher ended up

interviewing more females than males. There were seven females and one male that gave consent to participate in the study. Thus the perspective given here might not necessarily be true in as far as gender, in this specific case study, is concerned. Boys' views might be different and the study is not found to be accountable in that regard.

### **5.3 SIGNIFICANCE OF THE STUDY**

This case study, although it only speaks for itself and cannot be accountable for other similar case studies, it does give a point of reference. There is little research done on the perceptions and experiences of children in children's home, specifically in South Africa. Previous research have placed a greater emphasis on the events and occurrences encountered by children that live in children's home, rather than that of also exploring the intervention strategies whether they are responding to the challenge of child abuse. This study has therefore contributed in expanding the knowledge of the studied phenomenon by highlighting the perspective that is held by the children of their experiences of life in a children's home. This was done by ideally providing an academically sound platform through which they are able to give voice to their own experiences.

Secondly the study takes the reader from a home where the parents are abusive through to another environment intended to mediate that and also interrogates it. Thus learning about these institutions and their roles in society becomes consequential.

## 5.4 RECOMMENDATIONS

Based on the understanding from the study, it is imperative that, one considers the various and often interrelated ways in which their context influences children's development. That is, in order to give recommendations it will require multi-level intervention (Louw, Donald & Dawes, 2000).

Firstly, it is important that within the community the safety of the children becomes a priority, of which in some instances this does not seem to be true. The continuation of the neighbourhood security is important to maintain a sense of security in the children. There is a need for collaboration between schools, parents and children in order to create a greater sense of community safety. This should be an on-going process, in order to create the same sense of security for the younger generation to come.

To address the scars left by emotional abuse to children who are staying in children's home, the individual therapy sessions are recommended. This should be done by a qualified counsellor or therapist, where a safe and containing environment will be provided. The feelings of ambivalences experienced by some children towards their life after leaving the home should also be addressed by exploring how the children feel about leaving the home and transitioning to independent living in both individual and group therapy.

It is also recommended that this study should be replicated with abused children who are in children's home in a different community than Khayelitsha. Such research is vital in order to ascertain whether those experiences identified in the findings, arrived at this study, are

consistent with the qualitative experiences encountered by abused children living in different communities.

There is also more studies needed to be done that specifically examines the nature of the relationship between poverty and violence towards children in South Africa.

Lastly, the future research should also attempt to look at the intervention strategies used in different children's homes, whether they are sufficiently responding to the challenge of child abuse. This will assist in the consistency of this study and in terms of actually developing new intervention strategies, specifically for abused children who are residing in children's home.



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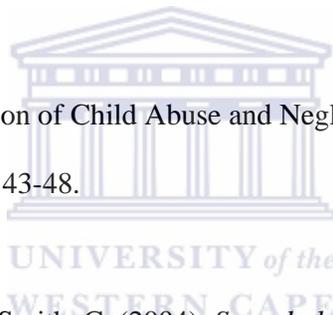
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