

**Child and Youth Care Work in the South African Context: Towards a Model for
Education and Practice**

A thesis submitted in fulfilment of the requirements for the Degree of Doctor of
Philosophy in the Faculty of Health Sciences

JANET MERLE ALLSOPP

Student No. 21557593

Durban University of Technology
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Supervisor
Prof Raisuyah Bhagwan
PhD

DECLARATION OF ORIGINALITY

This is to certify that the work is entirely my own and not of any other person, unless explicitly acknowledged (including citation of published and unpublished sources). The work has not previously been submitted in any form to the Durban University of Technology or to any other institution for assessment or for any other purpose.

Candidate's name: Ms Janet Merle Allsopp

Candidate's signature:

Date: 30/10/2020

APPROVED FOR FINAL SUBMISSION

Signature of Professor R. Bhagwan

Date of Signature

ETHICAL CLEARANCE

This is to certify that this study received ethical approval from the Institutional Research Ethics Committee (IREC) of the Durban University of Technology (DUT) in KwaZulu-Natal.

The Ethics Clearance number is **IREC 038/18**

Candidate: Ms Janet Merle Allsopp

Candidate's signature:

Date: 30/10/2020

ABSTRACT

Child and youth care work is a new profession in South Africa, regulated by the South African Council for Social Service Professions. Practitioners work in the life-space of young people in different settings. This study sought to document the current reality and contribute to future improvements in child and youth care work. The aim of the study was to develop a model to guide child and youth care practice and education in South Africa.

Using the theoretical underpinning of the ecological systems theory, a qualitative methodology was adopted in an exploratory descriptive design. This allowed participants to provide perspectives on the roles and functions of child and youth care workers and the nature of child and youth care work in a South African context. The study sought participants' understanding of the educational preparation of professional level child and youth care workers, and the further knowledge and skills that may be required.

Conducted in three provinces of South Africa, the study also included four international participants from the North American context who were familiar with the local child and youth care work sector. Five samples were selected and included a total of 57 participants. One of the samples was child and youth care workers functioning at the auxiliary level, and another was child and youth care workers functioning at the professional level of registration. Six focus groups were run with these samples, including 44 participants in total. Individual in-depth interviews were held with participants in the three other samples. These samples comprised employers of child and youth care workers, local child and youth care work experts, and international child and youth care work experts within this experience of child and youth care work in South Africa. Thirteen in-depth interviews were held in total.

Seventeen primary themes and 50 sub-themes emerged. The findings revealed that child and youth care work in South Africa is founded on a knowledge base from the North American context, but is affected by the local context of poverty, and the framework of children's rights within which child and youth care workers function. South African child and youth care workers were found to work with children as well

as families in community-based settings, health settings, education settings, and in child and youth care centres.

The roles and functions of child and youth care workers are aligned to the local scope of practice as articulated in legislation. The study found that a role undertaken by child and youth care workers not included in the scope of practice is that of stakeholder and referral management. The nature of child and youth care work included life-space work as the central context of the work, which is further characterised by relationship-building and a spiritedness in caring. Child and youth care workers are negatively impacted by the limited knowledge of their role on the part of other professionals and community members, and the continued struggle for professional recognition in the field.

The education of child and youth care workers was found to be constrained by Western theoretical frameworks and to be insufficiently contextualised in the South African practice reality. Child and youth care workers would be better prepared through the application of an Afrocentric curriculum and the enhanced teaching of complex child and youth care work practice. Access to tertiary level education in child and youth care work was found to be limited.

A schematic model representing key elements of South African child and youth care work practice and education was presented.

DEDICATION

This thesis is dedicated to:

My parents who allowed me to pursue a career in child and youth care work.

Rev Vivien Harber who demonstrated strength-based therapeutic child and youth care work to me in the 1980s. Her courage in believing in me has made my career possible.

The members, and executive committee members, past and present, of NACCW.

The sterling child and youth care workers with whom I have had the honour to serve.

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LIST OF ABBREVIATIONS/ACRONYMS

DSD:	Department of Social Development
FETC:	Further Education and Training Certificate
FICE:	Federation Internationale des Communautés Educatives
HWSETA:	Health & Welfare Sector Education and Training Authority
NACCW:	National Association of Child Care Workers
NDP:	National Development Plan
NPC:	National Planning Commission
SACSSP:	South Africa Council for Social Service Professions
SAQA:	South African Qualifications Authority
UNCRC:	United Nations Convention on the Rights of the Child
UNHCR:	United Nations High Commission for Refugees

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CHAPTER 1

INTRODUCTION TO THE RESEARCH

“In this context and the reality that by the end of the century almost half of the world’s population will be coming from this continent, South Africa is now very serious and is demonstrating its commitment to both developing and licensing a child focused children’s workforce” (Magida 2015a: 49).

1.1 Context of the study

The first section of this introductory chapter serves to provide the context of this study. This is done by looking at children and social services in South Africa (sub-section 1.1.1); describing child and youth care work (sub-section 1.1.2); the deployment of child and youth care workers (sub-section 1.1.3); the organisation of the child and youth care field in South Africa (sub-section 1.1.4); the training and education of child and youth care workers (sub-section 1.1.5); the regulation of child and youth care work in South Africa (sub-section 1.1.6); and the legal framework for services (sub-section 1.1.7). These points are discussed below under their respective headings.

Having introduced the chapter above, attention now shifts to the topic of children and social services in the South African context.

1.1.1 Children and social services in South Africa

The reduction of poverty and inequality has been a key focus of the South African Government since the dawn of democracy (Fransman and Yu 2019: 50). However, a full quarter of a century after the demise of the apartheid system and the advent of the democratic South Africa, the nation’s children “continue to face multiple forms of deprivation” (Omotoso and Koch 2018: 431). Children are primarily affected by poverty and inequality (Omotoso and Koch 2018: 417). This impacts on their opportunities for healthy development in a myriad of ways, since they experience numerous deprivations (Omotoso and Koch 2018: 431). Poverty can be measured through objective as well as subjective approaches (Fransman and Yu 2019: 50), and is not only limited to financial deprivation, but is also associated with experiences of “vulnerability, powerlessness and helplessness” (Fransman and Yu 2019: 65). However, the country continues to be characterised by inequalities in access to social welfare services (South Africa, Department of Social Services [DSD] 2016: 354).

The mid-year population estimates for 2018 showed that there were 17 million children aged 0-14 years in South Africa, comprising 30% of the total population of 57.7 million people, with children under 18 years of age making up 34% of the total population (Statistics South Africa 2019). There are a large number of challenges impacting children and youth in the country, creating groups of vulnerable and at-risk children in need of care and support. For instance, Hall (2019a: 219) explored the demography of children in South Africa and noted that there are 55,000 children living in 33,000 child-only households. Over half of South Africa's children, that is 58.8%, live below the "upper bound" poverty line which measures household income per person as over R1,183 (Statistics South Africa, cited in Hall 2019b: 221). Children living in households where child hunger is reported constitute 10.7% of the population (Statistics South Africa, cited in Sambu 2019: 234). In 2017, the South African under-five child mortality rate was 32 out of 1,000 children (Dorrington *et al.* 2019, cited in Hall, Nannan and Sambu 2019: 228). Young people aged between 15 and 24 who are not in employment, education, or training number 3.2 million (Statistics South Africa 2019, cited in Hall 2019c: 242). Furthermore, 29.9% of children live in households where no adult is employed (Statistics South Africa 2019, cited in Hall 2019: 222). Children receiving the Child Support Grant from the South African Social Security Agency were reported to be 12,445,000 in total in March 2019 (Hall 2019b: 223).

In 1997, the White Paper for Social Welfare recognised that social services were required to assist people to "live in some degree of comfort and security" given that their "dignity and ... ability to look after themselves" had been impaired by factors such as poor education, too few employment opportunities, and previous lack of access to social services (South Africa, DSD 1997: Chapter 1 para. 3 line 14). This foundational policy document, therefore, made a clear link between poverty levels and the need for effective and purpose-built social services. Whilst levels of poverty were an initial concern when the White Paper was first drafted, they remain a concern, creating a continued situation where social welfare services are required in order to assist large sections of the population who are negatively impacted by poverty. In the words of the ministerial committee on the review of the White Paper for Social Welfare, "[T]he current situation of children and youth in South Africa highlights the gaps in service provision for children and youth" (South Africa, DSD 2016: 334). In short, there is an increasing demand for social service practitioners in South Africa given the large

population of vulnerable and at-risk children and youth in the country (Jamieson 2013a: 1). It is also noted that the country requires “novel approaches to the provision of social services for children to realise its legislated rights imperatives” (Allsopp *et al.* 2018: 39). Child and youth care workers “are ideally situated to be among the most influential of healers and helpers in a person or family’s life” (Garfat *et al.* 2018: 10).

The next section reflects on common perceptions of child and youth care work, and various scholarly attempts to define this term.

1.1.2 Describing child and youth care work

It is acknowledged in the literature that the profession of child and youth care work has been compromised due to not being clearly articulated and described (Phelan 2015: 8). Stuart (2013: 4) asserted that defining the field of child and youth care work is “an ongoing dilemma”. This may be due in part to the fact that child and youth care work is a relatively new profession in the social services arena, having only been written about and studied in North America from the mid-twentieth century (Krueger 2015: 10). For a long period of time, child and youth care workers were considered to be ancillary to other helping professionals, and the profession was considered a “sub-profession” (Garfat *et al.* 2018: 10). In South Africa, however, child and youth care work has recently been professionalised (Allsopp *et al.* 2018: 41). Stuart (2013: 4) asserted that the process of defining child and youth care work has been central to the evolution of the field, and that the “struggle for identity” that child and youth care work has undergone is not unique to the profession, but has also been an aspect of the development of other professions.

Phelan (2015: 9) described child and youth care work as “a process of experiencing life alongside others and supporting them to use this experience to change”. There is an immediacy to child and youth care work, since it does not take place “in a sterilised environment” (Phelan 2015: 8). Stuart (2013: 12) observed that child and youth care work takes place “in children’s space and time”. In this regard, Garfat *et al.* (2018: 11) concurred that child and youth care work focuses “on the moment as it is occurring”. The work of the profession takes place “in the milieu” or the environment of the child or family (Stuart 2013: 10), focusing on building competence and strength in young

people (Stuart 2013: 11). A core element of child and youth care work is the provision of care which supports the development of young people (Krueger 2015: 12).

These features of child and youth care work are echoed by Garfat *et al.* (2018: 11) who asserted that child and youth care work is “a focused, timely, practical and, above all, immediately responsive form of caring”. It takes place in the context of daily living (Fulcher and McGladdery 2004, cited in Garfat *et al.* 2018: 11). The practice of child and you care work is not bound either temporally or spatially to engagements in an office setting (Garfat *et al.* 2018: 11). It also involves relating to children and families in “authentic ways” (Gharabaghi 2017, cited in Garfat *et al.* 2018: 10). The nature of this relational engagement is considered to be a “distinguishing feature” of child and youth care work (Stuart 2013: 16).

Stuart (2013: 15) described child and youth care practitioners as those who:

Care for and about young people and families while working with them in their own milieu. We use the characteristics of the space that clients are located in and carefully adjust our timing to maximise the opportunities for change that are present within that milieu. Children are naturally competent, and by believing in them and valuing them as competent people we help our clients learn how to resolve problems as they come up, building on their skills and helping them to be ready to address the next problem.

Stuart (2013:16) further argued that child and youth care workers’ own experiences may be brought into the work, requiring self-awareness, and that caring is undertaken to maximise development.

The section below focuses on the deployment of child and youth care workers in the South African context, observing a noticeable shift from residential care to community-based work. The proliferation of child and youth care workers is also ascribed to the implementation of the *Isibindi* model.

1.1.3 The deployment of child and youth care workers

Child and youth care workers provide services for children and youth who are vulnerable, orphaned, or at risk, as well as for their families (UNICEF 2019: 11). In the early development era in the field, child and youth care workers were deployed mainly

in residential care settings for children (National Association of Child care Workers (NACCW) 2015: 14). However, the new millennium has seen the increase of community-based child and youth care workers (NACCW 2015: 14). Community-based work is therefore a relatively new setting for child and youth care workers, whilst residential care was, in the past, the sole practice setting of child and youth care workers. Residential care settings include a range of facilities as described in section 191 of the Children's Amendment Act (Act No. 41 of 2007) (South Africa, DSD 2007: 80). These include facilities for the care of young people requiring observation and assessment, secure care, and temporary safe places (Jamieson 2013b: 67-68). Community-based child and youth care workers increased in number through a government initiative to scale-up the local *Isibindi* model (NACCW 2015, cited in Allsopp *et al.* 2018: 42). Both the state, as well as the non-profit organisation (NPO) sector is involved in providing social services where child and youth care workers are deployed (South Africa, DSD 1997: Chapter 4 para. 1 line 5).

There is no central data base recording the numbers of child and youth care workers deployed across the country (Jamieson 2013a: 7). However, the South African Council for Social Service Professions (SACSSP) has, over a period of four years, registered 10,522 child and youth care workers (SACSSP 2020: 2). It is estimated that this number is far lower than the numbers of child and youth care workers who are operating in the field. The DSD employs 3,818 child and youth care workers (South Africa, DSD 2016: 368) and over 7000 community-based child and youth care workers were trained in the scale up of the *Isibindi* programme (NACCW 2019: 14). The costing model developed in relation to the Children's Bill estimated that the implementation of the legislation would require 12,955 child and youth care workers at the lowest implementation scenario, and 216,913 at the highest (South Africa, DSD 2016: 280).

The formal organisation of the field of child and youth care work in South Africa is the focus of the next section.

1.1.4 The organisation of the child and youth care field in South Africa

The field of child and youth care work has a history of being organised in South Africa for over four decades, with its first national conference being held in 1977 (NACCW 1977: 1). The NACCW remains active and functional in promoting child and youth care

work, evidenced in the twenty-two national biennial conferences it has held to date (Allsopp 2019: 2). There are a number of professional associations which exist in other countries, which are constituted to deal specifically with the professional matters related to child and youth care work, and CYC-Net lists four countries which all have professional associations for child and youth care or child care, numbering 15 in all (CYC-Net n.d.). These countries where professional associations for child and youth care work are operational include South Africa and Zambia on the African continent, and Canada and the United States of America on the North American continent.

However, despite this level of organisation, and the presence of the formal regulatory mechanism in the profession, little scholarly work has been done in the field in South Africa, despite stated efforts towards promoting scholarly material in the local profession-specific publication (Allsopp 2008: 2). There is a dearth of formal indigenous, Afrocentric information available on child and youth care work in South Africa, and scholars and training providers must turn to the international literature for formal knowledge to be applied in the field in South Africa.

To service the nation's large number of children and youth in need requires the training and education of child and youth care workers. To this, attention now shifts.

1.1.5 The training and education of child and youth care workers

The National Development Plan (NDP) remarked that “[c]omplex social problems require professional interventions” (South Africa, National Planning Commission (NPC) 2012: 378), and in this regard, noted that both at present and over time, “the country needs to increase the supply of four categories of social service professionals to respond to the demand for appropriate basic social welfare services”, and includes child and youth care workers as one of those categories (South Africa, NPC 2012: 377). The South African White Paper for Social Welfare (South Africa, DSD 1997: chapter 2 para. 8 line 9) stated that there is a need to expand human resource capacity through the employment of other categories of social service personnel, such as child and youth care workers. Since the publication of the NDP, there has been a significant effort from the DSD to increase the number of child and youth care workers through a process of scaling-up the *Isibindi* model. In this context, almost 6,577 child and youth care workers were trained and deployed in communities across the country, working

from 367 NGO sites (NACCW 2018: 5). This dramatic and swift increase in this social service profession resulted in the servicing of 332,000 unique children (NACCW 2018: 5), demonstrating a significant increase in the provision of basic social welfare services as envisaged by the NDP.

In South Africa, child and youth care workers can be prepared for registration at either auxiliary or professional level (South Africa, DSD 2014: 14-15). The former training is managed through the Health and Welfare Sector Education Training Authority (HWSETA) and is offered by accredited training providers (HWSETA 2016: 10). The review of the White Paper makes reference to the scale-up of the *Isibindi* model which sought to train and deploy 10,000 new child and youth care workers at auxiliary level, and recognises that whilst this has made a contribution to addressing the inadequate level of service provision for children, it has not added sufficient numbers of child and youth care workers to address the problem (South Africa, DSD 2016: 371).

The education of professional level child and youth care workers is the preserve of institutions of higher learning, which has been on offer since 1999 (Allsopp 1999: 19). At present, a bachelor's degree in child and youth care work is available at a private institution, and at the Durban University of Technology (South African Qualifications Authority [SAQA] 2018; 2018a). Efforts have been undertaken by the Professional Board for Child and Youth Care Work to establish greater numbers of service providers who offer degree level education in child and youth care work (Magida 2019a: 36).

Being recognised as a formal profession, child and youth care work is now statutorily regulated, bringing unity and cohesion to the field. This is discussed in more detail below.

1.1.6 The regulation of child and youth care work in South Africa

Child and youth work is a profession that is statutorily regulated in South Africa. The Social Service Professions Act (Act No. 110 of 1978) regulates the professional practice of social service professionals through the South African Council for Social Service Professionals (SACSSP), which is a statutory body established in terms of this legislation (South Africa, DSD 1978: 3). Child and youth care work was formally recognised as a profession by the SACSSP in South Africa in 2014 with the signing of

regulations by the then Minister of Social Development, Bathabile Dlamini, to the Social Service Professions Act (Act No. 110 of 1978) (Allsopp 2014: 2). These regulations provide the criteria according to which child and youth care workers are able to register with the SACSSP (South Africa DSD 2014: 1-28). Regulation No. 38135 to the Social Service Professions Act (Act No.110 of 1978) (South Africa, DSD 2014: 7) aims to “provide for matters relating to the proper administration of the affairs of, and the registration of, child and youth care workers, auxiliary child and youth care workers, and student child and youth care workers”.

Four and a half decades ago, when the NACCW was formed in South Africa, the child and youth sector lacked unity and cohesion, to the extent that it could not really have been considered a sector (NACCW 2015: 11). People involved in the field worked in residential care settings and were “divided by race, geography and culture” (NACCW 2015: 14). However, the NACCW was able to bring about unity in the child and youth care field (NACCW 2015: 14) and successfully pursued the goal of professionalising the sector over a period of four decades (NACCW 2015: 8). This was made possible by the amendment of the Social Service Professions Act (Act No. 110 of 1978) in 1998 (Du Toit 1999: 8). This amendment paradigmatically broke with the past and made provision for the possibility of there being social service professions in addition to social work which were of sufficient distinction to be considered professions in their own right (South Africa, DSD 1978: 3). This was in line with the dictates of the White Paper for Social Welfare which stated that “a range of social development workers will be employed to address different needs and problems” (South Africa, DSD 1997: Chapter 2 para. 1 line1).

Presently, the SACSSP has two professional boards which fall under its jurisdiction, namely, the Professional Board for Social Work, and the Professional Board for Child and Youth Care Work (Magida 2019a: 34). In 2014, the legal framework for the professionalisation of child and youth care work was formalised, and legislation defined child and youth care work as meaning “the acts performed by a child and youth care worker which focuses on children and youth within the context of the family, the community, and the lifetime of a person” (South Africa, DSD 2014: 6). The legislation defined a ‘child and youth care worker’ as a person who is registered in terms of the Social Service Professions Act (Act No. 110 of 1978) (South Africa, DSD 2014: 6). It

further allowed for two levels of registration, that is, at auxiliary and professional levels, and specifies educational and training requirements necessary for registration at each of these levels. At auxiliary level, child and youth care workers are required to have a Further Education and Training Certificate (FETC) in child and youth care work (South Africa, DSD 2014: 15), and at professional level, they are required to have a four-year degree (South Africa, DSD 2014: 14).

Such educational and training requirements, it can be deduced, have been put in place to ensure that child and youth care workers are able to perform the functions of their roles adequately, and thereby to protect service recipients, and maintain standards of professional conduct as per an objective of the Social Service Professions Act (Act No. 110 of 1978) (South Africa, DSD 1978: 4). The previously mentioned regulations to the latter Act defined an 'auxiliary child and youth care worker' as being registered under the section that provides for the registration of auxiliary level child and youth care workers (South Africa, DSD 2014: 5). It described a 'child and youth care worker' as a person registered in terms of the section which allows for professional level registration (South Africa, DSD 2014: 6). This legislation also outlines two slightly different scopes of practice which are associated with each of these levels of practice (South Africa, DSD 2014: 17-18).

Next, the legal framework in place governing this profession is reflected on below.

1.1.7 The legal framework for services

Social development support to children and youth in South Africa is governed by a legal framework that reflects different types of support and holds the government accountable for establishing a system that responds to the needs of vulnerable and at-risk children and youth (South Africa, DSD 2016: 41). The *Constitution of South Africa* is the fundamental law of South Africa, setting out the Bill of Rights which protects the civil, political, and socio-economic rights of all people, including children (South Africa, Constitutional Assembly 1996: 5-20). In line with the Constitution, the *Children's Act* is a law that governs the provision of a range of social services for children and families (South Africa, DSD 2005: 2). The Act aims to provide a continuum of care to strengthen families, and prevent abuse and neglect; it also includes support services for child-headed households, and places accountability on the DSD to fund

prevention and early intervention services (Proudlock, Mathews and Jamieson 2014: 174). This is in addition to responsive services that provide protection for children from different forms of abuse and neglect (South Africa, DSD 2005: 19).

Policies and protocols linked to the legislation are intended to guide service provision (Martin, Hall and Lake 2018: 116). In addition, South Africa is a signatory to international instruments, including the United Nations Convention on the Rights of the Child (UNCRC), and the African Charter on the Rights and Welfare of the Child (ACRWC) (Proudlock *et al.* 2014: 101). The national DSD, and the provincial DSD, are the main institutional role-players responsible for child protection, early intervention, and prevention services. However, services are also provided by NPOs (Jamieson *et al.* 2017: 8).

The Children's Act makes mention of a range of social service practitioners required to provide different services to children and youth and reduce the burden on one cadre of social service practitioners, such as social workers. The White Paper for Social Welfare (South Africa, DSD 1997: 32) points to the need for child and youth care workers within social welfare provision in South Africa. The Comprehensive Report on the Review of the White Paper for Social Welfare also makes mention of the roles of child and youth care workers in social service provision (South Africa, DSD 2016: 41).

The above section provided the context and background of child and youth care practice in South Africa. It looked at the encompassing aspects of social services provided to children; conceptualisations and definitions of child and youth care work; the deployment of child and youth care workers; as well as the organisation, professionalisation, regulation, and legal framework governing the field. Included was a discussion on the training and education of workers in the field and the accompanying requirements. The rationale for conducting this study is provided next.

1.2 Rationale for the study

Legislation in relation to social services has been designed to make up for the inequalities of the past, and create a society where social justice prevails, addressing “poverty, basic human needs and the social development priorities of all people”

(South Africa, DSD 1997: chapter 1 para. 12 line 2). In 1997, the White Paper for Social Welfare recognised child and youth care workers as one of the “major service providers” in the social services sector (South Africa, DSD 1997: chapter 4 para. 1 line 3). Over a decade later, the NDP recognised child and youth care workers as key workers in realising the development goals set out in this outline (South Africa, NPC 2012: 377). In the process of reviewing the White Paper for Social Welfare in 2016, the value of child and youth care work was reinforced when it observed that additional workers in the social service workforce were required (South Africa, DSD 2016: 372). In addition, this report recognised the need for additional formal educational opportunities for child and youth care workers to develop beyond the level 4 certificate (South Africa, DSD 2016: 372).

Aspects of social service workforce strengthening identified by UNICEF (2019: 7) include planning, developing, and supporting the workforce. UNICEF (2019: 7) highlighted the importance of “increasing the understanding of the role and function of the social service workforce”. However, in the context in which policy recognises and promotes an increase in the numbers of child and youth care workers, research has shown that child and youth care workers in South Africa experience professional challenges of a significant nature (Molepo and Delport 2015: 153). These include job requirements that are inconsistent; working conditions that are inadequate; and the lack of recognition, training opportunities, and promotional prospects (Molepo and Delport 2015: 153). A further challenge was identified as the lack of clarity associated with the role of the child and youth care worker (Molepo and Delport 2015: 153).

The study referred to above by Molepo and Delport (2015: 149-160) is an anomaly in that very little scholarly research at doctoral level has been done in the field of child and youth care work in South Africa. Whilst social work has a rich history of research having been undertaken in South Africa, the previously referred to study represents the only doctoral research specifically undertaken in the field of child and youth care work in South Africa. This points to a significant paucity of local research in the field of child and youth care work. As indicated in the paragraph above, this study provided important empirical information on the range of challenges facing the child and youth care field in South Africa (Molepo and Delport 2015: 153). These researchers asserted that the challenges identified were a result of the child and youth care workers not

being “recognised as professionals” (Molepo and Delport 2015: 157). Despite the fact that child and youth care workers were faced with numerous challenges, the researchers held that most child and youth care workers were committed to both their jobs and to the field of child and youth care work (Molepo and Delport 2015: 157). The researchers recommended that further research be undertaken to identify the “successes and the contribution of child and youth care workers”, and referred to a master’s thesis by Thumbadoo (2013) as a foundation in this regard.

The current study is situated within the context of the confluence of a number of factors, including a policy framework that points towards future growth and development of the child and youth care profession; the relative newness of the child and youth care work profession; research evidence which speaks to a lack of clarity on the role of the child and youth care worker; and the paucity of scholarly knowledge generated within South Africa on the child and youth care field. The study therefore positions itself within this context to contribute to the scholarly knowledge available on child and youth care work as it is practised in South Africa. No other study has endeavoured to provide the scholarly underpinnings of child and youth care practice in South Africa in the manner undertaken in this study.

Given this context, this research sought to provide clarification of the nature of child and youth work in order to contribute to a better understanding of the profession in the context of social service provision, and to better prepare child and youth care workers in the context of their education for the work they are required to undertake.

With the above section drawing attention to the lack of local research on the topic under study and seeking to provide clarification of what the discipline entails, the next sections present the overall aim and objectives of this study, followed by the research questions that guided this inquiry.

1.3 Aim

This study sought to document the current reality and contribute to future improvements in child and youth care work. The aim of the study was to develop a model to guide child and youth care practice and education in South Africa.

1.4 Objectives

The objectives of this study were to:

- Determine the roles and functions of child and youth care workers in varied settings across South Africa;
- Explore the nature of child and youth care work in a South African context;
- Explore whether tertiary/post-school education has prepared child and youth care workers to function effectively;
- Investigate what further knowledge and skills may be required for child and youth care workers to function effectively; and
- Develop a model to inform child and youth care practice and education in South Africa.

1.5 Research questions

The research questions that guided this inquiry were:

- What are the roles and functions of child and youth care workers in varied settings across South Africa?
- What is the nature of child and youth care work in a South African context?
- Has tertiary/post-school education prepared child and youth care workers to function effectively?
- What further knowledge and skills may be required for child and youth care workers to function effectively?
- What is a model that will inform child and youth care practice and education in South Africa?

Endeavouring to address the identified knowledge gap in the field, the significance of this study is described next.

1.6 The value of the study

The value of this research lies in the fact that, despite it being a recognised social service profession, there is a dearth of research on child and youth care work in the South African context. This study therefore seeks to address this knowledge gap. De Vos *et al.* (2011: 26) observed that the “main task ahead of the human service professions is ... to transform the generalisations gleaned from the practical day-to-day experiences of these professionals into scientific propositions”. Thus, since child and youth care work is a recognised profession within social service provision in South Africa, the value of this research on one level is linked to the fact that it sought to contribute to a fuller understanding of child and youth care work in South Africa, and thereby elevate practice knowledge into formal, scientific knowledge.

Further, this paucity of research evidence on the nature of child and youth care practice in South Africa means that training and education curricula for South African child and youth care workers are not based on research evidence of the work of child and youth care workers, or their training and educational needs. Speaking of the professions of social work and nursing, De Vos *et al.* (2011: 508) noted that the training courses are often not based on scientific knowledge founded on research evidence, but on an understanding of practice “largely based on many years’ practical experience, handed down from generation to generation of practitioners, informed by what is often called practice wisdom”.

In the democratic South Africa, the curriculum for the FETC was developed through a consultative process by local experts (NACCW 2003: 19). A new upgraded Level 5 qualification is in the process of being developed, based on the foundation of the level 4 qualification (SACSSP 2020: 1). Several four-year degree level curricula have been developed for the education of child and youth care workers at tertiary level (SAQA 2018; 2018a). However, given the lack of evidence of local research evidence these curricula could not have been compiled on the basis of indigenous knowledge and research in the child and youth care field. The value of this research, therefore, further lies in the fact that it sought to contribute to an understanding of the learning needs of prospective child and youth care workers, and inform the training curricula with a foundation of research evidence.

Given the fact that the vision of the NDP is set to be realised in 2030 (a decade hence); the commitment of the NDP to increase the numbers of child and youth care workers being developed in the country; and the recent rapid development of the child and youth care workforce through the *Isibindi* scale-up, it is a reasonable conclusion to reach that it is likely that the workforce will develop in numbers over the coming decade. The value of this research, therefore, is anticipated to impact on future generations of child and youth care workers through the development of a model for their training and development based on research evidence rather than on what De Vos *et al.* (2011: 508) referred to as “practice wisdom”.

A rich body of research exists in the field of child and youth care work internationally. Furthermore, Gharabaghi (2018: 5) observed that “research, theory and intellectual engagement are now part and parcel of the full spectrum of activity that unfolds in child and youth care”. It is anticipated that this research will not only be of value locally, but also contribute to the international empirical knowledge. The field of child and youth care work in South Africa has a positive reputation in the international child and youth care field, as is seen in the following words: “[W]hen it comes to child and youth care, South Africa is leading the world” (Modlin 2019: 7). This positive sentiment was likewise expressed in relation to a global child and youth work conference held in South Africa, encapsulated as follows: “[C]hild and youth care, when driven by song, by kindness and by a real and authentic call to action, gives hope. South Africa gives hope” (Gharabaghi 2019a: 34). Given the paucity of research in the field, it is reasonable to consider that this positive view of the field in South Africa is based on knowledge of practice realities rather than theory and scholarly research. It is therefore anticipated that the elevation of local practice-based knowledge to scholarly knowledge would make an invaluable contribution to the field of child and youth care work internationally.

The theoretical framework of this study, which can be likened to the foundation that supports a house, is described in the section below.

1.7 Theoretical framework

A theoretical framework provides the researcher with a conceptual lens through which to view the study (Creswell and Plano Clark 2011: 10). Flick (2018: 606) defined the term ‘theoretical framework’ as meaning “a set of backgrounds and theoretical assumptions guiding a specific approach in qualitative research”. A study can be guided by a theoretical perspective which provides the framework for the processes involved in the study (Creswell and Plano Clark 2011: 6). Research begins with conceptualising about the nature of phenomena to be studied (De Vos and Strydom 2011: 35). It begins with an “organising image” of what is to be studied (Riley 1963, cited in De Vos and Strydom 2011: 35). De Vos and Strydom (2011: 35) referred to this process as one of identifying a conceptual framework to guide the study.

“Comprehensive ecological approaches are required in order to achieve significant developmental outcomes” for children (Fulcher and McGladdery 2011: 19). In the context of this research, the ecological systems theory (EST) developed by Bronfenbrenner (1979, cited in Fulcher and McGladdery 2011: 20) was selected by the researcher as the conceptual or theoretical framework to guide the study, echoing the importance of the framework in the phenomena being studied. This theory postulated that all people are impacted by systems within which they function, beginning with the individual level system closest to them and spreading out from the person to the larger systems that influence an individual (Duerden and Witt 2010: 109). This is a “multidimensional systems model for understanding human development within sociopolitical and cultural contexts” (Elliott and Davis 2020: 1120). Propounded by Bronfenbrenner (1979) and core to his theory, is the series of concentric circles of influence around an individual, beginning with the microsystem, which encompasses the individual’s immediate environment (Bronfenbrenner 1979, cited in Duerden and Witt 2010: 110), including family members and those in the child’s immediate surrounds. Moving outward from the individual, the next system is referred to as the mesosystem. The latter includes connections between the different contexts in which the child lives (Bronfenbrenner 1979, cited in Fulcher and McGladdery 2011:28), and is inclusive of the school and community environments. The mesosystem subsumes into it the microsystem, which includes the child and the social networks surrounding the child, but in the mesosystem “the focus of professional attention shifts attention

away from working in dyadic and triadic relations with that child or young person to inter-relations between carer(s) and children” (Bronfenbrenner 1979, cited in Fulcher and McGladdery 2011: 28). The successive system is the exosystem, which represents the overarching environment that impacts on the mesosystem and the microsystem, and includes “social structures or settings both formal and informal where a child is not directly involved” (Elliott and Davis 2020: 1128) but which may affect the child, such as community structures. Surrounding that is the macrosystem, the broadest level of influence, where laws, customs, and cultural norms influence the individual (Elliott and Davis 2020: 1128).

In relation to the latter two systems, Bronfenbrenner (1979, cited in Fulcher and McGladdery 2011: 31) argued that children’s development may be significantly impacted by matters that take place in contexts in which the young person is not present. However, the quality of care provided to a young person in their life-space may require engagement by social workers with the systems of influence that surround this life-space (Bronfenbrenner 1979, cited in Fulcher and McGladdery 2011: 28). Duerden and Witt (2010: 110) made the point that programmes for young people can focus on the microsystem without giving due consideration to the broader circles of influence on the young person’s life. However, EST brings attention to the significance of interactions between the various contexts within which a child lives (Duerden and Witt 2010: 108). “The ecological perspective on development helps child and youth practitioners put the meaning of young people’s behaviour into an environmental context to understand the developmental paths that young people are following” (Stuart 2013: 272).

Given the preceding points, this theory was considered an appropriate lens through which to view the study, as it stresses the importance of all of the systems that surround a child, as well as the agency of the social service professional in interacting within not only the child’s immediate environment, but the broader systems that affect the young person as well. It is a theory that is not only contextually observant, but also takes into account the range of diverse social environments that impact on a child’s development (Elliott and Davis 2020: 1128). Moreover, it was considered that this conceptual framework would allow the researcher to give due consideration to all of the contexts in which child and youth care workers operate in relation to young people.

The theory in no way discounts the value of the microsystemic interactions where child and youth care worker agency is centred, but allows for due consideration of the impact of the broader systems on a child's life. Child and youth care work on the practice level takes place in the microcosm of family relations, but the child and youth care worker interacts with the mesosystem and the exosystem. Skott-Myhre and Skott-Myhre (2009: 229) commented that child and youth care work "has always been an arena where care was a central concern... [However] ... In thinking about caring, we sometimes forget that our work is situated within a much larger field of politics and world events". For these reasons, it was considered that the theory would guide the researcher towards due consideration of all systems affecting children and the work of child and youth care workers, and the interactions between all of these systems in relation to the child at the centre of the ecological system.

It is important to clarify the key concepts used in one's study. These are described next.

1.8 Key concepts

Concepts must be defined in order to ensure that people have the same understanding of a term when used in a similar context (De Vos *et al.* 2011: 29). For the purpose of establishing conceptual clarity, the following definitions of terms guided this study:

1.8.1 Auxiliary level child and youth care worker

This term refers exclusively to a child and youth care worker who is registered with the SACSSP in terms of section 17 of the regulations to the Social Service Professions Act (Act No. 110 of 1978) (South Africa, DSD 2014: 15-16).

1.8.2 Child and youth care work

The regulations related to the Social Service Professions Act (Act No. 110 of 1978) referred to child and youth care work as referring to "acts performed" by child and youth care workers in relation to children and youth in the context of all their families and communities (South Africa, DSD 2014: 6). The definition of this term is considered comprehensively in the following chapter in order to examine the complexity of the term.

1.8.3 Child and youth care worker

The term 'child and youth care worker' refers to a person who is registered as a child and youth care worker with the SACSSP in terms of either section 18 or section 19 of the regulations to the Social Service Professions Act (Act No. 110 of 1978) (South Africa, DSD 2014:15-18). The term, as used in the study, therefore, encompasses child and youth care workers registered at either auxiliary or professional level.

1.8.4 Professional level child and youth care worker

This term refers exclusively to a child and youth care worker who is registered with the SACSSP in terms of section 18 of the regulations to the Social Service Professions Act (Act No. 110 of 1978) (South Africa, DSD 2014: 17-18).

1.8.5 Profession

A profession involves providing expert services where clients are considered dependent; focusing on the interests of the client and the community; requiring "advanced education and collegial organisation"; and the provision of services which are of an expert nature and are in line with set standards of "truth and competence" (Scuilli 2005 cited in Stuart 2014: 67). A profession, therefore, sets standards which include "rules, values, and beliefs" (Stuart 2014: 66).

1.8.6 Residential care

In the context of the study, the term 'residential care' refers to the care of children outside of their homes in facilities termed 'child and youth care centres', as defined by section 193 of the Children's Amendment Act (Act No. 41 of 2007) (South Africa, DSD 2007: 80). The term also refers to the care of children outside of their homes in facilities designed for this purpose which existed prior to the promulgation of the latter Act, and were, in South Africa, referred to as shelters, children's homes, places of safety, schools of industries, and reform schools. When used in relation to an international context, the term refers to the care of children outside of their home in facilities designed for this purpose.

1.8.7 Roles and functions

The terms 'role' and 'functions' can be seen in the literature to be used interchangeably (Reisch and Wencur 1982: 11; Hagen and Wang 1993: 82). In this study, these terms

will likewise be used to connote the same concept, that is, the range of activities that are undertaken by child and youth care workers.

1.8.8 Scope of practice

The term 'scope of practice' refers to acts which may be performed by child and youth care workers in terms of the regulations to the Social Service Professions Act (Act No. 110 of 1978) (South Africa, DSD 2014: 17-18). The list of acts that may be undertaken by child and youth care workers include 12 categories of activities in the scope of practice for the professional category of child and youth care workers, and 10 activities in the scope of practice for child and youth care workers registered at auxiliary level (South Africa, DSD 2014: 17-18).

However, before concluding this introductory chapter, the chapters of this study and their main focus areas are delineated next.

1.9 Overview of the thesis

This thesis is structured in the following manner:

Chapter One: The first chapter introduced this study on child and youth care work. In addition to contextualising the research topic by providing a background to child and youth care work in South Africa, the rationale for conducting this study was also presented, along with the aim, objectives, research questions, and contributions of the study. In addition, the theoretical framework was described, along with key concepts used throughout the dissertation. The final section delineated the forthcoming chapters, followed by a few concluding remarks to wrap up the chapter.

Chapter Two: Presents the literature review of this study. The latter provides an overview of the definition of child and youth care work and traces the global emergence of the profession in the global North. The roots of child and youth care work in residential care are discussed, as is the professionalisation process within the field. The chapter also provides an overview of the development of child and youth care work in South Africa, and then goes on to describe key aspects of the nature of child and youth care work. The characteristics of child and youth care work are then briefly

outlined, followed by a description of two key movements in the child and youth care field.

Chapter Three: Introduces the research methodology utilised in this study, presenting the overall design of the study, a detailed exposition of the methodology applied in the research, the study population, and sampling strategy adopted. Furthermore, it details the data collection process; the data collection tools used in the study; the analysis of the data; and the strategies used to ensure the trustworthiness of the research. The chapter concludes with an outline of the ethical considerations adhered to in the study.

Chapter Four: The data and discussion of the findings are presented in four sections, each containing an analysis of the data and discussion of the findings related to the objectives of the study. The first section deals with the roles and functions of child and youth care work; the second outlines the data analysis, findings, and discussion related to the nature of child and youth care work; the third section discusses the findings on the educational preparation of child and youth care workers after providing an analysis of the data linked to this third objective. Next, the fourth section provides an analysis of the data and discussion of the findings on the objective linked to outlining further knowledge and skill areas required by child and youth care workers studying for bachelor degrees in the profession.

Chapter Five: Conclusions and recommendations emerging from the study are provided in this chapter, after the model for the practice and education of child and youth care workers is presented. The chapter concludes the dissertation with recommendations for further research to be undertaken in this field of study.

1.10 Conclusion

This chapter introduced this study on child and youth care work in South Africa, providing the context, background, purpose, and rationale for the study. It outlined the aim, objectives, and the research questions, and provided an overview of the dissertation. The chapter also described the envisioned value of this research, and went on to give a brief description of the theoretical framework which contextualises the study. The chapter concluded by outlining key concepts used throughout the study.

The literature review of this study on child and youth care work is presented next.

CHAPTER 2 LITERATURE REVIEW

2.1 Introduction

Continuing from the previous introductory chapter, this chapter provided an overview of key literature on the topic of child and youth care work. In addition to reviewing the common definitions and understandings of the concept of 'child and youth care work' (section 2.2), the chapter also traced the origins and global emergence of this new profession (section 2.3). In doing so, the dearth of African thinking on the topic was noted, and a proliferation of literature from the global North dominating the discourse observed. The epochs of development of child and youth care work was considered, along with its roots in residential care. The knowledge systems that impacted on the development of the field were outlined, and the coalescing of the role of the child and youth care worker was described.

These developments were considered in relation to the organisation of the field and the global professionalisation process within child and youth care work. Aspects that were considered in this regard included the debate about professionalisation of the field (section 2.4); the development of profession specific literature; a code of ethics; the training and certification of workers; and the public perception of the field. After outlining the development of the field of child and youth care work in South Africa (section 2.5), the emergence of the field in the apartheid era was traced, along with its development in the post-apartheid period. A summary was then provided of key historical points salient to the current study (section 2.6).

The chapter then moved to describe the nature of child and youth care work (section 2.7); the five key facets of child and you care work; and the characteristics of child and youth care work. Finally, the chapter concluded with a brief contextualisation of child and youth care work in South Africa in the emerging schools of thought in child and youth care practice (section 2.8).

The following section seeks to define the concept of 'child and youth care work', reflecting on various scholarly definitions provided in the literature.

2.2 Defining child and youth care work

Molepo (2014: 106) noted that the field of child and youth care work “has reached a point where it can now be comprehensively defined”. Some authors have provided simple definitions of the field, including Smith (2009: 159) who referred to ‘child and youth care work’ as “the discipline involved in direct care practice with children”. Another noteworthy definition is by Garfat and Fulcher (2012a: 1) who suggested that “child and youth care practice is about how you are, who you are, when you do what you do”. However, child and youth care work has, over the years of its development, evaded a succinct definition. In this regard, Stuart (2013: 6) noted that comprehensive definitions of the field err on the side of being too lengthy, complicated, and not understood outside of the field.

Initial attempts at defining the field of child and youth care work often conflated the residential care setting with the child and youth care approach to human services (Charles and Garfat 2009: 20). This is evident in the definition of child and youth care work by Maier (1991: 394) who noted that child and youth care described people “looking after young people while they are away from home”. Other attempts at defining the concept focused on describing “who we are by who we are not” (Ferguson 2008: 61). The matter of professional identity has been a concern in the field (Stuart 2014: 62). Definitions seek to clarify matters of identity and create boundaries in relation to identity (Stuart 2014: 62). Such attempts are replete in the literature of the 1970s. For instance, Beker (1975: 257) described a ‘childcare worker’ as someone “who orchestrates and coordinates all the resources available to the child enabling him to experience these as an integrated whole in the service of his development”. Decades later, White (2008: 113) described child and youth care work as being “broadly concerned with promoting and supporting the optimal development and well-being of infants, children, youth and families in specific contexts through approaches that focus on individuals and their social circumstances and environments”.

Locally, Beukes (1990: 30) noted that in 1989 the NACCW described the term ‘child care workers’ in a deliberately vague manner as “all those who are interested in child care”. Beukes (1990: 30) observed that this definition was deliberately broad in order to be inclusive of all those who were operating in the area of child and youth care work,

given the nascent stage of development of the field at the time. In light of these developments, the South African definition below by Beukes and Gannon (1996: 2) assumed a residential care focus and demonstrated a deficit-based paradigm which is at odds with the competency-based approach currently operational in the field. These authors defined child and youth care work as follows:

A therapeutic intervention which aims at the care and re-education of children whose early development is marred or impeded by unfavourable circumstances with the result that they show disturbances in their physical emotional and/or cognitive functioning. Childcare is an attempt to correct the negative influences and the resulting disturbed behaviour by a variety of means, starting with the removal of the child from its harmful environment and then fostering productive, age-appropriate behaviour and strengthening ego-functioning, thus promoting improved coping and life skills (Beukes and Gannon 1996: 2).

Another noteworthy definition in the South African literature defined child and youth care work as “care that includes the physical, emotional and educational care of the child, within the life space of the child, in various situations, whether in the school, community or institution relationship” (De Kock 1999: 31). However, this definition does not articulate the nature of caring.

In addition to the above, Allsopp (2013: 33) defined child and youth care work as being:

The application by a child and youth care worker, of the body of child and youth care work knowledge, in order to provide relational contexts and direct interventions that promote development and/or provide therapeutic experiences for vulnerable, orphaned and at-risk children in their lifespace – towards the aim of increasing their social, emotional and behavioural competence. Engaging holistically with children as their lives unfold, child and youth care workers maximize the development and therapeutic potential in everyday life events; in interactions between the child and others; in the provision of care; and in the context of the provision programmes.

In 1992, a definition by the International Child and Youth Care Education Consortium was constructed (Stuart 2013: 5). Unwieldy though it is, it is comprehensive and includes descriptions of the settings in which child and youth care workers practice. The definition is provided below:

Professional Child and Youth Care practice focuses on the infant, child and adolescent, both normal and with special needs, within the context of the family, the community and the life span. The developmental-ecological perspective

emphasizes the interaction between persons and the physical and social environments, including cultural and political settings.

Professional practitioners promote the optimal development of children, youth, and their families in a variety of settings, such as early care and education, community-based child and youth development programs, parent education and family support, school-based programs, community mental health, group homes, residential centres, rehabilitation programs, paediatric health care and juvenile justice programs.

Child and Youth Care practice includes skills in assessing client and program needs, designing and implementing programs and planned environments, integrating developmental, preventive and therapeutic requirements into the life space, contributing to the development of knowledge and professions, and participating in systems interventions through direct care, supervision, administration, teaching, research, consultation and advocacy.

This definition of the field is included in the Policy for Social Service Professions which seeks to lay the foundation for the regulation of all social service professions" (South Africa, DSD 2016a: 5) in South Africa.

Having described the various definitions of child and youth care work in the preceding section, some of the major events, individuals, establishments, and organisations involved in the emergence of the field of child and youth care work are examined next.

2.3 The global emergence of the child and youth care field

In an effort to articulate the current status of the child and youth care work field in South Africa, it is necessary to trace the patterns of emergence in the field, both locally and internationally. Rukuni (2007: 13) described the Akan concept of *Sankofa* which means "we must go back and reclaim our past so that we can move forward; so that we understand why and how we came to be who we are today". It is thus with the intention of understanding how child and youth care in South Africa came to be at its current point that the development of the global emergence of child and youth care work will be traced in the following sections. The roots of child and youth care work will be unpacked in order to obtain a better understanding of the present position of the field.

2.3.1 A caveat on the limited impact of African thinking in the emergence of the child and youth care field

There is an awareness in South Africa of the need to move away from systems of thought that have been “transplanted” from different contexts (Qalinga and Van Breda 2018: 1). Colonisation imposed knowledge and thinking systems across the continent of Africa and disconnected people from indigenous ways of thinking and being (Thiongó 1994; Tuhiwai Smith 2012, cited in Ibrahima and Mattaini 2019: 800). Colonialism impacts on all aspects of society, including the manner in which we conceptualise “development, growth and mental well-being” (Kouri 2019: 70). The child and youth care field in South Africa has a history of organisation currently in its fifth decade, if the genesis of the field is set at the initiation of national networking and the emergence of a national professional association, NACCW, which took place in 1975 (Theron 1977, cited in Allsopp 2015: 30). However, the contribution of South African and other African thinking into academic child and youth care work has been minimal.

This is evidenced in the paucity of scholarly contributions by South Africans to international peer-reviewed journals and other written materials, including only a handful of local doctoral studies undertaken in the field to date. This is the case despite the fact that a previous study provided evidence of “growth in the size and quality of the South African child and youth care field” (Allsopp 2013: 93). Further, South African child and youth care practice, as well as the developments in professionalising the field, have been observed in international literature, and the *Isibindi* model has been lauded as a groundbreaking development in the field (Anglin 2015a: 9). Recently, Stephen and Gharabaghi (2019: 53) noted that South African child and youth care work presented “a great theoretical reference for the ways in which CYC practice could unfold, based on transcending current divides between orthodoxies and counter movements”. This indicated that the child and youth care work field in South Africa is evolving in creating local practice knowledge, and in such a manner as to be of significance in the field internationally. However, the fact that this is observed by non-South Africans further underscores the point that innovative local practice knowledge has not been elevated to the level of theory or academic knowledge by local writers. The exposition, which follows in the upcoming sections, has therefore been

undertaken in the knowledge of the relative absence of African voices in the global evolution of the profession.

2.3.2 Contextualising the emergence of child and youth care work

It is noted that “decontextualised and ahistorical” views of child and youth care practice render it subject to distortion through the lens of “Euro-Western philosophy” (Kouri 2019: 71). In contextualising the development of child and youth care work, and situating it historically, it must therefore be acknowledged that the profession has “developed within a set of societal conditions that included various political ideologies, government structures, and jurisdictions and numerous theoretical orientations that are based in the values and beliefs of those societies” (Stuart 2013: 31). The emergence of child and youth care work took place on the different continents of the global North, namely, Europe and North America (Stuart 2013: 31). Therefore, in contextualising the emergence of the field locally, it must be observed that South African child and youth care work has been based on knowledge emanating from the global North, particularly North America (Allsopp 2015: 40).

Currently, two movements have been identified in the field in North America, the *orthodox community* and the *counter movement* (Stephen and Gharabaghi 2019: 41). The former traces “it’s history largely along the pathways of developmental psychology and associated psychoanalytic traditions, life space intervention practices, institutional forms of care, and the centrality of the idea of relationship (operationalise differently over time) as the core of interpersonal/subjective interaction” (Stephen and Gharabaghi 2019:41). The counter movement lays emphasis on “processes of advocacy, disruption, critical evaluation of socially constructed and largely Euro-centric truths, as well as community mobilisation and activism within marginalised or often excluded groups” (Clark, 2017; deFinney, Dean, Loiselle & Saraceno, 2011; Watts, 2016; White, 2015, cited in Stephen and Gharabaghi 2019: 41). In South Africa, child and youth care work has developed based on the ideas and practices inherent in the orthodox approach, but has also integrated ideas inherent in the counter movement (Stephen and Gharabaghi 2019: 52).

There have been more rapid strides in the development of child and youth care work over the past few decades than over the past few centuries (Hellinckx, 2002: xiii).

Anglin (2015a: 5) aptly stated, “My grandfather was born and grew up as psychology developed. My father was born and grew up as social work and psychiatry developed. And I was born and grew up as CYC developed”. This statement made the point that the history of the helping professions is very short in comparison with human development over time. Whilst psychology has, as a formal subject of knowledge, been in existence for over a century, and psychiatry and social work have existed for approximately a century, child and youth care work emerged as a discipline approximately seventy years ago. Other authors concur with this point that the child and youth care field emerged as a discipline in the global North roughly 70 years ago, in the period after the conclusion of the Second World War (Stuart 2013: 2). The field can be seen to have begun to coalesce into a discipline at that point, in a manner which may be described as a process of emergence (Wilber 1996: 28), where a new level of organisation transcends its constituent parts, and is not amenable to being reduced to the sum of its parts. Wilber (1996:28) asserted that development in any field of endeavour leads to more complex forms of organisation. Child and youth care work initially drew on theory from other disciplines which made up the ‘constituent parts’, with child and youth care work theory becoming ‘a new level of organisation’. Peters (2008: 6) provided a similar view in noting that the development of the child and youth care sector has “followed the fundamental logic of the modernisation of modern societies which increase their efficiency through differentiation and the general culture of specialism”.

The emergence of residential care settings, the role of these, and the influence they had on child and youth care work is reflected on in the next sub-section.

2.3.3 Residential care and the global Northern roots of child and youth care work

The first key factor in the emergence of child and youth care work was the advent of systems of group care for children separated from their families, known as ‘residential care’ (Anglin and Brendtro 2017: 4; Ferguson, 2008: 61). Anglin and Brendtro (2017: 4) noted that the first example of residential care emerged in the fourth century. However, in industrialised countries, group care for children began to be a feature of society at the time of industrialisation, and these were largely work houses and orphanages (Beukes and Gannon 1999: 20). In the North American context, many children in the early orphanages were placed there for reasons of poverty, even though

they were not orphans (Hacsi 1997; Holt 2006; Rooke and Schnell 1983, cited in Charles and Garfat 2009: 18). Central to the establishment of residential care centres for children, therefore, is the notion of inequality in society. Many of the early residential care centres were run under the auspices of the church and other religious organisations. Initially staffed by members of religious orders, they were later replaced by lay people (Charles and Garfat 2009: 18). A humanitarian interest in providing such services can be observed (Dekker 2002: 35), and there was a focus on religious and moral development in such institutions (Smith, Fulcher and Doran 2013: 2).

Institutions were also established for children who were suffering from mental illness or who were in trouble with the law (Stuart 2013: 33). Group care for children was used in the eighteenth, nineteenth, and twentieth centuries for purposes of correcting deviant or criminal behaviour on the part of children, as part of the so-called ‘correction’ movement (Winzer 1993, cited in Charles and Garfat 2009: 18). Facilities established for the purposes of correcting the behaviour of children found to be unacceptable in society were usually run by the State (Charles and Garfat, 2009: 18). Residential care services for both vulnerable children and those in trouble with the law exist in many Western countries, including South Africa.

In Canada, residential facilities for indigenous children were established for the express purpose of their cultural assimilation (Stuart 2013: 33). These institutions were “state sanctioned” (de Finney 2014, cited in Mackenzie 2019: 110). Their existence is a stark example of the manner in which residential care services serve and must be contextualised within political ideology and policy (Gharabaghi 2019b: 3). The potentially nefarious aspect of the provision of residential care is perhaps most evident in the establishment of residential schools for aboriginal youth which “separated young people from their families in essence creating cultural orphans” (Charles and Garfat 2009: 19). The profession of child and youth care emerged in this chequered mix of residential care settings, in the context of the growing understanding of the impacts of institutionalisation on human beings (Goffman 1968, cited in Smith, Fulcher and Doran 2013: 3), and the growth in the understanding of human development.

2.3.4 Knowledge systems on understanding childhood

The ‘century of the child’ was a term applied to the twentieth century after the

publication of a book of the same title by Ellen Key in Sweden in the year 1900 (Key 1900). This publication ushered in an understanding of the fact that the needs of children are different from the needs of adults (Dekker 2002: 38). The century became one in which the knowledge generated within the field of psychology led to an understanding of human behaviour, needs, and child development previously not comprehended in any formal sense in Western writing on children (Jansz 2004: 12-44). However, such writings did not include the perspective of non-Western child-rearing practices, and the documentation of these is as yet required (Anglin and Brendtro 2017: 5). This means that non-Western ideas about children and child-rearing practices have not, until very recently, featured in an understanding of child development. Whilst this dominant cultural bias is present in the development of an understanding of children, during the past century “Western society became child oriented, as to the rights, economy, science and care” of children, and the State was increasingly involved in the manner in which children were treated (Dekker 2002: 38).

Child and youth care work initially emerged as a multidisciplinary profession, using existing theory in creating training programmes (Stuart 2014: 63). Child and youth care work has its roots in a number of disciplines within the humanities, including psychology, education, and social work (Krueger 2015: 16). The fact of this interdisciplinary genesis may have contributed to the struggle to carve out a unique and clear identity for child and youth care workers and to professionalise the field. However, child and youth care work was not the only field of endeavour within the human services that struggled to differentiate itself from other disciplines in the past century. Social work itself, a likewise interdisciplinary or transdisciplinary profession, was similarly challenged in its effort to professionalise (Swanzen 2011: 36).

An element related to the increasing psychological understanding of the human condition, which has relevance in the development of the child and youth care field, was linked to the emergence of the concept of ‘human rights’ – which followed the devastation and human suffering wrought by the Second World War, and led to the Universal Declaration of Human Rights (Cantwell, 2008: 4). An acknowledgement of the vulnerability of children in the context of the development of the concept of ‘human rights’ led to the development of the concept of ‘children’s rights’, which was enshrined in the United Nations Convention on the Rights of the Child (UNCRC) in 1989 (United

Nations General Assembly 1989: 1). After the Second World War in Europe, many displaced and orphaned children were provided for in residential care (Shaw 2008, cited in Allsopp 2013: 26). Children's villages and caring communities were established to provide education and care to children who had been affected by the trauma of World War II (Stuart 2013: 36). Large-scale residential care was taking place in Europe at a time when there was increased understanding of child development and the concept of human rights was being articulated. In 1948, the organisation, the Federation of International Educative Communities (FICE), was initiated to create networks in Europe for sharing knowledge on how to raise children in children's homes and residential care settings (Lasson, Nobs and Anglin 1990, cited in Stuart 2013: 36). At this point in global history, there was a confluence of large numbers of children being raised in children's homes and an increasing commitment to what would become a framework of children's rights. This coincided with an increasing focus on what can be termed "positive youth development" which, in relation to child development, "challenged punitive autocratic notions that prevailed in Western culture" (Anglin and Brendtro 2017: 5).

The next section traces and defines one of the core concepts of this study, 'the child and youth care worker', and includes a description of what it encompasses.

2.3.5 Emergence of the concept of the child and youth care worker

A knowledge base is a "dynamic entity which is constantly changing and growing and open to interpretation" (Kruger 2015: 16). This is evident when tracing the development of the concept of 'the child and youth care worker' over the past 70 years. In 1954, Neill's book *Summerhill* broke with a punishment and discipline approach to intervening with so-called 'troubled children'. Prior to this, in 1935, Aichorn's *Wayward youth* had posited creative ways of engaging young people in activities to aid their development. Seminal texts written in the mid-twentieth century included *Love is not enough* by Bruno Bettelheim in 1950, and Redl and Wineman's *Children who hate* and *Controls from within* written in 1951 and 1952, respectively. These texts attempted to understand complex behaviour patterns from the perspective of the reasoning of the troubled and troubling child. These were some of the texts that sought to provide alternative perspectives to the then mainstream 'control and punishment' thinking on non-conforming behaviour by children (Anglin and Brendtro 2017: 5).

The work by Redl and Wineman further birthed the concept of ‘milieu therapy’ in working with troubled and troubling young people (James 2008: 5) where the total living experience of a young person would be attuned to their therapeutic needs. By definition, milieu therapy required all persons intervening with a child, including those in immediate contact with the child on a daily basis, to do so in an orchestrated manner. A further groundbreaking text challenged the notion that therapeutic intervention with troubled children could be attained by the application of the 50-minute therapeutic hour, one-on-one model of psychotherapy that applies to adults. This text, *The other 23 hours* (Trieschman, Whittaker and Brendtro 1969), subtitled ‘Child care work with emotionally disturbed children in a therapeutic milieu’, outlined the complexity of working therapeutically with troubled young people in a residential care context, and highlighted the power of the direct worker in impacting on the behaviour of children (Trieschman 1969: 1). Residential care settings thus became the crucible for the emergence of the child and youth care worker, the direct frontline child-focused practitioner, and the profession of child and youth care work as it is known today (Garfat 1998: 12).

The idea that children in residential care settings could be therapeutically impacted on by the persons in their immediate environment, as they lived their lives, led to the replacement of lay people as direct carers of children with trained staff (Garfat 1998: 11). In Europe, the development of the professional person working in the life contexts of children took place from 1965, and by this time France had established 54 training centres for what were known as ‘social pedagogues’ (Grupper 2002: 65). These workers were considered to have a specific identity, and were provided with legal status (Grupper 2002: 65). In this way, European countries were the leaders in the professionalisation of what was, and still is, the local form of child and youth care work, known as ‘social pedagogy’ – and the North American countries followed this development in a somewhat different developmental trajectory (Grupper, 2002: 5). In the North American context, the term ‘child care worker’ began to emerge in the early literature in the 1970’s, as is evident in the work of Beker (2001a: 345) who wrote a 1975 paper entitled, ‘Development of a professional identity for the child care worker’. In 1977, the *Encyclopaedia for social work* published in the United States contained a lengthy description of ‘child care workers’ (Meier 1977: 130).

Whittaker (2019: 5), in viewing the contribution of the seminal text, *The other 23 hours*, observed that a key insight in this text was “the notion of building intervention models where those closest to the children ... were the primary agents of change”. When viewed in hindsight, this development was a radical shift in thinking about therapeutic and developmental work with children, in that it:

- Valued the role of the person intervening directly in the life of a troubled child outside of the therapeutic hour (Maier 1991, cited in Allsopp 2013: 26);
- Introduced the notion of therapeutic interventions rather than therapy as such, the context of such interventions being the child’s milieu and the chronology of such interventions as being the present (Maier 1991, cited in Allsopp 2013: 26);
- Understood everyday life events for their therapeutic potential (Maier 1991, cited in Allsopp 2013: 26); and
- Acknowledged that people in the immediate context of children can be trained to interact with children therapeutically (Maier 1991, cited in Allsopp 2013: 27).

With development and growth comes the establishment of professional bodies and organisations. This is reflected on further in the discussion below.

2.3.6 The organisation of the field

Anglin and Brendtro (2017: 2) noted that it is regrettable that the child and youth care field has seen many leaders develop programmes that are not sustained beyond their lifetimes. However, as the child and youth care work field spun into existence in the North American context, practitioners began to organise, and professional associations across the region were established, which were later amalgamated into national bodies (Stuart 2013: 41). For over half a century, professional associations have fostered debate and development in child and youth care work (Gharabaghi 2008a: 157). These professional bodies also provided the mechanism for development of a culture and an identity within the field (Freeman 2013: 104). Their role has further been to advocate for the field, promote the field to service providers and others, and seek recognition for the field (Freeman 2013: 104; Gharabaghi 2018: 29). These bodies have been responsible for setting standards in the field (Mattingly, Stuart, and Vander Ven 2010: 1). Evidence of positive outcomes from the work of these organisations in the North American context include a functional national certification

process in North America and the establishment of a set of ethics for the field (Krueger 2002: 17). This organisation process had an effect on the education of workers, in that whilst developments in education of child and youth care workers in Western Europe were led by state authorities and employers, in North America these developments were the result of the efforts of educators of child and youth care workers themselves (Stuart 2013: 43).

Linkages were established globally between membership organisations that were associated either with out-of-home care, or child and youth care workers (Vander Ven, 2000: 219). “The globalisation of child and youth care provides the mechanism to gather information from other social contexts” (Stuart 2014: 76). Associations between the North American child and youth care work constituency, FICE, and the European-based Association of Workers with Troubled Youth (AIEJI) were established, and cross-pollination of ideas was possible as a result. Organisation within the field led to the recording of child and youth care knowledge, training in the field, the development of ethical codes (Freeman 2013: 104), which together created the platform for professionalisation.

The importance of the developments in the professionalisation of the field of child and youth care work, as viewed in this study, will be the primary focus of the observations discussed below.

2.4 The global professionalisation of child and youth care work

This section looks at the professionalisation of the field of child and youth care work by examining the professionalisation debate (sub-section 2.4.1); scholarly contributions in the form of discipline-specific literature (sub-section 2.4.2); training and professional certification (sub-section 2.4.3); ethical codes of practice (sub-section 2.4.4); and public perception (sub-section 2.4.5). These topics are discussed further under their respective headings below.

2.4.1 The professionalisation debate

The impetus towards professionalisation emerged in North America with the recognition of the value of the role of child and youth care workers in the lives of

children in residential care, and voices in favour of professionalisation, both from within and outside of the field, have been raised since the early 1970s (Beker 2001a: 345). The status of a profession can be “self -defined (i.e., when the profession forms an association and declares itself to have a particular status) and legally defined (i.e. when the state regulates a particular professional group)” (Stuart 2014: 68). The development of professional associations stimulated the professionalisation process and supported the consideration of professional regulation, that is, a certification process which sets standards for practice competency (Stuart 2013: 41). The process of professionalisation in the North American context has not been without contention. Child and youth care work has been considered a profession (Anglin 1999; Beker 2001, cited in Gharabaghi 2008a: 156). It has also been considered to be in the process of becoming a profession (Gaughan and Gharabaghi 1999, cited in Gharabaghi 2008a: 157), although some authors have rejected this idea (Dunlop 2004; Jull 2000, cited in Gharabaghi 2008a: 157). Gharabaghi (2008a: 157) indicated that it is not of great importance to consider the question of whether child and youth care work is a profession or not. Rather, in his view, consideration of “the substance of the field and what it might mean to the practitioners” is important (Gharabaghi 2008a: 157). It was his contention that the field has grown and currently provides “more opportunity than ever before” (Gharabaghi 2008a: 157). This was borne out by Eckles *et al.* (2012: 55) who reported that the U.S. Bureau of Labour Statistics had noted child and youth care work positions as growing significantly during the decade 1998 – 2008, with the need to increase “by 26% to keep up with demand”.

European countries were the first to professionalise child and youth care work (Grupper 2002: 65). In France, legal status was afforded to the profession in 1965 (Grupper, 2002: 66). Beker (2001: 364) noted that as early as 1978 a profession akin to child and youth care work had existed for some time in Europe. This development was perhaps unsurprising, given the urgent role of child and youth care workers in the process of caring for orphans in the context of rebuilding Europe after the Second World War. Statutory regulation of the field has not been achieved in North America where “mandated registration would go a long way to ultimately solving the whole issue of whether or not child and youth care is a profession” (Charles and Garfat 2009: 24). Currently, the United States of America and Canada are characterised by piecemeal recognition, and full professionalisation has not been achieved in the North

American context (Stuart 2014: 71). However, child and youth care work has been professionalised and statutorily regulated in South Africa (Magida 2015b: 20).

As mentioned, the debate on the professional status of the field has had both supporters and detractors from within the field, as well as from outside of the field, where there are “some members of allied disciplines who view child care as subservient to their own professional expertise and authority” (Beker 2001a: 345). Beker (n.d., cited in Vander Ven 2000: 219), however, was of the view that a focus on the role of child and youth care workers and articulating child and youth care practice would enhance, rather than detract from other professions, contributing to better overall service provision for children. Beker (1975: 422) further noted that the drive for professionalism was not necessarily predicated on the workers’ interest to be better remunerated, as unionisation would have assisted in meeting that goal more efficiently. Rather, he saw the impetus towards professionalisation as being motivated more by an interest to provide better quality services to children (Beker 1975: 422). This motivation for professionalising the field has more recently been echoed by Freeman (2013: 104) who noted that the primary beneficiaries of professionalised child and youth care work are “young people, their families and the community at large”.

There cannot be a formulaic approach to the determination of a profession (Curry, Schneider-Munoz and Carpenter-Williams 2012: 9). However, there are broadly accepted criteria used to define professions, and discussions on the professionalisation of child and youth care work have attempted to place the field in relation to these characteristics (Gharabaghi 2008a: 156). The following criteria are some of those widely considered to be characteristic of professions: the commitment to serve humanity and perform a public service; the identification of a body of knowledge particular to the profession; training and education of “an extensive” nature; a set of ethical standards and codes; a professional culture; and the regulation of workers by those in the profession (Dunkerley 1975; Greenwood 1966; Lieberman 1956, cited in Curry, Schneider-Munoz and Carpenter-Williams 2012: 9).

Continuous development of knowledge in a new and emerging field is needed. The next section reflects on profession-specific literature and the generation of knowledge.

2.4.2 The development of profession-specific literature

Garfat (1998: 11) made the observation that at a point child and youth care workers “were not positioned to write about or inform their own field”. However, this has changed as practitioners have generated knowledge which has created theory based on child youth care practice (Stuart 2014: 75; Anglin and Brendtro 2017: 2). There has recently been a notable increase in the “international markers of a base of professional knowledge, such as peer-reviewed conferences, academic articles, journals and books” (Stuart 2014: 65). It is evident that over its years of existence, child and youth care work has established a body of knowledge that serves as the base knowledge of the profession (Curry, Schneider-Munoz and Carpenter-Williams 2012: 9). Krueger (2015: 11-12) listed a range of seminal texts in the field, including some already mentioned, noting the development of the core concepts associated with child and youth care work, including but not limited to, the life space interview by Fritz Redl (1951); the conflict cycle by Long (1991); peer group care systems by Brendtro and Ness (1983); and the Circle of Courage by Brendtro, Brokenleg and Von Bockeren (1990). More recently, there has been a dissemination of literature which has raised practice knowledge to the level of theory (Stuart 2014: 64). “Myriad perspectives have evolved ... that rely on distinct theoretical orientations, philosophical priorities, and practice-based approaches (Gharabaghi, Skott-Myhre and Krueger 2014: ix).

Journals have provided critical analysis of the field from a variety of perspectives over several decades (Krueger 2002: 16). Key journals in the field include the following: *Child and Youth Care Quarterly*, *The Journal of Child and Youth Care*, *The Journal of Child and Youth Care Work*, and *The Child Care Administrator* (Krueger 2015: 12). *Child and Youth Care Quarterly* was set up with the express objective of professionalising the field, as is evident in the initial editorial in its publication which stated that its purpose was to “illuminate the unique contribution of childcare, to clarify its relationships with allied fields, and to promote its professional evolution and identity” (Beker 1971: 6). Additional journals familiar to the researcher include: *Relational Child & Youth Care Practice*, and *Child & Youth Services*. The aforementioned literature has emerged from North America. Another journal *Children and Youth Services Review* is published in the Netherlands.

In North America, the knowledge base considered a requirement for child and youth

care practitioners was structured into a set of competencies and core knowledge areas by the North American Consortium of Child and Youth Care Education Programs (Anglin 1995: 269). These are as follows: care work as an interpersonal process; contextual interactions in the milieu; therapeutic interventions; and indirect elements in care work practice. Subsequently, the North American Certification Project further refined core knowledge and competence areas into five domains, namely: professionalism, cultural and human diversity, applied human development, relationship and communication, and developmental practice methods (Mattingly, Stuart, and Vander Ven 2010: 10-25). These two initiatives were described by Krueger (2002: 17) as “the largest collaborative effort undertaken to date to define child and youth care knowledge base”.

Continuing with the trend of development, the next section reflects on the training and education of child and youth care workers.

2.4.3 Training and professional certification

Anglin and Brendtro (2017: 2) asserted that the “transmission of practice wisdom is an essential feature of any worthy discipline or profession”. They further maintained that service beneficiaries ought not to be “subject to ad hoc ‘trial and error’ and ‘hit and miss’ techniques” (Anglin and Brendtro 2017: 2). By 1981, the field in North America was not only concerned with undertaking training of child and youth care workers, but also with refining the manner in which such training was made most effective, taking into account the need to synthesise imparting information with practitioner skill development in its application to all spheres of a child’s life (Beker and Maier 2001: 381). The training of child and youth care workers grew rapidly in the United States, where many different organisations became involved in providing training for child and youth care workers at in-service training and continuing development levels (Krueger 2002: 18). Although at the turn of the century Krueger (2002: 19) lamented the fact that much more development needed to take place in the area of educating and training child and youth care workers, at that point, diploma and three-year degree courses for child and youth care workers existed in Canada (Krueger 2002: 18). A decade later, Mattingly, Stuart and Eckles (2012: 25) observed that training in the North American context had significantly increased. Recently, it was observed that in some countries “dozens” of degree programmes were in existence and graduate

programme opportunities were on the rise (Gharabaghi 2019b: 4). Currently in Canada, college and university programmes exist in provinces across the country, and some include graduate programmes to doctoral level (Mattingly, Stuart and Eckles 2012: 25).

In North America, efforts to standardise training were undertaken from 1990 when the NACCYCEP was established for this purpose (Stuart 2013: 43). This body initially outlined required content for education programmes (Stuart 2013: 43). In 1992, the ILCPYC advanced a plan for developing and professionalising the child and youth care work field (Curry, Schneider-Muñoz and Carpenter-Williams 2012: 6). One element of this process was the establishment of “universal credentialling standards” for the field in an effort to standardise the training of child and youth care workers (Curry, Schneider-Muñoz and Carpenter-Williams 2012: 6).

This led to the establishment of the North American Certification Project, which analysed the existing information on competencies and established the core competencies mentioned in section 2.3.3 above (Curry, Schneider-Muñoz and Carpenter-Williams 2012: 6). These competencies were the result of several years of extensive review of over 100 documents (Stuart 2013: 44). The five competency domains represent “a comprehensive taxonomy for organising the knowledge base” (Curry, Schneider-Muñoz and Carpenter-Williams 2012: 6). A training certification process was established in 2007 entitled the Child and Youth Care Certification Board (CYCCB) (Eckles *et al.* 2012: 58). This was seen as an important step in bringing together the field in an effort towards professionalism (Eckles *et al.* 2012: 57). The CYCCB has established a process for the certification of practitioners in line with these competencies (Mattingly, Stuart and Eckles 2012: 25). This process “exists alongside numerous formal training courses and degrees at universities which are available in North America” (Mattingly, Stuart and Eckles 2012: 25).

On a global level, there has also been some development towards identifying competencies for child and youth care workers. The Global Social Service Workforce Alliance, whose focus is the development of the social service workforce, particularly in developing country contexts, produced a set of competencies for child and youth care workers at paraprofessional level at a basic and entry level (Thumbadoo 2015:

44). These were developed by representatives from 10 different countries, and sought to address the uncoordinated training of paraprofessionals, particularly in developing countries, and focus the training of people working with children and families in the direction of the child and youth care work profession (Thumbadoo 2015: 44).

Having looked at the development of knowledge and profession-specific literature, training, and certification in the sections above, a code of ethics is also necessary to mark a profession and set general guidelines for practice. The development of a code of ethics in the child and youth care field is the focus of the next sub-section.

2.4.4 The articulation of codes of ethical practice

Over a period of years, the child and youth care field engaged in an international consultative (Stuart 2013: 44) process to define a code of ethics (Stuart 2014: 67). The development of ethics to guide child and youth care practice was a milestone in the development of the field as a profession (Krueger 2002: 16). It is generally accepted that in order to be classified as a profession, apart from the other criteria outlined in the section above, a field of endeavour must have a set of explicit ethics (Curry, Schneider-Muñoz and Carpenter-Williams 2012: 7). Such ethics provide frameworks that assist practitioners to be able to select appropriate behaviours or make decisions (Magnuson 2012: 27). A code of ethics provides a set of guidelines to assist workers in their interactions with beneficiaries (Charles and Garfat 2009: 23). The North American and European codes of ethics were “developed as part of an identity struggle and, as such, represent a set of principles that govern practice” (Sercombe 2010, cited in Stuart 2014: 62). The function of an ethical code is to protect service users by clearly describing harmful practices (Magnuson 2012: 30). Ethics are central to the notion of being professional, and without a code of ethics, a field will not be a profession (Smiar 2019: 19). Child and youth care workers need to be trained in the application of ethical standards in order to ensure that these codes improve service delivery and the care of children (Lochhead 2001: 78).

In the European context, the articulation of ethical standards was undertaken by FICE (Lane 2018: para. 29 line 1). In the North American context, three organisations were involved in the process, namely the Association for Child and Youth Care Practice, the ILCPCYC, and the North American Consortium of Child and Youth Care Education

Programs (Krueger 2002: 16). The latter identified four domains of ethical behaviour relating to responsibilities towards self, the client, the employer, and society (Krueger 2002: 16). The ethical standards established by FICE are intended for adaptation to local contexts and include codes in the following areas: responsibility to self; responsibility to children, young people and their families; responsibility to colleagues; responsibility to employers; responsibility to the profession; and responsibility to society (FICE 1997: 1).

In this newly emerging field, increments are being made in the body of knowledge, yet public perception remains poor or weak. The section that follows explores this further.

2.4.5 Public perception

Krueger (2002: 13) noted that professionalisation was important “to improve the overall quality of care for children and youth”. Therefore, establishing standards for the training of child and youth care workers was necessary in order to focus attention on the skills and knowledge required of practitioners (Krueger 2002: 23). However, attaining professional status required practitioners from within the field to advocate and campaign “to inform the public about the importance of their work or their needs as a professional group” (Eckels *et al.* 2012: 72). Charles and Garfat (2009: 21) spoke of a “lack of public profile” as a difficulty facing the organisation of the field. This lowly position may be a result of the coverage of the field by the media (Lochhead 2001: 77). “Ongoing questions of legitimacy” must be confronted by child and youth care workers in order that their status as professionals be acknowledged (Stuart 2014: 75). Stuart (2014:76) noted that the child and youth care work profession works towards the greater good in society, has a professional organisational presence through associations, has created education and certification processes and, as a consequence, has “arrived as a profession”. This points to the fact that whilst the public is not as yet familiar with child and youth care work as a professional endeavour, there is notwithstanding impetus within the field internationally to assert its professional status.

Attention now shifts to the development of the field over different epochs in the South African context.

2.5 The development of the field of child and youth care work in South Africa

This section looks at the development of the field of child and youth care in South Africa, beginning with a reflection of child and youth care work prior to, during (sub-section 2.5.1), and post-apartheid (sub-section 2.5.2). Local scholarly contributions and the development of the body of knowledge and literature are explored, particularly from a South African perspective. A local model, the *Isibindi* initiative, is also reflected on. Pertinent to the discussion is the concept of 'residential care'. This is discussed next.

2.5.1 The early emergence of child and youth care work and the apartheid era

As is the case in the global North, child and youth care work in South Africa has its roots in residential care. This is evidenced in the fact that the professional association was established by persons concerned with the residential care of children (NACCW 1977: 1). The first form of residential care in South Africa was for young people in trouble with the law, and the law made provision for placement in such institutions in 1819 (Beukes and Gannon 1999: 23). However, churches established institutions for the care of neglected children, the first being in 1814 in Cape Town, and the second being 50 years later, also in Cape Town (Beukes and Gannon 1999: 23). Child protective legislation was passed in the various territories of what was to form South Africa at around the turn of the nineteenth century (Beukes and Gannon 1999: 23). Given that the roots of child and youth care work in South Africa lie in residential care, the history of the child and youth care field must be contextualised within the parameters of apartheid social engineering which impacted on the provision of residential care. Evidence of the impact of political and economic influences on the development of residential care facilities in South Africa is apparent, in that, in the apartheid era, in addition to children being cared for in institutions designated for specific racial groupings, different government subsidies were provided to children's homes for children from different racial groupings (Beukes and Gannon 1999: 24). Furthermore, apartheid legislation deemed Bantustans responsible for residential care and institutions for African children could not be built outside of these areas. In 1981 the number of Black children (the vast majority of the total population of children in the country) in residential care was approximately 40% of the number of White children in facilities (Beukes and Gannon 1999: 24).

South Africans engaged in the residential care of children began to connect with one another and this resulted in the formation of a national professional association in 1975 (Allsopp 2015: 31). This can be seen as the start of the organisation of the field of child and youth care work in South Africa. The NACCW was established as a non-racial body which was unusual in the racially divided country, and this created a platform for the inclusion of perspectives on the field from all South Africans (Gannon 1977: 1). A professional association operates “in highly contested policy, governance and organisational terrains” (Emslie 2013: 126). From its inception, the commitment of the NACCW to the children of South Africa is evidenced in the first recommendation made at the first conference of the NACCW as follows: “This Conference does not accept that there should be differences in standards of care as are implied by the differences in subsidies paid for various race groups [for children in children’s homes]” (NACCW 1977: 55).

The organisational structure of the NACCW provided a context for people to meet and organise across racial barriers in the apartheid South Africa and became the crucible for the development of child and youth care work in the country (Allsopp 2015: 32). Matters of professional identity and professionalisation are complex processes that weave together (Ranahan 2018: 138). Both of these processes were pursued by the professional association, and in addition to holding biennial conferences, members of the child and youth care field were kept connected through training courses, regional meetings, and regular publications (Gannon 1988: 2).

The above section considered child and youth care work in South Africa before and during the apartheid era. The post-apartheid period is reviewed next.

2.5.2 The local development of child and youth care work in the post-apartheid period

The field of child and youth care work in South Africa has grown in both size and quality (Allsopp 2013: 60). Setting out a clear and broadly held vision of the profession assists in channelling resources to achieve goals for the whole profession (Eckels *et al.* 2012: 59). Research showed that the growth of child and youth care work has been brought about in this way by the work of the professional association (Allsopp 2013: 95). The active nature of the NACCW has led to it being considered a vehicle of social

mobilisation, “constantly redefining itself to capture current and future needs” working in the “context of social policy and national conversations about children, youth, families, poverty, unemployment, education, health, inequities, inclusion and so many other things” (Gharabaghi 2018: 28). In the context of the generation of child and youth care work knowledge in the global North, the local driver of growth and development in child and youth care work was determined to be the NACCW since it provided a network and the organisational structure necessary for development purposes (Allsopp 2013: 60). “It is without a doubt the case that the NACCW has changed the social location of the child and youth care profession in South Africa and has rendered the opportunities that flow from this location limitless” (Gharabaghi 2018: 29).

2.5.2.1 Knowledge generation and importation

Examples of formal South African knowledge include the 2005 publication *Aspects of child and youth care practice in the South African Context* (Garfat and Gannon 2005). Thumbadoo (2012: 190-199) wrote a chapter, ‘*Isibindi*: Love in caring with a child and youth care approach’ in an international volume entitled *Child and youth care in practice* (Garfat and Fulcher eds. 2012). In addition, Molepo and Delport (2015: 149-160) contributed to the professional body literature through an article published in the peer-reviewed journal, *Children and Youth Services Review*. This article was based on a doctoral thesis study entitled ‘Professional challenges experienced by child and youth care workers in South Africa’. A further noteworthy South African contribution is the chapter titled, ‘Supporting young HIV Aids survivors and disabled children in family households in rural South Africa: The *Isibindi* model’ (Allsopp *et al.* 2018: 338-353) in *The SAGE handbook of early childhood policy*. These writings have provided some record of the development of local community-based child and youth care practice. Furthermore, an article entitled ‘New beginning for child and youth care workers in South Africa’ (Allsopp 2015: 29-41) published in the journal *Relational Child & Youth Care* gave a brief overview of the history of the development of child and youth care work in South Africa. Additionally, a document entitled *Technical Brief: Child and Youth Care Workers in South Africa* (Jamieson 2013a) provided source material on the development of community-based child and youth care work in the country. Several other contributions to the international body of child and youth care literature from a South African perspective exist, although the paucity of such material is acknowledged, pointing to the development of the local child and youth care work

profession being based largely on knowledge generated outside of South Africa. Prior to the advent of the Internet, the NACCW made international literature on child and youth care work available to the child and youth care field. Evidence, however, points to the fact that the profession in South Africa has been largely influenced by the local context and global child and youth care work information and knowledge (Allsopp 2013: 95).

A regular publication, *Child and Youth Care Work*, published by the NACCW, is currently in its thirty-eighth year of publication. This publication is not a peer-reviewed journal, and therefore disseminates informal local knowledge, but also includes information from international sources. This demonstrates that, notwithstanding the relative absence of South African formal knowledge, the field has been consistently active in pre-and post-apartheid eras in knowledge creation within the child and youth care field, albeit on an informal level. Given the fact that few academic positions support the generation of child and youth care knowledge, such a sustained output of information and knowledge over almost four decades, must be acknowledged. The assertion by Denzin (2019: 456) has relevance in this regard – “the insertion of indigenous voices, epistemologies, ethics and ways of knowing into Western colonial discourse is transformative”.

The growth in South African child and youth care work has been influenced by the cross-pollination of ideas from the global North (Allsopp 2013: 60). The foundation for this was set in the apartheid era as evidenced by Gannon (1988: 1) who noted the influence of international perspectives in enriching the NACCW conference of the previous year. Evidence of an early orientation by the NACCW to the social pedagogical model of Europe can be seen in the importation of European speakers at the first NACCW conference presence (Gannon 1977: 1). In 2001, the local field “received an injection of creativity through the exposure of practitioners across the country to the Danish socio-pedagogical approach” (Allsopp 2001: 3). However, little evidence of an ongoing importation of information from the social pedagogical movement in Europe is evident in the archives of the NACCW. The bulk of the knowledge and skill base to which South African child and youth care workers have been exposed has emanated from North America, with a predominance of information coming from Canada (Allsopp 2015: 41).

2.5.2.2 Training

One of the elements of professionalism is training (Lochhead 2001: 81). The absence of a trained workforce often results in poor service delivery (Eckels *et al.* 2012: 57). Locally, Molepo and Delport (2015: 152) observed that “for the child and youth care fraternity to convincingly do professional work, child and youth care worker education and training needs to be embraced by all stakeholders as the cornerstone of the field”. The commitment to training child and youth care workers was present in the NACCW from its inception where six conference recommendations were accepted on the matter of training child and youth care workers (Gannon 1977: 57). In the absence of there being a requirement for child and youth care workers to be trained, the NACCW created a context in which training became accessible and the Basic Qualification in Child Care (BQCC) was made available in all major centres (Beukes and Gannon 1999: 33). Formal training in child and youth care work took place initially through the provincial technical colleges (Beukes and Gannon 1999: 23). In 1999, the then technikons introduced a diploma and the B.Tech. Child and Youth Development (Beukes and Gannon 1999: 33).

In the democratic South Africa, skills development became a focus of attention, and national standards for training in all spheres became a requirement (South Africa, DSD 1997: 35-37). This provided an opportunity for the standardisation of pre-degree level training in child and youth care work. The NACCW then initiated the establishment of a Standards Generating Body for child and youth care work, as per the then South African Qualifications Authority (SAQA) requirements (SAQA 1995: 1). This body created qualifications which became available on the NQF at both tertiary and pre-tertiary levels as per the National Qualifications Framework Act 67 of 2008 (South Africa, 2009: 6). Training at the pre-tertiary level became the responsibility of the Health and Welfare Sector Education Training Authority, and this responsibility is currently shared with the Quality Council for Trades and Occupations (HWSETA 2016: 10). The pre-tertiary qualification was initially set at level 4 of the National Qualifications Framework (NQF), and an upgraded qualification on level 5 of the NQF has been introduced (SACSSP 2020:1). At present, several university programmes exist, with some offering graduate level degrees in child and youth care work (Gharabaghi 2019b: 4).

2.5.2.3 Professionalisation in South Africa

Beker (2001: 347) commented that in the quest for professionalisation,

[T]he key issue for child and youth care workers is not autonomy from the necessary demands of the organisational structures within which they function, but differentiation, that is, having an area in which their privacy and expertise are recognised and accepted.

The NACCW relentlessly pursued the goal of professionalising the child and youth care field over a period of decades (Du Toit 2000: 12). The 1997 White Paper for Social Welfare recognised the need for different categories of social service professionals to meet the social development needs of South Africans (South Africa, White Paper for Social Welfare 1997, chapter 2, paragraph 36). Amendments to the legislation allowing for the statutory regulation of social workers were made in 1998 with the changing of the “Interim Social Work Council into the South African Council for Social Service Professions” which created the legislative framework for the statutory regulation of other social service professions (Du Toit 1999: 8). The NACCW made an application to the SACSSP for child and youth care work to be considered as an autonomous self-regulating profession within the stable of social service professions (Allsopp 2001: 3). This application required the NACCW to provide evidence of the child and youth care work knowledge base and practice approaches which were unique to the field (NACCW 2000). This application was accepted, opening the path to the statutory regulation of child and youth care workers in 2001 (Allsopp 2001: 3).

However, it was over a decade later that the legislation which allowed for the regulation of child and youth care workers was signed into law, after a protracted period of advocacy (Magida 2015b: 20). These regulations make provision for child and youth care workers to be regulated at both auxiliary level and professional level, setting standards for minimum training and education requirements and outlining a scope of practice for each of the levels of registration (Magida 2015a: 49). Currently, 10,257 child and youth care workers, including those at professional, auxiliary, and student levels, have been registered (South African Council for Social Service Professions 2020: 1). The Professional Board for Child and Youth Care has also established a set of professional ethics (Magida 2015b: 49), and a policy for the continuous professional

development requirements of child and youth care workers (Magida 2019a: 37).

2.5.2.4 The *Isibindi* initiative and its impact on the field of child and youth care work

Gharabaghi (2008a: 150) observed that child and youth care workers are increasingly being deployed in non-institutional settings. In South Africa, services for children have moved to prevention and early intervention levels (South Africa, DSD 2016b: 13). As the HIV/AIDS pandemic spread, it was evident that the pandemic affected children in vulnerable communities in a very dramatic way, as children faced the loss of their parents and a generation of caregivers (South Africa, DSD 2016b: 12). In addition, children were frequently required to take care of terminally ill parents as well as look after their siblings (Meintjies *et al.* 2010: 41). Younger children were often deprived of parental engagement due to parents being ill and incapacitated (Jamieson 2013a: 112). In response to the growing numbers of orphans and the increasing numbers of vulnerable children, the NACCW developed the *Isibindi* model as a child and youth care response to the HIV/AIDS crisis (NACCW 2015: 21). Stephen and Gharabaghi (2019: 53) noted that the *Isibindi* model is a response to “a context and a need”. The *Isibindi* model provides services by trained child and youth care workers at community level to orphaned and vulnerable children who are in need of care and support (South Africa, DSD 2016b: 14). The model develops and deploys auxiliary level child and youth care workers in communities to serve children and families, providing evidence that community-based child and youth care work has an impact on the well-being of families (Thurman *et al.* 2013: 3-4). Research has further indicated that family strengthening activities undertaken by child and youth care workers have had positive outcomes on child well-being in relation to education, health, psychosocial well-being, economic well-being, child protection, information and awareness, as well as the increased access to other services (UNICEF 2017: 94).

The *Isibindi* model was adopted by the national Department of Social Development (South Africa, DSD) and scaled up by the DSD in partnership with the NACCW over a period of five years, where the target to train and deploy 10,000 child and youth care workers and 1.4 million children were set (South Africa, DSD 2016b: 15). By the close of the scale-up period, 7,268 child and youth care workers had been trained in the FETC: Child and Youth Care Work (NACCW 2019: 26). Anglin and Brendtro (2017: 8)

observed that the kind of services provided in *Isibindi* are likely to be the dominant form of child and youth care work service in countries with high birth rates. Child and youth care workers in communities are required to deal with a range of different challenges at community level (Gharabaghi 2008a: 150). The success of the scale-up of the *Isibindi* model proved the value of the deployment of child and youth care workers in communities outside of residential care facilities in South Africa. It was also found that community-based child and youth care services support “the national agenda to increase the social service professional capacity, and extend social services through innovative means to reach the most vulnerable populations” (South Africa, DSD 2016b: 120). In this way, the scale-up of the *Isibindi* model provided the opportunity to test the value of child and youth care work in the context of the complexity of community-based dynamics in situations of great poverty.

In summary, the development and scale-up of the *Isibindi* model has had the following impacts on the development of the field of child and youth care work in South Africa:

- It adapted child and youth care worker practice to the local context in a unique and innovative model;
- It increased the size of the child and youth care workforce in the country through the rapid development of large numbers of child and care workers;
- It proved the value of child and youth care workers working in families at community level, and at the prevention and early intervention levels of the child protection system;
- It provided evidence that child and youth care workers at auxiliary level are able to provide effective services.

Pertinent to the discussion are a number of key historical points. These are listed next.

2.6 A summary of the key historical points salient to the current study

Of significance to the present study in relation to this history are a number of key points. These are listed below:

- Child and youth care work in South Africa has its roots in residential care, as is the case in North America;
- The child and youth care role grew out of work with troubled and troubling young people in such residential care settings;

- This implies that it grew out of the context of dealing intensively with small numbers of behaviourally-challenging children in relatively controlled environments;
- The bedrock of the local field is made up of child and youth care work knowledge derived mainly from North America;
- Locally, a critical feature of the development of the field is the racially divided and socially unjust service context within which it grew, which has largely excluded African thinking and perspectives;
- The child and youth care profession in South Africa has been impacted by the proliferation of the acclaimed community-based *Isibindi* child and youth care work projects;
- The success of the quest for professionalisation of the field in South Africa has formalised the profession.

The next section pays particular attention to the nature of child and youth care by looking at the contributions of leading scholars in the field, discussing key concepts, and focusing on central characteristics of a child and youth care approach.

2.7 The nature of child and youth care work

The differentiation of the field is of particular importance given that child and youth care work is, at its source, interdisciplinary, and is rooted in some of the other recognised human service professions (Vander Ven, 2000: 219). Anglin (2015a: 3) posed the matter as a conundrum, exclaiming: “[H]ow child and youth care workers make a difference is different from different professions’ differences, because all helping professions seek to make a difference in different ways”. This is a light-hearted but incisive point that reflects the entangled nature of social services and the complexity of the process of delineating child and youth care work as distinct from other social services. The unique nature of child and youth care work can be described as the way in which child and youth care workers share themselves in the context of life-space-based care interactions with young people and families, in order to “create transformative developmental and therapeutic experiences” (Anglin 2015a: 7). Child and youth care work is unique in that no other approach to helping is “so immediate, so grounded in the present experiencing or, one might say, so everyday”

(Garfat *et al.* 2018: 10). In describing the nature of child and youth care work, it must be noted that the last half-century has seen the field develop a language particular to child and youth care work (Gharabaghi 2008b: 281). There is an emphasis within the field on articulating child and youth care practice and theory in plain language. In this regard, Phelan (2015: 28) observed that “we need to start valuing our knowledge of how to use everyday events to create useful energy in youth without believing that it has to be translated into the language of psychology”. This attempt at jargon-free language is evident in the description of the nature of child and youth care work that follows below.

The next section provides three distinct perspectives on the nature of child and youth care by three leading scholars in the field.

2.7.1 Views on the nature of child and youth care work

Three descriptions of the nature of child and youth care work are provided to create an overview of the dominant thinking in the literature on the subject. Firstly, Anglin (2001: 2) described ‘child and youth care work’ as follows:

[C]hild and youth care is work with children and youth, as whole persons, in order to promote their social competence and healthy development, by participating in and using their day-to-day environments and life experiences, and through the development of therapeutic relationships, most importantly the relationship with the particular child or youth who is the focus of attention. (The word *therapeutic* is taken to mean ‘having healing or curative powers; gradually or methodically ameliorative’).

Anglin (1999: 145) articulated the following elements as encapsulating the nature of child and youth care work:

- having a focus on the *growth and development* of children;
- attending to all aspects of *the child as an integrated human being*, rather than only a certain aspect of the functioning of the child;
- being concentrated on the *development of competence, and a strengths-based approach*;
- engaging with the child within *the context of his or her living environment* at any one time; and
- developing *therapeutic relationships* with children and their families or other

caregivers (italics added).

White (2008: 109) considered the following to be “hallmark characteristics” of child and youth care work:

“engaging with youth and families in collaborative and respectful ways; taking practical actions to create the conditions for young people to experience meaning, worth and connection; supporting them to imagine hopeful futures for themselves; and bringing oneself fully to the therapeutic relationship” (italics added).

Gharabaghi (2010: 137) described the nature of the child and youth care field in five points as follows:

- being focused on the *growth and development* of children and youth;
- being concerned with the *totality of a child’s functioning*;
- having a *social competence perspective*;
- being based on *direct day-to-day work with children and youth in their environment*; and
- involving the *development of therapeutic relationships* with children, families and other formal and informal helping persons (italics added).

As can be seen from the above, both Anglin and Gharabaghi concurred on the central concepts of the nature of child and youth care work. White (2008: 109) provided a slightly different perspective in that she included consideration of gaining a positive perspective on a possible future as a key element in describing child and youth care work. However, all three of these descriptions demonstrate significant overlap and clarity in an understanding of the nature of child and youth care work in the literature. Elsewhere Anglin (2015: 8) observed that child and youth care workers engage in a “care mode” with children in their life space. Caring has long been considered a foundational aspect of professional child and youth care work “which views nurturance as a helping modality” (Beker and Maier 2001: 377). Based on the above, the following represents a distillation of the key elements of the nature of child and youth care work:

- Having a central focus on the development of the child as a whole person and the primary client;

- Being in contact with the child in the context of everyday life experiences;
- Connecting with the child in an authentic and other-focused manner;
- Engaging in caring activities; and
- Focusing on positivity, strengths, and building competence.

These five key elements will be discussed in the sections that follow.

2.7.2 Key concepts associated with child and youth care work

The following five key concepts will be considered separately for the purpose of convenience; although, in practice, all five key areas may be in operation at the same time, overlapping with one another, complementing one another, and embellishing one another. These include the development of the child as a whole person and primary client (sub-section 2.7.2.1); life-space-work (sub-section 2.7.2.2); connecting with the child in an authentic other-focused manner (sub-section 2.7.2.3); engaging in caring exchanges (sub-section 2.7.2.4); and focusing on positivity, strengths, building competence, and making life better (sub-section 2.7.2.5). Hence, the complexity of child and youth care work lies in the fact that oftentimes a myriad of intricate interactions take place simultaneously, incorporating all of these aspects of the work.

2.7.2.1 Development of the child as a whole person and primary client

This section describes the first key element listed above of the nature of child and youth care work. Child and youth care workers are able to “impact the whole life experience of the child” (Anglin and Brendtro 2017: 10). Practitioners work with children as their primary clients, and always stay focused on the child (Anglin 2013: 12). Whilst a consideration of a child outside of the family context would be antithetical to a child and youth care approach, the family in the child and youth care context is engaged because of the child and the child’s needs in relation to the family (Anglin 2001, cited in Swanzen 2011: 33). The child is therefore the starting point of a child and youth care work intervention, and remains the primary focus of the child and youth care worker throughout the intervention, notwithstanding any engagement that may take place with family members or community members or any other role players in the child’s life.

The child is also seen by child and youth care workers in his or her totality, and child and youth care workers deal with all aspects of the child's functioning (Anglin 2013: 12). This includes consideration of the child's development and developmental needs in all domains (Anglin 2013: 12). Rather than focusing on a particular aspect of a young person's functioning, child and youth care work is holistic in its perspective of the child (Anglin 2013: 12). The child and youth care focus is thus on the whole child as they live out their lives at a particular point in the life-cycle (Anglin 2013: 12).

2.7.2.2 Life-space work

The second key feature of the nature of child and youth care work as identified by Vander Ven (1991: 15), separating the endeavour from related fields, is the notion of working with young people in their life-space, in a manner that ensures that the quality of life in that space is improved, and that the space itself is "developmentally and holistically growth producing". Vander Ven (1991: 15) asserted that "there is no other field that embraces the nature of the spaces that contain its clients, works to adapt the spaces to the clients' needs and uses the spaces as a context to empower its other services".

The two words, 'life' and 'space' are simple, but when used together "take on a far greater complexity" (Allsopp 2006: 2). The term is often confused with simply the notion of occupying the same space and time as another person, whereas when used in child and youth care work, it connotes the quality of presence of the worker (Allsopp 2006: 2). Phelan (2015: 8) noted that "child and youth care work is done at the molecular level, it doesn't occur at arm's-length or in a sterilised environment". Child and youth care workers encounter their clients in the context of them living their lives, and the space 'belongs to' the client but becomes a shared space of encounter. Life-space work is linked to the quality of the presence of the worker in the context of the instant as a child's life is unfolding (Gharabaghi and Stuart 2013a: 54). The interpersonal and professional complexities that emerge from this fact of context make for intricacy in that the interpersonal boundary matters "do not occur in an artificial environment, separate from daily events" (Phelan 2015: 126). Life-space work is a complex approach (Gharabaghi and Stuart 2013a: 181).

Krueger and Stuart (1999: 197) noted that child and youth care workers must possess the “knowledge, skill, and analytic ability to recognise, change, and/or create context.” The life-space can be a “wildly uncontrollable place” (Phelan 2008: 4). Skeckley (2013: 27) made the point that people experience their life-space as singular and whole, even though one’s life-space may comprise different locations and experiences. Child and youth care workers are able to be present in children’s lives, wherever they may be (Anglin 2015a: 13). However, child and youth care workers, as people who often spend the greatest amount of time with children, have the responsibility to take opportunities that are offered in the life-space to create positive developmental experiences that are in the best interests of children (Anglin 2015a: 8). Being involved with children in everyday, daily living events, and helping children with ordinary activities is the “warp and woof of our work” and the core of child and youth care expertise (Beker 2001b: 356). In the daily living space, the objective of a child and youth care worker in working on a bedtime routine, for instance, would be “to get him to bed in such a way that he is a little happier, less frightened, more mature than he was before” (Beker 2001b: 356). Brendtro (2019a: 10) observed that what are considered routines in daily life must be seen as holding the potential for providing learning events and growth producing experiences. “What is needed is a professional who can physically and emotionally join with the other person’s reality, remains safe and confident in spite of the danger, and display the tools and skills to move toward a better place” (Phelan 2015: 127).

The researcher defines ‘life-space work’ as work that takes place in the immediacy of the child’s varied and shifting environment which aims to optimise the child’s experience of life through the presence and actions taken by the child and youth care worker.

2.7.2.3 Connecting with the child in an authentic other-focused manner

This section describes the third key element of the nature of child and youth care work. Phelan (2015: 35) considered relationships to be at the core of helpful child and youth care interventions. Anglin (2015a: 7) asserted that relationships are a defining feature of child and youth care work. Relationships are considered the “active ingredient” – the essential element that is required – in order to be successful in working with children and youth (Brendtro 2019a: 14). The nature of the relationship between the

child and youth care worker and the child contains both personal and professional elements (Anglin 2013: 13). This relationship combines “the richness and intimacy of the ‘personal’ with the rigour and goal directedness of the ‘professional’” (Anglin 1999: 145). The concept of ‘hurt’ and troubled children being helped in *The other 23 hours* was a significant element in defining the role of the child and youth care worker (Anglin 2019: 28). It elucidated that those directly connected with hurting young people in ‘the other 23 hours’ have the greatest possibility of changing their lives (Brendtro and Ness 1983a: 19). The origins of the unique child and youth care work relationship, therefore, has its roots in residential care which exposes the worker to the young person for potentially extended periods of time, in what Phelan (2015: 8) asserted is a personally undefended manner. It is acknowledged that establishing relationships of this nature with children who are behaviourally challenging and have complex needs is not a simple undertaking (Holden 2019: 24). The child and youth care work relationship is predicated on an understanding that children who have been let down require dependable adults to be able to assist them to heal (Maier 1987: 48). Developing such relationships requires knowledge, skill, and ‘self’ elements to be used in complex ways (Anglin 1999: 146). In the child and youth work relationship, the worker aims to become a significant individual in the child’s life for at least the duration of the intervention. In Canada, as well as in Western Europe, child and youth care workers are well trained to be able to develop such relationships with children (Brendtro and Du Toit 2005: 55). These relationships become “protective factors that prevent high-risk behaviour” (Brendtro and Du Toit 2005: 33).

Research has established that relationships are key to maintaining safety in residential care settings (Jenney 2020: 99). Most children in residential care settings are there as a result of relationship difficulties (Gharabaghi 2019, cited in Jenney 2020: 102). The establishment of a relationship with a child in the context of child and youth care work is sometimes considered to be *the* intervention itself (Stuart, 2013: 222). However, it can also be a foundation for other interventions (Long 2008: 57). Resilience is developed through relationships in the child’s environment (Luthar 2006, cited in Brendtro 2019a: 15). Gharabaghi (2013: 16) noted that the relationship between the child and youth care worker and child is not only important when they are together, but also when they are no longer physically in contact. It is at this point that the young person “can invoke the relational connections to the caregiver as a way of becoming

empowered” (Gharabaghi 2013: 16). The relationship between the child and youth care worker and child “finds expression especially in the moments when they are apart” (Gharabaghi 2013: 17). Recent conceptualisations of the child and youth care work relationship focus on the two-way nature of this relationship in the helping context. It is from this consideration that the term ‘relational child and youth care practice’ emerged (Garfat 2007, cited in Garfat 2008: 8). Relational practice takes place in an “interpersonally co-created place (Garfat 2008: 9) and seeks to “co-construct relationships in which children, young people and their families can develop further ways of experiencing and being in the world” (Garfat *et al.* 2018, cited in Steckely 2020: 2).

2.7.2.4 Engaging in caring exchanges

Caring is a core of child and youth care work (Gharabaghi and Stuart 2013: 54) and is the fourth identified key aspect of building relationships between children and child and youth care workers (Krueger 2015: 12). Care is important for children of all ages (Jamieson and Richter 2017: 34). The work of Maier (1987) entitled *Developmental group care of children: Concepts and practice* is recognised as a foundational text in this regard (Krueger 2015: 12). Seven elements of care were identified by Maier (1987:110) as “components of care”, namely:

- Seeing to the *bodily comfort* of the child, which includes ensuring physical comfort and combining this with the personal involvement of the child and youth worker caregiver in such acts (Maier 1987: 110);
- Differentiations, which means *individualising care responses* to meet the needs of each child (Maier 1987: 112);
- *Rhythmic interactions*, including rituals and activities in which children and adults are engaged in shared rhythms (Maier 1987: 116);
- *Predictability*, which allows children to gain “a sense of order and power” (Maier 1987: 116);
- *Dependability*, which allows children to feel comfortable in depending on an adult, and can lead to mutual feelings of caring (Maier 1987: 117);
- *Personalised behavioural training* where child and youth care workers pro-socially influence children through becoming meaningful adults to them (Maier 1987: 119); and

- *Care for the caregivers*, meaning that those caring for children need to be “nurtured themselves and experience sustained caring support in order to transmit this quality of care to others” (Maier 1987: 119).

Maier’s (1987: 111) work on developmental care highlights the conflation of physical, social, and emotional care in the context of child and youth care work. Care that is attuned to children’s particular needs provides the context for positive emotional development (Jackson, McKenzie and Frederico 2019: 105). Children are more likely to respond to assistive interventions when they feel that they are cared for (Krueger 2019: 13). However, children who have not been cared for, or who have not felt cared for, may resist being cared for, and may be very distrusting of care, even when the opportunity for such caring to be experienced is presented. “In the dog eat dog worldview of a person with low attachment ability, everyone is self-centred and has no need to care about anyone else unless they get some personal benefit” from the caring experience (Phelan 2015: 62). The process of caring for children in the child and youth care contexts is, therefore, complex, and involves a myriad of tiny caring interactions in everyday contexts (Maier, 1987: 41). Care in a child and youth care context is an “action-oriented concept”, involves “being present in the life-space” (Gharabaghi and Stuart 2013a: 56), and “takes time, patience and persistence” (Krueger 2019: 13).

2.7.2.5 Focusing on positivity, strengths, building competence, and making life better

This section describes the fifth key element of the nature of child and youth care work. Brendtro, Brokenleg and Van Bockeren (1990: 15) described what they referred to as “professional pessimism” where young people who present with difficult to manage behaviour are often considered to be deviant, disturbed, disordered, delinquent, deprived, dysfunctional, disobedient, and disabled by those in the helping professions. This contrasts with the approach to the behaviour of young people that is characteristic of a child and youth work paradigm. The developmental approach applied in child and youth care work contexts “does not permit preoccupation with deviant, pathological, or defective behaviour” (Krueger 2015: 14). Child and youth care work is characterised not by a focus on pathology, but by a preoccupation with the strengths and assets of young people (Phelan 2015: 35). Environments that lack positivity for young people can support the development of “failure and futility” in both the young people

themselves as well as others in their environment (Brendtro, Brokenleg and Van Bockeren 1990: 12). Child and youth care work was pioneered by individuals who displayed commitment to, and faith in, the strengths of young people, as opposed to a pathology-based approach to children (Anglin 2015b: 41).

Children are motivated towards competence in all domains of life (Brendtro, Brokenleg and Van Bockeren 1990: 72). Within a child and youth care work framework, the behaviour of young people is viewed from a developmental perspective, which focuses on strengths and the development of competence (Anglin 1999: 145). In this approach, children are viewed as being on developmental pathways where they are considered to be doing as well as possible at any point in time, rather than dysfunctional, and are best assisted by efforts to support incremental steps towards social competence (Anglin 1999: 145). Children should always be considered to be “developing beings” (Krueger 2015: 14). Holden and Sellers (2019: 64) observed that “children should not be punished for behaviour that is the manifestation of emotional distress”. The role of the child and youth care worker is to support young people while they practice their competency (Holden and Sellers 2019: 65). In a current child and youth care perspective, behaviour is not simply managed, but the focus of the worker is on “creating transformative experiences and collaborative problem-solving” experiences (Anglin 2015a: 8).

Having identified and described the five key elements of the nature of child and youth care work above, attention now shifts to the main characteristics of a child and youth care approach.

2.7.3 Characteristics of a child and youth care approach

Garfat *et al.* (2018: 7-45) described child and youth care work by outlining 25 characteristics of a child and youth care work approach to providing services. The novelty and incisiveness of their description lies in the simplicity of the language used to articulate these characteristics, which nevertheless succinctly describe complex seminal areas of activity. The characteristics have been well received by the field and education programmes have been built around them (Stephen and Gharabaghi 2019: 41). The iterative development of these characteristics began in 2004, and several versions of the characteristics were published prior to the release of the upgraded 25

characteristics (Garfat *et al.* 2018: 7-8). The current version was the result of wide international consultation (Garfat *et al.* 2018: 8).

The characteristics were intended to outline an approach that describes the child and youth care work methodology undertaken by all who are involved in the field. They are also not intended to be setting specific (Garfat *et al.* 2018: 12-13). Furthermore, they are contextualised within concepts of “being, interpreting and doing” child and youth care work (Garfat *et al.* 2018: 12). The characteristics are contextualised within relational child and youth care practice which refers to the “co-created space between us” (Garfat 2008: 8). This concept stresses the importance of the relationship created between child and worker, and the mutuality and centrality of what is termed ‘space’ between the worker and the young person (Garfat *et al.* 2018: 14). In the context of relational engagement, the child and youth care worker is mindful of the nature of the engagement between him-/herself and the other (Garfat *et al.* 2018: 14). These 25 characteristics are described by the authors (Garfat *et al.* 2018: 9-15) as follows:

- *Participating with people as they live their lives* – illuminates the concept of ‘life space work’, and the fact that child and youth care workers involve themselves “in all aspects of the daily life of the people” with whom they work.
- *Rituals of encounter* – refers to the manner in which child and youth care workers approach or engage with young people in the context of the cultural reality of the child.
- *Meeting them where they are at* – means accepting people for who they are, as they are encountered in the engagement.
- *Connection and engagement* – stresses the responsibility of the child and youth care worker to engage with the child and work towards establishing a relationship.
- *Being in relationship* – notes the mutuality of the caring relationship and the fact that it extends over a course of time.
- *Using daily life events to facilitate change* – involves the child and youth care worker’s use of what appears to be ordinary moments to work with people.
- *Examining context* – emphasises the essential element of remaining contextually aware.
- *Intentionality* – encompasses the consciousness that the child and youth care

worker brings to his or her actions in the context of the relationship.

- *Responsive developmental practice* – points out that child and youth care workers remain aware of developmental stages and needs that may be impacting on children.
- *Hanging out* – underscores the role of the child and youth care worker in doing everyday things with people and what may appear to be meaningless activities, or actually nothing at all, but where relationships are being fostered and developed.
- *Hanging in* – specifies the requirement of the child and youth care worker to persevere with children through difficult times.
- *Doing 'with' not 'for' or 'to'* – informs the role of child and youth care workers in fostering the participation of young people in all aspects of their lives and avoiding directing or overly cosseting behaviour.
- *A needs-based focus* – describes an attitude of the child and youth care worker of being aware that behaviours meet needs, and that when destructive behaviours are occurring a need is being met in these behaviours, and it is the work of the child and youth care worker to help to become familiar with these needs in order to be able to change the behaviour.
- *Working in the now* – means that the child and youth care worker remains focused in the present as an opportunity for change rather than being focused on the past or the future.
- *Flexibility and individuality* – acknowledges the uniqueness of each child and the need for interventions to be specified for that individual.
- *Rhythmicity* – refers to the rhythms of engagement that may facilitate engagement and connection.
- *Meaning making* – foregrounds the process of the child and youth care worker in establishing the meaning of a particular action, for a particular person, in a particular context.
- *Reflection* – speaks to the consideration of the worker on what they are doing both before, during, and after an interaction.
- *Purposeful use of activities* – considers the need for creating opportunities for children to learn from experiences that they undertake.
- *Family-oriented* – delineates the need for the child and youth care worker to

remain aware of the child's family, as defined by the child him or herself.

- *Being emotionally present* – speaks to the need for the child and youth care worker to be emotionally available to children in the context of their interactions.
- *Counselling on the go* – notes that child and youth care work counselling is not a formal time-bound form of counselling but happens in fits and starts in the context of life as it unfolds.
- *Strength-based or resiliency focus* – outlines the need for the child and youth care worker to be always focused on finding strength and resilience in children.
- *Love* – highlights that the child and youth care work relationship with a child can be one of selfless loving in the context of child and youth care practice.
- *It's all about us* – accentuates the need for high levels of self-awareness on the part of the child and youth care worker and the relationships that exist amongst the team who work together in collaboration with the child.

Having delineated the above characteristics to provide a framework for child and youth care practice, two influential schools of thought are reflected on below.

2.8 Two schools of thought in child and youth care practice

The preceding characteristics of a relational child and youth care work approach provides a framework for thinking about child and youth care practice (Stephen and Gharabaghi 2019: 52). In articulating these characteristics of interpersonal engagement in child and youth care work practice, Garfat *et al.* (2018: 11) observed that other broader considerations should also be brought to bear. These include an engagement with the impact of historical matters, as well as the “histories of oppression and racism” which may impact on people. Steckley (2020: 2) observed that in the context of child and youth care work, relational practice involves consideration of the “meaning made of experience and the historic, cultural and political contexts that influence those experiences”. Stuart (2013: 109) weighed in on the matter of macro versus micro considerations in child and youth care practice and noted that child and youth care workers are questioning the broader political contexts which give rise to practices which are at odds with child and youth care work. There are calls for child and youth care worker practice not to be limited to action on an individual person-by-person basis, but for involvement in advocacy and political action as well

(Mackenzie 2019: 115). Beyond caring for vulnerable children and families, child and youth care workers are increasingly recognising the socio-economic and political conditions that give rise to such vulnerabilities and the need to address these in the context of practice (Mackenzie 2019: 114). These considerations represent some of the concerns of the counter movement within child and youth care work (Stephen and Gharabaghi 2019: 41).

Furthermore, Stephen and Gharabaghi (2019: 41) asserted that concepts that are commonly used in child and youth care work in the context of the orthodox movement, including "care, relationships and community are not manifested universally and instead must be considered within the broader context of complex histories of dehumanisation, dispossession, this embodiment and systematic oppression". Stephen and Gharabaghi (2019: 52) posited that child and youth care work in South Africa has synthesised ideas from both the orthodox and the counter movement. These authors (2019: 53) contend that South African child and youth care work features aspects of the orthodox movement in relation to practice, as well as "counter movement ideas about power, colonialism, white supremacy and other categories of oppression".

2.9 Conclusion

This chapter provided a summary of seminal literature in the field of child and youth care work. In addition to presenting the main definitions of child and youth care work and elaborating on these to broaden the understanding of the field, the chapter also outlined the emergence of the new profession of child and youth care work both in the global North and in South Africa. It described the elements of the child and youth care work knowledge base and its emergence in the field of residential care for children; depicted the professionalisation process with reference to what are broadly understood as the features of a profession; explained the nature of child and youth care work by reflecting on the five key aspects of the field; and noted the defining characteristics of child and youth care work. The chapter concluded with a brief outline of two schools of thought in the child and youth work field, contextualising South African child and youth care work within these.

The following chapter contains the data collected, and an analysis of the findings made in the study.

CHAPTER 3

RESEARCH METHODOLOGY

3.1 Introduction

Chapter 1 provided an overview of the context of the study, as well as outlined the aims and objectives, and research questions. In addition to describing the value of the study, it contextualised the research within the ecological systems theory and explained the key concepts used throughout the study. In Chapter 2, attention shifted to the literature review of the study. The current chapter, however, presents the methodology employed in this study.

The outline of this chapter is as follows. The chapter begins with an introduction (section 3.1) and overview of the methodology and qualitative research design adopted in this study (section 3.2) and a description of the way it was applied. Thereafter, the national setting in which the study was implemented is provided (section 3.3), followed by an explanation of the research population (section 3.4), the samples recruited (section 3.5), and the sampling strategies used. Attention then shifts to the processes followed in collecting the data (section 3.6 and section 3.7), which includes an exposition of the in-depth interviewing process used, as well as the manner in which the researcher approached conducting and managing the focus groups. The next section unpacks the approach undertaken during the analysis of the data (section 3.8), giving special attention to the trustworthiness of the study (section 3.9). The final section confirms the ethical considerations adhered to in the study (section 3.10). The chapter is rounded off with some concluding remarks (section 3.11).

Having introduced and provided the outline of the chapter above, attention now shifts to the research design and methodology utilised in this study. The chosen design and methodology are comprehensively described, and justification of the choice of methodology is also given in the discussion that follows.

3.2 Research design and methodology

The discussion here begins with a clarification of the concept of ‘research design’ (sub-section 3.2.1), followed by an explanation of the two main research approaches commonly used in the social sciences – the quantitative and qualitative approaches (sub-section 3.2.2). The advantages of qualitative research methodologies (sub-section 3.2.3) are then discussed, along with factors to consider when choosing between a quantitative or a qualitative research approach (sub-section 3.2.4), and when choosing a research design (sub-section 3.2.5).

3.2.1 Definition of research design

In this study, the term ‘research design’ is applied to the whole gamut of undertakings which together make up the entire process of the study. A research design is “a systematic plan for a research project” (Flick 2018: 604). The literature acknowledges a level of ambiguity with regards to the term ‘research design’ in both quantitative and qualitative research (Fouché and Schurink 2011: 307). A research design is created with the essence of the research question in mind (Hart 2018: 68). However, according to Fouché and Schurink (2011: 308), there is a good deal of “unnecessary confusion” concerning the meaning of the concept of research design in the context of qualitative research. They go on to highlight the subjectivism of qualitative enquiry and the importance of creating a plan for the study, or a design of the study that fits with the nature of the enquiry (Fouché and Schurink 2011: 308). The term ‘research design’ can thus be used to apply to the entire process of drawing together a research project, including all elements to which the researcher must apply his or her mind and decide upon throughout the research process. This, in turn, forms a “plan, recipe or blueprint for the investigation” (Delport and Roestenburg 2011: 171). Alternatively, it can be used in a far narrower sense to connote the particular approach taken to a single aspect of the research process which is designed to access data in a specific manner (Fouché, Delport and De Vos 2011: 143).

It is within the context of these variations, that the researcher approached the consideration of the research design. It was further noted that research in a qualitative context includes a series of choices, both in relation to the planned design, as well as in relation to the execution of the design (Flick 2018: 98). In this study, the term was

applied to connote the plan for undertaking the research endeavour (Flick 2007: 159). This provided what Edmonds and Kennedy (2017: 13) described as a framework for the pursuit of the specific questions to be asked in the study. The research design links to every part of the process, including the manner in which data is both collected and analysed (Ragin 1994, cited in Flick 2018: 98). In other words, the term as used in this study refers in the broadest sense to “research design”.

The section above attempted to define one of the main constructs involved in this particular study – ‘research design’. The ensuing sections look at the two main approaches to research – the qualitative approach and the quantitative approach – taking the reader through all aspects that distinguish these two approaches, also looking at the strengths and weaknesses of each.

3.2.2 Quantitative and qualitative research approaches

The two key generally accepted approaches to research in the social sciences are the quantitative and qualitative research approaches (Fouché and Delport 2011: 63). There is, however, growing acceptance and use of a mixed methods approach, where the two approaches are integrated within a research design (De Vos *et al.* 2011: 22); (Hesse-Biber 2017: 5). Quantitative research focuses on measurement processes which seek to be accurate and objective, and the “generalisation of the findings to a population beyond the study context” (Fossey *et al.* 2002: 717). In contrast, qualitative approaches seek to “illuminate the subject of meaning, actions and context of those being researched” (Fossey *et al.* 2002: 717). Quantitative methods rely on numerical data which is able to be efficiently analysed, and “appeals to people’s preference for numbers” (Creswell 2015: 5). In using the quantitative approach, the researcher is able to both engage with cause and effect relationships as well as relationships within and between different data sets (Creswell 2015: 5).

Furthermore, qualitative enquiry has gained international acceptance and is now an essential element of global “interpretive public social science discourse” (Clark *et al.* 2015, cited in Denzin and Lincoln 2018: 31). At the same time, however, the value of, and even the existence of, qualitative enquiry, continues to be challenged by some authors (Denzin and Lincoln 2018: 30). Hesse-Biber (2017: 5) argued that qualitative and quantitative approaches to research have some elements in common, and should

rather be seen as two ends on a continuum than as two utterly different approaches. Both qualitative and quantitative methodologies have their own approaches to undertaking the enquiry, as well as to the collection and analysis of data, and way of evaluating the quality of the research (Fouché and Delport 2011: 63).

A qualitative approach to research is widely used in the social sciences (Hesse-Biber 2017: 5) where there is a long history of its usage (Flick 2018: 9). Quantitative inquiry has developed over the past 125 years (Erickson 2018: 113). Qualitative research provides a scientific approach to studying complex social phenomena in a scientifically rigorous manner (Flick 2018: 7). This approach is applicable in the following situations: where the matter being investigated is poorly defined and understood; is rooted within the lived experience of people; is complex in nature; is located in the experience of participants; and is intangible or difficult to capture (Richie 2003: 32-33). In addition, qualitative researchers tend to begin with broad research questions instead of specific hypotheses, collecting large amounts of data through verbal means from a limited number of participants, which they arrange in a manner that provides clarity and verbally describes the studied phenomenon (Leedy and Ormond 2005, cited in Fouché and Delport 2011: 64). The orientation of qualitative research is towards “analysing concrete cases in the temporal and local particularity” and begins with things that people say and do (Flick 2018: 13). This means that in qualitative studies, data tends to be obtained in a natural setting, where participants experience the issue being studied, and a range of data sources is used (Creswell 2009: 174-175).

Creswell and Creswell (2018: 43) asserted that three areas must be considered in the selection of a research approach, namely: (1) the philosophical underpinnings of the approach, (2) the design, and (3) the methods used. Constructionism or constructivism is frequently the philosophical approach associated with qualitative research (Creswell and Creswell 2018: 45). In the constructivist approach, “[T]he realities we study are social products of the actors, of interactions and institutions” (Flick 2018: 36). This perspective eschews the notion of an objective reality and sees knowledge as emerging from interaction with the world (Kovach 2018: 389). In this way, constructivism takes into account the subjectivity of individual experience (Creswell and Creswell 2018: 46). This theoretical stance is consistent with a qualitative research approach since the latter “seeks to discover and to describe narratively what

particular people do in their everyday lives and what their actions mean to them” (Erickson 2018: 87).

3.2.3 Advantages of qualitative research methodologies

It has been noted that a dichotomous view of qualitative versus quantitative approaches is largely being rejected in favour of a perspective that holds that both are appropriate and applicable in the social sciences, and that the adoption of either should be a selection based on the nature of the research question (Garfat 1998: 29; Flick 2014: 12). These two strategies can be seen as distinct, and yet related (Flick 2018: 19). An advantage of the qualitative approach is that it acknowledges the significance of the “subjective meaning” that can be brought by individual participants to research, and, as indicated in the preceding section, is cognisant of the “social construction of reality” (Hesse-Biber 2017: 43). Additional advantages of the approach include that it is predicated on the views of participants, which can be rich in detail given the limited number of participants; it can be linked to their context; it may capture their voices; and it is divorced from the views of the researcher (Creswell 2015: 5). Qualitative research also allows for a scientific approach to obtain multiple subjective views on a research question (Hesse-Biber 2017: 4). Moreover, it is considered to be appropriate for obtaining “diverse perspectives and practices for generating knowledge” (Hesse-Biber 2017: 5).

In qualitative enquiries, data is not produced through obtaining numerical information (hard data). Instead, data is gained from the perceptions of participants in the form of opinions and observations (Creswell 2015: 5). It is also less dependent on the capacity of the researcher. However, this is considered a disadvantage, as it relies heavily on the input of the participants (Creswell 2015: 5). Other disadvantages include that this approach tends to focus on a few participants from which the data is drawn, instead of the large numbers within a short period of time that are studied in qualitative situations which leads to a high possibility of generalisability (Flick 2015: 12).

The next section provides justification for the choice of approach adopted in this study. It also considers the suitability of this approach for this research.

3.2.4 Selection of the research approach

As indicated, the long-standing view that qualitative and quantitative research approaches are opposing approaches has given way to a consideration of the appropriateness of the approach used in a particular research context (Flick 2018: 29). Flick (2015: 124-125) outlined five factors for consideration in relation to the choice of a quantitative or qualitative research approach. These include: (1) the nature of the matter being studied; (2) the theoretical approaches being adopted by the researcher to the study; (3) the nature of the research question itself; (4) the unbiased appraisal of the applicability of the approach, and (5) the resources available for undertaking the research, which includes a consideration of researcher competency. Consideration of these points assisted the researcher in selecting a qualitative approach for this study. A qualitative study does not usually begin with a hypothesis on the area of study, or a theoretical model of the phenomena (Flick 2015: 11). This study sought to explore the *nature* of child and youth care work in South Africa, and thus required a nuanced, detailed set of perspectives on the subject. This is characteristic of a qualitative enquiry (Creswell 2015: 5). The study sought to access personal, individual perceptions on the research question, which is a hallmark of a qualitative approach to research (Neuman 2012: 49). The study did not seek numerical data, such as the numbers of child and youth care workers in a particular setting, which would have required adoption of a quantitative approach to the study (Creswell 2015: 5). Rather, it intended to understand the *quality* of the area under review, taking into consideration multiple complex perspectives on the matter, and it sought to make sense of the perspectives of the participants. In this way, the study envisioned arriving at a position of clarity and articulation on the area of study.

The study thus sought to *understand* and to *describe* the nature of child and youth care work in a South African context, rather than explain or measure the subject. The latter is characteristic of a quantitative approach (Fouché and Schurink 2011: 308). All of these intentions lend themselves to a qualitative approach to research. In addition, this study aimed to obtain information that is best suited to a qualitative methodology, in that it did not seek causal linkages between phenomena, or an understanding of a large amount of data (Creswell 2015: 5). In qualitative research, the aim is less to check known phenomena, but instead to “discover and explore the new” (Flick 2018: 7). At the conclusion of a qualitative research study, the researcher ought to have gone

beyond confirmation of what had already been established to develop fresh perspectives that emerged from the data analysis (Flick 2018: 130). It is for these reasons that a qualitative research methodology was selected for this study.

The next section provides a comprehensive overview of the term 'research design', with special attention given to exploratory and descriptive designs, and the design utilised in this study.

3.2.5 Selection of research design

The term 'research design' has been described as meaning 'strategies of inquiry' (Denzin and Lincoln 2011, cited in Creswell and Creswell 2018: 49). As mentioned, the term 'research design' can also be used to denote the process of planning a study, which includes collecting and analysing data that will enable the researcher to provide answers to the research questions (Ragin 1994, cited in Flick 2018: 98). Essentially, a research design follows the research intention. It is necessary for the researcher to select a particular and specific approach to research (Creswell and Creswell 2018: 259). This provides a plan which becomes "translated into concrete procedures" (Flick 2018: 98). After having chosen an approach to the study, the researcher is required to select a particular design that will guide the research process (Creswell and Creswell 2018: 49). Researchers are required to articulate the reason for the choice of research design, including data collection and data analysis methods to address the research question, and thus consciously employ a particular design (Fouché and Schurink 2011: 323).

A qualitative study can be used in pursuit of varied goals (Flick 2018: 98). Goals can include the description of a situation or context, or the exploration of phenomena in order to establish "what is going on" (Flick 2018: 99). Palays (1992: 80) offered four types of designs that are based on the objectives of the research, in other words, what the research sets out to achieve. These are as follows: exploratory, descriptive, relational, and explanatory. An exploratory researcher seeks new data for illuminating the phenomenon being studied (Stebbins 2011a: 59). An exploratory design is used when the researcher embarks on seeking to understand something that has not been fully understood and articulated previously, where there is a newness to the process of understanding being undertaken, and where articulation of the nature of the study

subject is required (Fouché and De Vos 2011: 95). Exploration can be considered a “distinctive way of conducting science – a scientific process – a special methodological approach” (Stebbins 2011b: 4). Qualitative data is generally obtained when undertaking exploratory research (Fouché and De Vos 2011: 96).

Fouché and De Vos (2011: 96) contended that exploratory and descriptive designs have both similarities and differences. Descriptive research, observed Rubin and Babbie (2005, cited in Fouché and De Vos 2011: 96), leads to a “thicker description” following an “intensive examination of phenomena”. In descriptive research, the researcher aims to provide an accurate description of the area being studied (Fouché and De Vos 2011: 96). However, Stebbins (2011b: 4) described exploratory research as being designed to uncover generalisations and to lead to a “description and understanding of an area of social or psychological life”. Fouché and De Vos (2011: 96) observed that in practice, exploratory and descriptive research may blend.

In an exploratory study, no attempt is made by the researcher to provide a conclusive analysis of the matter being studied (Daniel 2012: 237). The research question in this study sought to articulate the essence of child and youth care work as practised in South Africa, in other words, to explore and describe the practice of child and youth care work, which is an area that has not been researched. Hence, a design that is in line with this intention to initially examine and describe the subject was selected as the framework for the study. Exploratory studies seek answers to questions of “what” (Mouton 2001, cited in Fouché and De Vos 2011: 95).

This study sought to answer the question of what child and youth care work is in South Africa. However, in doing so, it also sought to describe the phenomenon under study. For this reason, an exploratory, descriptive design was considered best suited for this enquiry. Given the paucity of academic enquiry on the nature of child and youth care work in South Africa, this study endeavoured to engage with the subject in a manner that intended to enter new territory of understanding. Hence, the research approach was selected to support this exploration and provide, through an exploratory process, what Stebbins (2011b: 4) referred to as “descriptive facts”.

Now that the reader has a better understanding of the qualitative methodology employed in this study, and the exploratory and descriptive designs that are utilised, a description of the context and study setting is provided next. Knowledge of the context sets the stage for more informed consideration of the study's methodology.

3.3 Study setting

In qualitative research, the matter of the context of a study is a serious consideration (Gibbs: 2007: xi). Flick (2018:13) maintained that qualitative research focuses on gaining perspectives from participants within "their local context". The aim of this study was to explore the manner in which child and youth care work is practised in South Africa. Accordingly, the setting for this study was the South African context. The enquiry was not confined to a particular geographical area, but rather was spread across three major centres in three provinces. This was done to ensure that the data collected was as representative of the South African situation as possible. In this way, the study obtained the views of practitioners across several provinces and did not simply confine the data collection process to a single geographical area within South Africa. Three geographical areas were selected, given the limitations of the study in respect of the size of the undertaking. The three biggest provinces, namely the Western Cape, Gauteng, and KwaZulu-Natal were targeted for the following reasons:

- Gauteng is the most populous province in South Africa, with more than 25% of the country's population living in its smallest province (over 15 million) (Statistics South Africa 2020). KwaZulu-Natal is second place (over 11 million), followed by the Western Cape (over 7 million) (Statistics South Africa 2020);
- Hall (2019a: 216) showed that the majority of children reside in Gauteng and KwaZulu-Natal, each with over 4 million children. The Western Cape is the fifth province with the largest number of children, with close to 2 million children;
- In these metropolitan areas, services, particularly residential care services, continue to be concentrated (South Africa, DSD 2016: 78); and
- The South African Council for Social Service Professions (2020) reflects that of the number of social service practitioners registered (over 6,000 child and youth care workers and more than 30,000 social workers at different levels), the majority are located in these three provinces.

The next few sections define the concepts of 'universe', 'population' and 'sample' as understood in the context of research. Although closely related to each other, these concepts are not the same, and therefore need to be defined. The sections below also delineate the 'universe', 'population', and 'sample' used in this study.

3.4 Study population

The term 'population' can be described in relation to the term 'universe', which connotes all of the individuals that fall into a particular defined group, that is, all of the possible subjects in any one category (Brynard, Hanekom and Brynard 2014: 57). It refers to the universe of all possible subjects that are defined as possessing particular qualities required for the study (Strydom 2011: 223). It is thus the totality of those who are categorised or described in a particular manner. The term 'population', however, is a subset of any universe. It is a term that limits groups "of persons, events, organisation units, case records or other sampling units" (Strydom 2011: 223) that are linked to the research problem who, in addition to possessing the attributes of the universe, possess further qualities that have been defined by the researcher as falling into a definable group. A population is a defined group that possesses all of the qualities of the universe, but also has qualities that set it aside from all of the other subjects in that universe.

Daniel (2012: 9) indicated that it is essential for the researcher define the target population clearly, prior to making any sampling decisions. With regards to this study, the universe was described as the total number of persons who are child and youth care workers – novices or experts, working or unemployed, registered with the SACSSP or not, resident in South Africa or not; or who are associated with child and youth care work by virtue of the fact that they are employers of child and youth care workers. The populations studied, which are subsets of the universe of this study, totalled five in number.

The criteria according to which the target population in any study is defined, should specify factors that include participants, as well as those which exclude participants (Daniel 2012: 9). In qualitative research, the researcher defines these criteria prior to the initiation of the research and collection of the data (Flick 2018: 174). In this study,

the researcher defined inclusion and exclusion criteria, which are listed in section 3.5.5 below.

Much of the time in research it is not feasible and practical to study the entire universe or even study populations. For this reason, samples are often selected to represent the population. The sampling process and the participants that formed part of this study are described in more detail below.

3.5 Study sample

This section defines the term ‘sample’ (sub-section 3.5.1); explains the sampling strategy used in this study (sub-section 3.5.2 and sub-section 3.5.3); and unpacks the study sample (sub-section 3.5.4). It also delineates the inclusion and exclusion criteria (sub-section 3.5.5) for selecting the participants, as well as provides an overview of the sampling process (sub-section 3.5.6). These are discussed in more detail below under their respective sub-headings.

3.5.1 Definition of a sample

The term ‘sample’ connotes a section or subset of an entire population which is deemed to hold the properties or attributes of the entire population (Brynard, Hanekom and Brynard 2014: 57). A sample is a “scaled-down version of the population mirroring every characteristic” of the whole (Lohr 1999: 3). A sample is a selection of a subset of a particular group (Gravetter and Forzano 2003, cited in Strydom 2011: 223). In referring to a sample, what is connoted is a proportion of the total population, not the whole population, and a sample is studied when the entire population would be impossible or onerous to study. By selecting a proportion of the population to study, which has the same attributes as the population, it is possible to generalise the findings of the study to the entire population (Strydom 2011: 222).

Having identified in the sections above who will be studied, it is now necessary to consider possible strategies to recruit the participants. There are a number of strategies that can be used to obtain one’s study sample. The sampling strategy utilised in this study is described next.

3.5.2 Nonprobability sampling strategies

Flick (2018: 605) described the 'process of sampling' as the "selection of cases or materials for the study from a larger population or variety of possibilities". There are two distinct approaches to sampling, viz. probability sampling and nonprobability sampling. *Probability sampling* is termed such, since in using this procedure, there is a probability that every element in the population has the same probability of being included in the sample (Daniel 2012: 66). Probability sampling is associated with the extrapolation of the research findings to the entire population (Lohr 1999: 23; Flick 2018: 182). A probability sampling approach involves a randomised process of selecting participants. This approach does not involve the researcher in the selection of the participants in a subjective way, but leaves the probability of any single participant being selected to chance. This form of sampling has as a strong point the possibility of statistical extrapolation from the findings (Daniel 2012: 67).

Nonprobability sampling is an approach where elements of the population are not included in the study (Daniel 2012: 66). Nonprobability sampling is not associated with accurate generalisation to the population (Maree and Pietersen 2016: 192). However, it is not always the aim of research to generalise the research findings to the entire population (Edmonds and Kennedy 2017: 19). This approach is normative in qualitative enquiries (Strydom and Delpont, 2011: 391). Flick (2018: 182) stated that decisions on sampling must take into account factors of width or depth. The width criteria are associated with attempting to include a broad representation of the population in order to substantiate the position reached by the research, while the depth criteria refer to an approach of "concentrating on single examples or certain sectors of the field" (Flick 2018: 182).

The sampling technique adopted in this study falls into the category of nonprobability sampling, which is a sampling process that targets specific respondents who are perceived to be knowledgeable on the topic, and are thereby able to provide valuable data to illuminate the research questions (Strydom and Delpont 2011: 391). This approach was selected because the study did not seek to include all possible members of the population with equal probability. It sought to obtain the perspectives of certain groups within the total population of child and youth care workers and people

associated with child and youth care workers. Within these groups, participants were consciously targeted in order to obtain high quality data.

Having explained and opted for nonprobability sampling above, the next section considers a specific type of nonprobability sampling, namely, *purposive sampling*.

3.5.3 Purposive sampling

A range of nonprobability sampling techniques are applied in qualitative research. Daniel (2012: 82) outlined four key approaches to nonprobability sampling, one of which is *purposive sampling*. The latter is an approach where participants are intentionally selected because of what they can possibly contribute to the study (Daniel 2012: 87). Purposive sampling is intentional sampling where the intention of the researcher is to include some participants and exclude others with particular characteristics (Strydom and Delpont 2011: 392). Purposive sampling is a non-probability method that allows for the selection of participants based on a set of criteria specified by the researcher (Daniel 2012: 88). Strydom and Delpont (2011: 392) referred to purposive sampling as one of their seven identified nonprobability sampling techniques. Purposive sampling can also be described as judgemental sampling (Rubin and Babbie 2005: 247, cited in Strydom and Delpont 2011: 392). Purposive sampling techniques target specific cases because of what they can contribute to the area being studied (Flick 2018: 182). In purposive sampling, the researcher applies judgement to the selection of the participants in the study to consciously select participants “who have experienced the central phenomenon or the key concept being explored in the study” (Creswell and Plano Clark 2011: 173). Given that rich in-depth data was being sought in this study, and that the researcher consciously intended to select participants to provide this quality of perspective on the field of child and youth care work, a purposive sampling technique was adopted in this study.

When using a purposive sampling technique, the researcher clearly defines the inclusion sampling criteria as well as the criteria for exclusion. In this way, the researcher narrows down the possible participants in a sample and is explicit about the choices made in this winnowing process. This relies on the judgement of the researcher in relation to the distillation of participants within the different samples. This is a favoured method in qualitative research, as it allows for the researcher to make

conscious judgements about the target population prior to undertaking the sampling process (Daniel 2012: 9). As a result of following these procedures, samples are likely to provide the richness of data required for a particular enquiry.

The five samples selected for this study are described in the section below.

3.5.4 Study sample

Daniel (2012: 1) stressed the importance of sound sampling procedures and good preparation of samples, noting that the value of a study is diminished if poor sampling procedures have been used, since the sample does then not provide an authentic link to the population as a whole. Whilst there is no clear rule for the size of a sample to be used (Patton 1990, cited in Nieuwenhuis 2016: 84), (Creswell and Plano Clark (2011: 186) stated that the samples used in qualitative data collection are smaller than those used in quantitative data collection. It is important in qualitative research to strike a balance between a sample size that is too overwhelming to allow for the extraction of quality data, on the one hand, and is too limited to impact on the possibility of achieving data saturation, on the other hand (Sandelowski 2010, cited in Nieuwenhuis 2016: 84). Some authors have provided observations on their estimations of size requirements in relation to different kinds of studies (Nieuwenhuis 2016: 84). Generally, however, qualitative enquiries have limited, small sized samples (Hesse-Biber 2017: 54) in order to yield detailed, in-depth data on a subject (Creswell 2015: 5).

This was the case in this study, where small sample sizes were chosen with the view to obtaining data which provided depth on the research question. The size of the samples is described below. However, given that data saturation is key to the quality of qualitative research, this was the principle applied in approaching sample size (Nieuwenhuis 2016: 83). Accordingly, a certain sample size was outlined in the research design, but the principle of saturation was employed in undertaking the study, determining the final sample size. These numbers therefore represent the number of participants who were included in the study, as well as the researcher's estimation of the saturation point level. The study included multiple data collection processes, broadly including five distinct samples with different data collection methods. These are described in Table 3.1 below.

Table 3.1 Number of samples and participants

Sample Number	Population	Data Collection Method	Number of Data Collection Processes	Total Number of Participants
1	Employers of child and youth care workers	In-depth interviews	5	5
2	Auxiliary level child and youth care workers	Focus groups (x3)	3	23
3	Professional level child and youth care workers	Focus groups (x3)	3	21
4	Local child and youth care work experts	In-depth interviews	4	4
5	International child and youth care work experts	In-depth interviews	4	4
Total				
5	5	2	19	57

In summary, the five samples included: (1) the employers of child and youth care workers; (2) child and youth care workers functioning at auxiliary level; (3) child and youth care workers functioning at professional level; (4) local child and youth care work experts; and (5) international child and youth care work experts. The numbers of participants were determined in two different ways. For all five samples, data was collected until saturation was reached.

However, when making choices concerning the sample, it is important to establish a number of inclusion and exclusion criteria to identify and select the participants, and which are appropriate to address the research questions the study plans to answer. This is the focus of the next section.

3.5.5 Inclusion and exclusion criteria in samples

A targeted selection process with set criteria for selection, as enunciated below, was used in selecting the participants. Maree (2007, cited in Strydom and Delport 2011: 392) asserted that it is crucial that the researcher clarify the criteria for selection of

participants in the study in order to maximise the benefit of purposive sampling, and select the appropriate participants for the study. Selection criteria were therefore set for the inclusion of participants in the study, as were exclusion criteria. Inclusion criteria are criteria that must be met in order for participants to be considered for participation in the study (Daniel 2012: 9). Exclusion criteria are factors that disqualify someone from participating in the study (Daniel 2012: 9).

The inclusion and exclusion criteria for each of the five samples are listed below:

- **Sample 1 – Employers of child and youth care workers**

- Inclusion criteria for the participants included:

- Having at least five years' experience in the field of child and youth care practice or of social work in a child and youth care setting;
 - Having at least five years' experience in a managerial position at a child and youth care centre or a community-based child and youth care project; and
 - Holding a degree in either education or the social service professions.

- Exclusion criteria for the participants included:

- Having less than five years' experience in the field of child and youth care practice;
 - Having less than five years' experience in a managerial position at a child and youth care centre or a community-based child and youth care project; or
 - Not holding a degree in either education or the social service professions.

- **Sample 2 – Auxiliary level child and youth care workers**

- Inclusion criteria for the participants included:
 - Having at least five years' experience in the field of child and youth care work direct practice;
 - Holding a Further Education and Training Certificate in child and youth care work (FETC: CYCW); and
 - Having the capacity to communicate in English in a professional context;
- Exclusion criteria for the participants included:
 - Having less than five years' experience as a child and youth care worker;
 - Not holding a Further Education and Training Certificate in Child and Youth Care Work (FETC: CYCW); or
 - Not having the capacity to communicate in English in a professional context.

- **Sample 3 – Professional level child and youth care workers**

- Inclusion criteria for the participants included:
 - Being employed in a child and youth care work direct practice or supervisory position; and
 - Being in possession of either: (1) a registration certificate issued by the SACSSP indicating registration with the statutory body at professional level, or (2) a B Tech degree in child and youth care work.
- Exclusion criteria for the participants included:
 - Not being employed in a child and youth care direct practice or supervisory position; or
 - Not being in possession of either: (1) a registration certificate issued by the SACSSP indicating registration with the statutory body at professional level, or (2) a B Tech degree in child and youth care work.

- **Sample 4 – Local child and youth care work experts**

- Inclusion criteria for the participants included:
 - Having at least five years' experience in the field of child and youth care practice;
 - Having at least five years' experience in either: (1) a managerial or specialised child and youth care work position, or (2) teaching child and youth care work at a tertiary level;
 - Having completed at least a (1) graduate level degree in child and youth care work, or (2) a master's degree in child and youth care work, or (3) having served on the PBCYC; and
 - Being registered with the SACSSP at professional level.
- Exclusion criteria for the participants included:
 - Having less than five years' experience in the field of child and youth care work practice;
 - Having less than five years' experience in either: (1) a managerial or specialised child and youth care work position, or (2) teaching child and youth care work at a tertiary level;
 - Not holding at least a (1) graduate level degree in child and youth care work, (2) a master's degree in child and youth care work, or (3) not having served on the PBCYC; or
 - Not being registered with the SACSSP at professional level.

- **Sample 5 – International child and youth care work experts**

- Inclusion criteria for the participants included:
 - Being a citizen of the USA or Canada;
 - Having published at least four articles on child and youth care work in international and local child and youth care work publications;
 - Having had experience of the South African child and youth care work environment through having provided training in child and youth care work in South Africa;
 - Having had engagement with the local professional association for child and youth care work for a period of at least ten years.

- Exclusion criteria for the participants included:
 - Not being a citizen of the USA or Canada;
 - Having published fewer than four articles on child and youth care work in international and local child and youth care work publications;
 - Not having had experience of the South African child and youth care work environment through having provided training in child and youth care work in South Africa;
 - Not having had engagement with the local professional association for child and youth care work for a period of at least ten years.

The sub-section above delineated the inclusion and exclusion criteria used to select the participants for this study. In regard to the sampling process, some authors have suggested a number of steps to follow in order to obtain a suitable and relevant sample. These are looked at below.

3.5.6 Overview of the sampling process

Daniel (2012: 5) outlined six steps to be followed in selecting a sample. These were followed in the sampling process undertaken.

The first step linked to preparation, where the researcher is required to carefully consider the purpose and objectives of the study as well as the research design (Daniel 2012: 5). This process was followed by the researcher, leading to the decision to pursue a qualitative approach.

The second step encompassed choosing between using the entire population or a sample of it for the collection of data (Daniel 2012: 5). A decision was made to select a sample, eschewing the option of using a form of census, as that would not have yielded the nuanced and textured data that is required to understand a complex phenomenon as the matter under study. Given that the design of the study was exploratory and descriptive in nature, a decision was made to select a sample to be studied, which was expected to yield descriptive and clear information on the nature of child and youth care work in a South African context.

Daniel (2012: 6) stipulated that the third step in the sampling process involved selecting the sample design from three options, namely: probability sampling, non-probability sampling, and a mixed methods approach. In the selection of a non-probability sampling process, the “idea is not to generalise from the sample” (Creswell and Plano Clark 2011: 174). Given that this is a qualitative study, and that participants’ subjective views on the subject matter were sought to illuminate the research question, a non-probability approach was chosen. Daniel (2012: 69) noted that nonprobability sampling is suited to situations in which the research seeks to explain a phenomenon, as was the case in this study.

The fourth step identified by Daniel (2012: 6) was the selection of the type of sampling design which falls into the selected approach. In the category of the non-probability sampling method, a number of types of methods are available to the researcher. This study adopted a purposive sampling approach to allow the researcher to select participants on the basis of their likelihood to provide useful data.

The fifth step in selecting a sample is the determination of the size of the sample (Daniel 2012: 7). In an exploratory study, a small sample is often sufficient (Daniel 2012: 237). An estimation of the size of the samples that was required was made in the planning process, and the principle of saturation was applied. Saturation refers to the point in the data collection process where information obtained from additional participants “does not add substantially to the codes or themes being developed” (Creswell 2015: 77).

Finally, the sixth step outlined by Daniel (2012: 7) concerns the process of making the selection of the sample. This was undertaken in line with the preparations made in the first step.

Having discussed in the sections above all the main elements related to the study sample, the next two sections deal with data collection (section 3.6) and the data collection process (section 3.7) followed in this study.

3.6 Data collection

Section 3.6 focuses on the data collection phase of the research. The first sub-section (3.6.1) looks at the methods used to collect the data in this study. This encompasses the types of interviews used (discussed under sub-headings 3.6.1.1. and 3.6.1.2). The second sub-section (section 3.6.2) looks at the data collection tools used (discussed under sub-headings 3.6.2.1. and 3.6.2.2).

3.6.1 Data collection methods used

Typically in qualitative research, data collection and data analysis are not viewed as two separate processes, but are instead integrated in a manner that allows the researcher to reflect on the gathered data, identify gaps in the research, and then address these gaps by gathering more data (Nieuwenhuis 2016: 87). In this way, the data collection process is dependent on an analysis of data collected during the process of undertaking the research, and the approach to data collection can be adjusted during the course of the data collection process. Most research is based on a specific method of data collection (Flick 2018: 130). In this regard, the researcher approached the data collection process with a plan for the process.

Many forms of data can be used in research. In the context of qualitative studies, a frequently used form of data is “talk as data” (Flick 2018: 60). Two clear data collection processes are frequently associated with qualitative research approaches, namely: individual *semi-structured in-depth interviews*, and *focus group discussions* (Flick 2018: 61). Semi-structured interviews provide the context in which the researcher is able to obtain complex non-superficial information from respondents (Gillham 2000: 19). Focus groups are basically group interviews where participants interact with one another as well as with the interviewer or facilitator (Morgan 1997: 6). It is acknowledged that the literature does not place value on one methodology above another, but on the selection of an appropriate data collection approach for the particular situation or study (Greeff 2011: 341). The reasons for the choice of these data collection methods in relation to the five samples are provided in sub-sections 3.6.1.1 and 3.6.1.2 that follow.

Table 3.2 Data collection methods and objectives

Sample Number	Population	Data Collection Method	Objectives
1	Employees of Child & Youth Care Workers	In-depth Interviews	<ul style="list-style-type: none"> • To determine the roles and functions of child and youth care workers; • To explore the nature of child and youth care work; • To explore the extent to which tertiary/post-school education has prepared child and youth care workers; • To investigate what further knowledge and skills may be required for child and youth care workers to function effectively;
2	Auxiliary Level Child & Youth Care Workers	Focus Groups	<ul style="list-style-type: none"> • To determine the roles and functions of child and youth care workers; • To explore the nature of child and youth care work;
3	Professional Level Child & Youth Care Workers	Focus Groups	<ul style="list-style-type: none"> • To determine the roles and functions of child and youth care workers; • To explore the nature of child and youth care work; • To explore the extent to which tertiary/post-school education has prepared child and youth care workers; • To investigate what further knowledge and skills may be required for child and youth care workers to function effectively
4	Local Child & Youth Care Work Experts	In-depth interviews	<ul style="list-style-type: none"> • To determine the roles and functions of child and youth care workers; • To explore the nature of child and youth care work;

			<ul style="list-style-type: none"> • To explore the extent to which tertiary/post-school education has prepared child and youth care workers; • To investigate what further knowledge and skills may be required for child and youth care workers to function effectively
5	International Child & Youth Care Exports	In-depth interviews	<ul style="list-style-type: none"> • To determine the roles and functions of child and youth care workers; • To explore the nature of child and youth care work; • To explore the extent to which tertiary/post-school education has prepared child and youth care workers; • To investigate what further knowledge and skills may be required for child and youth care workers to function effectively

3.6.1.1 Semi-structured in-depth interviews

An *interview* can be described as “a social interaction which is set up to exchange information between the participant and the researcher” (Greef 2011: 342). An interview has a quality of intentionality to it, the intention being on the part of the researcher (the interviewer) to extract information from the participant (the interviewee) (Nieuwenhuis 2016: 92; Gillham 2000: 1). In the case of qualitative interviews, the aim is to gain a clear view of the interviewees’ perspective on the subject under discussion. Hesse-Biber (2017: 107) observed that in-depth interviews are useful in situations in which the researcher has refined the issue that requires attention and focus, and on which the researcher wishes to gain individual perspectives. He described in-depth interviews as “knowledge producing conversations” (Hesse-Biber 2017: 116). Flick (2014: 218) remarked that in-depth semi-structured interviews provide the opportunity for the interviewer to understand the “subjective theory” of the participant on the matter of enquiry. In other words, the interview provides the context in which the researcher is able to discern an individual’s personal sense-making constructs of a particular matter.

Different authors have provided descriptions of various types of interviews. Flick (2014: 211-236) referred to the following types of interviews: focused interviews; semi-standardised interviews; and problem-centred interviews. Nieuwenhuis (2016: 93) outlined three variations of individual interviews as follows: open-ended or unstructured interviews; semi-structured interviews; and structured interviews. Unstructured or semi-structured interviews are typically used in qualitative research (Greeff 2011: 347). These terms denote an interview process which is at once bounded and open-ended. This allows for a focus on the subject being researched, as well as for the flexibility to allow the participant to move the conversation in the direction desired by the participant (Flick 2018: 217). In this form of interview, the structure or standardisation allows for the interview to be managed, whilst the partial nature of the structure or standardisation allows for the interviewer to pursue points of interest that arise during the course of the interview (Nieuwenhuis 2016: 93; Flick, 2014: 215). This balance of structure and openness allows for the subjective point of a participant to be expressed.

This data collection method was used in relation to three samples. They were: (1) employers of child and youth care workers; (2) local experts in the field of child and youth care work; and (3) international experts in the field of child youth care work. It was considered appropriate to use this data collection method for the following reasons. Firstly, the purposive sampling process allowed for the selection of participants who would, by definition, have subjective experience and expertise in the area to be studied, and could therefore be expected to be able to articulate their subjective experience of the research topic. Secondly, the researcher considered that the interviews which were prepared for, guided (as are semi-structured interviews), and of sufficient depth (as are in-depth interviews) would allow for full exploration of the subject matter. Individual in-depth semi-structured interviews were used with participants in each of the three samples mentioned above, since each of these samples could be considered to have expert knowledge on the subject matter which could be accessed through this data collection methodology. The researcher intended to provide scope for participants to contribute these perspectives, and therefore, a semi-structured interview process, which allows for questions to be answered “openly and extensively” by participants, was selected (Flick 2015: 140). The researcher also did not wish to run the risk of holding unstructured interviews. Such interviews

essentially extend and formalise conversation (Greeff 2011: 348) and may potentially not have achieved consistency across interviews (Greeff 2011:349), thus yielding less useful data.

The researcher imposes on the data collection process in relation to the degree of structure or lack of it applied in the interviewing process (Hesse-Biber 2017: 114). The greater the structure of the interview and the more bounded the subject matter, the more delineated is the scope of the interview. For this reason, the researcher considered a semi-structured approach to balance the desire of the researcher to obtain relevant data, with the desire to ensure that the voices of participants were authentically expressed and recorded. In-depth interviews are, as described by Hesse-Biber (2017: 116), meaning-making partnerships.

The advantages of individual in-depth semi-structured interviews, particularly aligned with the qualitative approach to research, lies in the conversational approach of such interviews, which allows the narrative to be determined to a certain extent by the interviewee (Hesse-Biber 2017: 113). A pitfall of such a method of data collection is the key disadvantage associated with qualitative enquiry, which is possible subjectivity. The literature also points to researcher skill as a potential disadvantage (Greeff 2011: 343), in that an incompetent interviewer can impact greatly on the quality of the data obtained through this particular collection method.

Whilst interview formats are familiar to most people through the media, as well as through personal experience, it is generally considered that the researcher must approach the interview situation with due consideration and preparation in order to ensure that an interview yields the desired quality of data (Greeff 2011: 343). The interviewer must be skilled in interviewing techniques in order to ensure a satisfactory result (Greeff 2011: 343). Regardless of the measure of familiarity between interviewee and interviewer, the situation of being interviewed creates a context of formality that must be considered as a factor in the interviewing process. However, interviews are required to be “conversational” in nature (Creswell and Plano Clark 2011: 9). It is therefore the responsibility of the researcher to create a context of sufficient rapport and connectedness with the interviewee to ensure that the interviewee is sufficiently at ease to be able to express his or her thoughts and opinions

about the subject matter in the fullest and most useful manner. Many authors have comprehensive suggestions on how to ensure interviewing success, and these were taken into consideration by the researcher when approaching the interview process (Nieuwenhuis 2016: 94; Greeff 2011: 343-347; Hesse-Biber 2017: 128).

3.6.1.2 Focus groups

As indicated, interviews with groups of participants are generally termed ‘focus groups’ (Nieuwenhuis 2016: 95; Flick 2014: 243; Morgan 1997: 2). Focus groups are a relatively new approach to research in the social sciences (Morgan 1997: 2). They have become popular as a manner of allowing the researcher to understand “what the key issues, ideas and concerns are from multiple participants at once” (Hesse-Biber 2017: 149-150). Focus groups are conducted in a manner that encourages and deliberately provokes engagement between the participants on the topic at hand (Nieuwenhuis 2016: 95).

Morgan (1997: 2) noted that focus groups may be used in three different manners of data collection, namely: (1) as the stand-alone principal source of data; (2) as a source of data supplementary to another data collection method; and (3) in a multi-method study where several different data collection methods are employed. In this study, as has been pointed out, two methods of obtaining data were used, namely: *individual interviews* and *focus groups*. Focus groups were thus used in a multi-method approach. An advantage of focus groups is their use of the synergy which may be generated within a group to “uncover important constructs which may be lost with individually generated data” (Greeff 2011: 374). Focus groups were thus used in this study to complement the data generated in the individual in-depth interviews with the data that emerged through a more complex process of communication and engagement, as is characteristic of focus groups.

Focus groups are considered to be ideal for obtaining data of an exploratory nature (Hesse-Biber 2017: 150). Focus groups exemplify some of the core strengths that are attributed to the qualitative method of research in relation to this explorative nature, and given that they take into account the context of the study, they allow for depth of engagement with the topic, and provide the opportunity for interpretation of data (Greeff 2011: 362). However, a weakness of focus groups is that they are susceptible

to the influence of the researcher. Nevertheless, as Morgan (1997: 13) pointed out, this is true of qualitative research in general. The disadvantages of focus groups were further considered in the planning of the study. One of the possible disadvantages of this methodology lies in the intentionality of the researcher, in that focus groups have gained a reputation for being a quick-fix solution to data gathering (Morgan 1997: 13; Greeff 2011: 363). Morgan (1997: 13) stated that both the strengths and weaknesses of focus groups derive from the “the reliance on the researcher’s focus on the group’s interaction”. In order to ameliorate the possible negative impact of this on this study, trustworthiness was ensured. This is discussed further under section 3.9 below.

The researcher was aware that the topic for discussion in the focus groups was not particularly sensitive. Should the latter have been the case, the focus group approach would not have been an appropriate choice. Participants are required in a focus group to offer opinions and provide their perspectives on the subject on which the group is focused (Greeff 2011: 363). Participants would have been unlikely to feel comfortable in expressing such opinions if the subject matter had been of a delicate nature. However, the subject under discussion was familiar to the participants, and did not require them to reveal vulnerable aspects of themselves. Therefore, this potential disadvantage did not present itself in this study. Focus groups were conducted with two of the samples in this study. A total of six focus groups were held to collect data from Samples 2 and 3. Sample 2 comprised three focus groups which included 25 participants. Sample 3 also comprised three focus groups with a total of 20 participants.

3.6.2 Data collection tools

This sub-section presents the data collection tools for the semi-structured individual interviews (sub-section 3.6.2.1) and the focus groups (3.6.2.2).

3.6.2.1 Data collection tools for semi-structured individual interviews

In the context of qualitative enquiry, the interviewer comes to the semi-structured interview with a prepared set of questions. These are used as a guide to maintain clarity of vision for the interviewer in the context of the multiplicity of information which may be brought to the data collection process by the interviewee (Hesse-Biber 2017: 114). In semi-structured interviews, the approach to questioning the interviewees is

customarily considered and developed by the researcher prior to engaging in the interview situation (Nieuwenhuis 2016: 93). An interview schedule or interview guide provides a clear set of areas for questioning for the interviewer to pursue within the interview (Hesse-Biber 2017: 114). The advantage of having a predetermined set of guiding questions, is that it can assist in avoiding the interviewer being thrown off course in the interview by information that arises during the interview session (Nieuwenhuis 2016: 93).

These questions then form what is known as the 'interview guide' (Flick 2018: 217). The interview guide ensures that the interviewer remains focused and able to cover all of the data collection points required (Greeff 2011: 353). The interview guide is thus an aid to the interviewer, and a mechanism for ensuring the quality of the data collection process. In semi-structured interview situations, the interviewer is required to engage with the participant in a manner that sets the participant at ease, and allows for his or her most focused and full engagement in the interview (Greeff 2011: 353). An interview guide is created in a written format (Greeff 2011: 352), and requires the researcher to give consideration to the interview prior to it taking place. Hesse-Biber (2017: 115) described the process of creating an interview schedule as one of identifying a series of "lines of inquiry" from which questions are distilled.

Whilst the interview schedule serves as a guide for the interviewing process, it should not rigidly limit the possible questions to be asked by the interviewer (Hesse-Biber 2017: 116). Neither should it prevent the interview experience from taking on the flavour of an ordinary conversation between people, including interaction and two-way communication (Hesse-Biber 2017: 110). The researcher was aware that the interview schedule would only form the 'skeleton' of the interview.

The interviewees were selected based on the reasonable assumption that they would have broad personal reservoirs of information on the subject under consideration, from which they would be able to draw. It was therefore essential for the interviewer to guide the interviewees appropriately in order to access relevant aspects of what was anticipated to be their considerable knowledge on the subject, and thus prevent them from being distracted by superfluous or tangential streams of thought (Flick 2014:

217). Interview questionnaires, or interview schedules, can be considered “methodological aids” in semi-structured interviewing (Flick 2014: 217).

An interview guide provides an outline of the “topical areas” to be covered in the interview (Flick 2017: 218). The researcher was aware that semi-structured interviews require a focus on both the content of the interview, as well as process within the interview. This means that the interviewer must not only focus on what is being said, but also how it is said (Greeff 2011: 347). The interviewer was aware that her predisposition would be to focus on the comfort and non-verbal communication of the interviewees in favour of a balanced concentration on both aspects of the interview. It was for this reason that an interview guide was developed to assist the interviewer to keep track of the information gathering process within the context of the interpersonal engagement which characterises a semi-structured interview.

Gillham (2000: 21) expressed that interview questions need to be distinct from one another to facilitate the engagement and motivation of participants and interviewees. Too much overlap leads to data analysis complexities, but distinct questions allow for the interviewee to feel that each question is important and pertains to distinct content to be shared. The process of developing an interview schedule requires the researcher to delineate the nature of the information that she requires to extract from the interview (Greeff 2011: 349). An interview guide, according to this author (2017: 115), may or may not include sets of questions linked to each of the domains of enquiry identified.

In the process of designing the interview schedules to be used with the various samples in this study, the researcher was mindful of the three types of questions which may be asked, as identified by Flick (2014: 218). These include: *open questions*; *theory-driven and hypothesis-directed questions*; and *confrontational questions*. In semi-structured interviews, open questions or semi-structured questions are most frequently used, and structured questions, or closed questions, are rarely used (Flick 2015: 140). In creating the interview schedules, the researcher used only *open questions* and did not ask questions from either of the latter two categories. The interviewer highlighted for herself distinct areas of enquiry, and then formulated these into open questions, to which the interviewee would be able to respond in a fulsome manner with his or her subjective perception on the line of enquiry. In designing the

interview schedule, the researcher brainstormed the broad areas of inquiry, and then positioned these in a logical sequence. Questions which would mine the perceptions of interviewees on these different lines of inquiry were then developed, bearing in mind the importance of the questions being both unambiguous and value-free (Greeff 2011: 352). Several drafts of the interview schedule were constructed before the researcher was satisfied that closed questions had been eliminated from the schedule and replaced with open questions. Greeff (2011: 352) also noted that the interviewer must be mindful of the issue of the sensitivity of the questions when ordering the questions. However, the researcher determined that the questions were not of sufficient sensitivity to require consideration of this factor in the ordering of the questions, and so consideration of the creation of a logical order to the questioning process was paramount.

Each sample required a customised interview guide, so that three interview guides were devised for each of the three samples in which the data collection method used was in-depth semi-structured interviews. These are appended as indicated in Table 3.3 below:

Table 3.3 Interview guides for in-depth interviews

Sample Number	Population	Data Collection Method	Interview guide
1	Employers of Child & Youth Care Workers	In-depth Interviews	Appendix 3
4	Local Child & Youth Care Work Experts	In-depth interviews	Appendix 12
5	International Child & Youth Care Experts	In-depth interviews	Appendix 15

3.6.2.2 Data collection tools for focus groups

Morgan's (1997: 48) comment that focusing on developing a strong interview schedule is as important in preparing for focus groups as "managing the actual group dynamics", served to alert the researcher to the significance of the interview guide as a support for the interviewer. In a focus group, the interviewer is often termed a 'moderator'

(Morgan 1997: 2). It is the role of the moderator to direct the conversation and discussions (Nieuwenhuis 2016: 96). However, it is nonetheless essential that the moderator has a clear sense of the direction in which such a conversation must be steered in order to obtain participants' perspectives on the topics of enquiry for the study. For this reason, Morgan (1997: 47) suggested that it is important for the researcher to have a clear guide to be followed across different focus groups. Morgan (1997: 48) noted that the interview guide has a similar degree of impact on the production of data as the skill of the moderator. For this reason, the researcher paid attention to the interview guide, drafting it on four occasions prior to undertaking the first focus group.

In relation to the data collection tools for the focus groups, a similar process was followed as outlined above in relation to the in-depth semi-structured individual interviews. Whilst focus groups are considered to be fora in which "rich conversation occurs", it is noted that such conversations are not spontaneous, but take place in a contrived situation, regardless of how skilled and facilitative the moderator may be (Hesse-Biber 2017: 152). For this reason, the researcher paid significant attention to the process of delineating the topics for discussion in the group, and the verbal approach to the introduction of these topics through writing out detailed interview schedules. Flick (2015: 140) warned against the use of leading questions which suggest that a particular response is required from the participant.

In preparing an interview guide, the researcher paid attention to the suggestion of Greeff (2011: 352) that an appropriate manner of creating an effective interview guide is to begin with outlining themes that the researcher may wish to enquire about, and work towards creating questions around each of these topics. Key points of enquiry were identified by the researcher, and open-ended questions were then created in relation to each of these topics. The approach of Greeff (2011: 352) was followed by the researcher in refining the interview schedules. Having identified the themes to be explored, and creating open-ended questions in relation to each of these, consideration was given to ensuring that there was a logical progression in the ordering of the questions. Given the interactional possibilities within focus groups where interpersonal dynamics are at play, and where individuals may feel uncomfortable if they are not able to contribute to a question, the researcher attempted

to ensure that the sequence of the topics started with the least complex, increasing in complexity. This measure was applied in order to prevent any possible discomfort on the part of any of the participants.

This approach yielded an interview schedule where five key topics or themes were identified for discussion. Sub-themes were delineated in relation to each, yielding ten possible questions in each schedule. Questions were written out as a standardised format for the introduction of each of these themes and sub-themes across all of the focus groups in each sample. Each draft saw a refinement of the open-endedness of the questioning, and the interview guide was greatly refined before being used in the first focus group.

Interview guides were developed for each of the focus groups. These are appended as indicated in Table 3.4 below.

Table 3.4 Interview guides for focus groups

Sample Number	Population	Data Collection Method	Interview guide
2	Auxiliary level Child & Youth Care Workers	Focus Groups	Appendix 6
3	Professional Level Child & Youth Care Workers	Focus Groups	Appendix 9

Having explained the data collection tools above for the individual and focus group interviews, section 3.7 below now guides the reader through the actual data collection phase of the study.

3.7 Data collection process

This section focuses on the process of collecting the data, with special consideration given to the details of the preparation phase (sub-section 3.7.1) and settings where the data was collected (sub-section 3.7.1). This is followed by an explanation of the

data collection process (sub-section 3.7.3), followed by a few comments on the challenges that were encountered during the collection of the data (sub-section 3.7.4).

3.7.1 Researcher preparation for data collection process

The researcher prepared for the interviewing process. She was aware that the role of the interviewer is to listen to the verbal and non-verbal communication of the participant in an active and engaged manner, allowing participants to provide the content of the interview whilst responding to all the utterances of the interviewee through either non-verbal acknowledgement, or verbal responses and further probes (Hesse-Biber 2017: 111). It was noted that the time allocation for an interview should be between one and two hours (Hesse-Biber 2017: 110). This expectation of the amount of time the interviews would take was therefore communicated to the interviewees when the logistical arrangements were made in an effort to avoid time pressure from impacting on the quality of the interviews.

This preparation proved to be of value, in that most of the face-to-face interviews proceeded largely as planned. The interviews also proceeded smoothly after a period of initial adjustment by some of the participants who were less known to the interviewer. However, in three of the focus groups, two or three participants either were unable to attend at the last minute, or needed to leave the group early due to public transport difficulties being experienced, resulting in lower numbers of participants than expected. Nevertheless, the quality of the data obtained was not affected by these lower participant numbers, as the remaining participants were very forthcoming in the encounters.

Preparations made by the researcher for the interviews that were held electronically were, however, not sufficiently thorough. The interviewer failed to take into account the possible interruption to the electrical supply due to unannounced load-shedding in planning the first international interview. This resulted in the cancellation of the interview due to there being no Internet connection with the interviewee. The researcher learned from this experience, and therefore ensured that an alternative data connection was in place for all of the other interviews that were undertaken. Additionally, a problem was experienced with one participant who was in New Zealand at the time of the interview. The Internet connection resulted in a poor audio

connection, and the collection of less information from this participant than had been anticipated. Given that this was a problem that emerged as a result of the quality of electronic infrastructure between the two countries, the researcher was not able to repeat the interview with any hope of a better result. However, what could be gleaned from the interview and the density and richness of the data received from the remaining three international expert interviews, meant that the study was not unduly impacted by this factor.

It was expected that the focus groups would require at least two hours for completion, and this expectation was clearly communicated to all participants prior to the focus groups taking place. This proved to be a correct estimation of the time that the focus groups took, including the time which was anticipated as needing to be used to set a relaxed atmosphere, and round up after the completion of the focus groups.

‘Gatekeepers’ are defined by Flick (2007: 157) as persons who are able through their positions to “formally or informally” regulate access to the field to be studied. The gatekeeper letters are appended (see Appendices 16 and 17) in relation to samples 1, 2, 3 and 4. The letters to the gatekeepers appealed for these persons to allow the participation of the participants selected for inclusion in the study, and were sent to those in relationships of direct authority over the participants. Where required, these letters were sent to the employers of the child and youth care workers falling into samples 2 and 3, and in the case of the employers themselves (sample 1), to the managing bodies of the organisations where they worked. In relation to the experts, letters were likewise sent to their employers. The letters sought permission from the persons in a position of authority in the participants’ workplaces for them to participate in the study, providing all necessary information on the study as well as information on the confidentiality of the data, data retention, and the application of the information gleaned from the study.

In relation to the international experts (sample 5), gatekeeper letters were not required. This was because three of the experts are retired, and the fourth was not approached through his place of employment, which meant that he was not representing this institution, but was participating in the research in a personal capacity.

3.7.2 Data collection settings

This sub-section describes the setting for both the individual and focus group interviews.

3.7.2.1 Individual interview settings

The majority of the interviews took place in face-to face settings. All of the interviews with the international expert participants, however, took place electronically, as did two interviews with local experts. The matter of the importance of attending to the comfort of the interviewee or interviewees is postulated by numerous authors (Greeff 2011: 353; Hesse-Biber 2017: 111; Morgan 1997: 54). Individual interviews should be conducted in settings which allow for privacy (Hesse-Biber 2017: 111). Such settings are then conducive to both the full attention of the interviewer being directed to the interviewee, as well as the full attention of the interviewee being focused on the process. Bearing this in mind, the interviewer took steps to ensure that the interviews were conducted at venues that were convenient for the participants. Participants chose the settings most suited to themselves. All but one were held in office settings, either at the office of the participant or the office of the researcher, as per the choice of the participant. One participant chose to be interviewed at her home.

The interviews that took place electronically, via Skype, were done in this manner to accommodate either the needs of the participant, or the matter of geographical distance, as in the case of the international participants. In these instances, the participants were able to choose the time and setting of the interview which suited them most, allowing for the international time differences to reasonably accommodate the interviewer. In such instances, the consideration of setting was not necessary, but consideration of the electronic software to be used in the interview was the prerogative of the interviewee. In order to accommodate the preferences of participants in respect of such software, the interviewer equipped herself with the popular forms of video communication software available, namely Skype and Zoom. Participants were asked during the initial approach by the researcher to specify their preferred method of communication. All elected to use Skype, and the interviewer contacted the participants via this method at the appointed times.

3.7.2.2 Focus group settings

Focus groups took place in three provinces, namely, Gauteng, KwaZulu-Natal, and the Western Cape, which required the researcher, resident in the Western Cape, to travel to the other two provinces to undertake the focus groups. Flick (2016: 96) stated that a focus group does not constitute a “natural social setting”, even when the researcher takes measures to normalise the setting for the focus group. Notwithstanding this, it is the responsibility of the researcher to create the context in which participant interactions are as unstilted as possible, and where discussions on the subject matter can take place as naturally as possible (Flick 2016: 96). Further, focus groups must take place in a setting which allows for the recording of the interaction (Morgan 1997: 54). This requires the selection of a quiet environment for the interview. Morgan (1997: 55) indicated that an essential element of a setting for a focus group is a table, such as those used for conferences and meetings. The researcher therefore decided that the setting most conducive to holding the focus groups would be an office setting, since this would be the most natural setting for people who are unfamiliar to each other to engage with one another on a particular topic. In addition, it would be quiet and provide a room with a table suitable for meeting.

3.7.3 Outline of the data collection process

The data collection process followed a broadly sequential process. The process was envisaged as one where the interviews with the participants from samples 1 and 4 (that is employers of child and youth care workers and local experts in youth care work) would be interspersed between the focus groups. It was planned to conclude the data collection process with interviews with the international experts.

The rationale for beginning with individual interviews with participants from the samples of employing individuals and local experts, was that it was assumed that they would provide a sense of the expectations of child and youth care workers by organisations and the extent to which these expectations were being met, as well as a ‘birds eye view’. The perspective of the employers would give a sense of the expectations of child and youth care workers from a group who were not themselves child and youth care workers, or who were child and youth care workers and who no longer worked in direct practice. This group would therefore provide a view somewhat external to those of participants directly involved in child and youth care work practice,

and the view of those who are in authority over child and youth care workers. It was anticipated that the participants in the sample of local experts would provide perspectives that would be more complex, and linked to national trends. It was anticipated that the employer and expert participants would provide data on four of the objectives, namely: *the role and functions* (Objective 1) and *the nature of child and youth care work* (Objective 2) as well as the *educational preparation* (Objective 3) and *further skills and knowledge they need* (Objective 4). These objectives were likewise anticipated to be illuminated by the international experts as well as the professional level child and youth care workers. The auxiliary level focus group participants were expected to provide data in relation to two of the objectives, viz. *the roles and functions of child and youth care workers* (Objective 1), and *the nature of child and youth care work* (Objective 2).

The researcher considered that sandwiching the focus groups involving child and youth care workers between individual interviews would provide an opportunity to reference child and youth care worker perspectives with those of local experts.

The focus groups were undertaken on a province by province basis, beginning with the two groups in Gauteng. In Gauteng, the first group undertaken was the auxiliary level group (Sample 2), and the second group was the professional level group (Sample 3). Further focus groups were then held in KwaZulu-Natal, and the final two focus groups took place in the Western Cape. The final phase included local employers and experts, Samples 1 and 4, and the interviews with the participants from Sample 5, the international experts. It was expected that the international experts would provide an overall, external, international perspective on the range of perspectives, opinions, and information obtained within South Africa.

This process took place over a period of six months, and allowed for initial analysis of data collected at each point in the process. This meant that after each of the data collection episodes, the researcher was able to commit to writing up some of the interviews which had taken place in that particular phase, and conduct some basic analysis on the data before proceeding with the next phase. In instances where the timing of the interviews did not allow for the transcription of one interview or focus group before another, the researcher was able to review the recording of the interview

or focus group. This allowed for the researcher to be able to use the data collected in an iterative manner. The researcher was able to obtain information from each stage of the collection process, and use the following stage of data collection to clarify or build upon information obtained in that phase. The same process was applied within each of the phases of data collection. The information obtained in the first set of focus groups with child and youth care workers was reviewed by listening to the recordings prior to the second set of focus groups being initiated. Individual interviews held with employers and local child and youth care work experts were adapted in relation to the data obtained in the previous phases of data collection.

Prior to the interviews beginning, participants received letters of information about the research. See Appendices 1, 4, 7, 10 and 13 for templates of these letters. Participants were requested to sign forms which indicated that they were consenting to participation in the study from an informed position. See Appendices 2, 5, 8, 11 and 14 for templates of the informed consent forms. During each of the interviews and focus groups, participants were made aware of the fact that the researcher was recording the conversations. It was further made explicit that the purpose of this recording was for the researcher to be in a position to transcribe the information provided by participants. It was also explained that the transcriptions would be used to analyse the responses made by participants in the interviewing process. It was explained that this analysis would form the substance of the findings of the entire study.

The next section explores some of the challenges that occurred during the data collection process.

3.7.4 Challenges in the data collection process

The challenges and complexities encountered are discussed in relation to the individual interviews (sub-section 3.7.4.1) and focus groups (sub-section 3.7.4.2) that were conducted.

3.7.4.1 Challenges in relation to the individual interviews

The process of interviewing requires a sense of rapport to be established between the researcher and the participant (Legard, Keegan and Ward 2003: 143). The interviewer

is required to take account of this and prepare for the interview process (Legard, Keegan and Ward 2003: 143). This was taken heed of by the researcher, who prepared thoroughly for the interviewing and focus group processes, and who found that this was indeed an essential investment in obtaining complex and comprehensive sets of data. The researcher found that participants, even those well-known to the researcher, felt initially hesitant and self-conscious when the interviewing process was initiated. The researcher therefore applied skills obtained in serving as a social service practitioner in creating an atmosphere of relaxed collegiality. In order to do this, the researcher connected with the participants on a level of shared experiences, allowed sufficient time for small talk and the establishment of situation-specific rapport prior to initiating the interview, and brought humour into the interactions in order to dissipate any potential anxiety on the part of the participants.

Where interviews were held electronically, the researcher was conscious of spending time with the interviewee in adjusting the microphones and cameras so that the interviewee could be most at ease. This brief period of adjusting the equipment further allowed for an extended period of small talk and for participants to become familiar with the style of interaction, and more comfortable with the interview context. The researcher further clarified the exact nature of the interviewing process, the time each interview would be expected to be completed, and the fact that individual opinions were being sought and that there were no objectively correct answers to any of the questions being asked. She further clarified the matter of confidentiality, anonymity, and transcription.

3.7.4.2 Challenges in the focus groups

Focus groups are mistakenly considered to be inexpensive and easy to make happen (Greeff 2011: 363). The researcher, however, was not under this misapprehension in undertaking the focus group processes since she was very mindful of the fact that participants would require compensation for all transport, and that it is customary in South Africa to provide refreshments at any meeting. In addition, the researcher was aware that focus groups need to be well planned in order to ensure their success. This preparation allowed the researcher to anticipate that there would be expenses associated with running focus groups, and that participants would need clear

instructions as to the venue for the groups as well as the times that they were to be held.

From the researcher's experience, the logistics concerning meetings, such as transport options, and information on venues and scheduling, is often confused or miscommunicated. For this reason, she was particularly mindful of setting up clear arrangements and paying attention to all aspects of the logistical arrangements associated with the focus groups to ensure that they were able to take place as planned. The South African tradition of 'tea on arrival' was followed in all the focus groups where basic refreshments were provided, and participants had an opportunity to mingle prior to engaging in the focus group. Participants were made aware beforehand that this would be the format of the engagement; and funding for transport was provided for participants who needed this prior to them coming to the focus groups or interviews. A participant in one of the focus groups mentioned that the participants felt cared for as a result of these arrangements.

A key consideration for the researcher in undertaking the focus groups, was her experience and skill level in implementing focus groups. "The richness of the data collected is therefore linked to the potential for interaction and synergistic exploration of the topic by the group members, but that advantage can only be experienced in the context of the researcher managing the process or moderating the group in a skilful manner" (Morgan 1997: 6). A disadvantage of focus groups includes the fact that group dynamics may allow only dominant people to participate. A challenge experienced by the researcher in running the focus groups did link to the presence of dominant individuals, who were present in all groups. The researcher was therefore required to limit the contributions of some participants and actively seek participation from others. Another challenge that was not anticipated prior to the implementation of the focus groups was the extent to which participants were eager to make their contributions. This enthusiasm required management by the researcher to ensure that participants were reassured that they would all be provided with an opportunity to make their contributions, and thus reduce the level of individual participants speaking more than what was necessary.

Having described the data collection phase of the research above, it is to the data analysis phase of the research that attention now turns.

3.8 Data analysis

Specific attention is given here to the nature of data analysis (sub-section 3.8.1.), more specifically, the nature of data analysis in this study (sub-section 3.8.2). The researcher then clarifies what data analysis encompasses (sub-section 3.8.3), and then looks at the approaches to data analysis used in this study (sub-section 3.8.4).

3.8.1 The nature of data analysis

Quantitative data analysis tests hypotheses using numerical data, whereas qualitative data analysis creates “new concepts and theory by blending together empirical evidence and abstract concepts” (Kreuger and Neuman 2006, cited in Schurink, Fouché and de Vos 2011: 399). Gibbs (2007: 5) propounded that a difference between quantitative and qualitative data analysis is that whereas the former seeks to reduce the data, the latter seeks to amplify and expand the material available for analysis. Qualitative data analysis is undertaken within the context of a wide variety of approaches, tends to provide platforms for further data gathering and analysis, and is less likely to provide a complete and final answer to the research question (Kreuger and Neuman 2006, cited in Schurink, Fouché and De Vos 2011: 399).

However, quantitative and qualitative data analysis approaches have a number of characteristics in common. Both methodologies employ processes of logical consideration underpinned by forms of evidence; both provide transparent research designs; both seek to discern patterns of likeness and similarity; and both are committed to seeking truthful representation of the process and a quality of integrity in the research (Kreuger and Neuman 2006, cited in Schurink, Fouché and De Vos 2011: 399).

3.8.2 The nature of data collected in the study

Qualitative data, however, are produced through three generally accepted data collection methods, namely: the *examination of documentation*; *direct observation*; and *enquiring of information or opinions from participants* (Flick 2015:131). Qualitative

data includes a variety of forms of human communication (Gibbs 2007: 3). It therefore tends to be documentary in quality, taking the form of words and text. Bogdan and Biklen (1998, cited in Schurink, Fouché and De Vos 2011: 399) described qualitative data as the raw material obtained by researchers in their studies, including researcher fieldwork notes, transcripts from interviews, and collateral documentation. These authors described data as “both the evidence and the clues” in a study (Bogdan and Biklen 1998, cited in Schurink, Fouché and De Vos 2011: 399). They commented that data provides the essence of the scientific nature of qualitative enquiry, moving studies of this nature from subjective speculation to a respectable scientific enquiry study (Bogdan and Biklen 1998: 106, cited in Schurink, Fouché and De Vos 2011: 399). Qualitative data is generally represented by text, rather than numbers, which means that the data is less precise and mathematical, and also tends to be context specific (Kreuger and Neuman 2006, cited in Schurink, Fouché and De Vos 2011: 399).

Data collected in this study was an assemblage of interview and focus group transcripts, fitting in with the observation that text is the most common form of data collected in qualitative research (Gibbs 2007: 3). Originally, the data was electronically recorded in the context of the researcher’s engagements with the individual and group participants in the study. It was then later transformed to the written word through a transcription process. Rendering the audio data into text allowed for the process of analysing to take place through the visual engagement of the researcher with the raw audio data obtained in the interviewing process. The qualitative data used in this study was therefore the opinions and observations expressed by the participants, rendered into accurate written form to allow the researcher to consider the data in an iterative manner. The transcription of the interview material provided a data form that is accessible to the researcher time and again as the analysis process takes place. Since the data analysis stage operates hand-in-hand with the data collection stage of the research, there must be congruence between these two stages to ensure that the nature of the data available for analysis fits the research design (Nieuwenhuis 2016: 110).

3.8.3 Defining data analysis

Schurink, Fouché and De Vos (2011: 399) observed that within the context of qualitative research, precise definitions of terms used are often difficult, if not

“impossible”, to formulate. They argued that this is true of a widely accepted definition of qualitative data analysis. Given this concern, however, many authors do provide definitions of qualitative data analysis that describe the process. The aforementioned authors, for instance, described qualitative data analysis as “a process of inductive reasoning, thinking, and theorising”, noting that empirical data is the foundation of this process (Schurink, Fouché and De Vos 2011: 399). They advanced that the researcher undertakes qualitative data analysis through a process of interpretation and induction, attempting a sense-making process of data produced by study participants.

Flick (2014: 317) defined qualitative data analysis in relation to its aims. He exclaimed that qualitative data analysis is the “interpretation and classification of linguistic (or visual) material”, aiming to pronounce on elements of “meaning making” in the data. This combines high level analysis with closer scrutiny, and finally makes pronouncements which can be generalised in some manner. This definition noted the fact that qualitative data analysis aims to articulate both “explicit and implicit levels of meaning” in the data. Nieuwenhuis (2016: 110) highlighted that the perspective with which the researcher approaches the entire process of data collection, ordering, and analysis, will be carried into the data analysis process. The approach to data analysis, therefore, must be congruent with the data collection strategy and process, and articulated at the outset of the study.

Gibbs (2007: 11-12) listed four aims of qualitative data analysis, namely, to: develop a theory; develop and refine hypotheses; provide an “in-depth description of social phenomena”; and develop a model that explains a phenomenon. Whilst the ultimate aim of the research was to create a model for the education and training of child and youth care workers, this was seen to be a product of an in-depth exposition and understanding of the phenomenon of South African child and youth care work, hence this understanding was sought through the data analysis in this study. Ultimately, the aim of qualitative data analysis is to lift the meaning implicit in the data to a level of explicitness whilst being scrupulously true to the data itself.

In undertaking the data analysis, the researcher was mindful of the enigmatic and seemingly dialectical points made by Schurink, Fouché and De Vos (2011: 399) that

data analysis could be engaged from both a scientific and an artistic paradigm. These authors affirmed that “when the emphasis is on science the analysis should be rigorous, disciplined, systematic and methodically documented ... when data analysis is treated more like an art it does not mean that it is a less empirical procedure” (2011: 399). Their observation warned the researcher to ensure that whilst the process of data analysis within a qualitative study such as this could be “ambiguous, creative and fascinating”, it was nonetheless important for the researcher to remain grounded within a scientific view in her engagement with the material being analysed.

Having defined and dealt with basic data analysis issues in research in the section above, the next section looks at the data analysis approach used in this study.

3.8.4 Approach to data analysis in the study

Schurink, Fouché and De Vos (2011: 400) made the point that notwithstanding the fact that there is a great deal of information available about how to approach data analysis, there remains a sense that there is a need for more information on the subject. This may be because it is difficult for a student to grasp the analysis process until he or she engages in it. A challenge in the analysis of data is that often an immense amount of data is collected, which then needs to be managed (Ritchie, Spencer and O'Connor 2003: 200).

Nieuwenhuis (2016: 110) asserted that whilst there are no set ways to go about data analysis, some guidelines exist to ensure that the researcher is able to produce results that stand up to the test of trustworthiness. Commonly used data analysis strategies include the following: hermeneutics, which is associated with the phenomenological approach, and embraces a dialectic between analysis of the whole and analysis of its constituent parts; conversation analysis, which seeks to find patterns in conversational interactions; discourse analysis, which seeks to analyse the use of language to uncover societal dynamics within specific contexts; narrative analysis, which analyses the story being presented in the data; and content analysis, which is a technique seeking to identify key elements of communication in a systematic manner and make inferences about these (Nieuwenhuis 2016: 110).

The researcher chose *content analysis* to apply in the study. Flick (2011: 163) described content analysis as “a classical procedure for analysing textual material”. Rosengren (1981, cited in Nieuwenhuis 2016: 111) described ‘content analysis’ as a group of analytic approaches, rather than a single approach. However, Nieuwenhuis (2016: 111) noted that content analysis allows the researcher to engage with a vast amount of data “with relative ease in a systematic fashion”. A content analysis approach aims to do exactly what these words specify, that is, analyse the content of statements that form the data. This is undertaken through a process of creating categories which are applied to text in the data collected (Flick 2011: 164).

Different authors identify different steps in the process of conducting qualitative data analysis, but largely agree that the data analysis process begins during data collection (Schurink, Fouché and De Vos 2011: 403; Nieuwenhuis 2016: 114-123; Hesse-Biber 2017: 143-144). The feedback loop between data collection and data analysis is recognised within the context of qualitative research to begin as soon as the first data set is collected. The ongoing feedback loop can be described as a data analysis spiral, and the analysis process “moves in analytic circles rather than using a fixed linear approach” (Creswell 2007, cited in Schurink, Fouché and De Vos 2011: 403). The researcher was therefore aware that it could not be expected that the analysis process would unfold in a step-by-step manner providing ever increasing clarity, but that the process may be messy, complex, confusing, and at times frustrating. This allowed the researcher to ‘stay with the process’ in a confident manner, being sure that ultimately the data would yield its empirical treasures.

On the one hand, Nieuwenhuis (2016: 114), for instance, considered there to be two general steps, with some steps articulated within them. These two general steps are (1) the preparation of data, and (2) the coding of data. However, Schurink, Fouché and De Vos (2011: 403-404), on the other hand, outlined three steps in the process of qualitative data analysis, namely: (1) preparing and organising the data; (2) reducing the data; and (3) visualising, representing, and displaying the data. The latter were the steps that were followed in this study. These are outlined below:

3.8.4.1 Stage 1: *Preparing and organising the data*

Schurink, Fouché and De Vos (2011: 43) proposed that the process of data analysis begins with the initial phase, which includes planning for the recording of data; it then moves into the collection phase, which incorporates preliminary analysis; it then progresses to the managing of the data phase, followed by the reading and writing of memos.

Planning for recording the data

Schurink, Fouché and De Vos (2011: 404) indicated the first step in preparing and organising data to be the attention paid to the process of recording the interviews. The recording process proceeded without hitches, and all of the recordings (except for one electronic recording as previously noted) were clearly audible for transcription purposes. In order to ensure that the recordings were kept, they were uploaded in the cloud and emailed to the researcher.

Data collection and preliminary analysis

Qualitative data analysis is a process that is integrated into data collection (Gibbs 2007: 4) and can begin as the researcher commences to collect the first set of data which can be analysed prior to the collection of the next data set. This approach was adopted in the analysis of the data in this study. As each interview or focus group was undertaken, it was followed by a process of preliminary analysis. In this regard, the researcher listened to each interview several times after the interview was conducted and made preliminary notes. This process involves “checking the data to see what is emerging from them and identifying hunches or ideas that need to be followed up (Grbich 2004, cited in Schurink, Fouché and De Vos 2011: 405). During this period, the researcher began to observe the emergence of possible themes and ideas for making sense of the data, which is a process described by Schurink, Fouché and De Vos (2011: 406).

Managing the data

Knowing that this data analysis process would be lengthy, intense, and complex, linking to many different data sets, the researcher was mindful of the fact that Ritchie, Spencer and O'Connor (2003: 201) stressed that the amount of data produced within the context of a qualitative study can be large, even “daunting” to the researcher. For

this reason, management and organisation was necessary to facilitate the researcher being able to engage with the material in an orderly manner within the context of a process which by definition is disorderly. Flick (2014: 371) stipulated that before analysis can begin, the data has to be prepared for analysis and organised. Since the researcher must familiarise him or herself with the data in an intimate manner, it is important to guard against the possibility of being overwhelmed by the data by ensuring that it is stored in an orderly manner that is easily accessible and retrievable. Transcription is essential for the purpose of creating a library of data that can be accessed and referenced at any point in the analysis process, for instance, when the researcher may need to cross-reference data from different interviews (Gibbs 2007: 18). Transcription was undertaken by an assistant using a combination of voice recognition software and manual review. After the completion of the transcription, the researcher reviewed the scripts and corrected any errors in transcription. During this process, the researcher familiarised herself with the recordings and checked them for accuracy. This enabled the researcher to include the non-verbal communication present in the interview and note these in addition to the verbal content, as suggested by Nieuwenhuis (2016: 115). The researcher heeded Gibbs' (2007: 18) concern that transcription changes the medium of the data from the spoken to the written word, which may result in some pithy elements being lost in the translation. It was therefore essential for the researcher to pay close attention to the non-verbal aspect of the interviews during the transcription process. Gibbs (2007: 19) further cautioned that "the general 'feel' of the session" may be lost in the transcription. Thus, the researcher found that reviewing the transcripts assisted in avoiding this potential pitfall.

Reading and writing memos

Researchers usually read through the transcripts a number of times in order to obtain a sense of the entirety of the data before a fragmentation process takes place (Schurink, Fouché and De Vos 2011: 409). For ease of reference, transcripts were printed single-sided in single line spacing, and then clipped together so that the researcher could flip back-and-forth between each of the transcripts. Whilst some authors (Gillham 2000: 62) recommend transcriptions to be written in double spacing, the researcher did not find double spacing helpful in accessing meaning in a text, and therefore did not follow this advice. However, Gillham (2000: 62) recommended leaving generous margins for note taking and coding. This recommendation was

followed, and ultimately proved to be helpful in the coding process. Gibbs (2007: 32) commented that in the process of analysing the data, many additional documents will be produced by the researcher, and this again has the potential to become out of hand if not organised in a suitable and disciplined manner.

3.8.4.2 Stage 2: *Reducing the data*

The second phase, according to Schurink, Fouché and De Vos (2011: 404), primarily comprises reducing the data, and encompasses the following three steps: generating categories and coding the data; testing emergent understandings; and interpreting and developing typologies. These are described in more detail below.

Generating categories and coding the data

Besides managing, transcribing, and organising data, as well as becoming familiar with the data, core to the process of qualitative data analysis is the process of coding the data. Flick (2014: 373) perceived the process of coding as a process of working with data “for generating concepts and for allocating excerpts of the material to categories”. Nieuwenhuis (2016: 116) further explicated coding as assigning transcribed data “into meaningful analytical units”. It is a process that involves identifying sections of data with a symbol or a specific name unique to that section of words. Gibbs (2007: 54) proposed that coding is “how you define what the data you are analysing are about”. He explained (2007: 54) that “coding is a way of indexing or categorising the text in order to establish a framework of thematic ideas about it”. The researcher understood coding to mean the process of marking text sections which connote a particular meaning or idea. Wertz (1983, cited in Nieuwenhuis 2016: 116) referred to “meaning units” within the text. Each meaning unit is assigned a symbol or a name to identify it as such during the coding process.

In order to code the material, the researcher must read the text very carefully, deeply, and intensively, so that the theoretical and analytical information, as well as the descriptive information contained within the text becomes apparent (Gibbs 2007: 57). The researcher found it necessary to read through all of the transcriptions several times before reaching a point of refining the data into codes. Following an initial refinement of the process, the transcribed documents were then re-read in part on numerous other occasions.

It is essential to create a method of undertaking the coding that works for oneself as a researcher. Gibbs (2007: 60) suggested the use of marking the text with highlighters or indicating the name of the code in the margin of the transcript. This approach was adopted by the researcher. However, code names were substituted for numbers to speed up the coding process. The researcher found that it was quicker to memorise numbers associated with the different codes and record these than to write out the code names.

Testing emergent understandings

The objective of coding is to enable the researcher to better examine and compare data by easily referencing and accessing text which carries similar meaning across the spectrum of data collected (Nieuwenhuis 2016: 116). Coding, the first step in the actual analysis process, focused on identifying ideas that are used for “labelling, sorting, and comparing excerpts” in the process of analysing the data (Flick 2014: 373). The coding process is not an end in itself, but is a means to an end, the end being the analysis of the data. Coding is a process that allows the researcher to think about the material by having reduced the plethora of information collected into a set of thematic areas which can be more easily grasped, and compared and contrasted across the transcriptions. This, then, enables the researcher to discern patterns and anomalies within the data. The coding process refines the immense amount of text into pieces that are useful for consideration and those that are not. The researcher uses a process of interpretation to make sense of the data once coded. During this stage of testing emergent understandings, it is necessary to make determinations on the usefulness of data in respect of the research questions (Schurink, Fouché and De Vos 2011:415). The researcher is required to review understandings reached, check for aberrant instances, and subsume understandings into bigger categories where necessary (Schurink, Fouché and De Vos 2011: 415). This process was followed by the researcher, and categories originally determined were reviewed and linked in a process of critical evaluation.

Interpreting and developing typologies

At this point in the data analysis process, it is necessary to dispassionately view the data at arm’s-length in order to “form broader opinions of what is going on with the data” (Schurink, Fouché and De Vos 2011: 416). At this stage in the process, the

researcher develops systems in which to cluster data (Schurink, Fouché and De Vos 2011: 416). The criteria applied in order to establish sound typologies are “exhaustiveness and mutual exclusiveness” (Schurink, Fouché and De Vos 2011: 416). The researcher considered the data in a way that allowed her to be sure that the categories reached for understanding the data do not overlap.

3.8.4.3 Stage 3: *Visualising, representing, and displaying the data*

The third phase is visually representing and displaying the data where there is a need to present the data in a particular manner (Schurink, Fouché and De Vos 2011: 403). In this final stage of the data analysis, data was represented schematically in tables in relation to key research questions. It was thereafter rendered into writing in the research report, which is a key aspect of the analysis (Gibbs 2007, cited in Schurink 2011: 419.)

Having discussed the three stages of data analysis followed in this study in the section above, the next section explains the importance of establishing trustworthiness in qualitative research, looking at the various key criteria that can be used to achieve this.

3.9 Trustworthiness

This section seeks to establish the trustworthiness of this research. To this end, researchers generally employ four key criteria. These are presented in the sub-sections that follow: credibility (sub-section 3.9.1); transferability (sub-section 3.9.2); dependability (sub-section 3.9.3), and confirmability (sub-section 3.9.4).

This study took place within the paradigm of the scientific method, where the term ‘validity’ is used to connote the adherence of the study to findings which accurately seek to answer the questions asked in the research (Edmonds and Kennedy 2017: 4). The strength of a study such as this rests on its validity (Schurink, Fouché and De Vos 2011: 420). Within qualitative studies, the term ‘trustworthiness’ is used to connote the question of the validity of the research (Edmonds and Kennedy 2017: 4). The trustworthiness of the data analysis as well as the findings and conclusions provide the assurance to external parties that the research may be trusted (Nieuwenhuis 2016:

123). Guba (1981, cited in Nieuwenhuis 2016: 123) set out the criteria for trustworthiness in the context of qualitative research as follows: credibility, transferability, dependability, and confirmability.

These four key criteria are described in more detail below:

3.9.1 Credibility

Credibility is considered to be the most important of these four criteria (Schurink, Fouché and De Vos 2011: 419). The credibility of the study links to the fit between the findings of the study with the actual situation that exists that is being studied (Edmonds and Kennedy 2017: 6). The concept is at times referred to as ‘authenticity’ (Schurink, Fouché and De Vos 2011: 419), and answers the question of whether the subject being researched has been accurately presented within the research, in other words, whether there is a clear connection between the perceptions of participants and the extrapolation and representation of these views by the researcher. The credibility of a study is determined in part by the extent to which the researcher provides an accurate representation of the complexities and permutations of the data in the research report, so that it is incumbent on the researcher to accurately detail all aspects of the study which may have had an impact on the findings reached. Lincoln and Guba (1985, cited in Nieuwenhuis 2016: 123) expressed that credibility rests on factors such as clear and defined purposive sampling, well-articulated data collection methods, and triangulation of the data.

The researcher applied all of the above strategies to ensure that credibility was achieved. She also attempted to provide a detailed description of all aspects of the research process to confirm credibility.

3.9.2 Transferability

The concept of *transferability* as it pertains to trustworthiness relates to whether the research findings would be found in another situation or case (Schurink, Fouché and De Vos 2011: 420). However, within the context of qualitative research, the matter of transferability is widely considered to be an inherent shortcoming in the approach (Schurink, Fouché and De Vos 2011: 420). Given that qualitative enquiry is generally linked to specific contexts, it may be difficult to generalise findings to situations other

than that of the specific research context. Guba (nd., cited in Schurink, Fouché and De Vos 2011: 420) undertook seminal work in this regard, which implored the researcher to be very clear on the detailed recording of the research design, as well as the sampling approach and the context of the research, which is referred to as providing a “thick description” of the research process. This allows for an external party to reach their own conclusions regarding the matter of transferability. A further option for increasing transferability is that of triangulation of a selection of data sources. In this way, data sources are checked against one another to ensure that the data informing the findings does not only link to the perceptions of a single participant or data source. The use of multiple groups of participants, thus, can be a way of enhancing the transferability of the study. Nieuwenhuis (2016: 124) noted that thoughtful participant selection to ensure that participants do represent a population is a further manner in which transferability can be assured.

The researcher attempted to ensure transferability in the context of the research design through the use of multiple groups of participants in focus groups, as well as in the context of individual in-depth interviews. The researcher further approached the content analysis process with consideration of transferability in mind. In this regard, she was mindful of avoiding reaching conclusions on single participant views. In addition, the researcher established a member checking process in order to obtain the perspectives of an external group on the accuracy of the research findings. Processes of checking by members is frequently used in qualitative research (Creswell and Plano Clark 2011: 211). Member checks validate data and interpretations by the researcher with members of the field being studied (Flick 2018: 548). Seven members were invited to participate in a validation process, which took place over three separate sessions. The seven members of this validation committee were either experienced and degreed child and youth workers, registered at professional level, or members of the PBCYC. In each of the three meetings held, the findings were presented to the committee for their interrogation. Members applied their minds to the findings in the course of these three sessions, resulting in some adjustments to the findings being made.

3.9.3 Dependability

The third criteria for ensuring trustworthiness in qualitative research is the concept of *dependability*. Lincoln and Guba (1985, cited in Nieuwenhuis 2016: 124) indicated that dependability is linked to credibility, in that ensuring credibility goes some way to ensuring dependability. Nieuwenhuis (2016: 124) further referenced these authors in noting that careful detailing of the research design, including “operational detail”, as well as journaling decision-making processes during the research, assists in creating a clear trail of researcher reasoning, particularly regarding the data analysis process. Dependability links to the logical nature of the research process, and the auditable nature of the findings (Schurink, Fouché and De Vos 2011: 420).

The researcher approached the process of data analysis with a consideration of the criteria of dependability, creating copious notes and documents in the process of reducing the data and reaching the research findings.

3.9.4 Confirmability

Confirmability asks whether the research has been undertaken in an objective manner to ensure that it is not the subject of interpretation of the researcher; it also seeks third-party confirmation (Schurink, Fouché and De Vos 2011: 421). The application of this criterion seeks to eliminate researcher bias. In order to ensure confirmability, the researcher must provide detailed notes and observations, and report on decision-making processes so that a third party would be able to discern the role of the researcher which inevitably will insert itself into the research. Nieuwenhuis (2016: 125) affirmed that the researcher develops relationships with the participants and, even when working with the data, may be either consciously or unconsciously tempted to manipulate the data to fit a particular bias or consideration. The researcher facilitates confirmability by being utterly transparent about the interpretation of data (Nieuwenhuis 2016: 125).

The researcher worked to ensure confirmability through being conscious of potential bias in the data analysis process, and through creating a paper trail of documents that provide a view on the process of interpretation of the data followed by the researcher.

Notwithstanding the articulation of these seminal concepts related to trustworthiness, the matter of quality in qualitative studies has been the subject of some criticism in that researchers have argued that the criteria described above seek to mimic quantitative research requirements (Schurink, Fouché and De Vos 2011: 421). Three categories of thinking on the matter of quality in qualitative research can be identified as follows: Firstly, that both paradigms of research should be evaluated by clear and universal standards; secondly, that measures for the evaluation of qualitative research ought to be specific to this paradigm; and thirdly, that qualitative research should not be evaluated on set criteria (Schurink, Fouché and De Vos 2011: 421). Flick (2007: 74) proposed that quality is not so much linked to the standardisation of aspects of research, but on the “soundness of the research as a whole”. Flick (2015: 237) argued that the quality of qualitative research is found in the sound management and documentation of the research process, including recording of decisions taken by the researcher during the process.

The researcher noted the complexity in the consideration of quality in qualitative research, recognising the impact of the postmodern perspective on researcher objectivity. This stresses the need not to imitate quantitative quality standards, but to “record a continuous critical analysis” of the researcher’s internal experience, including thoughts and feelings of the entire research process, with an emphasis on the need for mindfulness in respect of the fundamental and unavoidable intrusion of the researcher in the research context (Schurink, Fouché and De Vos 2011: 422). This conceptual understanding of the need for researcher consciousness throughout the research process was valuable to the researcher. She attempted, in the context of this study, to articulate her cognitive and emotional engagement throughout the process, as well as to follow the dictates of the earlier trustworthiness criteria.

It is highlighted that qualitative studies are characteristically more subjective in nature than quantitative studies, and that such subjectivity can emanate from both the researcher and the participants, and that whilst this very subjectivity is at the heart of the approach, steps must be taken to ensure that scientific rigor is employed in a qualitative study. Such a process involves (but is not limited to) the conscious setting aside of the perceptions of the researcher so as to avoid influencing the outcome of the research, a process known as ‘bracketing’ (Fouché and Schurink 2011: 317). The

researcher was aware of her familiarity with the subject of the study, and so applied the concept of 'bracketing' throughout the data analysis process.

Continuing to discuss the core elements of qualitative research, methods for data collection, and the analysis process, the next section looks at ethical considerations that need to be adhered to when conducting research, as researchers have an obligation to protect participants, put safety measures in place, and conduct research that is 'ethical'.

3.10 Ethical considerations

This section focuses on the *ethical considerations* adhered to in this study. Measures were taken to make sure that participants are not harmed in any way (sub-section 3.10.1); informed consent to participate was obtained (sub-section 3.10.2); participation was completely voluntary (sub-section 3.10.3); participants' right to privacy and anonymity were respected (sub-section 3.10.14); the relevance of the research was established (sub-section 3.10.5); the competence of the researcher to conduct the study was affirmed (sub-section 3.10.6); confidentiality was maintained at all times (sub-section 3.10.7); and correct protocols were followed for data storage (sub-section 3.10.8). These are discussed in more detail below, following the introductory comments of this section.

The researcher was aware that the institution where she was enrolled has a clear ethics clearance process that was required for all research being undertaken at the institution. This institutionalisation of ethical considerations, and rigorous review process provided an additional, external review of the ethical considerations in the study. Such institutionalised ethical review processes are normative in institutions of higher education where human beings participate in research studies (Flick 2007: 84). The role of an ethics committee is to give consideration to any risks associated with the research in relation to the potential benefits of the research (Flick 2011: 39). Ethical clearance was provided by the body responsible for this review only after considerable engagement and resubmissions of the research proposal, and this extended process underscored the importance of ethical considerations for the researcher. It further

brought to the awareness of the researcher the fact that, as indicated by Flick (2007: 85), ethical considerations begin at the point of proposal writing.

3.10.1. Avoidance of harm

Research needs to be conducted in an ethical manner and should be considerate of the participants. The principle of *avoiding doing harm* (non-maleficence) to people participating in the research is a fundamental consideration in any research, both quantitative and qualitative (Flick 2007: 89). This was therefore the first consideration of the researcher. The operative word in relation to this principle is 'avoidance', rather than minimisation of harm or amelioration of harm once inflicted (Strydom 2011: 115). It was acknowledged that participants should not suffer in any way as a result of their participation in the study. The concept of 'avoiding harm' does not only refer to physical discomfort, but is extended here to include emotional harm. Strydom (2011: 115) stressed that this is both difficult to anticipate or predict as well as to discern. It was obvious that the only physical discomfort that may arise from the research could be linked to inadequate public transport for people who may be inconvenienced as a result of inconsiderate scheduling of interviews, and the researcher avoided such discomfort through scheduling the focus groups at off-peak times. The primary consideration in relation to avoiding harm to participants was thus considered on an emotional level, and the steps taken by the researcher in this regard are discussed below.

Gibbs (2018: 13) asserted that participation in in-depth interviews may cause participants distress, in that they may be required to personally open up about matters in a way that they may not be accustomed with, and that this could result in them feeling sensitive, vulnerable, and exposed. It is the responsibility of the researcher to be sensitive to this possibility and interact with participants in a manner that demonstrates sensitivity to any potential discomfort on the part of the participant. The researcher took care to avoid asking sensitive questions in the interviews and focus groups. However, in one of the focus groups, one participant became somewhat emotional, and appeared to wish to unburden herself within the group. The researcher dealt with this matter through adopting an empathic response both through verbal and non-verbal communication, and in a timely manner moved the discussion back to the relevant questions using the interview guide.

3.10.2 Informed consent

A key ethical consideration in data collection is that of *informed consent*, where potential participants need to be clearly informed as to the exact nature of the research. This includes participants understanding what they will be required to engage with in the research, and what will take place after completion of the research (Gibbs 2018: 13). Potential participants need to be informed of the parameters of the research prior to their commitment to participate, so that they are able to make a decision to participate on the basis of having been informed (Gibbs, 2018: 13). Participants also need to be informed that they may cease to participate in the research at any stage of the process (Gibbs, 2018: 13). The principle of informed participation has its roots in the Nuremberg Code established after the Holocaust following the shocking experiments undertaken on imprisoned and powerless persons in Nazi death camps (Hesse-Biber 2017: 69). Hesse-Biber (2017: 77) expressed that there is both a “principal and reality” to the provision of informed consent, and that the very nature of qualitative research, where it is hard to define the course of the data collection process, and what may be evoked in participants through the questioning process, may mean that participants, even when appraised of what the researcher knows about the research process, may not actually know what they are committing to in participating in the research. It is therefore essential that should a participant in the research withdraw at any point, the participant has the right to stipulate that any research data collected from them also be destroyed or possibly provided to them (Gibbs 2018: 13). This ethic was applied in that when one participant did not attend a focus group, and another left a focus group early, the researcher did not react in any negative way to this behaviour.

3.10.3 Voluntary participation

Strydom (2011: 117) noted that various authors, including Babbie (2001) and Thomas and Smith (2003), referred to informed consent as *voluntary participation*. Strydom (2011: 118) also referred to the power imbalance between researcher and participants, noting that informed consent can be impacted by this power differential. It was therefore the responsibility of the researcher, as a person holding a leadership position within the child and youth care work field, to take special care to ensure that informed consent was obtained. The steps taken in this regard included outlining all of the parameters of the study prior to their engagement in the study. The voluntary nature

of participation was stressed with each participant. It was important for the researcher that it came across to potential participants that participation was genuinely voluntary, and that the researcher was not in any way using her leadership role to coerce potential participants to become involved in the study.

3.10.4 Anonymisation of data

A further principle related to ethical qualitative research includes *anonymisation* of data collected, which simply means that all data, including transcripts of data, should not in any manner expose the identity of either a group or an individual participant, which requires that the researcher take active, concerted, and effective steps to protect the identity of the participants (Gibbs 2018: 13). Related to the point of anonymity is the consideration of the *privacy* of the participants, where privacy relates to avoiding revealing information which is normally not shared beyond an individual or chosen intimate others (Strydom 2011: 119). In this regard, avoiding dissemination of identifiable information related to individual participants is required in the course of dissemination of research findings (Strydom 2011: 120). The researcher thus took care to ensure that links to particular participants were not discernible in the research report.

3.10.5 Relevance of the research

Consideration was given by the researcher to the matter of the *relevance* of the study as an ethical consideration. Undertaking superfluous research is considered to be unethical (Flick 2007: 86). It was determined that the area of study was by no means saturated by research. It was also considered that the participants in the study were not particularly characterised by vulnerability, and whilst this did not mean that the researcher would not need to be sensitive to the participants, it did not call for exceptional measures to be taken to protect the vulnerability of participants as may be the case if, for instance, children were engaged as research participants (Flick 2007: 86).

3.10.6 Competence of the researcher

Researchers are required to ensure they have sufficient *competence* to undertake a planned study (Walliman 2006, cited in Strydom 2011: 123). Two key points in the research process where ethical considerations are of particular concern are in the data

collection and data analysis phases. In relation to data collection, Flick (2007: 87) made the point that ethical considerations apply even in the focusing of questions, in that poorly constructed research questions could lead to more participants being engaged in the study than would be necessary if the questions were focused. This admonition was taken seriously by the researcher, and the researcher conscientiously attempted to ensure that the questions prepared for participants were thoroughly thought through and focused.

During the phase of data analysis, ethical considerations are paramount, especially with regards to the manner in which the analysis of the data takes place. Ensuring integrity in interpretation of the data is a key ethical responsibility for a researcher (Flick 2007: 91). In this regard, it is essential to avoid key pitfalls, such as generalisation, and reading interpretations into the data. The statement issued by Strydom (2011: 123) that the “entire research project must run its course in an ethically correct manner” became a mantra on ethics for the researcher during the project. A checklist on ethical considerations as per Patton (2002) was reiterated by Hesse-Biber (2017: 96). Flick (2011: 42-43) also provided a checklist on the matter, which included 14 points for consideration by the researcher. One of these considerations did not pertain to this study, but the remaining 13 had direct relevance to the study. In relation to both of these checklists, all of the relevant aspects of the ethical considerations are articulated in the above paragraphs of this section, and were taken into consideration in the planning, executing, and writing up stages of this study.

The researcher affirms that consideration of ethics must be maintained throughout the research process, and such considerations are not limited to the protection of individuals involved in the study and the data collection process (Flick 2011: 43). The researcher further professes that providing feedback to participants on the outcomes of the research is desirable and adds to the ethical weight of the research (Strydom 2011: 126). In this regard, the researcher undertook to send to participants any publications that may emerge from the study. In this way, the participants would be able to assess for themselves the application of the ethical principles to which the researcher had committed (Gibbs 2018: 143).

3.10.7 Confidentiality

Babbie (2001, cited in Strydom 2011: 120) referred to the principle of *confidentiality* as an ethical consideration, in that participants' views should be kept confidential by ensuring that as small a circle of people as possible are able to link participant identity with the data. The researcher approached the consideration of confidentiality by using the services of a technician involved in the transcription process who was appraised of the need for confidentiality.

3.10.8 Data storage and retention

There are also ethical considerations around the matter of *data storage and retention*. Flick (2007: 91) implored researchers to "avoid cemeteries of data". By this the author meant that data should be maintained for as long as is necessary, but not longer than necessary. However, Gibbs (2018: 141) observed that qualitative data may be of value at some point in the future, and that this should be taken into account as regards the decision as to the length of time to retain data. The researcher undertook to maintain the electronic and hardcopy data sets for a period of five years as per the requirement of the institution. However, bearing the latter point in mind, the researcher may consider approaching the institution during the five-year period to request the consideration of the university to archive the data in a central data bank for an extended period of time.

Some concluding remarks are provided next.

3.11 Conclusion

This chapter presented the research design that was followed in this study, along with a description of the qualitative methodology that was used, with reference to the exploratory descriptive design chosen for the research. The chapter then described the study setting and study population. Information on the sample used in the study was provided and the nonprobability sampling technique of purposive sampling which was used in the study was detailed. Inclusion and exclusion criteria for the five samples were provided, and the method of collecting the data from these samples was described. The manner in which in-depth interviews and focus groups were undertaken was also outlined. This was followed by a detailed description of the data

collection tools, as well as the data collection process that was undertaken. The approach to data analysis – content analysis – was then described, as were the steps taken to ensure the trustworthiness of the study. Lastly, the ethical considerations adhered to were also outlined.

The next chapter presents the data, analysis of the data, and the relevant findings that pertain to the data.

CHAPTER 4

DATA ANALYSIS, FINDINGS AND DISCUSSION

“In this context and the reality that by the end of the century almost half of the world’s population will be coming from this continent, South Africa is now very serious and is demonstrating its commitment to both developing and licensing a child focused children’s workforce” (Magida 2015a: 49).

4.1 Introduction

The previous chapters introduced the study under investigation (Chapter 1), the literature review on child and youth care work (Chapter 2), and the research methodology utilised in the study (Chapter 3). Chapter 4 is a presentation and analysis of the data and the findings related to the data. In line with the research questions, four categories of findings were interrogated. These included: (1) the roles and functions of child and youth care workers; (2) the nature of child and youth care work in South Africa; (3) the extent to which education had prepared child and youth care workers for the work; and (4) the further knowledge and skills required by child and youth care workers in the course of their education. In the **first category**, *roles and functions*, three (3) themes and thirteen (13) sub-themes were identified. In the **second category**, *the nature of child and youth care work*, two (2) subcategories were identified. The first sub-category included six (6) themes and sixteen (16) sub-themes. The second sub-category included two (2) themes and seven (7) sub-themes. The **third category**, *educational preparation of child and youth care workers*, included four (4) themes and nine (9) sub-themes. The **fourth category**, *further knowledge and skills needed*, included two (2) themes and five (5) sub-themes. These themes and sub-themes are outlined in Table 4.1 below. This chapter presents and describes the themes and sub-themes, substantiated with excerpts from the data, further supported by a literature control.

In addition to the Introduction, the chapter contains the following subsections: Participant identification (section 4.2); Data analysis, findings, and discussion of Category 1 (section 4.3); data analysis, findings, and discussion of Category 2 (section 4.4); data analysis, findings, and discussion of Category 3 (section 4.5); data analysis, findings, and discussion of Category 4 (section 4.6); and a brief conclusion (section 4.7).

Table 4.1. Overview of themes and sub-themes across all categories

Category 1: Roles and functions	
1.1 International roots of South African child and youth care work	
1.2 Core roles and functions	1.2.1 Providing care 1.2.2 Managing behaviour 1.2.3 Implementing developmental programmes 1.2.4 Engaging in developmental assessment 1.2.5 Maintaining planned environments 1.2.6 Facilitating play 1.2.7 Advocating for children and families 1.2.8 Working in multidisciplinary teams 1.2.9 Undertaking administration 1.2.10 Managing stakeholders and referrals
1.3 Applicability of the scope of practice	1.3.1 Captures salient roles and functions 1.3.2 Excludes complexity of practice 1.3.3 Distinguishes auxiliary from professional level

Category 2: The nature of child and youth care work in South Africa	
A. Nature of South African Child and Youth Care Work Practice	
2.1 Adapted to the context of poverty	
2.2 Framework of children's rights	2.2.1 Working in the best interests 2.2.2 Challenging violations 2.2.3 Promoting participation
2.3 Centrality of life-space work	2.3.1 Combining presence and action 2.3.2 Intervening developmentally and therapeutically through daily life events 2.3.3 Working with self
2.4 Primacy of relationships	2.4.1 Consciously building egalitarian relationships 2.4.2 Listening 2.4.3 Relating in the context of diversity

	2.4.4 Relating in time-bound contexts
2.5 Spirited care	2.5.1 The spirit of Ubuntu 2.5.2 Love in care 2.5.3 Work as a calling
2.6 Working with families	2.6.1 Prevalence of family work 2.6.2 Life-space work in families 2.6.3 Strengthening family relationships
B. Contextual Elements Impacting on South African Child and Youth Care Work	
2.7 The struggle for recognition	2.7.1 Limited understanding of the role 2.7.2 Invisibility in community settings 2.7.3 Blurred auxiliary and professional roles
2.8 Practice settings	2.8.1 Child and youth care centres 2.8.2 Community-based programmes 2.8.3 Educational settings 2.8.4 Health care settings

Category 3: The educational preparation of child and youth care workers	
3.1 Educational preparedness for the workplace	3.1.1 Beneficial aspects of education 3.1.2 Disjuncture between theory and real-world practice
3.2 Curriculum	3.2.1 Indigenising current curriculum 3.2.2 Situating practice in SA education 3.2.3 Complex life-space work
3.3. Teaching approach	3.3.1 Theoretical focus 3.3.2 Inappropriate placement settings 3.3.3 Insufficient practical exposure 3.3.4 Increased supervisory support
3.4 Limited access to education	

Category 4: Further knowledge and skills needed	
4.1. Teaching the essence of practice	4.1.1 Application of theory to practice 4.1.2 Self-development 4.1.3 Complex life-space practice
4.2. Indigenisation of child and youth care work education	4.2.1 Indigenous practice knowledge 4.2.2 Orienting to South African contexts

4.2 Participant identification

Participants in the study were either part of a focus group or engaged in an individual in-depth interview with the researcher. Tables 4.2 4.3 and 4.4 below provide demographic information on participants for identification purposes.

Table 4.2. Demographic data of participants involved in in-depth individual interviews

Pseudonym	Gender	Race
International Experts		
P1	Male	White
P2	Male	White
P3	Male	White
P4	Male	White
Local Experts		
P1	Male	Coloured
P2	Male	White
P3	Male	African
P4	Female	Indian
Employers		
P1	Male	Coloured
P2	Female	White
P3	Female	White
P4	Female	White
P5	Female	Indian

Table 4.3. Demographic data of participants at the professional level involved in focus groups

Participant Number	Gender		Race			
	M	F	A	C	I	W
Group 1: Western Cape						
1		✓	✓			
2		✓	✓			
3		✓	✓			
4		✓	✓			
5		✓	✓			
6		✓	✓			
7		✓		✓		
8		✓	✓			
9		✓	✓			
Total		9	8	1		
Group 2: Gauteng						
1		✓	✓			
2		✓	✓			
3		✓	✓			
4		✓	✓			
5		✓		✓		
6	✓		✓			
Total	1	5	5	1		
Group 3: KwaZulu-Natal						
1	✓		✓			
2	✓		✓			
3		✓	✓			
4		✓	✓			
5		✓	✓			
6		✓	✓			
Total	2	4	6			

Table 4.4. Demographic data of participants at the auxiliary level involved in focus groups

Participants Number	Gender		Race			
	M	F	A	C	I	W
Group 1: Western Cape						
1		✓	✓			
2	✓		✓			
3		✓	✓			
4		✓	✓			
5		✓		✓		
6		✓		✓		
7		✓		✓		
8	✓		✓			
9		✓	✓			
10	✓		✓			
11		✓	✓			
Total	3	8	8	3		
Group 2: Gauteng						
1		✓	✓			
2		✓	✓			
3	✓		✓			
4	✓		✓			
Total	2	2	4			
Group 3: KwaZulu-Natal						
1		✓	✓			
2		✓	✓			
3		✓	✓			
4	✓		✓			
5		✓	✓			
6	✓		✓			
7		✓	✓			
8		✓	✓			
Total	2	6	8			

4.3 Data analysis, findings and discussion of the roles and functions of child and youth care workers – Category 1

The analysis of the data in Category 1 was divided into three (3) themes and thirteen (13) sub-themes. These are described below.

4.3.1 Data analysis of Category 1

Category 1: Roles and functions

Table 4.5 below outlines a summary of the themes and sub-themes that have emerged under the category of *determining the roles and functions of child and youth care workers*.

Table 4.5 Themes and sub-themes of Category 1

Category 1: Roles and functions	
1.1 International roots of South African child and youth care work	
1.2 Core roles and functions	1.2.1 Providing care 1.2.2 Managing behaviour 1.2.3 Implementing developmental programmes 1.2.4 Engaging in developmental assessment 1.2.5 Maintaining planned environments 1.2.6 Facilitating play 1.2.7 Advocating for children and families 1.2.8 Working in multidisciplinary teams 1.2.9 Undertaking administration 1.2.10 Managing stakeholders and referrals
1.3 Applicability of the scope of practice	1.3.1 Captures salient roles and functions 1.3.2 Excludes complexity of practice 1.3.3 Distinguishes auxiliary from professional level

Figure 4.1 below provides a schematic representation of the roles and functions of child and youth care workers.

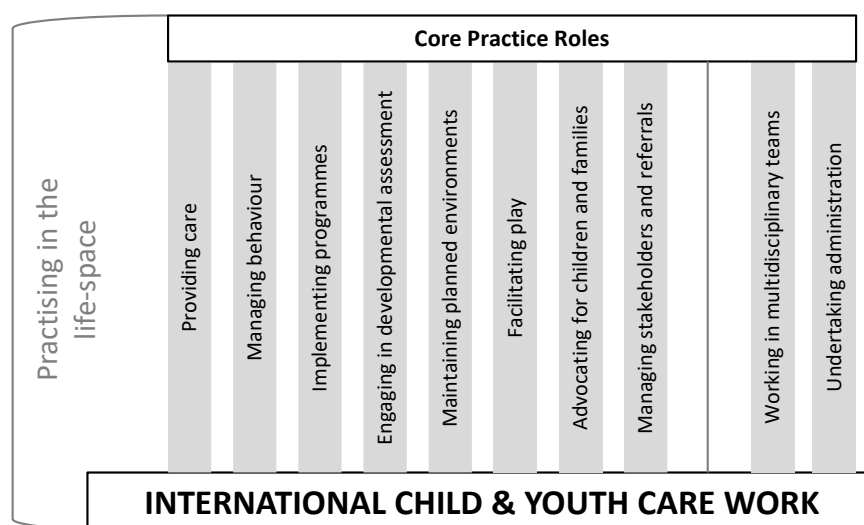


Figure 4.1 Roles and functions of child and youth care workers

Participants provided their views on the roles and functions of child and youth care workers as advanced in the themes that follow.

4.3.1.1 Theme 1: International roots of child and youth care work

The data reflected that South African child and youth care work is rooted in international knowledge. In this regard, the participants stated:

“[The scope of practice for child and youth care work] would fit almost anywhere [in the world] in terms of basic developmental needs, physical needs, behavioural, safety and all the rest, so using the daily events to create developmental progress and change.” [IE Interview 1, Page 3]

“So there clearly has been sort of a transfer of ideas.” [IE Interview 2, Page 1]

“I think one can easily identify core concepts in the field. Like life-space intervention, engagement, caring, relationship. All those keywords that are central to the field in Canada, in other European countries, are also central

to the work in South Africa, and that's readily visible, and many of the practitioners I have spoken to, use those words." [IE Interview 2, Page 1]

"The essence of what is child and youth care work practice and by that I mean that momentary engagement, the beating heart of child and youth care practice, has always been tremendously present. And whether it's present in that sort of educated way of 'can you tell me about it?' or whether it's present simply in the sense of sitting with kids, or cooking with kids, or just being in daily life and making a life of significance for young people, is one of the things that always impresses me as one of the greatest strengths of South African child care workers." [IE Interview 4, Page 1]

4.3.1.2 Theme 2: Core roles and functions

All participants described aspects of the roles and functions of child and youth care workers without distinguishing between auxiliary and professional levels. All roles and functions were contextualised within the concept of 'life-space work', as follows:

"For me, the roles and functions is to work in the life-space – in the moment." [AFG1, Page 1]

"By building a strong relationship with them, yes, by working in the moment; working in their life-space, making sure that by looking at the five dimensions of need, make sure that you cover those broken pieces. If, maybe, cognitively, or physically, or emotionally." [AFG1 Page 1]

"Just being in, present, changes the entire atmosphere." [EM Interview 5, Page 7]

"Whenever you get there, everything changes." [AFG2, Page 2]

"And if the child is unhappy, or had a bad day at school, the child and youth care worker will try to create a way to get around." [EM Interview 5, Page 7]

These roles and functions were brought to life in the following eleven sub-themes.

a. Sub-theme 1: Providing care

Participants described the *provision of care* to children in their life-space as one of the functions of child and youth care work. This caring role was seen to be central and to take place across all of the domains of the development of children, as evidenced in the following excerpts:

“People talk about child and youth care as being with young people as they live their lives, and sometimes that involves playing and sometimes it involves cleaning up the room, and personal routines and those kinds of things.” [IE Interview 2, Page 1]

“I think child and youth care workers are there to restore some sort of order in children’s lives, especially the children that come into care ... You are there to still remind the child that even after everything [traumatic events] ... you are providing circles of care.” [PFG3 Page 3]

“The safety in the care plays such a vital role.” [EM Interview 5, Page 2]

Participants understood the interplay of the domains of a child’s functioning in the provision of care. This holistic care was described as follows:

“Your basic role would be to provide care, and it’s that holistic care ... not just the physical. It’s the physical, emotional, the social, cognitive and spiritual care. So that would encompass a lot and how they and provide that care and if that’s being done properly, then a lot of the functions fall under that.” [EM Interview 2, Page 3]

“But in the life-space a child has developmental areas that you cannot just, that you have to, when you deal with a child, you have to separate them, because there is physical that you need to deal with, there is emotions that you need to deal with, there is cognitive development that you need to deal with. So you can’t say if you dealt with the physical of a child then you’ve dealt with all of it. So the child and youth care worker is there to look at each and every developmental area – if its needs are met?” [PFG2, Page 2]

b. Sub-theme 2: Managing behaviour

Participants described *understanding, engaging with, and managing young people's behaviour* in a number of different ways, as follows:

"The feeling might be driving the behaviour of the child. Maybe you see a child is always stealing. We won't judge the child. We are going to find out what is making the child steal." [AFG3 Page 5]

"And then with a lot of patience we found that the boy was actually being bullied at school, that's why he was displaying different behaviour. He was beating up his younger siblings, because he was experiencing the same. So now when the boy expressed this, now we can start working on the problems. Let's go to the school. Let's address the issue of bullying. It really assisted." [PFG2, Page 6]

"When you sit down with him and then you talk to him and sometimes you find out ... this child, he was behaving this way because there is something behind his behaviour." [AFG1, Page 9]

"A young person says, but when I'm angry, when I throw a tantrum, or when I swear, it's unacceptable, but my child and youth care worker still accepts me and is there for me." [EM Interview 5, Page 6]

"I realised that one solution does not work for every child. So every single child, you need to learn different [interventions]." [AFG1, Page 10]

"We need to look at individualisation ... When we say stealing. This is the programme for stealing. I don't think that would work ... Because there is no set programme right for a specific child. Children are unique." [EM Interview 5, Page 11]

"When we talk about the behaviour management, is not about that inappropriate behaviour. It's about managing your routines, managing just everything from wakeup time right through to sleep time ... You're not

hanging around waiting for the child to punch another child. You are there alongside the child, and you're guiding and you're prompting and you're holding them back and you're doing all those things." [EM Interview 3, Page 2]

c. Sub-theme 3: Implementing developmental programmes

A further sub-theme that emerged was that of *implementing developmental programmes*, as follows:

"I think programmes play a vital role. Programmes meaning just not activities as such, looking at the developmental programme, like your camps, your life skills programme, your independent living cottage programmes." [EM Interview 5, Page 1]

"A few of my responsibilities [include] ... designing programmes." [PFG1, Page 1]

"You have to identify a child's needs individually, because what works for one child may not work with another. So it is very good identifying their needs and look at it strength based. So that you know what kind of programmes [to offer]." [AFG2, Page 6]

d. Sub-theme 4: Engaging in developmental assessment

The fourth sub-theme related to *engaging in developmental assessment* processes that emerged was as follows:

"And the child and youth care workers actually sit with the children beforehand [before the assessment], like if they're doing a review of the IDP [individual development plan], and talk through what they think their progress has been and then support the child in giving that feedback when they have the meeting." [EM Interview 3 Page 3]

“When we are having our developmental assessments, and IDP [individual development plan] they come with so much information.” [EM Interview 5, Page 8]

“So our assessment ... it’s gathering information from the child so that you can tailor a response to what they actually need.” [LEX Interview 1, Page 1]

“[A professional child and youth care worker] was actually gathering all the information from all the different places, and drawing up the IDP with the child, if the child was old enough.” [EM Interview 3, Page 1]

“We also, even when we do assessments, we are not just coming in with a paper and saying this is a plan I have done for you, but we are involving the family in planning for their own development.” [PFG2, Page 4]

e. Sub-theme 5: Maintaining planned environments

Maintaining planned environments was described as follows:

“We help parents to change the environment at home.” [AFG3, Page 2]

“The routines play a vital role. That sets the tone for the young people, like especially in the morning and in the evening, and in between and getting them up in the morning. How you set the tone for them ... see that they are okay are they happy.” [EM Interview 5, Page 1]

f. Sub-theme 6: Supporting developmental play

Play was another salient aspect related to child and youth care work. In this regard, participants stated:

“As a child and youth care worker ... giving them an opportunity to go and play. I will look after your siblings. That is something that is very therapeutic. That might seem simple – this person came in and allowed me to go and play, but you are actually ensuring that their right to play is being met.” [PFG2, Page 4]

“We there when they wake up, with them when they sleep. We read them bedtime stories, we wake up and we also play with them, and also we are there in their level.” [AFG1, Page 9]

“We wear many hats in one day. You can play with a three (3) year old and you can go and have a discussion with an eighteen (18) year old all in one day.” [PFG1, Page 5]

g. Sub-theme 7: Engaging in advocacy

Participants described *engaging in advocacy* as follows:

“We fight for the children.” [AFG2, Page 4]

“We also do advocacy.” [PFG2, Page 3]

“If it wasn’t for the child and youth care workers that house would have been taken by the extended family, but the child and youth care workers fought for them [the orphaned children], so that they can stay in their house.” [AFG 1, Page 13]

h. Sub-theme 8: Working in multidisciplinary teams

Multidisciplinary teamwork emerged as a further aspect of child and youth care work. Participants stated:

“I’m part of the multidisciplinary team.” [AFG3 Page 4]

“The child and youth care workers do all the school visits. They also take all the children for any therapy sessions ... The child and youth care workers go in and will give the history, the background, the whole story.” [EM Interview 3, Page 3]

“When you bring people together [in multidisciplinary teams] you make those people realise what the [life] space looks like, what the activities or things that needs to be done in that space of the child.” [PFG2, Page 1]

“The issue of developmental assessment and programming, to actually look at activities, at developmental programmes that have emerged from a developmental assessment, positions the child and youth care workers very effectively, particularly in multidisciplinary teamwork.” [LEX Interview 4, Page 1]

i. Sub-theme 9: Carrying out administration

Undertaking *administration* was also seen as important. Some noteworthy comments include:

“[Administration] takes a chunk of their work ... You’re looking at the recordings, their loggings, then you get the programme book. If there has been any incidents that emerge. Then you will get cottage meetings, medical, behaviour management [records] and all that they have to have that in place.” [EM Interview 5, Page 1]

“They do things like daily logging on each child before another person comes to shift.” [PFG2, Page 5]

“There’s reportable incidents that have to be written, there’s the loggings that have to be done, there’s reports for the social workers who call for them. But now with department [of social development] requirements that [administration] has just increased so much.” [EM Interview 3, Page 2]

j. Sub-theme 10: Managing stakeholders and referrals

Managing stakeholders and referrals emerged as a further function in the data, expressed in the following excerpts as follows:

“I’m accompanying them to the hospital, [as a] ... support system.” [AFG2 Page 2]

“She or he will accompany the young person, she will also play a part with the need to ask questions, and come back and give us feedback.” [EM Interview 5, Page 5]

“The child and youth care worker’s role is to help to either refer these young people to the relevant services, support them, help them, or help the parents to understand.” [LEX Interview 3, Page 4]

“[Child and youth care workers have] got to understand how to work the system with birth certificates and how to get the child back into school.” [EM Interview 2, Page 6]

“We refer ... If there is a child protection case – are the police doing what they are supposed to be doing? And really advocate, because we find for child and youth care workers even if you step into police stations and clinics, they ask you who are you, because this person is coming in now and asking us to be accountable, who is this person? That means you are really making that difference to say everyone must be accountable, and we must all work together to ensure the child is in a safe space.” [PFG2, Page 4]

“Then you plan which stakeholders you will work with because you cannot do things alone. There are different stakeholders that you work with, and what I like most about the child and youth care workers, you don’t just refer a child to SASSA [South African Social Assistance Agency] and leave it like that. We make sure the service she gets is done, and everything she will do. Even at the clinic, we use to accompany them to make sure that the child receives services.” [AFG3, Page 4]

“They are able to build relationships with very difficult stakeholders and use these relationships to assist the child.” [LEX Interview 4, Page 7]

4.3.1.3 Theme 3: Applicability of the scope of practice

The suitability of the outline of the roles and functions of child and youth care workers in the *scope of practice* was described in the three sub-themes that follow.

a. Sub-theme 1: Captures salient roles and functions

The excerpts that follow below provide examples of the opinions of the participants with regards to the scope of practice:

“I think that the scope of practice is clear. It’s clear in terms of what is expected of child and youth care workers.” [LEX Interview 3, Page 1]

“The present scope of practice as described in the regulations for child and youth care workers with the professional board capture, adequately capture, the key functions of child and youth care workers.” [LEX Interview 4, Page 3]

“I look at your scope of practice and I think it’s very straightforward. It would fit almost anywhere in terms of basic developmental needs, physical needs, behavioural, safety and all the rest, so ... using the daily events to create the developmental progress and change.” [IE Interview 1, Page 4]

“I don’t see anything there that is unrealistic for the average child and youth care practitioner.” [IE Interview 4, Page 3]

b. Sub-theme 2: Excludes complexity of practice

The data revealed that the scope of practice outlines the roles and functions of child and youth care work but failed to convey the *complexity of the work*. Participants had this to say:

“It covers what needs to be done, but the expansion of a single word, reliant on the training and the practice element, and the link that people can make between the word and the practice ... It’s lost in the way in which we articulate the scope of practice.” [LEX Interview 2, Page 5]

“I’m a helper, sometimes I’m a counsellor, sometimes I’m a teacher, sometimes I need to be a parent, depending on the situation at that time. So child and youth care work it’s everything.” [AFG2 Page 2]

“I am a supporting system of a child. I vouch for a child. I advocate for kids. My best interest is the well-being of a child. That is where my focus is. The holistic [approach to] the well-being of a child. That is a child and youth care worker.” [AFG2 Page 2]

c. Sub-theme 3: Distinguishes between auxiliary and professional roles

Participants also noted the *distinction between the different scopes of practice for auxiliary and professional level child and youth care workers*, as outlined in the regulations for the registration of child and youth care workers (South Africa, Department of Social Development 2014:17-18). The following was mentioned:

"[The scope of practice] categorises what the key responsibilities would be for the people in the different categories." [LEX Interview 1, Page 3]

"I would say [the distinction between the scopes of practice at the two levels] that's within around being realistic because it [the auxiliary level scope of practice] uses at times words like 'assist with' and 'participate in', as opposed to having to do. So it really looks to me like a person working alongside of the person identified [in the professional category]." [IE Interview 4, Page 3]

4.3.2 Findings and discussion of Category 1

Theme 1: International roots of South African child and youth care work

All participants, including international participants, were provided with the opportunity to interrogate the South African scope of practice for child and youth care workers (South Africa, DSD 2014: 17-18).

International participants noted a congruence between South African child and youth care work and that in North America and in other places in the global north. The first excerpt described the South African scope of practice (South Africa, DSD 2014: 17-18) as being an accurate description of practice that could be applied in other countries. It was noted that a "transfer of ideas" has taken place and that South African child and youth care work reflects the essence of an internationally accepted knowledge base and skill set.

International experts noted that the key roles and functions of child and youth care work as it is internationally known are both exhibited by, and articulated by, child and youth care workers in South Africa. These include the concepts of life-space work, engagement in relationships, and the provision of care. The excerpts showed that the

quintessential element of child and youth care work, which is the purposeful intervention in daily life events for developmental and therapeutic ends, is observable in South African child and youth care practice. Furthermore, the broad, overall goal of engaging in child and youth care work was perceived as being congruent with the internationally understood aim of the profession. One participant broadly described the reason for engaging in child and youth work as that of “making a life of significance for young people”.

Professions have a core knowledge base which is taught to members of the profession (Moore 1970, cited in Beker 2001b: 359). Child and youth care work has a history of being articulated and expressed, and its knowledge and skill sets have been researched and debated over a period of almost half a century (Krueger 2002: 21). Most of the professional knowledge base has been generated in northern countries, notably in the United States and in Canada where Charles and Garfat (2009: 23) reported that three hard copy journals were being produced. Currently, *Journal of Child and Youth Care Work*, *Relational Child & Youth Care*, and *Child & Youth Services* are produced in North America. A great deal of local child and youth care work knowledge has been generated, as is evident in the fact that a local journal is currently in its thirty-third year of publication. However, local knowledge has remained largely at the informal level. Little research has been undertaken locally to augment the international knowledge base to reflect local challenges experienced by child and youth care workers (Molepo and Delport 2015: 152). Likewise, there has been a paucity of research on the adaptations and differences in child and youth care work locally.

Local contextual idiosyncrasies have given rise to local elements or manifestations of child and youth care work which may render it a particular, local form of the profession as it is described in the international literature. As early as 1987, the keynote speaker at the sixth NACCW conference noted that international exchange of knowledge was a feature of the child and youth care world (Garfat 1988: 17). This international connection and exchange process within child and youth work was directly referenced in the data. Early in the development of the profession, Denholm (1990: 349) noted that the interaction between the knowledge base of the field and contextual elements were an essential element in developing the field as follows: “responsiveness to local, national and international trends is not only part of the necessary development of the

profession, it is critical to understanding the scope of the entire child and youth care field”. This point was made in the fourth excerpt where the participant observed that key elements of the profession may be expressed differently in South Africa compared to that in other countries, but were nonetheless expressions of child and youth work as it is internationally known. Local child and youth care work is thus rooted within the parameters of what is internationally perceived to be child and youth care work.

Theme 2: Core roles and functions

The data revealed that *the core child and youth care roles and functions* all took place within the context of life-space work and relationships between child and youth care workers and young people or family members. Rather than simply being a different context for working with children and families, the term ‘life-space’ connotes “a way of conceptualising work with young people in the spaces where their lives unfold” (Gharabaghi and Stuart 2013b: 11). This fundamental contextual definition was borne out in the data where the role of the child and youth care worker was seen to be that of working in the life-space. The relational aspect of life-space work was further highlighted in the data, echoing the observation by Ruch (2018: 29) that in the child and youth care work context, a relationship is “the vehicle through which interventions are mediated as well as potentially being of intrinsic value as an intervention in its own right”. All roles and functions were articulated as taking place within the relational life-space context. Ten (10) sub-themes, each specifying a role and function of child and you care work, were identified. These sub-themes coalesced to embrace the myriad roles and functions of child and youth care practitioners and are separately considered as follows:

a. Sub-theme 1 Providing care

The centrality of the *caring function* of child and youth care workers is evident in the very description of the profession, that is, child and youth *care* work. The international definition of child and you care work refers to those who work with children as being in “direct care” (National Organisation of Child Care Worker Associations 1992: 83). Developmental care, as indicated in the international literature, is a core theme of child and youth care work (Krueger 2015: 12). It is also a function that is the foundation for other child and youth care work functions, such as relationship building (Krueger, 2015: 12).

Care has been described as consisting of the “nurturing activities of everyday life” (Smith, Fulcher and Doran 2013: 39). The role of child and youth care workers is one of caring *for* children as opposed to caring *about* children, the former having a greater responsibility for implementing direct caring actions (Smith, Fulcher and Doran 2013: 41). However, this caring function in a child and youth care work context is more than simply the provision of physical care.

Graham and Fulcher (2017: 98) found that the provision of “needs led, not regulation driven, care” to be one of five key factors creating successful residential care environments. Maier (1987: 11) pioneered work on care which included consideration of human development in the provision of care. Developmental care is therefore care that is provided by a child and youth care worker which is designed to meet the individual developmental needs of a child. Developmental care must be individualised to the child (Graham and Fulcher 2017: 104). It also includes consideration of the safety of the child receiving the care, and the child and youth care worker providing the care (Jenney 2020: 100).

Maier (1987: 12) asserted that “direct care workers, carry the full obligation for a personal involvement in providing ‘caring care’”, and involves transcending the provision of physical care to providing nurturance which contains an element of emotional presence and caring. This can be achieved through the engagement of the child and youth care worker themselves in the process of caring where “the ‘self’ of the carer becomes central to the experience of care” (Smith 2006: 4). The relational element between the child and youth care worker and the child is important in creating a safe environment for traumatised children (Jenney 2020: 105). Caring in a child and youth care context, therefore, involves the emotional presence of the child and youth care worker undertaking caring actions.

In South Africa, children are exposed to “multiple forms of deprivation”, and social welfare initiatives, including family-based services, have been initiated in order to reduce these deprivations (Omotoso and Koch 2018: 418). All children require nurturing and care, but this is more the case when children and youth have experienced caring relationships that are not secure (Maier 1987: 11). Traumatized children often have an internal framework which makes them wary of accepting

kindness and the very caring interactions that they may need most, often investing in proving that the care they are shown is not genuine care (Phelan 2015: 62). Brendtro (2019: 16) noted that whilst “children in pain may be difficult to nurture”, research evidence points to supportive caring as being essential for the healing and thriving of such children. It is essential that child and youth care workers communicate warm acceptance of children and avoid interacting with harshness and hostility (Brendtro and Du Toit 2005: 57). Caring for children who have been hurt and deprived may appear to be a straightforward endeavour, but is “not as easy as it sounds” (Phelan 2015: 63).

In the context of the life-space, biopsychosocial and spiritual facets of a child are considered as South African child and youth care workers are cognisant of engaging holistically with children. This is consistent with the international definition of child and youth care work which states that practitioners are engaged with the totality of a child’s life, rather than a discrete aspect or dimension of it (National Organisation of Child Care Worker Associations 1992: 83). Anglin (1999: 145) considered this holistic approach to working with the child as one of the key defining aspects of the profession. The data revealed that it is in the context of life-space work that all of these dimensions are the concern of the child and youth care worker. In being physically present, emotionally present, and attuned to the biopsychosocial and spiritual aspects of the child, the worker seeks to enhance the agency of the child in respect of all of dimensions of development.

The scope of practice (South Africa, DSD 2014: 17-18) for child and youth care workers at a professional level lists as one of the elements of practice the “care and development of children”. This provision of care provides for children’s needs to be “protected” in relation to the physical, emotional, spiritual, cognitive, “social survival”, and developmental domains (South Africa, DSD 2014: 17-18). The articulation of the care function at auxiliary level is very similar, although it allows for basic as well as developmental care (South Africa, DSD 2014: 17-18). The inclusion of the provision of care in the description of the functions that may be performed by child and youth care workers is consistent with the competencies for child and youth care workers developed in North America under the competency entitled Developmental Practice Methods in the CYCCB (Mattingly, Stuart, and Vander Ven 2010: 20-23).

Sub-theme 1.2.2 Behaviour management

Holden and Sellers (2019:64) observed that in a child and youth care context, “the ability to deal with children’s psycho emotional pain without inflicting additional painful experiences on them is one of the biggest challenges”. It is widely recognised that traumatised children are hypervigilant and prone to react to situations with suspicion or aggression (Phelan 2015: 13). The response of others to the behaviour of children can either enhance resilience or lead to further emotional distress (Brendtro 2019a: 12). Anglin (2002: 109) observed that “a philosophy of staff control may tend to breed aggressive reactions, whereas acknowledging each youth’s freedom of choice and encouraging them to make good choices tends to limit the incidence of such explosive behaviour”. Young people do not grow up to be well-behaved through “the application of rules, policies or techniques” (Smith, Fulcher and Doran 2013: 112). The limitations of the application of external controls in managing the behaviour of young people as opposed to responding sensitively have been documented (Anglin 2002: 110). “Traditional coercive behaviour management systems manipulate pain and pleasure for compliance and control” (Brendtro 2019a: 7).

Molepo and Delport (2015: 151) noted that child and youth care workers need to understand the emotional derivatives of troubling behaviour. Whilst behaviour is noted to be complex in nature, some behaviours are more difficult to understand than others (Jackson, McKenzie and Frederico 2019: 115). The data demonstrated that child and youth care workers take a complex view of children’s behaviour and do not see it at the superficial level of what meets the eye. Holden and Sellers (2019: 64) noted that in the absence of “physical evidence of what is causing the behaviour, sometimes adults are not in tune with the pain that the child is experiencing”. However, child and youth care workers described understanding the fact that behaviour is linked to underlying emotions and needs. This process of understanding “the need beneath the problem is the ultimate antidote to pain based behaviour” (Brendtro 2019a: 9).

This study revealed that child and youth care workers endeavour to intervene in situations where young people’s behaviour is unacceptable. They do so in a respectful manner that seeks to de-escalate the intensity of such behaviour. Participants observed that it is their professional responsibility to engage with children’s behaviour in an individualised manner, seeking to understand rather than simply censure difficult

behaviour. This non-coercive approach to providing behavioural support and to managing the behaviour of children is in line with South African law where the corporal punishment of children, even by parents, has been deemed illegal (Children's Institute 2019: para 2 line 2-5).

Child and youth care workers proactively manage children's behaviour in the context of daily life. Participants emphasised their professional responsibility to maintain a relationship with a child, even when behaviour is what would be considered socially unacceptable or aggressive. This is consistent with Smith, Fulcher and Doran's (2013: 30) point that "nurturing self-management and enriching a child or young person's behaviour repertoires are closely linked to quality relationships with carers".

Participants from both community-based and residential care settings observed that the management of young people's behaviour involved: seeking to understand emotions behind behaviour; individualising responses; respectful engagement with difficult behaviour; the avoidance of counter aggression; making efforts to maintain emotional bonds with children in the context of managing behaviour; and seeking to assist the child to gain self-control. This echoes the general approach to the management of behaviour as described in the child and youth care work literature which aims for young people to gain self-control over their behaviour, rather than simply to control behaviour (Phelan 2015: 97).

Sub-theme 1.2.3 Implementing developmental programmes

The *provision of developmental programmes* was reported as a core function of child and youth care work. A programme is "a set of planned activities designed to promote and strengthen the development of individuals, groups, families and communities" (NACCW 1997: 4). Programmes include intentionally designed or assembled activities and resources for developmental and/or therapeutic purposes for targeted participants (NACCW 1997: 4). The term 'programme' can therefore denote both the global programmatic context within which a child and youth care worker is deployed or an aspect of that overall programmatic environment. In child and youth care work settings, programmes are individually tailored to meet the specific needs of children.

Activity programming has long been a matter of discussion in the child and youth care literature (Krueger 1988; Mand 1983; Vander Ven 1999). Stuart (2013: 303) noted that implementing programmes is a function undertaken by child and youth care workers in a number of different settings, and the purposes of such programmes are often intermingled. The South African child and youth care work literature has for a long time featured the role of programmes. This is evidenced in the 1988 *Proceedings of the Sixth Biennial National Conference of the National Association of Child Care Workers* (NACCW 1988: 80-139) which contains a section on programmes and practice, and included papers presented on programs on substance abuse, after-care, self-development programmes, sexual abuse, and family work.

The North American competencies produced by the CYCCB (Mattingly, Stuart, and Vander Ven 2010: 22-23) also features a section on programme planning and activity programming under the overall heading of developmental practice methods. It includes a section that specifically describes this competency as “design and implement programmes and activities which integrate age, developmental, preventive, and/or intervention of requirements and sensitivity to culture and diversity” (Mattingly, Stuart, and Vander Ven 2010: 22). The scope of practice (South Africa, DSD 2014: 17-18) for child and youth care workers lists as an element of practice the provision of programmes. It describes the responsibility of child and youth care workers at auxiliary level to be one of implementing programmes, and at professional level, to be one of designing as well as implementing programmes. This differentiation between the level of the auxiliary and professional levels is consistent with South African Qualifications Authority (SAQA) level descriptors of qualifications which require greater complexity of application of learning at higher levels (SAQA 2012: 4-5).

Sub-theme 1.2.4 Engaging in developmental assessment

This study showed that child and youth care workers are *engaged in the developmental assessment* of children. South Africa’s Children’s Act 38 of 2005 (South Africa, DSD 2005: 60) clearly stipulates that children who receive social services must be assessed. This requirement is for children receiving services at all levels of intervention. In relation to statutory and pre-statutory assessment processes, South African law requires that assessments are undertaken by designated social workers (DSD 2005: 46). However, the Children’s Act 38 of 2005 (South Africa, DSD

2007) distinguishes between ‘assessment’ and ‘developmental assessment’. The latter form of assessment is required to be undertaken for children who receive prevention and early intervention services (South Africa, DSD 2010a: 151). Developmental assessment should involve and be facilitated by “a range of professionals from various disciplines” (South Africa, DSD 2013: para 3. line 1). Developmental assessment is a process used to “determine the least restrictive, most empowering environment and programmes suitable to the child or family development needs in a given moment and/or during the next steps of development and/or in the long-term” (South Africa, DSD 2017: 218).

This theme of developmental assessment as a function of child and youth care work is consistent with the competencies laid out as a responsibility in the North American competencies produced by the CYCCB which describe “contextual-developmental assessment” (Mattingly, Stuart, and Vander Ven 2010: 15).

Assessments of children usually focus on the difficulties that they experience (Freado 2019: 3) and thus tend to “disregard resilience” (Freado 2019: 2). However, developmental assessment in the South African context pays attention to the positive aspects of development as well as the strengths of individuals and families. Developmental assessment is “a methodology of assessment that moves away from the pathology-based model to strength-based developmental approach with the focus on the developmental and therapeutic needs of the child as well as his/her strengths” (South Africa, DSD 2017: 218).

The data showed that child and youth care workers have two responsibilities in relation to developmental assessment. The first is the role of information gathering in order to report information on the child during the assessment process. The study found that child and youth care workers who occupy the life-space of children engage in observations of children in that space. Child and youth care workers present information obtained in this process to be used in developmental assessment processes. Children are most accurately assessed in the context of non-artificial environments by people who are involved in that life-space (Brendtro and Ness 1983a: 19). The role of child and youth care workers in such assessment processes is acknowledged to be of a unique nature, in that the child and youth care worker is

required to understand the child's behaviour in the physical and relational context in which that behaviour occurs (Brendtro and Ness 1983a: 18). This is consistent with the articulated foundational philosophy of developmental assessment in South Africa which indicates that children must be understood within their own contexts (South Africa, DSD 2017: 218).

The second responsibility of child and youth care workers in relation to developmental assessment is facilitating the participation of children and families in developmental assessment processes. This involved obtaining the perspective of children on their situation and that of the family, and assisting children or families to take active roles in developmental assessment processes.

The scope of practice for child and youth care workers lists developmental assessment as one area of practice (South Africa, DSD 2014: 17-18). The difference between the auxiliary level involvement in developmental assessment and the professional level involvement in developmental assessment was articulated in the extracts where the professional level child and youth care worker was described as being responsible for the entire developmental assessment process. This is consistent with the differentiation in the scope of practice (South Africa, DSD 2014: 17-18) which indicates that auxiliary level child and youth care workers may participate in developmental assessment, whereas those at professional level may be fully responsible for developmental assessment processes.

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Sub-theme 1.2.5 Maintaining planned environments

The seminal text *The Other 23 Hours* (Treischman *et al.* 1969: 2) focused attention on the child and youth care worker managing a child's milieu for the benefit of the child's development. Child and youth care work emerged from residential care work, where there was a focus on creating a therapeutic milieu – a totally managed environment – within which daily events could be exploited for maximum developmental and therapeutic benefit (Treischman *et al.*, 1969: 3). Participants in this study described how child and youth care workers managed living environments in the family home environment and in residential care settings. This is in keeping with the assertion by Anglin and Brendtro (2017: 10) that “to the extent that we understand what is needed in the total environment for young people, we can create powerful interventions”.

It is possible to create environments that are restorative in nature in institutional settings such as child and youth care centres and schools (Brendtro 2019b: 20). In such restorative environments, traumatised children are able to develop and heal (Brendtro 2019b: 20). Research has indicated that young people associate social environmental factors such as stability and predictability with safe residential care facilities (Jenney 2020: 99). Brendtro and Du Toit (2005: 20) and Brendtro (2019: 19) described the difference between environments that are restorative and those that are coercive, noting the stresses and negative impact of the latter on the development of children. Participants described managing or influencing aspects of the living environment to create conditions to meet the needs of young people. This is consistent with the assertion that environments “must be developed with attention to modifying various transactions to facilitate a positive adjustment” (Brendtro and Ness 1983a: 18).

The North American competencies described by the CYCCB stated that one of the competencies of child and youth care workers is to “design and maintain planned environments which integrate developmental, preventive, and interventive requirements into the living space, through the use of developmentally and culturally sensitive methodologies and techniques” (Mattingly, Stuart, and Vander Ven 2010: 22). As evidenced in the data, beyond individual relationships, environmental factors have a profound influence on children in child and youth care programmes (Holden, 2009: 167). The role of the child and youth care worker is to influence environmental factors to the extent possible for the benefit of the child's growth and development.

This echoes the assertion that “the ability to respond to, create, and change contexts” is a unique hallmark of the child and youth care and youth work profession (Krueger and Stuart 1999: 203).

The scope of practice for child and youth care workers (South Africa, DSD 2014: 17-18) refers to the concept of planned environments. At a professional level, the scope of practice for child and youth care workers lists as their responsibility the “development and maintenance of planned environments in child and youth care work” (South Africa, DSD 2014: 17-18). At auxiliary level, the scope of practice indicates that the “maintenance of planned environments” is an activity that may be performed by child and youth care workers (South Africa, DSD 2014: 17-18).

Sub-theme 1.2.6 Facilitating play

Child and youth care workers enable children to experience play. Participants spoke of facilitating play in relation to both physically engaging in play with children and undertaking actions that support children accessing play experiences. In the foundational child and youth care literature, Maier (1987: 76) noted that “play is children’s major avenue for learning, for exploring, or verifying themselves and, above all, for interacting meaningfully with others and environmental events in general.”

The importance of play for children and the acceptance thereof as an indispensable activity for children has been established through the development of play theory (Mand 1983: 236). Mtembu and Mkhize (2019: 3) asserted that play assists children to manage their emotions in relation to themselves as well as others. Play is also regarded by the UNCRC (United Nations General Assembly. 1989: 9) as a right of children. Hence, enabling play constitutes an important function of child and youth care work. Child and youth care workers both engage in play with children and facilitate their access to places and times where they are able to play. “Developmental play” is described as an element of the scope of practice for child and youth care workers (South Africa, DSD 2014: 17-18).

Sub-theme 1.2.7 Advocating for children and families

In a social welfare context, *advocacy* is considered a “heterogeneous concept” (Feldman, Strier, Koreh 2016: 256). Definitions of the concept indicate that advocacy

is oriented towards action (Mellinger 2016: 3). Advocacy can be defined as being constituted by efforts “to change public policy or influence decisions of government, and to protect individual socio political rights and freedoms” (Almog-Bar and Schmid 2014, cited in Shier and Handy 2015: 2583). Advocacy has been an element of social work practice since its establishment as a profession (Mellinger 2017: 293). The need for advocacy to continue to play a part in social work is broadly accepted (Chereni 2017: 516). It is contended that social work is distinct from other helping professions in that it employs advocacy to realise socio-economic rights of individuals and thus bring about societal change for the better (Sosin and Calum 1983, cited in Chereni 2017: 508). Advocacy has thus been considered a value in the social work profession (Mellinger 2016: 1).

In a similar vein, advocacy emerged as a clear function of child and youth care work. It is considered a crucial element of child and youth care practice since the world is not just, and that some people have less opportunity for influencing situations than others (Stuart 2013: 298). Examples of South African community-based *Isibindi* child and youth care workers advocating for children’s rights are described by Allsopp *et al.* (2018: 346). Participants described advocating for children and families on different levels. They described advocating for the realisation of the rights of children as a group in particular situations, and they described actions taken to advocate for an individual child or family of children in a specific context. Descriptions of advocacy undertaken by participants articulated the child and youth care workers’ awareness of rights to which a child or children or family were entitled, but were not being realised. Such advocacy involved child and youth care workers engaging with people in power over children in order to ensure the realisation of a particular right. This is consistent with the goal of advocacy in social work, of “being a voice for those who do not have a voice and bringing about systems level change” (Mellinger 2017: 304).

The data reflected a child and youth care worker advocating for a particular family of children with extended family members, standing up to family members in order to protect property to which the children were entitled. In another example, a child and youth care worker recounted standing up to a person in authority, a school principal, in an attempt to bring about systemic change in a school to realise the rights of children. The data revealed child and youth care workers taking action in line with a

rights-based approach in both a family context and a school environment. The data further showed child and youth care practice as encompassing and integrating advocacy efforts. These two levels at which participants described being involved in advocating for children are consistent with the view of Gharabaghi (2014: 16) who observed that many child and youth care workers are able to meld “political activism and effective practice seamlessly.”

In the North American context, the CYCCB includes a section on advocacy under the competency heading of professionalism. The advocacy section includes six elements, including the requirement that the child and youth care worker is familiar with information on children’s rights and is able to demonstrate advocacy skills (Mattingly, Stuart, and Vander Ven 2010: 12). The scope of practice for both auxiliary level and professional level child and youth care workers includes “advocacy for the rights of children”, suggesting that advocacy is accepted as a key function of child and youth care workers (South Africa, DSD 2014: 17-18).

Sub-theme 1.2.8 Working in multidisciplinary teams

Interprofessional collaboration is considered a priority in social services for children in the international context (Hesjedal *et al.* 2016: 842). A multidisciplinary approach has always been emphasised in working with abused children (MacLeod 2016: 42). The process of different professionals working together in the context of the multidisciplinary team can be referred to as “interdisciplinary collaboration” (Giles 2016: 25). In such contexts it is the child and youth care worker’s role to represent their particular view of the situation experienced by the child or family (Stuart, 2013: 221). Child and youth care workers also provide support to children during multidisciplinary team meetings, as well as thereafter (Johannisen, Yates and Van Wyk 2019: 8-9). The study found that engaging in multidisciplinary teamwork was a core role and function of child and youth care workers. They noted their role as child and youth care workers to be that of implementing plans that emerge from multidisciplinary, collaborative engagements. Multidisciplinary teams in child and youth care settings are therefore established with a view to bringing the perspectives of different professionals to bear on matters relating to a child or family in order to establish optimal intervention processes.

Research has found that the manner in which multidisciplinary teams function can have a significant impact on service recipients (Giles 2016: 26). One of the difficulties encountered in multidisciplinary teamwork is the responsibility for each professional to be mindful of both their individual responsibilities as well as those of the multidisciplinary team as a whole (MacLeod 2016: 43). Relationships between team members are important for effective communication and sharing of information (Young and Nelson-Gardell 2018: 592). Phelan (2015:30) noted that multidisciplinary teams can be negatively affected by different perspectives of team members on the work of the child and youth care worker. However, the study showed that child and youth care workers experience multidisciplinary teams as forums where their perspectives can be communicated effectively.

The North American competencies for child and youth care workers as described by the CYCCB makes reference to the engagement of child and you care workers in multidisciplinary teams in the following words: “acknowledge and respect other disciplines in programme planning, communication and report writing using multidisciplinary and interdisciplinary perspectives; communicate the expertise of the profession to the team” (Mattingly, Stuart, and Vander Ven 2010: 19-20). It further describes a competency related to exchanging information with team members in the best interests of the quality of service provision. The scope of practice for child and youth care workers makes reference to the role of the child and youth care worker as working in multidisciplinary teams (South Africa, DSD 2014: 17-18). It describes child and youth care workers at auxiliary level as participating in multidisciplinary teams, and distinguishes this from the professional level where child and youth care workers also lead multidisciplinary teams.

Sub-theme 1.2.9 Undertaking administration

Administration as reflected in the data included written communication in the form of reports that are required in residential care settings. These were linked primarily to recording information about service recipients and the services offered to children and families by child and youth care workers. In these contexts, reports include those outlining observations shared between child and youth care worker shifts. This administrative undertaking in residential care settings has been a long-standing aspect of child and youth care work settings, and ensures that a seamless standard of care

is maintained across workers and shifts (Fulcher 1991: 217). This activity is generally referred to as logging (Krueger 1988: 32). In addition to writing logs, Stuart (2013: 190) noted that child and youth care workers are required to write reports for other professionals, as well as progress reports and case plans. Participants described reports that are required on incidents of concern, known as 'reportable incidents', as well as medical records and minutes of meetings.

Participants in both community-based and residential care settings referred to an onerous burden of administration that is carried by child and youth care workers. In both of these practice settings, the requirement of administration emanates from the parties that fund the services and, as well as contributing to seamless service delivery, feeds information into monitoring and evaluation platforms. The *Isibindi* guidelines (NACCW 2018: 41) detail the extent of administration required in the model. Six domains of administration are detailed in this document, including family, mentor, supervision, human resources, in-service training, and meeting records. Child and youth care workers in this programme are required to undertake administration which includes the completion of numerous forms and reports. Some of these are first contact report forms, monthly narrative forms, risk assessment forms, reportable incident forms, and referral forms. The President's Emergency Plan for HIV/AIDS Relief (PEPFAR) monitoring and evaluation manual (PEPFAR 2019: 23-24) details a myriad of intricate indicators on which personnel working in PEPFAR programmes, including child and youth care workers, are required to report.

The FETC: Child and Youth Care Work at level 4 of the NQF (SAQA: 2018b) curriculum includes a section on child and youth care work administration that focuses on aspects such as logging and report writing. This has been expanded in the revised FETC: Child and Youth Care Work at level 5 of the NQF (SAQA: 2018c). The scope of practice for child and youth care workers indicates that administration is an element of the scope of practice (South Africa, DSD 2014: 17-18). It is stipulated that administration is to be undertaken at a basic level for auxiliary level child and youth care workers. At the professional level, the scope of practice refers directly to the "undertaking of child and youth care worker administration" (South Africa, DSD 2014: 17-18).

Sub-theme 1.2.10 Managing stakeholders and referrals

Participants who worked in both community-based and residential care settings described one of the roles of child and youth care workers as that of engaging with people who may occupy professional and nonprofessional roles, and who provide services required by children and families. Such persons are referred to as stakeholders in this research.

In the context of residential care, the data shows that stakeholders include service providers from educational and health settings. Engaging with stakeholders may involve accompanying the young person to access services, providing support for the young person during such processes, and interfacing with service providers in the course of accessing services. Interacting with the service provider included both imparting information to the service provider and receiving information from them.

In the context of community-based work, participants described four elements of managing stakeholders and referrals. Firstly, child and youth care workers were required to be cognisant of the services that were available for children. This knowledge allowed them to seek access to such services, and to match children's needs with the services available. This required child and youth care workers to be familiar, not only with the child's needs in order to make an appropriate referral, but also to be fully cognisant of available services. Thirdly, they needed to have both formal and informal knowledge about methods of accessing these systems and services. Fourthly, they were required to make referrals in the appropriate manner as stipulated by the particular services. They noted the need to have a sound understanding of the manner in which the range of stakeholder systems operate as well as being able to negotiate successfully within such systems. Child and youth care workers steered children through stakeholder mazes. This function is consistent with the observation by Budlender and Thumbadoo (2018 cited in Mkhwanazi *et al.* 2018: 7) that "child and youth care workers help bridge the knowledge and information gaps within communities and strengthen the linkages between services".

Further, their role, as evidenced in the data, was to ensure that the required services were delivered to the child. Participants noted the relationship building skills that they used to ensure that the children whom they refer to service providers do, in fact,

receive the required services. Not only did they see their role as one of supporting young people in accessing services, but participants saw child and youth care workers as being responsible for ensuring that the service took place, advocating for the child and holding the service provider accountable for the provision of services. Gharabaghi (2008b: 286) described “ensuring that a child gets the appropriate care from the appropriate professional at the appropriate time” as an aspect of caring. The work associated with this role is described by Phelan (2008: 4) as one where child and youth care workers are required to relate to “the relationships that people have with the coercive systems around them; schools, jobs, social workers, police etc.” The child and youth care worker’s role emerged as one of intervening, where necessary, in the relationship between a child and a service provider or another stakeholder, or a child and a system – represented by a person.

Fenton (2019: 87) described what he termed “system trauma” as being trauma experienced by either service recipient or child and youth worker as a result of failure and gaps in the care and protection systems which are meant to support children and families. The child and youth care worker’s role in relation to stakeholders is aimed at preventing the experience of system trauma. This function, therefore, involves both a practical level of skill, as well as an emotional component of supporting the person who is due to receive services from another stakeholder. It further involves the skill of holding accountable for service delivery persons who are not directly accountable to the child and youth care workers. The manner in which child and youth care workers undertake this function is described by Stuart (2013: 13) who said that when child and youth care workers move into interfacing with stakeholders they use their child and youth care skills, or “take this core way of working with them”.

The North American competencies established by the CYCCB include a competency under the section on applied human development as follows: “access resources that support healthy development” (Mattingly, Stuart, and Vander Ven 2010: 16). However, the scope of practice for child and youth care work does not include this competency or the element of stakeholder and referral management as described in the study as a role or function (South Africa, DSD 2014: 17-18).

Theme 1.3 Applicability of the scope of practice

The data offered perspectives on the *applicability of the scope of practice* (South Africa, DSD 2014: 17-18) with regards to its accuracy in providing a framework for the roles and functions of child and youth workers. The suitability of the scope of practice thus emerged as a theme with three associated sub-themes. The three sub-themes include: the scope of practice captures the salient roles and functions of child and youth care work; the exclusion of the complexity of child and youth care work; and the distinction made between auxiliary and professional levels of practice.

Sub-theme 1.3.1 Captures salient roles and functions

The participants concurred that the scope of practice as outlined in the regulations allowing for the statutory registration of child and youth care work (South Africa, DSD 2014: 17-18) constitutes an accurate description of the required professional activities. An exception was, however, noted. The data showed that the scope of practice is understandable, straightforward, and reflects what are universally considered to be the roles and functions of child and youth care work. However, the role of policy development that is included in the professional level scope of practice (South Africa, DSD 2014: 17-18) was not referred to or discussed by participants as an aspect of child and youth care work. An aspect that is not included but which emerged as a function of child and youth care work, is that of stakeholder and referral management, as evidenced in sub-theme 1.3.10.

Sub-theme 1.3.2 Excludes complexity of practice

Working in the life-space of children and families creates *complexity* (Phelan 2015: 38). Anglin and Brendtro (2017: 10) asserted that “by definition nothing can be more complex than the total milieu”. Further, the process of engaging with children, families as well as communities in a manner where the worker is attuned to their “multiple and overlapping identities, is not just a matter of good intentions – it is complicated” (Gharabaghi 2019b: 3).

The data revealed that the scope of practice provides an outline of the roles and functions of child and youth care workers (South Africa, DSD 2014: 17-18) but does not convey the complexity of the implementation of these roles and functions in the context of the life-space of the beneficiary. The scope of practice is set out in a linear

fashion (South Africa, DSD 2014: 17-18). However, Jackson, McKenzie and Frederico (2019: 115) asserted that such linear sequencing cannot adequately express a phenomenon that is complex. The roles and functions, although distinct, are interrelated with one another when a child and youth care worker is implementing them. Hence, an examination of the separate elements does not express the integration of the discrete elements in practice. "Something that is complex comprises multiple components in an intricate arrangement that can create new or emerging properties" (Jackson, McKenzie and Frederico 2019: 115). The myriad of possible arrangements of the different roles and functions of child and youth care workers allows for its adaptation in infinitely individual instances.

Participants described the integrated and multifaceted nature of child and youth care work that is not captured in disaggregation into discrete elements. Some participants struggled to articulate the complexity of their work by describing their functioning in terms of a series of roles from other professional domains. This challenge is not unique to the participants in this study. Child and youth care work literature includes attempts that have been made to describe the child and youth care field in an oblique or metaphorical way in order to convey this complexity. These include metaphorical descriptions of child and you care practice in terms of dance and music (Krueger 2004, cited in White 2008: 125) and craftsmanship (Eisikovits and Beker 2001: 416). Child and youth care work has been defined as both an art and science (Krueger 2002: 22).

Child and youth care work functions take place in relation to one another, so that, in the life-space, in the moment, as life unfolds, and child and youth workers interact with children or family members, care cannot be separated from relationship, from life-space, and from behaviour management. Phelan (2015: 20) observed that "when what looks simple gets positive results in life space work, there is often a complex strategy behind it". The complexity of child and you care work is evident when all of the elements are brought together in a conscious way by a child and youth care worker in a particular context with a specific child or family. This complexity of practice is captured by Krueger (2012: 52) as follows:

The challenge is to learn as much as possible, bring self to the moment, and move in and out of sync with youth's developmental readiness and capacity to engage in

conversations and activities, always seeking resolution in a moment of connection, discovery and/or empowerment. Like all aspects of the process, these moments are influenced by context, tone, mood and tempo as worker and youth's developing selves move forward and back in processes of learning and development.

Sub-theme 1.3.3 Distinguishes between auxiliary and professional roles

The statutory framework for the regulation of child and youth care workers makes allowance for practitioners to be registered at both *auxiliary and professional levels*; it also defines the educational requirements associated with both levels, as well as the different scopes of practice for both levels (South Africa, DSD 2014: 17-18). The distinction drawn between the two levels of practice was noted by participants to be both clear and accurate.

The levels of complexity of the functions of child and youth care workers at each of the two levels was made by qualifying words such as “basic” and “routine” which are used in relation to the auxiliary level scope of practice (South Africa, DSD 2014: 17-1). Words such as “development of” and “design” are applied in relation to the functions at professional level. This is in line with the prescriptions of the educational regulatory framework (SAQA 2020: 9-11).

This categorisation of two levels of functioning is not present in the definitional literature from North America where competencies are described at a single professional level (Mattingly, Stuart, and Vander Ven 2010:10-29). However, the competencies described by the Global Social Service Workforce Alliance (2020) provide descriptions of two levels of competencies for child and youth care workers within the auxiliary level. The data reflected that the distinction between auxiliary and professional level responsibilities in relation to each of the roles and functions is appropriately articulated in the scope of practice.

4.4 Data analysis, findings and discussion of Category 2

4.4.1 Data analysis of Category 2

Category 2: The nature of child and youth care work in South Africa

The data in Category 2 was analysed in terms of two sub-categories. The first sub-category related to elements of the nature of South African child and youth work

practice. In this category, six (6) themes emerged with a total of sixteen (16) sub-themes associated with these themes. The second sub-category related to contextual elements associated with child and youth care work practice. Two (2) themes were emerged under this category, and seven (7) sub-themes were associated with these themes. Table 4.6 below summarises the themes and sub-themes that emerged under the category of *the nature of child and care work in South Africa*.

Table 4.6 Themes and sub-themes in Category 2

Category 2: The nature of child and youth care work in South Africa	
A. Nature of South African Child and Youth Care Work Practice	
2.1 Adapted to the context of poverty	
2.2 Framework of children's rights	2.2.1 Working in the best interests
	2.2.2 Challenging violations
	2.2.3 Promoting participation
2.3 Centrality of life-space work	2.3.1 Combining presence and action
	2.3.2 Intervening developmentally and therapeutically through daily life events
	2.3.3 Working with self
2.4 Primacy of relationships	2.4.1 Consciously building egalitarian relationships
	2.4.2 Listening
	2.4.3 Relating in the context of diversity
	2.4.4 Relating in time bound contexts
2.5 Spiritedness of care	2.5.1 The spirit of Ubuntu
	2.5.2 Live in care
	2.5.3 Work as a calling
2.6 Working with families	2.6.1 Prevalence of family work
	2.6.2 Life-space work in families
	2.6.4 Strengthening family relationships
B. Contextual Elements Impacting on South African Child and Youth Care Work	
2.7 The struggle for recognition	2.7.1 Limited understanding of the role
	2.7.2 Invisibility in community settings
	2.7.3 Blurred auxiliary and professional roles
2.8 Practice settings	2.8.1 Child and youth care centres
	2.8.2 Community-based programmes
	2.8.3 Educational settings
	2.8.4 Health care settings

Figure 4.2 below provides a schematic representation of the nature of child and youth care work in South Africa that emerged from the analysis of the data.

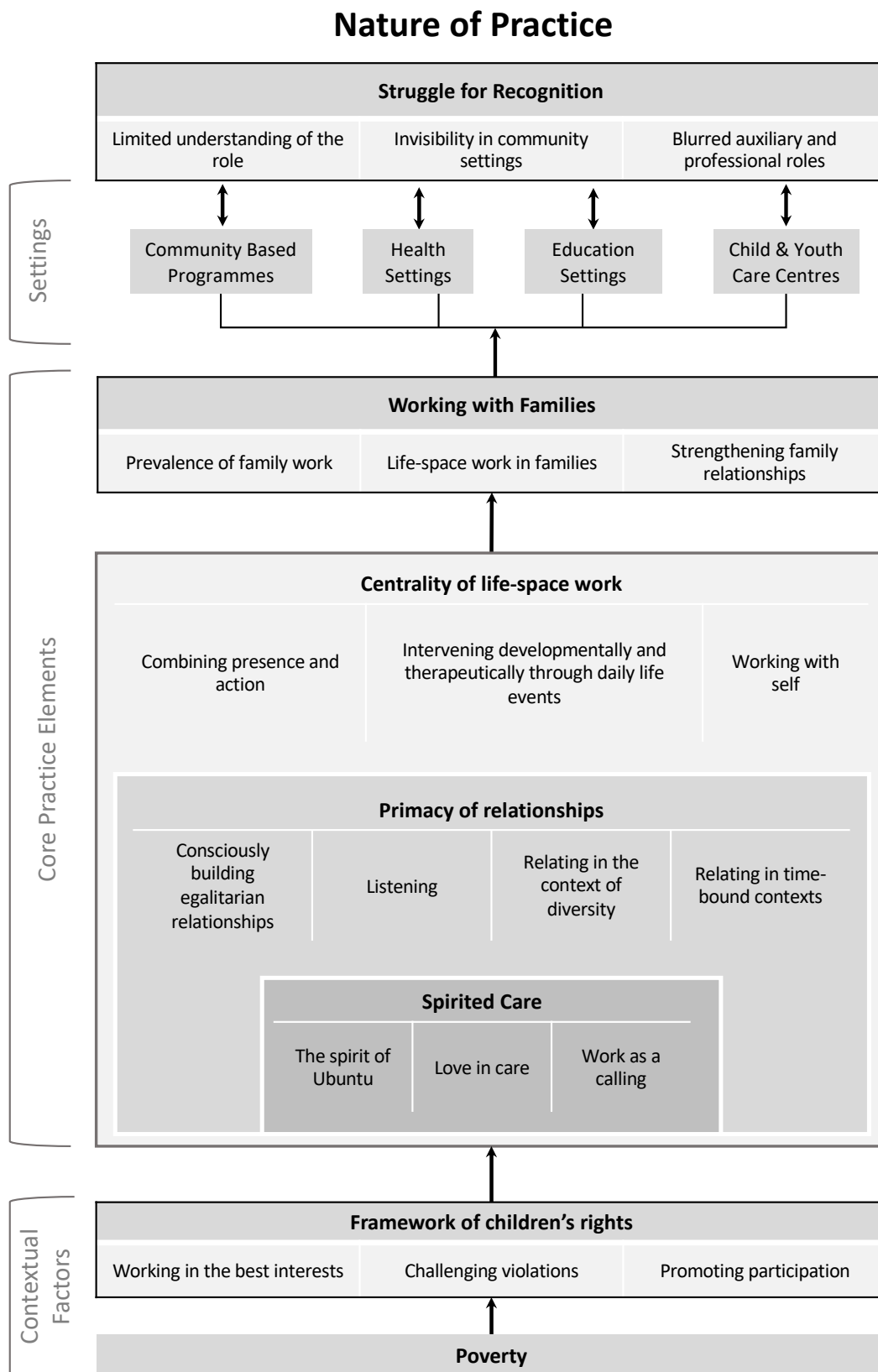


Figure 4.2 The nature of child and youth care work in South Africa

Theme 2.1 Adapted to the context of poverty

Child and youth care workers *function in a context of poverty* as follows:

“I do think that what fundamentally and very significantly distinguishes child and youth care in South Africa from Northern countries, is the resource base of the field, and so people are giving life to these [child and youth care] concepts in ways that Northern child and youth care practitioners don’t.” [IE Interview 2, Page 1]

“I also see poverty as a huge thing ... I see that as a different kind of framework for people to work in.” [IE Interview 1, Page 2]

“Let’s say the family is in poverty and then you come and say there is access – there are things out there that can work to your advantage ... But child and youth care worker come and say “here we are” we can take you to the channel, and some of the channels you touch them and they open. Here is the grant it’s coming in. Here is the disability grant, it’s coming in. The child was sexually abused, but now the child is receiving psychological therapeutic activities.” [PFG 2, Page 3]

“Child and youth care workers seem to have a great capacity to read the situation around them, to understand what’s happening in the context of poverty, in the context of loan sharks, in the context of drug lords, in the context of children dropping out of school, teenage pregnancy, so in those contexts how to navigate their way in supporting children and again at the same time providing the relevant advocacy.” [LEX Interview 4, Page 7]

Theme 2.2 Framework of children’s rights

The notion of children’s rights, as per the UN Convention on the Rights of the Child (CRC), emerged as a theme in the data as follows:

“There is a very strong child rights culture that is expressed by child and youth care workers.” [LEX Interview 4, Page 7]

“We are here to uphold the rights of the kids.” [PFG3, Page 2]

“The rights of children are not just things that we just talk about, but we must make sure they are practised.” [PFG2, Page 4]

The sub-themes derived from the data were as follows:

Sub-theme 2.2.1 Working in the best interests of the child

The principle of ‘best interests’ was reflected as follows:

“One of the basic principles is actually having the interest, best interest, acting at the best interest of the child. I think that is a call for every child and youth care worker. What does this child need specifically? Not treating all children with the same measurement, like each child has got their own specific needs, despite them going through the same challenge.” [PFG1, Page 1]

“Child and youth care places the focus on the child itself, and therefore everything we do is surrounding the child, it’s [in] the best interests of the children.” [AFG1, Page 3]

Sub-theme 2.2.2 Challenging violations

Challenging the violation of rights was also identified as an aspect of working in line with children’s rights, as follows:

“I said [to the principal] ‘I feel that kids are being violated in school’. And he was like ‘In what way?’ And I said to him, ‘Most of our kids are coming from different backgrounds with different scars or wounds. So coming in here in school and the teacher coming in and calling the child names, they are giving the child an attitude and beating the child. There’s nothing good that’s going to come from the child because already the child is damaged, and at school you are also damaging the child. So it’s important that you understand our learners individually, what is going on with their emotion. Not like, okay the child is rude. Ask why the child is being rude?’” [AFG2, Page 6]

“[Training in child and youth care] gives them the stability and the ... confidence to also challenge cultural practices that violate children’s rights.”
[LEX Interview 4, Page 7]

“You need to understand what are their cultures, what are the rules, how do they see children’s rights because as a country we are also facing the challenge of children’s rights. Maybe most people are finding it difficult to accept that children have rights. Maybe most people are finding it difficult to accept that children have rights and they have to respect that and to uphold and promote children’s rights. And when you come in [to the family] you come with open mind to say how am I going to get a buy in of family members so that altogether we put this child at the centre?” [PFG2, Page 3]

Sub-theme 2.2.3 Promoting participation

Participants described *promoting participation* as part of their approach to children as follows:

“Involve the child as much as possible so that the child will also feel the importance of being a child. Feel that this is about him or her.” [AFG2, Page 5]

“We make sure we do things with them. We don’t just decide for them. We are there for them and do things with them. We just give them options, choose option they choose for themselves we allow them to do, it’s on their space.” [AFG3 Page 5]

“For children that can actually provide input into programmes, or input to a care plan or an assessment that you’re actually doing...we actually take time as child and youth care workers to understand okay what is it that this child actually wants?” [PFG1, Page 4]

“You put them as key role players even though you come in as a professional knowing the rules, knowing the procedures, knowing the frameworks, and even legislation that guides your work. But you put them at the front to lead

the way, not to side-line them or put them away and bring laws that you are coming with in front of them to the lead the way of whatever. But you give them the space to lead you so that you incorporate gradually as you go together with them all the laws and procedures that are in place.” [PFG2, Page 4]

Theme 2.3 Centrality of life-space work

The *centrality of life-space work* was evident in the practice of participants as follows:

“We actually do things with them, do things according to them, we live in their world instead of them coming into our space ... We work in their own space. So it makes it easier when you are in your own territory, you are able to explore and experience a lot of things ... When we are in the space, they [children] are able to show who they really are, and we are able to identify, these are the challenges, this is what you doing wrong, let’s try and fix it. We are able to give them options.” [AFG3, Page 2]

“The language of life-space is really very strong [in South Africa].” [IE Interview 2, Page 2]

“[A] solid foundation of understanding the ‘being with’ part ... That piece is always present.” [IE Interview 4, Page 2]

Sub-theme 2.3.1 Combining presence and action

Combining presence and action in the life-space was reflected in the data as follows:

“You think ‘life-space’, you think that it’s me being next to you and not even saying a word, but the fact that I’m next to you, that’s me working as a child and youth care worker. And you are able to actually draw from my energy and...that is child and youth care practice. So and then you move on to life-space work where you actually now have an intervention.” [PFG2, Page 1]

“It’s not just a matter of doing. It’s a matter of using the doing and the being mode to be able to say the right thing, and do the right thing at the right time,

in order to be able to grow young people, emotionally and socially.” [LEX Interview 2, Page 6]

“[You] just go to the family, and by going each and every day they see your face. You become the member of this family, but from outside. And people when they are seeing your face and then see that you put effort on what they are struggling with, and you make sure that this is happening, this is happening, people start to understand ‘oh this person, they here to help us actually’. So they start working together with you.” [AFG1, Page 4]

Sub-theme 2.3.2 Intervening developmentally and therapeutically through daily life events

Engaging in daily life events was also viewed as an element of life-space work as follows:

“I was once told go to a learner who doesn’t want to talk, who doesn’t want to participate in class. Who just sits alone during break time. So what I first did was, I took my lunch and went to where the child was. Then I just sat, and I was like, do you want some bread? The second day, same thing. My lunch, we share lunch. It went on for a week ... I went back on Monday. Same thing, lunch. Okay, now he starts to talk.” [AFG2, Page 6]

“But when children know auntie is going to come and fetch me in the morning. We’re going to go to school. We’re taking a walk or bus. During that time, is when you make moments meaningful. Not just by walking, but actually by engaging.” [AFG1, Page 5]

Sub-theme 2.3.3 Working with self

Personal and professional development was also seen as a crucial aspect of child and youth care work. Several sub-themes emerged in the data related to this as follows:

“Child and youth care work really taught me that you yourself you need to understand what it is that you’re doing for you to attempt to help another person. So most of the time I was learning more about myself through other people, in terms of when you are working with the family you’d see yourself

in a child within that family ... Child and youth care work is more or less about relationships, giving support and knowing yourself.” [PFG1, Page 3]

“You cannot work on the circle of courage and then you as a child and youth care worker you do not know who you are and what you stand for.” [AFG1, Page 3]

“You have to dig inside yourself. Look at you your enemy within you in order to be able to help the child.” [AFG1, Page 15]

Theme 2.4 Primacy of relationships

The *primacy of the relationship* between child and youth care worker and child or family was found to be the core of child and youth care practice, as follows:

“A child and youth care worker is a relational being.” [PFG1, Page 11]

“So it all starts with that relationship and if I don’t have that therapeutic relationship with our children then we are unable to actually break those barriers that are causing them hardships. So we engage with them therapeutically through relationships.” [PFG2, Page 2]

“It’s all relational ... Unless I have a connection with this person, I’m not going to get this person to respond to the particular thing I’m asking them to do.” [EM Interview 4, Page 7]

“When we talk about relationship-based practice or relational practice, they really do have a greater emphasis on that in South Africa, I think, than elsewhere.” [IE Interview 4, Page 9]

The sub-themes that follow illuminate the core dimensions of this relationship.

Sub-theme 2.4.1 Consciously building egalitarian relationships

Practitioners emphasised the salience of *approaching children and families in an egalitarian* and positive manner as follows:

“You start humbling yourself, and having a proper manner of approach is key to building relationships.” [PFG1, Page 11]

“When we get there, I’m happy ... it’s the manner that we approach them that makes them comfortable enough to want us to be there all the time.” [AFG3 Page 7]

“We put ourselves in the same level as the child. It makes it easier for them to be able to come and say, ‘I’m going through this how can you help, please advise’. Even though sometimes they may not be direct ... I think it’s the manner that we introduce ourselves in that makes it easier [to connect with us].” [AFG3 Page 6]

“The family is vulnerable ... and you are at their level ... the family will be eager to follow you because you are not here to change us, just leave what you know, but you are here to help us to see a brighter perspective.” [PFG 2, Page 3]

Sub-theme 2.4.2 Listening

Listening was also found to be crucial to building and maintaining relationships. This was expressed as follows:

“I think one of our core functions is to listen. Half of the time children never get the opportunity to talk, and actually be heard.” [AFG1, Page 6]

“You need to be a good listener, not always talk, giving information. At some point you will need to listen. And when you listen, you need to show that you listen and pay attention. Because the other thing is that mostly with the young children and youth, they are not being heard, we [adults] take decisions for them.” [AFG2, Page 5]

“Another thing is we want to listen to them. When they come with their stories, we pay attention to them. We give them their time. We don’t just listen now and say ‘go’, but we give them time to talk.” [AFG3 Page 6]

“The way you talk to someone, it’s very important, your tone of voice, your way of saying things. Because sometimes we say things that are right but then the way you put them might destroy the child, might make the child feel judged.” [AFG3 Page 9]

Sub-theme 2.4.3 Relating in the context of diversity

A deep respect for *diversity* and a strong commitment to being culturally competent was viewed as being an important part of the professional relationship. Participants said:

“The whole thing of being culturally competent as well would come in ... people do deal with a wide variety of cultures, even in a community. Particularly your urban communities.” [EM Interview 3, Page]

“I think the sensitivity to culture, the sensitivity to context, the understanding of where children come from, recognising that at a deep level, comes from the child and youth care workers’ own personal experiences.” [LEX Interview 4, Page 6]

“I wouldn’t wear pants and do home visits because I need to build the relationship, and I need for them to understand what I am here to talk about. Because if I do that they are not going to be on the same level. I’m not going to get the buy in which defeats the whole purpose right there. So you would dress up in a way that the people there dress up.” [PFG2, Page 3]

“I started talking with her. I can’t speak Xhosa. I started breaking, like not pronouncing it properly, and she’s laughing, she’s like ‘okay its fine I’m not gonna be offended you can speak in English’. So you have to understand diversity.” [PFG1, Page 11]

2.4.4 Relating in time-bound contexts

A further sub-theme that was identified was the emergence of *time-bound contexts* for the implementation of child and youth care work requiring rapid engagement. Participants described particular child and youth care programme settings as follows:

“Responding more speedily to children is becoming more essential in cases of emergency, cases of risk, HIV-positive children. Identifying them and responding to them.” [LEX Interview 4, Page 9]

“As practitioners you just don’t have the luxury of time, and sort of getting used to each other, and learn from each other and all those kinds of things. Now things have to unfold very quickly, and you may not get back to it until three weeks later. That’s a new concept.” [IE Interview 2, Page 7]

“How to optimise the time with this person for thirty (30) minutes?” [EM Interview 4, Page 5]

“And the goal of connection is now also different because it in many cases is a very instrumental goal. You need to motivate people to stay connected in such a way that they can benefit from the service being offered.” [IE Interview 2, Page 6]

“It’s denser, you have to actually, it feels like denser, and the intensity...but it’s definitely very different.” [EM Interview 4, Page 6]

Theme 2.5 Spirited care

The data reflected that there was a strong sense of *spirit* in the way in which child and youth care work is practised.

“[Care] I think becomes a much more complicated concept, in settings where the needs drive a much more complex idea of care. So you care means, caring for survival, in some cases so it means caring for young people in such a way that survival becomes possible. Care means caring for a very fragile social context”. [IE Interview 3, Page 3]

This spirit is captured in the next two sub-themes on the spirit of Ubuntu and the experience of child and youth care work as a calling.

Sub-theme 2.5.1 The spirit of Ubuntu

Spiritedness in care appeared to emanate from *Ubuntu*. Participants described this as follows:

“Child and youth care, it’s about empowering, it’s about Ubuntu, because we are all African, if you’re an African you know this term of Ubuntu. But with the current changes in South Africa even a spirit of Ubuntu is very hard to practice.” [PFG3 Page 1]

“I’ve seen the African spirit of Ubuntu expressed by child and youth care workers in very practical ways. They do walk an extra mile. They do care for the child on the street who was not in school. They would stop and give attention, even if it were in the evening, on a Saturday, at any time in the night. So what you find here is a compassionate heart, willingness to walk the extra mile, a capacity to provide very concrete practical support to children and families at any time.” [LEX Interview 4, Page 7]

“In a relationship the concept of care is not a one-way concept, and I think in South Africa the workers really see themselves as being in a caring relationship, so that their own care unfolds in the care they give.” [IE Interview 2, Page 3]

“Western child and youth care practice has not been good at understanding, or even having a concept that deals with Ubuntu. Doesn’t exist. So articulating what the practice is, that is important for that to be part of what South African contributors are writing about.” [IE Interview 3, Page 5]

Sub-theme 2.5.2 The presence of love

The *presence of love* in the child and youth care work relationship further characterised the relationship, depicted as follows:

“[Children] might just say they’ve actually experienced love”. [LEX Interview 4, Page 5]

“[Child and youth care work is] about having love, patience, empathy, compassion.” [PFG1, Page 1]

“Good child and youth care workers generally, across-the-board, have a lot more love in their relationship with the children and the children experience that.” [EM Interview 1, Page 5]

“Your extension of love for this human being, for me is more important than anything else. Because if I can’t love this person that I’m going to be working with, I’m going to be working with a structure or something that’s there that’s not part of me.” [EM Interview 1, Page 5]

The excerpt below captures an international participant’s description of love:

“[The concept of love in child and you care work] clearly came out of South Africa. The freedom to experience that and to speak about it ... So that’s the sense of caring that goes beyond caregiving or care taking, but the genuine caring for other ... I think there is an expressed genuine caring for and caring about other in the South African context.” [IE Interview 4, Page 9]

Sub-theme 2.5.3 Work as a calling

Many of the child and youth care workers contextualised their work within a spiritual context and considered their work to be a *calling*. They said:

“When we are doing child and youth care work, we can say it’s just a calling.” [AFG2, Page 4]

“The time of calling it, or where people used to call this kind of job a calling, hasn’t changed”. [EM Interview 1, Page 2]

“At the motivational level a lot of practitioners really talk very eloquently about being driven by sometimes spiritual or faith-based values, or values that are really about care and love.” [IE Interview 2, Page 2]

“So, this thing of being a child and youth care worker is a calling. You have no places where ‘no I have to be myself here, I have to behave’. No, it’s in your skin.” [AFG1, Page 9]

Theme 2.6 Prevalence of family work

Participants spoke of the *prevalence of family work* being undertaken by child and youth care workers. Three sub-themes emerged under this theme, namely, working with families, life-space work in families, and strengthening family relationships.

Theme 2.6.1 Working with families

Working with families emerged across all samples as a critical aspect underpinning the nature of child and youth care work. Participants reported as follows:

“[There is] a greater awareness of familial context [than elsewhere].” [IE Interview 4, Page 10]

“Child and youth care needs to be understood from the premise that this is someone’s child that you’re going to be working with, that was born in a family...you need to provide for another human being in a family.” [EM Interview 1, Page 8]

“For child and youth care workers they’re working with the young person. They also get to know where the young person is, where they live, the environment ... And also, the parents or the family, the significant others need to know who their caregiver is. My child is taken from me and placed in your hands. So I need to know who you are as a child and youth care worker...you [are] sharing with the families.” [EM Interview 5, Page 12]

“We have to be able to apply the learning that we are getting about this child located within this child’s family relationships, including their extended family relationships and their tribal identity. And all of that has to be a part and parcel of daily practice.” [IE Interview 3, Page 4]

Sub-theme 2.6.2 Life-space work in families

The application of the *methodology of life-space work* in the context of working with families was articulated in the data as follows:

“Even the family members they are not informed, or they are not aware of how to use the space therapeutically and developmentally to the child. So as a child and youth care worker, your role is to set the tone and to lay the foundation in the existing space of the child for people to realise that we can use the very same space for the development of the child, and to use the space as a therapy or therapeutically to the child without looking for extra things.” [PFG2, Page 1]

“We come in silently, but we do drastic things. We change behaviour silently without you noticing as a household, the parent or caregiver, even the granny. You become more prone to actually accept what it is that we want to showcase to you. However, we do not expect miracles – that we are clear on. We work together in order to achieve.” [AFG1, Page 6]

Sub-theme 2.6.3 Strengthening family relationships

A sub-theme under the theme of relationships was that of *supporting and strengthening relationships* within families. The following excerpts provided evidence of the role of child and youth care workers in strengthening family relationships:

“You have to deal with the whole family, because they will forgive one another between the child and the mother, but the uncle still holds that, the granny still holds that. Let’s come together as a family and then let’s pave the way forward.” [PFG2, Page 7]

“Let’s identify things that we need to fix, like there is a relationship with so-and-so that is not good. ‘What can we do together to ensure the relationship is developed? Maybe we should have supper together every night to ensure that we interact?’ You as child and youth care worker ensuring that the therapeutic session of them just sitting together and eating together is done. That for them is starting something that might seem simple to someone else,

but it's very therapeutic for the family and the broader family.” [PFG2, Page 4]

“We like, not intervening with the child only, but also involving also the family. That is where the family conferencing assists us because everyone would say they see the child in this way, they see the child in this way... And then you intervene accordingly.” [AFG3 Page 1]

Theme 2.7 Struggle for professional recognition

Multiple issues emerged in the data with regard to the *status of child and youth care work*. Participants expressed ambivalence with regards to the status of the profession, acknowledging the growth of the field, but at the same time expressing concern about the lack of recognition of the field, and how this affected them as professionals. They said:

“People are still feeling quite undervalued in their jobs ... They talk about all the work that they do and their hours that they put in and that they're not valued. And that's a concern that people are still feeling, that they're not seen as a profession.” [EM Interview 2, Page 9]

The journey of the growth of the profession was reflected in the data as follows:

“There was a move to professionalise in various ways. With training, providing supervisions, training leaders, training your managers, and all these different things were put in place in order for the field to become more organised ... So now when you look at where we are now in the year 2019, we can see that the field has made some nice strides, as a field.” [LEX Interview 1, Page 2]

“The expectation [when I entered the field over 30 years ago] was that I should walk in there and I should just manage these youngsters. And how do you manage if you have absolutely no idea as to where they come from, what it is that caused them to be there in the first place.” [EM Interview 1, Page 1]

"What impressed me most is what I've seen ... Is the evolution [of the field]."
[IE Interview 4, Page 1]

Sub-theme 2.7.1 Limited understanding of the role

The *struggle for professional recognition* was evidenced as follows:

"Your KPA [Key Performance Area] might be fetching the laundry. So it's like child and youth care workers fetching laundry?" [PFG1, Page 3]

"Even today child and youth care workers here in our country were regulated in 2014, but even today we find ourselves struggling to be understood. Who we are and what we are doing and what is our role as child and youth care workers?" [PFG2, Page 5]

"Currently we are trying to push ourselves for ourselves as child and youth care workers to belong, to be acknowledged, to be recognised by anyone. Currently we don't have those systems. We don't have systems or platforms that tell other professionals about us as child and youth care workers and how much they can expect from us." [PFG2, Page 10]

Sub-theme 2.7.2 Invisibility in community contexts

Local participants decried the *invisibility* of child and youth care work in the broader community. They said:

"The understanding that child and youth care work is a profession hasn't permeated throughout society. We don't hear people speaking freely of who child and youth care workers, who these people are, what they do." [LEX Interview 1, Page 1]

"People call us teachers, we not teachers, we're not going to be teachers... I don't understand why it's so difficult for people to understand that there is something called child and youth care work." [PFG1, Page 4]

Sub-theme 2.7.3 Blurred professional and auxiliary roles

Whilst the scope of practice makes a distinction between auxiliary and professional levels of practice, participants reported the *blurring of these boundaries* as follows:

“Child and youth care workers with degrees are coming in and they are going to be managed by child and youth care workers with NQF 4. I don’t think that is fair. So there is no difference in the field whatsoever. If you say you are a child and youth care worker, they just throw you in one pot.” [PFG1, Page 5]

“We don’t have something that says this is fair for this level, for this level, this is unfair for that level.” [PFG2, Page 10]

“We would not be able to afford someone at the other [professional] level.” [EM Interview 3, Page 1]

Theme 2.8 Practice settings

Several *practice settings* for child and youth work emerged within the data as follows:

“Context creates a whole lot of different plans and goals [for child and youth care workers].” [EM Interview 4, Page 8]

“How you would apply the scope of practice to all these roles that you play in different settings [is different].” [LEX Interview 4, Page 1]

There were four sub-themes which reflected the practice settings, namely, residential care, community-based programmes, and educational and health settings.

Sub-theme 2.8.1 Residential care

Participants referred to *residential care* services as contexts in which child and youth care workers are deployed. This was expressed as follows:

“With the NGOs, a child gets to be exposed in all the aspects, in terms of the child being hands on and also learning from doing a skill, as opposed to in state run institutions because in a state run institution most of the things get to be done for the child.” [PFG 2 Page 1]

“I was working in a children’s home... Most of the time it’s about sexual abuse cases ... By building a relationship with the kids I’ve been able to identify about seven children in my house who was sexually abused ... They ended up sharing all the issues. It was very helpful for them.” [AFG 2, Page 8]

“Sometimes the child is telling me something at 4 o’clock and these people in the office, they leave you that time. You call and say ‘this child had this happen at school, and this triggered the child’ [and they are now out of control]. And they say, ‘no, I’m going to see the child tomorrow at 8 am’. You see you going to have to stay with that child the whole night.” [AFG 1, page 12]

Sub-theme 2.8.2 Community-based programmes

Community-based programmes where child and youth care workers work in family contexts were identified as settings in which child and youth care workers practice. Participants said:

“You just have to do regular home visits to the children ... just go there and check if that need is met and then if that goal is met in the family, that’s where you see them, that’s where you connect with them, that’s when you speak to them ... That’s where you see that they are growing, that’s where you see the family is also growing, that’s where you see they are safe.” [AFG 2, Page 2]

“You get to build the relationship with the children taking them to safe parks, taking them on outings. They have been abused, they have told the mother, but the mother would say, you can’t talk about that because he’s buying us our groceries ... But when you a child and youth care worker and you build that relationship for children, you have different youth programmes, talking about all of these subjects and topics. Children will eventually come out themselves [and disclose the abuse].” [AFG 2, Page 5]

Sub-theme 2.8.3 Educational settings

Schools emerged as being new settings in which child and youth care workers can practice. They said:

“[We work] in educational ... I’m saying different settings in the school setting, in primary schools and in high schools, and for example setting up ... safe spaces within the school setting, providing the after-school component.” [LEX Interview 4, Page 2]

“We need to assist children to stay in school and that means increasing school attendance, understanding why children are dropping out, assisting them to come to school regularly, and support them to improve their school performance.” [LEX Interview 3, Page 2]

“We are now getting into schools, we are going to be helping teachers understand how troubled children react to how, because when a young person’s aggression is met with an adult aggression it’s basically pouring fuel into the fire.” [AFG3, Page 3]

Sub-theme 2.8.4 Health care settings

In addition, there was support for *health care settings* as new settings in which child and youth care workers practice. Participants said:

“I see that whole idea of helping them negotiate medical systems ... I see that it’s very different in South Africa than you’d have in most other places.” [IE Interview 1, Page 3]

“When a medical doctor discloses to a patient that they’re HIV positive in the presence of a child and youth care worker ... So here I’m sitting with a doctor in a room and the doctor asked for me to sit there so that I can actually offer the psychosocial support immediately within the health context.” [EM Interview 4, Page 5]

“In the immediacy, in a horrible context, a clinic, you don’t have a room to go talk to them on a sofa and it’s actually noisy with a lot of other people. So understanding how to hold that person in that context.” [EM Interview 4, Page 5]

4.4.2 Findings and discussion of Category 2

Theme 2.1: Adapted to the context of poverty

South Africa is a developing country which is “characterised by poverty, and health system failures that continue to compromise children’s survival and development; where schooling outcomes remain poor despite high attendance; and where the interpersonal relational needs and emotional well-being of children are neglected” (Mezmur 2017: 7). This is the context in which child and youth care work is practised in South Africa. It is widely held that all aspects of life are more difficult in the context of poverty, and that poverty causes human suffering since those who live in poverty have little to shield them from difficulties that life inevitably presents (Brendtro 2019b: 18). Poverty is synonymous with a lack of resources and poor access to engage in economic activity (Thaba-Nkadamene 2019: 79). Mkhwanazi *et al.* (2018: 70) noted that economic pressures related to survival compromise the capacity of families to care for children in South Africa. While stress is inevitable in life, stress that is too intense and sustained can have negative effects on people (Brendtro 2019b: 16).

“In South Africa, the decisions, opportunities and resources available for caring for children are rooted in – and deeply intertwined with – systems of inequality that are experienced along the lines of race, gender and class” (Mkhwanazi *et al.* 2018: 70). Children receiving child and youth care services in the global North are usually those who live in conditions of relative poverty (Smith 2006: 5). However, the social conditions in which the profession is practised in South Africa are notably different from those in the global North from whence child and youth care work emanated. Factors linked to history, politics, and social environments impact on people’s experience of life, and “inform our approach to service within the communities served” (Stephen and Gharabaghi 2019: 52).

Child and youth care workers in South Africa work to reduce the vulnerabilities of service recipients who are suffering as a result of living in poverty. Given this local context, child and youth care work practice itself was found to be adapted to the local reality of poverty. Expert and employer participants noted the challenges of practice in a context of poverty as a feature of a local form of child and youth care work. They considered this context to be a hallmark of the profession in South Africa.

Fenton (2019: 95) referred to worker capacity to “tolerate uncertainty and the anxiety ... this induces” as being a determinant of success in the profession. However, in the South African context, participants considered the capacity of child and youth care workers to tolerate and manage the local conditions of poverty as being essential attributes amongst child and youth care workers. Participants recounted the capability displayed by child and youth care workers in handling the complex and demanding community and working environments that are associated with poverty.

The study found that child and youth care workers were able to work effectively in contexts where resources to support their interventions were few. They expressed understanding of the local context of poverty in a manner that allowed them to work with fluidity and skill in socio-economic conditions characterised by vulnerability, exclusion, and social distress. Local research undertaken on the *Isibindi* model echoed the presence of this capacity in child and youth care workers working in contexts of poverty, as is evident in the following passage:

[S]ome activities reported by child and youth care workers are unconventional such as negotiating with moneylenders (loan sharks) and recovering SASSA cards from the loan sharks ... These activities are necessary as the children would not benefit from the SASSA grant as the loan sharks would take all the money, which results in the family and children moving deeper into debt and poverty (UNICEF 2017: 70).

Allsopp *et al.* (2018: 342-348) documented child and youth care workers managing complex contexts of poverty with skill and assurance, successfully accessing resources for families, and engaging with the stakeholders and service systems around them.

Participants described their approaches to providing care in the context of poverty. These included their agency in navigating complex social and institutional situations in order to be able to get to provide services for children and families. They perceived part of their work as the process of managing and negotiating with stakeholders around them in order to be able to do their work as child and youth care workers. This role is consistent with the description by Skott-Myhre and Skott-Myhre (2012: 177) of child and youth care workers being brokers between the social system and the individual. Steckley (2013: 28) noted that the work of child and youth care workers focussed on increasing the agency of young people in the context of their life-space. Increasing the agency of children and families in the context of the disempowerment that is associated with poverty was a key feature of South African child and youth care work. The need for creative thinking and innovation in this endeavour was expressed and spiritedness, creativity, and personal resilience were elements of their personal disposition in relation to the work. This echoes the view that child and youth care work requires “thoughtful, activist, politicised, ethical and skilful praxis” (Gharabaghi 2019b: 3).

Theme 2.2 Framework of children’s rights

There is an increased focus on the implementation of children’s rights given that the UNCRC has been in existence for thirty years (Kilkelly and Liefaard, 2019: 521). In considering the implementation of children’s rights, four meta rights require consideration, namely, the right to equality; the right of the best interests of the child to be taken into account in matters related to them; the right to survival and development; and the right to be heard (Bhardwaj, Sambu and Jamieson 2017: 23). The latter three rights apply uniquely to children (Bhardwaj, Sambu and Jamieson 2017: 23). Mezmur (2017: 7) observed that the right of children to survival and development refers to more than simply the preservation of children’s lives, but the notion that they are entitled to reaching their full capacity and potential. Furthermore, resilience in children can be supported through the promotion of children’s rights (Theron, Liebenberg and Malindi 2014: 253).

Research in educational settings has found “macro-systemic endorsement of child rights and concomitant micro-systemic enactment thereof” (Theron, Liebenberg and Malindi 2014: 262). Kilkelly and Liefaard (2019: 525) noted that key to the successful

implementation of the UNCRC is the capacity of those working with children. Child and youth care workers are important duty bearers in relation to children's rights (Vrouwenfelder 2011: 20). The study showed that the concept of children's rights was deeply ingrained in the participants' work. It also outlined their role in implementing and upholding these rights. Child and youth care workers considered the UNCRC to guide their work and indicated that they were consciously attentive to ensuring that the rights of children were protected. Child and youth care workers framed some of their interventions with children and families, as well as with other stakeholders in terms of children's rights. This was consistent with the view of Smith, Fulcher and Doran (2013: 149) who asserted that "[r]ights perspectives, properly thought through, ought to be of central relevance" in providing child and youth care services.

The data provided evidence of the way in which the children's rights principles have been translated by child and youth care workers into a framework for individualising their interventions with children. It illustrated the translation of the concept of best interests into professional child and youth care practice. Child and youth care work translates the legal concepts of children's rights into practice approaches, and in the context of lifespan interventions, brings these abstract principles to life. In this vein, Smith, Fulcher and Doran (2013: 150) noted that these legal principles can only be "expressed meaningfully in human relationships". In dealing with extreme poverty, it is necessary not only to care for children but to "ensure that implementation strategies draw on the entire child rights framework and foreground children's best interests and participation" (Jamieson and Richter 2017: 38).

The United States is not a signatory to the UNCRC (Collins 2016: 15). The concept of children's rights is not in evidence in the CYCCB (Mattingly, Stuart, and Vander Ven 2010). However, locally, the curriculum for the training of child and youth care workers at both auxiliary and professional levels includes substantial teaching on the subject of upholding children's rights (SAQA 2007; 2018; 2018a; 2018b; 2018c). This children's rights framework, which is a key conceptual framework for South African child and youth care workers, is therefore not shared by child and youth care workers in North America (SAQA 2007; 2018; 2018a; 2018b; 2018c).

The following sub-themes emerged from the primary theme of upholding children's rights: working in the best interests of the child; challenging violations; and promoting participation of children.

Sub-theme 2.2.1 Working in the best interests of the child

One of the four foundational pillars of the UNCRC is Article 3 on the *best interests of the child* which states that in all decisions pertaining to the child, their best interests must be taken into account (United Nations General Assembly. 1989: 2). A stronger imperative on the matter of the 'best interests' principle is to be found in the South African Constitution (South Africa 1996: 1255) which outlines that what is in the best interests of the child is to be considered paramount in matters to do with the child.

Petrie *et al.* (2006, cited in Smith, Fulcher and Doran 2013: 150) indicated that in the residential care context, children's rights can only become properly meaningful if the engagement with the concept is not so much procedural, but impacts on the way in which child and youth care workers think about children. Holden (2009: 6) considered the concept of 'the best interests of the child' to be a "touchstone for child and youth practice". The data reflected strongly that the 'best interests' principle was, in fact, a guiding principle for South African child and youth care workers. The data showed that this principle was a touchstone used by child and youth care workers when making decisions about practice. In the South African context, children's rights, and more specifically, the idea of what may be in the best interests of children, provides a frame for the way in which child and youth care workers think about children, and are able to make decisions about children and their work with them. Graham and Fulcher (2017: 100) noted that work that is in the best interests of children is "characterised by dynamic complexity". The data revealed child and youth care work participants applying the 'best interests' principle in determining the course of action to be taken with a particular child.

Sub-theme 2.2.2 Challenging violations

In relation to children's rights, duty bearers are both those who are employed by the State, as well as people in civil society (Blanchet-Cohen and Bedeaux 2014: 76). Child and youth care workers in South Africa are employed either by the State, or by NGOs,

and are therefore duty bearers in relation to the legislation on children's rights. Participants did not use the term duty bearers, but saw themselves as uncompromising on the matter of challenging violations. They saw it as their duty to challenge the violation of children's rights by others. This included instances where other professionals violated children's rights. Child and youth care workers referenced the external authority of the child rights framework in feeling authorised to challenge such violations.

The data showed that child and youth care workers used their professional skills in confronting child rights violations, especially in the context of families. The participants were well-positioned to influence families positively in respect of cultural practices that may violate children's rights because of their cultural knowledge and understanding. This knowledge enabled them to be successful in influencing family behaviour in realising the rights of children. The data showed that participants were able to adapt to different cultural contexts in order to provide social services using their own cultural competence as an element in their repertoire of skills to protect children from cultural violations.

The data further reflected the sensitivity employed in the child and youth care work approach, which allowed for maintaining the relationship of influence with a family in the context of rights violation confrontations. Child and youth care workers were empathic in relation to the perceptions of families, and they adopted a delicate approach to influencing changes in perspective and behaviour regarding children's rights. Child and youth care practice enacted a rights-based approach. Such an approach "requires a paradigm shift towards respecting and promoting the human dignity and the physical and psychological integrity of children as rights bearing individuals rather than perceiving them primarily as 'victims'" (United Nations 2011: para. 3b). Such a rights-based approach was evident in relation to the interactions by child and youth care workers with both children and their families.

Sub-theme 2.2.3 Promoting participation

The right to participation is outlined in Article 12 of the United Nations Convention on the rights of the child (United National General Assembly 1989: 4). Children have the right to express their opinions and have these taken into account in all matters that

affect them (Jamieson 2017:90). However, the practical implementation of the principle of participation remains challenging (Collins 2016: 15). Further, interpretations and understanding of the nature of child participation differ (Jamieson 2017: 91). Smith, Fulcher and Doran (2013: 109) acknowledged the positive development of the promotion of participation in the context of the provision of care services. This study found that child and youth care workers displayed clarity of insight into the significance of participation for the development of self-esteem in children. Participants understood the importance of participation in relation to children's developmental needs, as well as in relation to their development of independence through engaging in decision-making.

This approach was consistent with the view of Melton (2008: 910) who observed that the intention of the UNCRC is to enable children to have the experience of feeling that they are human beings who matter. The data showed that child and youth care workers respect the views of children, and actively seek to create contexts in which children are able to express their views. Child and youth care worker participants expressed unequivocal understanding of the importance of child participation, as well as ways of supporting such participation.

Hall *et al.* (2014: 269) noted that implementing the principle of participation is difficult to achieve in the context of resource constraints. However, this was not a concern of participants, despite the resource constrained contexts in which they worked. Child and youth care workers, rather, provided evidence of having internalised an understanding of the principle of participation and were able to provide examples of applying that principle in the minutiae of life-space work with children and families in low resource contexts.

The final excerpt provided evidence of a child and youth care work approach to ensuring participation of an entire family in the context of exposing them to ways of understanding children and child-rearing that are new and different. It captured a non-confrontational approach to influencing family members through respecting their right to participation. The promotion of child participation was seen to be a key aspect of the South African child and youth care worker.

Theme 2.3 Centrality of life-space work

The concept of life-space work is a unique, key aspect of child and youth care work, and describes the difference between child and youth care work and other social service and human service workers (Phelan 2015: 40). Garfat and Fulcher (2012b: 5) asserted that child and youth care workers are “ideally situated to be among the most influential of healers and helpers” in relation to children and families. The profession of child and youth care work grew in the crucible where direct workers in residential care interfaced with children in the context of ordinary life events, that is, in the context of their ‘non-therapeutic’ time as the “primary agents of change” (Whittaker 2019: 5). In this context, a methodology for working with children emerged that broke from previous therapeutic paradigms that separated therapeutic interventions from the living environment (Trieschman, Whittaker and Brendtro 1969: xii). Local participants articulated the potential value of child and youth care workers entering into the worlds of children, demonstrating a strong grasp of the concept of working in the life-space. International participants noted that the concept of life-space work in South Africa was well understood by local practitioners and constituted a central feature of the profession locally. Life-space work is the quintessential element of the nature of child and youth care work and is the context in which all other aspects of the nature of the profession are situated in the South African context. Local participants succinctly described the concept of working in the life-space, displaying a sound grasp of, and reverence for, this approach to working with children and families. The data showed that child and youth workers articulated the inherent therapeutic and developmental possibilities associated with engaging with people in the context of their own lives. It described the value of the child and youth care worker being in the life-space of the service recipient, where the latter can be engaged in their most comfortable and undefended environment.

In the South African context, “[A] defining aspect of child and youth care work is that it is practiced in the life space of children, so that the physical context of the work is where children are at any moment – in their homes, in the community, in school, or in the street” (NACCW 2014: para 3 line 2). The concept of ‘working in the life-space’ recognises the potential for developmental and therapeutic work taking place outside of the therapeutic hour and beyond the walls of a formal physical setting. Hence, the term ‘life-space’. Child and youth care work takes place “in the natural places that

surround us, not in neutral or artificially constructed places” (Phelan 2015: 40). The data not only showed that this unique approach to providing social services in the spaces where people are living their lives is the foundational methodology applied by South African child and youth care workers, but that it is operationalised in the context of poverty, which is the central feature of the lives of most service recipients.

The data coalesced into four sub-themes which illuminated the concept of life-space work. These are described in the sections that follow. Each sub-theme described an aspect of the manner in which therapeutic and developmental work takes place in the life-space that is embodied in South African child and youth care practice. These sub-themes include: combining presence and action; engaging in daily life events; positively influencing experience; and impacting on experience as life unfolds.

Sub-theme 2.3.1 Combining presence and action

Participants described the impact of practitioner presence in the life-space, saying that life-space work involves action being taken by the fully present practitioner to intervene in a helpful manner in that context. Garfat and Fulcher (2012b: 16) acknowledged the complexity of describing the quality of being present and described it as a sense of “when I am with you I am *with you* and not somewhere else!” The potential power and comfort of the presence of a child and youth care worker, coupled with the action element of life-space work, was evident in the data. This reflects the characteristic of child and youth care work of “being and participating with people in the everyday moments of their lives” (Garfat and Fulcher 2012b: 8).

True life-space work is not simply defined by the physical presence of a child and youth care worker in the life-space of a person, but by the engagement of the child and youth care worker with the person in the life-space where that presence is used for developmental and therapeutic ends (Allsopp 2006: 2). Child and youth care workers fail when they are physically present in the life-space but do not “engage in processes taking place in that context to maximise learning and development opportunities for children” (Allsopp 2006: 2). The presence of the child and youth care worker in the life-space, in concert with the action being taken for the benefit of the person being helped, is life-space work. Child and youth care workers observe young

people's agency in their life-space and attend to the way in which their agency can be supported (Steckley 2013: 28). This effective combination of presence and action in support of the agency of the child or family member is reflected in the data. This shows the integration of the 'being' and 'doing' aspects of life-space work that has been articulated in the literature by Garfat *et al.* (2018: 16).

Sub-theme 2.3.2 Intervening developmentally and therapeutically through daily life events

Meier (1987: 6) articulated the importance of the "minutiae of everyday life events" in therapeutic work with children where such therapeutic work should be undertaken as the child lives his or her life, and interacts with the world, by the person who is in direct contact with him or her. The data showed that an integral aspect of life-space work in the child and youth care context is the use of daily life events for therapeutic and developmental ends. "It is in this combination of practical task and personal relationship that the opportunity lies for purposeful and valuable work" (Clough 2000, cited in Feilberg 2007: 33). Such daily life events may include activities associated with home life, such as gardening, cooking, personal care and grooming, and household cleaning activities (NACCW 2014, para 3 line 2). The data reflected the description offered by Phelan (2015: 9) that life-space work is "a process of experiencing life alongside others and supporting them to use this experience to change."

The use of daily life events for purposes of growth may appear ordinary and "unsophisticated" but child and youth care workers "know how much strategy and deep thinking is required to do this well" (Phelan 2008: 4). This context in which the work takes place requires a "different approach to delivering human services than the office-based approaches of most practitioners" (Phelan 2015: 40). A key aspect of life-space work as described by Garfat (2013: 2) as "making moments meaningful", was articulated directly in the data by a practitioner who described the potentially transformative presence of a child and youth care worker through their active engagement with the child in the life-space in the ordinary context of travelling to school.

The data further reflected Phelan's (2015: 22) description of the use of "strategically planned and spontaneous events in the life space" as a key function of child and youth care workers. The concept of life-space includes the dimension of time (Miel 1992: 457). Life-space refers not only to the spatial aspect, or the place where the intervention takes place, but also to the temporal aspect, in that child and youth care workers engage with children as their lives play out.

South African child and youth care workers are physically present in the life-space in the ordinariness of daily life events, and are emotionally attuned to the elements of the context itself, the service recipient, and themselves as the worker, finding opportunities for supporting the agency of the service recipient in their lives. Life-space work is a concept that melds the impact of the demands of the child's immediate context with the impact of the child and youth care worker being present, and using this presence to spontaneously create developmental and therapeutic opportunities in the flow of everyday life.

Sub-theme 2.3.3 Working with self

Professionalism is often associated with a separation between a professional and personal self which serves the purpose of defending and protecting the worker from strong emotions (Smith 2013: 137). Child and youth care workers are required to attend to the use of self in relationships with young people and families (Feilberg 2007: 34). Child and youth care workers are exposed in "a particularly unique way" as people to their 'clients', in that child and youth care work takes place in the shared life-space of children and worker in the course of the unfolding of life (Stuart 2013: 60). They may also be in the presence of clients for both short and very impactful periods of time, or for extended periods of time. The impact of people on others is linked primarily to who they are as people (Garfat and Fulcher 2012b: 18). The child and youth care work relationship is also characterised by authenticity, realness, and a personal sense of presence, as well as a sense of purpose generally associated with professional relationships (Anglin 1999: 145). This means that child and youth care workers have 'nowhere to hide' in the context of their work relationships with vulnerable people, since they are exposed in these encounters as the people who they are. White (2008: 127) noted that child and youth care workers are required to know how to conduct themselves – to know "how to be". This places unique responsibilities on child and

youth care workers to strengthen and develop themselves for the challenges and realities that unfold in the milieu. This necessity for, and commitment to self-development, was reflected in the data as child and youth care workers recognised the importance of self-awareness and self-development. This reflected that South African child and youth care workers recognise “the use of the self as a vehicle for growth and development” (Stuart 2013: 13). The unique ‘use of self’ is considered a key characteristic of the profession, and child and youth care workers become the main tools of their profession (Feilberg 2011: 60). This involves, among other elements, “openness, self-reflective attunement to others, commitment and emotional maturity” (Feilberg 2011: 60).

The data revealed that child and youth care workers experienced themselves as being developed through the process of engaging with service recipients. Phelan (2015: 42) said that many child and youth care workers in *Isibindi* projects have experienced similar trauma and difficulties in their lives as have their service recipients, but the experience of working in the child and youth care work modality provided them with opportunities for personal growth and healing. He asserted that the particular aspects of child and youth care work of life-space work and relational practice contribute to this being the case. This phenomenon is described by Fenton (2019: 90) in the following statement, “[P]aradoxically, in attempting to help others, the children and young people and their families I encounter in my practice, I have found that I have benefited personally, oftentimes through vicarious processes”.

Theme 2.4: Primacy of relationships

The study found that there is an emphasis on *relational practice* in South African child and youth care work. There is a great deal of consensus with regards to the matter of the centrality of relationships in child and youth care work (Steckley 2020: 1). Local participants across all samples pointed to the primary role that relationships play in child and youth care work practice. The capacity to build relationships was perceived to be a make-or-break foundational skill in child and youth care work. This is consistent with the importance ascribed to relationships in the international literature on relational child and youth care practice. Relational practice views the relationship that develops between child and worker as being mutually impacted on, and the central point “around

which all other characteristics of practice revolve” (Garfat *et al.* 2018: 14). The term ‘relational child and youth care practice’ is widely used and denotes a focus on a “co-created space” between the worker and the child or family member, where the impact of both the worker and the other person in the relationship are taken into account (Garfat and Fulcher 2012b: 7).

Relationships in a child and youth care context are potentially complex, since they emerge in encounters between worker and child or family in the context of a shared physical space. This space can be shared for either a short or an extended period of time. Child and youth care workers need to connect with children and at the same time keep themselves emotionally safe (Phelan 2015: 127). This nuanced position allows the child and youth care worker to be of assistance to the child. This element of maintaining professional boundaries, yet engaging in a relationship, is common in the helping professions (Smith, Fulcher and Doran 2013: 137). The child and youth care work approach to relationships is, however, different from that of other helping professions in that the relationship exists in the context of everyday life encounters, as opposed to being within the context of a sequestered space. As a result of working in the life-space, child and youth care practice requires a significant amount of openness from the worker (Bellefeuille and Jamieson 2008: 36). Further, relationships established by child and youth care workers are considered to have at their core an authenticity or genuineness (Smith, Fulcher and Doran 2013: 132). This unique aspect of child and youth care work must be taken into account in order to ensure that “professional boundaries are to be established and maintained” (Davidson 2004, cited in Steckley 2020: 3).

The data reflected that relationships in child and youth care work are necessary, not in and of themselves as such, but for therapeutic and developmental ends in the life of the person being serviced. Child and youth care workers build relationships with children and families in order to become persons of influence in their lives, as well as to offer therapeutic relational experiences. The therapeutic value of a relationship between an individual and a child and youth care worker is widely accepted as being key to healing from trauma and emotional pain (Jackson, McKenzie and Frederico 2019: 113; Brendtro 2019b: 12; Fenton 2019: 98).

The data in the current study identified aspects of relationship building which included: the conscious building of role-free non-hierarchical relationships; the importance of listening in building relationships; the element of love in child and youth care work relationships; supporting family relationships; and the challenge of building relationships in time-bound contexts.

Sub-theme 2.4.1 Consciously building egalitarian relationships

In relation to the matter of the primacy of relationships, a sub-theme that emerged was *the conscious, egalitarian approach to building authentic relationships* in the South African context. Participants described actively seeking to connect with children. This conscious and active approach to establishing relationships was described by Gharabaghi and Stuart (2013a: 108) who observed that “building relationships is not a passive activity. Every opportunity must be sought to actively create relationships of trust and caring”. Child and youth care workers saw themselves as responsible for establishing relationships with young people. They described the onus for the relationship building process as resting with themselves, thereby reflecting the assertion that child and youth care workers build “connections deliberately” (Phelan 2015: 64). Participants described being conscious of ensuring that their demeanour was attractive to young people in order to establish rapport.

The data revealed that a central element in practice is approaching children and families in an apparently role-free and authentic manner. This approach places the child and youth care worker in a relationship of equality with the person with whom they are attempting to connect. Phelan (2008:4) described this as a “non-expert stance”. Such egalitarian relationships can also be considered to be equal relationships (Phelan 2008: 3). The term ‘humble’ was used in the data to describe the demeanour of the child and youth care worker when approaching young people or families. The ethical approach to building connections is one where the power is equalised (Stuart 2014: 67). This approach can be contrasted with coercive engagement which is detrimental in a child and youth care context (Brendtro 2019a: 19). Young people are also quickly able to discern whether child and youth care workers are genuinely interested in them (Anglin 2002: 130). In order to gain the trust of young people, child and youth care workers must be “trustworthy (honest, reliable, and available) and must find ways to establish warm, healthy connections” (Bath 2019:

136). The data demonstrated the consciousness of South African child and youth care workers in building such relationships.

In the South African context, relationships with children and families are built using this egalitarian approach, avoiding a sense of disparity in status between worker and family due to the socio-economic status of the families. This flattening of power relations is an aspect of the child and youth care work approach in the South African context.

Sub-theme 2.4.2 Listening

Listening is listed as one of the numerous competencies in the CYCCB Competencies for Professional Child and Youth Care Work Practitioners included in the section on relationship and communication under interpersonal communication (Mattingly, Stuart, and Vander Ven 2010: 17). Anglin (2002: 127) noted that “listening and responding with respect to youth helps them to develop a sense of dignity, a sense of being valued as persons and a sense of self-worth”. Participants considered listening to children to be an important aspect of what they do in building relationships. They were mindful of being non-judgemental when listening, and of approaching listening by employing conscious attempts to regulate their responses to show empathy and support.

The fact that child and youth care workers considered listening to children as so important may connect to the context of poverty in which they are deployed. Child and youth care workers were aware that caregivers were often too stressed to be able to afford their children the time to be able to listen to them. This was referred to in the data where the element of affording children time was described as significant. Evidence has shown that caregivers living in poverty experience a “morality of despair” which is considered “a poor foundation for communication between generations” (Nilsson *et al.* 2020: 798). Franklin and Goff (2019: 100) noted that communication is “embedded in the emotional, personal contexts and scripts” which impact on people. Parental stress, which is experienced daily and is associated with poverty, impacts negatively on children (Brown *et al.* 2016: 593).

Being listened to may be experienced as something out of the ordinary for many children in South African social service programmes. Children report that they do not feel that adults listen to them (Bray *et al.* 2010; Clatcherty and Associates and Donald

2002, cited in Jamieson 2017: 92). Evidence suggests that children involved in protective services do not experience themselves as being listened to (Tucker 2011, cited in Damiani-Taraba *et al.* 2018: 76). Service recipients consider a hallmark of good child and youth care practice being listened to and having their viewpoint appreciated (Phelan 2015: 19). The data reflected the importance of child and youth care workers being non-judgemental and nondirective when listening to children.

Sub-theme 2.4.3 Relating in the context of diversity

South Africa is a culturally diverse country, signified by the fact that 23 different languages are spoken in the country (Ibrahima and Mattaini 2019: 807). Cross (1988: 1) described cultural competence as “a set of congruent behaviours, attitudes and policies that come together in a system, agency or professional and enable that system, agency or professional to work effectively in cross-cultural situations”. Sue (1998, cited in Moleiro, Marques and Pacheco 2011: 767) described cultural competency as being “a process, orientation or approach”. These authors described cultural competency as being a way of thinking about the engagement between service recipient and worker (Moleiro, Marques and Pacheco 2011: 767). Cultural safety includes freedom from discrimination, as well as freedom from “threats to identity and cultural isolation”, and is an important element of service delivery (Jenney 2020: 96).

Child and youth care workers interface directly with children in residential care and other settings. Child and youth care centres accommodate children from diverse cultural backgrounds (Malatji and Dube 2015: 111). Regulations to the Children’s Amendment Act 41 of 2007 (South Africa, DSD 2007: 74) requires that the “cultural, religious [and] linguistic heritage” of children is respected in child and youth care centres. Further, given that children may live in child and youth care centres for extended periods of time, the staff of children’s homes may be entrusted with “fulfilling the responsibilities of families” (Malatjie and Dube 2015: 109). This requires child and youth care workers to display cultural sensitivity in servicing children.

The data showed that child and youth care workers were cognisant of the matter of cultural diversity in interactions in the life-space of children and families. This respect

for culture allowed them to build relationships with children and families. Child and youth care workers were aware of the following: not imposing their own cultural expectations on children and families; avoiding seeing their own cultural standards as the right way to do things; respecting cultures of families; and respecting linguistic heritage in the course of undertaking life-space work. This allowed them to build relationships with children and families where cultural differences were present by bridging these differences.

Participants saw the need to be culturally sensitive in their approach with families. This extended to participants adopting unfamiliar personal dress codes in order to enter into the life-space of people who had culturally different expectations from their own. The data highlighted an incident where a child and youth care worker's commitment to linguistic diversity was tested by a family member. The child and youth care worker light-heartedly went along with the insistence by the family member to speak her language, and in doing so was able to establish rapport with a resistant person. This demonstrated an ability to work deftly with the resistance of the service recipient in an interpersonal space that was potentially conflict ridden.

The CYCCB listed cultural and human diversity as one of the five domains of competency for child and youth care workers (Mattingly, Stuart, and Vander Ven 2010: 12). This competency domain outlined foundational knowledge as well as competencies on "cultural and human diversity awareness and enquiry" and "relationship and occasion" as well as "developmental practice methods" which are sensitive to cultural and human diversity. This demonstrated that being able to work in multicultural contexts is considered essential for child and youth care workers in the North American context. In South Africa, this competency is included in the curriculum for the training of child and youth care workers at auxiliary level (SAQA 2018b; 2018c). Cultural diversity is likewise included in the curriculum of the bachelor's degree at Durban University of Technology (SAQA 2018).

Sub-theme 2.4.4 Relating in time-bound contexts

The data revealed that some South African child and youth care workers are deployed in settings where they engage with children and families in time-bound contexts. Their interactions are affected by the limited time they have to spend with the people with

whom they work. Halliday (2020: 67) observed that child and youth care practice is being implemented in new settings where it is not possible to build up relationships over a period of time, where child and youth workers practice in the context of short lived, sometimes single-instant encounters with children and families. The data showed that a feature of such contexts is that child and youth care workers are required to ensure that service recipients access a particular service. This echoes an international reality where programmes are affected by “targets, technical rational approaches and measurable outcomes” (Steckley 2020: 9).

Holden and Sellers (2019: 66) noted that “the child – adult relationship is commonly recognised as the key to providing effective interventions”. This remains the case in time-bound contexts where brief but positive powerful connections can be established with young people (Krueger 1998, cited in Brendtro and du Toit 2005: 56). The data revealed that relationships are central to convincing a person to access a service deemed good for them, but such relationships must be established very rapidly, and are likely not to be maintained through regular contact beyond the initial social contract. Such situations were identified as placing a new and unfamiliar set of responsibilities on child and youth care workers to be able to establish relationships that allow for powerful motivation of the service recipient in a very short space of time. This study, thus, identified relating in time-bound contexts as a new feature of relational work in the South African context.

Theme 2.5 Spirited care

The nature of child and youth care work in South Africa was further illustrated in the data through the spirited care provided by child and youth care workers. Mkhwanazi *et al.* (2018: 70) noted that “children’s experience of care is inextricably woven into the social fabric”. It emerged that the care provided by child and youth care workers was infused with a sense of spirit. This spirit was described by participants as being made up of a sense of profound commitment to the work itself and to the children and families being serviced. The data showed that the provision of care by child and youth care workers was suffused by a depth of genuine concern for and engagement with the individuals for whom they provided care. The following three sub-themes emerged from this primary theme: *the spirit of Ubuntu*, *love in care* and *work as a calling*. These are discussed further below.

Sub-theme 2.5.1 The spirit of Ubuntu

The data showed that the spirit of Ubuntu permeates child and youth care work in South Africa. The concept of Ubuntu speaks to the interrelatedness of human beings with one another at an elemental level (Beukes and van der Westhuizen 2018: 7). The data revealed that practising the spirit of Ubuntu was challenging and a concerted effort was made to practically express Ubuntu. In caring for children beyond their work contexts and responsibilities, extending their concern for children to those beyond their professional purview, child and youth care workers embodied the spirit of Ubuntu. This echoed the concept of the philosophy of Ubuntu, asking that people “live, on a daily basis, for the wellness of the whole community without exception” (Beukes and van der Westhuizen (2018: 7).

Child and youth care workers use the relationship that they develop with children to help them as they develop (Smith 2009: 120). The concept of relational child and youth care practice describes the mutually created relational element between child and worker, emphasising the two-way quality of such relationships (Garfat 2013: 9). This understanding of relational child and youth care work is fundamentally in accord with the concept of Ubuntu which understands “human *being-ness* or existence as ‘relational’” (Etieyibo 2017: 318). More than, and deeper than a sense of the value of another person, the philosophy of Ubuntu recognises humanity as one, and connections, linkages, and engagement between people as being the hallmark of what it is to be human, “my humanity is inextricably bound up in yours” (Etieyibo 2017: 318). This concept of ‘mutuality’, and the value accrued to the child and youth care worker through the practice, was articulated in the data. This two-way nature of the benefit of child and youth care work, where the worker is themselves impacted positively by the practice, was articulated in the literature by Fulcher and Garfat (2008: 8) who asserted that through “we are engaged with the young person at a deep and profound level which impacts both the young person” and the child and youth care worker themselves. This bidirectional impact of caring, where the worker, as well as the child or family, are both positively affected by the caring relationship was noted to be present in child and youth care practice in South Africa.

It was further noted that whilst the spirit of Ubuntu is present in South African child and youth care work, this has not, as yet, been articulated in the literature.

Sub-theme 2.5.2 Love in care

The notion of *working with love* emerged as an aspect of caring in child and youth care work in South Africa. The data reflected that the term 'love' in the professional child and youth care context described a depth of compassion, empathy, and a profound respect for the humanity of the other. In an iconic statement, Bronfenbrenner in 1981 asserted that "every child needs someone who is irrationally crazy about him or her" (Brendtro 2006: 163). Brendtro and Ness (1983: 64) made a point about the validity and therapeutic value of the presence of love in the context of child and youth care work and quoted Keith-Lucas's (1981) well-known axiom that "one doesn't have to behave in order to be loved, but be loved in order to behave". Despite this, outright statements on the value of love are scarce in the context of professional literature (Brendtro and Ness 1983b: 64). Fenton (2019: 98) likewise noted that the concept of love in child and youth care work is not well understood, is undervalued, and is infrequently discussed in the literature. Fewster (2014: 202) confronted what he observed to be an approach in the professional literature that eschews any discussion of love as unprofessional. He noted a tendency to dismiss considerations on love in child and youth care work "as wishy-washy claptrap regurgitated by well-meaning dogooders" (Fewster 2014: 202).

Local participants considered that love may be experienced by both children and child and youth care workers, and underscored the legitimacy of working with love. This view is reflected in the observation that whilst the subject of love may not be able to be included in the curriculum for training child and youth care workers, it nonetheless should be present in the actions of workers (Brendtro and Ness 1983b: 64). However, Anglin (2019: 15) noted that the concept of love in child and youth care work should be approached cautiously. Similarly, Smith (2012: 67) opined that the concept of love in child and youth care work settings is not "clear-cut". This was reflected in the data which raised the complexity inherent in the discourse on working with love, noting that there is "uncertainty ... about how we can talk about" love. This demonstrates the ambivalence within the field on the matter of articulating the role of love in the context of caring by child and youth care workers in the professional literature.

However, some authors pointed to the fact that the concept of working with love is presently being more freely considered in the literature (Skott-Myhre and Skott-Myhre

2007: 55; Stuart 2013: 9). Garfat and Fulcher (2012b: 17), in their list of characteristics of child and youth care work, included the notion of love as a characteristic, saying that in child and youth care work “one acts in the context of love in a non-exploitative manner”. Smith (2012: 72) pointed out that the context of child and youth care work practice provides for the development of love. A local author, Thumbadoo (2012: 197), considered that love can be an element of a strong and positive relationship in a child and youth care work context. Reflecting on the community-based South African context of the *Isibindi* model, Thumbadoo (2012: 197) said that "caring and love intermingled in the encounters between the child and youth care workers and children".

Furthermore, the data revealed that love in the form of reverence for the value of the child or family member is an element of the child and youth care work relationship. The term connoted a depth of caring for the humanity of the other. The emergence of current discourse on love in the international literature was attributed to the South African context.

Sub-theme 2.5.3 Work as a calling

Child and youth care workers were frequently required to overcome grave difficulty in the course of providing services. This required a complex amalgam of qualities and attitudes on the part of the worker, and the presence of these qualities and attitudes created the conditions for a depth of caring which was identified as being present by participants. This reflected the concept of care as described by Fewster (2014: 196) as “a multifaceted enterprise involving emotions and actions that call for the highest level of commitment, understanding, and expertise”.

The phenomenon of child and youth care workers feeling called to the work is not unusual. Those involved in the work of caring for vulnerable and at-risk children in the early period of out-of-home care, were frequently connected to the religious orders who provided such services (Charles and Garfat 2009:18). Persons caring for children frequently felt called to provide for their religious instruction, considering this a calling (Stuart 2013: 7). Currently many child and youth care workers still experience themselves as being called to the profession in the sense that they are “passionate about, and devoted to, improving the lives of young people and families” (Stuart 2013:

7). Research has indicated that youth who have experienced residential care services consider it vital that child and youth care workers do not “see their work as ‘just a job’” (Anglin 2002: 130). The modern sense of being called to child and youth care work is linked to a sense of concern and commitment to helping children to find their way in life, rather than a religious imperative (Stuart 2013: 7).

The study showed that many South African child and youth care workers were motivated by the perception that the work was a calling, or a sense of faith which found an expression in child and youth care work. Stuart (2013: 8) noted that “if you’re called to the practice of child and youth care, it is more than something you learn about and then *do*, it represents who you are, in every moment of your day. It is your *being*.” Garfat and Fulcher (2012a: 1) speak of child and youth care work as “a way of being in the world”. This deep and positive sense of identification by child and youth care workers with their profession was expressed in the data.

Theme 2.6 Working with families

Children establish a sense of belonging in relation to their families (Smith, Fulcher and Doran 2013: 31). The data described the level of importance attributed to the child’s family by the child and youth care worker, reflecting an understanding of the family as a primary source of a sense of belonging for the child. Hence, the child receiving services is not seen as separate from a family, notwithstanding the family’s capacity. The child was seen as inherently belonging to a family, where all aspects of work with the child needs to take this reality into account.

Stuart (2013: 269) observed that child and youth care workers are as yet not universally working with families. However, this study found that child and youth care workers in South Africa characteristically work with and in the context of families. This was affirmed by an international participant who commented that family work takes place to a greater degree in South Africa than in other countries.

Garfat (2003: 4) observed that the profession of child and youth care work has, in the past, not considered work with families of children in care in a positive light, or working with them a priority, but he noted that this perspective has shifted and the profession is now engaged in supporting families. In the past, residential child and youth care

programmes tended to shield the children in their programmes from their families (Shaw and Garfat 2003: 40). An evolution in work with families within South African child and youth care settings has, however, taken place. During the 1980s, innovative family programmes in residential care began to be recorded in local literature (Nightingale 1990: 155-166; Quintrell and Crowley, 1988: 110-116). The immediate post democratic era saw the introduction of family preservation projects which included child and youth care work in community-based projects (Scott 1999: 9). The Children's Act (38 of 2005) currently makes provision for prevention and early intervention programmes, including family-based and community-based programmes in which child and youth care workers are included as social service professionals running such programmes (Jamieson 2013b: 53). This change over time has resulted in child and youth care workers in South Africa currently considering family work to be an integral aspect of their work.

Sub-theme 2.6.1 Prevalence of family work

Residential care should include an element of working with the family (Fewster 2003: 80). Moreover, family work is a key aspect of the work of child and youth care workers in community-based settings (Thumbadoo 2013: 25). The data showed that work with families was an aspect of child and youth care work in both residential or community-based services, permeating child and youth care work nationally. As noted by Shaw and Garfat (2003: 51), it is not the role of the child and youth care worker to establish the fitness of parents to manage their children, but rather to work to bring about change in the family's living arrangements so that they are less stressful for the members. Families require services to "promote caregivers ability to cope with stress and strengthen their support networks" (Mkhwanazi *et al.* 2018: 77). It is this role that child and youth care workers play in families.

In the South African context, the family was seen by participants to be made up of not only nuclear family members, but of extended family members and significant members of the community. Participants saw child and youth care workers as customarily working with extended family members, even when the child is the index client. This approach to working with extended families is documented in the context

of descriptions of family work in the context of the *Isibindi* model (Allsopp *et al.* 2018: 344-348).

Sub-theme 2.6.2 Life-space work in families

The scope of practice at both auxiliary and professional levels refers to undertaking life-space work with children, but does not specify that life-space work also takes place in families (South Africa, DSD 2014: 17-18). However, this study showed that working with families in their life-space is a feature of child and youth care work in South Africa. A child and youth care approach to family work is one which takes place in the life-space, the “natural environment” of the family (Phelan 2015: 153). The data confirmed that child and youth care workers in South Africa take the methodology of life-space work into families. In addition to being present in that life-space, they maximise the potential developmental and therapeutic benefits for families and children within that life-space. For this complex work there is no formulaic approach that can be rigorously applied and it is therefore “conducive to experiential approaches” (Phelan 2015: 153). The child and youth care worker must understand the family context and discern the potential developmental and therapeutic opportunities in the life-space, guiding families to maximise these opportunities. The data revealed that the approach to the work with families is that of managing the elements of the family’s everyday environment so that family members are able to realise the potential that lies within that environment to which they may be oblivious. This reflects the aspect of life-space work that is the “purposeful use of daily life events as they are occurring” (Garfat 2015: 33). This “involves identifying moment-by-moment opportunities” for growth and development (Allsopp *et al.* 2018: 346). The use of life-space interactions to create connection and change requires the child and youth care practitioner to be experiential and physically present in a way that most other professionals avoid” (Phelan 2008: 3).

The data described work that fits the description of a number of the “25 characteristics of a child and youth care approach to working with families” (Fulcher and Garfat 2015: 10). These include the characteristics associated with doing things with families (Fulcher and Garfat 2015: 15), and “hanging out” (Fulcher and Garfat 2015: 14). The former characteristic describes a way in which child and youth care workers assist people to learn through a process of doing family activities with them. The latter

characteristic refers to the informal “apparently simple, everyday (yet extremely important)” things that child and youth care workers do with families (Fulcher and Garfat 2015: 14). This description aptly ties in with that of Shaw and Garfat (2003: 43) who noted that child and youth care workers work with families through “being with them while they are doing what they do”.

A South African approach to child and youth care work in families includes providing practical assistance to families. In circumstances of poverty, people’s basic needs are often not met, and child and youth care workers engage themselves in providing practical support to families. The data showed that child and youth care workers build trust through this engagement by providing practical relief for families in the context of the stress of poverty by leveraging resources. In the context of providing practical support, child and youth care workers also provide emotional support to families. This element of supporting families is consistent with the view that child and youth care workers work in families in such a way that enables families to “function more effectively and to acquire the competency and hopefulness” that will assist them to manage life better (Phelan 2015: 153).

Sub-theme 2.6.3 Strengthening family relationships

South African child and youth care workers apply relationship building in the context of families, both to build relationships with family members, as well as to *strengthen the relationships that exist between family members*. The data revealed that child and youth care workers approached building relationships with families in a non-invasive manner. A subtle and humble approach to building trust with a family is described in the words “you let them allow you into their lives”. In this excerpt, the child and youth care worker described their unassuming presence in the life of the family. In the words, “we come in silently”, the participant described the role free engagement of child and youth care workers, where they enter the lives of families in an unimposing and informal manner. This approach is consistent with that of Phelan (2015: 156) who asserted that the context of the family is an important context in which the child and youth care worker must be “humble and affirming”. By adopting this approach, they are able to catalyse change for the better without setting up resistance on the part of the family and meeting with defensiveness. The data showed that by being present in the life-space of the family, the child and youth care worker was able to bring a subtle

but different element into the family, as is seen in the words “you come with a special touch that they need”. This echoed Fulcher and Garfat’s (2015: 11) view of the role of child and youth care workers in meeting families “where they are at”. This conveys both being in the physical space where the family is encountered, that is, their life-space, but also describes the quality of emotional acceptance of who the family are as people.

The study provided evidence that child and youth care workers become bridges between family members, facilitating the relationships and connections between members whose bonds may be frayed. Phelan (2015: 156) noted that “a child and youth care approach included using the family’s life space and shared lived moments to facilitate helpful interventions.” Such assisting interventions include supporting family members to reconnect or strengthen the bonds between them. Child and youth care workers work holistically with families, understanding that the quality of relationships between all family members impacts on the way in which a family functions.

In the context of supporting and strengthening families, child and youth care workers engage themselves in strengthening family bonds between any family members who may impact on the well-being of the family. This included extended family members who may seem peripheral, but yet may influence family functioning. Participants reported consciously working towards strengthening family relationships in the best interests of the child. This process is articulated by Fulcher and Garfat (2015: 12) who noted the importance of child and youth care workers establishing connections with all members of the family, but at the same time supporting the development of relationships between members. Child and youth care workers also apply the principle of participation in working with families. Participation is noted to be an important aspect of child and youth care work with families (Fulcher and Garfat 2015: 54).

Family group conferencing emerged as a specific methodology to strengthen relationships between family members. A family group conference provides an opportunity for all relevant family members to engage in a process of healing and decision-making, and can be facilitated by child and youth care workers (South Africa, DSD 2010b: 204).

Theme 2.7 Struggle for recognition

The status of the child and youth care work profession has been considered in the international literature for over four decades (Beker 2001a: 345). Concern for the professionalisation of the field was evidenced in the early 1990's when the NACCW set up an internal voluntary regulatory process for child and youth care workers (Du Toit 1993, cited in Allsopp 2015: 34). The first members of the Professional Board for Child and Youth Care were elected in 2003 (Allsopp 2015: 40). The field has been statutorily regulated since 2014 when regulations to the Social Service Professions Act 110 of 1978 (South Africa, DSD 1978) were signed to allow for the regulation of child and youth care workers with the SACSSP (South Africa, DSD 2014: 17-18). The development of the field in South Africa was acknowledged with admiration by international participants.

Participants recognised the development of the profession in South Africa. In doing so, they noted the positive impact of this development on services provided by child and youth care workers who had, in the past, before efforts were made to professionalise, been uninitiated into the caring of vulnerable children prior to taking up such responsible positions. Nonetheless, South African child and youth care workers lamented, feeling undervalued and relegated to an inferior status. However, Molepo and Delport (2015: 155) observed that child and youth care workers are not recognised in the same way as other professions in the social service arena.

The struggle for recognition emerged as a theme. The following three sub-themes are associated with this theme: the limited understanding of the role of child and youth care workers; the invisibility of the profession in community contexts; and the lack of distinction between auxiliary and professional level practitioners in the field.

Sub-theme 2.7.1 Limited understanding of the role

The study found that there was *little understanding of the professional capabilities* of child and youth care workers in the context of the social service professions. A participant (registered at professional level) indicated that the key performance areas associated with the job included descriptions of the housekeeping tasks that are part of the context of the daily life events in which she engaged as a child and youth care

worker. Her job description did not describe the life-space work that she undertook with children in the context of undertaking these ordinary daily living tasks, but the daily living tasks themselves. This demonstrates a lack of value being attached to the role of child and youth care workers in such settings. Charles and Garfat (2009: 24) contended that intentional disrespect is not usual from other professions towards child and youth care work, but that there is a lack of awareness of the role of child and youth care workers on the part of other professions. This reflects a common underestimation of the profession. When viewed through the lens of persons not familiar with child and youth care work, the richness of child and youth care work may be diminished or undervalued. Phelan noted that child and youth care work interventions often appear as ordinary and unspectacular, and observed that “what you see is often not what is actually happening” (Phelan 2015: 19). The job descriptions of child and youth care workers in the employ of the State do not reflect the richness and complexity of the range of roles and functions in the scope of practice written into legislation (South Africa, Department of Public Service and Administration 2008: 5-14). This suggests that at the level of the State, there is a limited understanding of the profession.

Molepo and Delport (2015: 155) concurred that the perception had “emerged that the Department of Social Development as the employer also does not recognise” child and youth care workers. However, Ranahan (2018: 148) observed that child and youth care workers can influence other professionals by valuing their own professional contributions and communicating their perspectives on children and families whilst they navigate through the care system. This was reflected in the data where participants described efforts made towards ensuring that the professional contributions of child and youth care workers are felt in multidisciplinary and multi-stakeholder contexts.

Sub-theme 2.7.2 Invisibility in community settings

Gharabaghi (2008: 155) contended that child and youth care work is viewed by both the public and other professionals as being situated “at the bottom of the hierarchy” within human services. Charles and Garfat (2009: 22) observed that child and youth care work has a “low profile” in the public arena, and that people are unaware of the profession as falling into the category of ‘caring professions’.

The data supported the notion that the title ‘child and youth care worker’ is relatively unknown. Child and youth care workers are discouraged by the lack of recognition and constantly having to explain the services that they offer to children and families. Practitioners are of the opinion that the profession is not well-known among the general population. This perception is confirmed by Molepo and Delport (2015: 155), who contended that those practising the profession are likewise not known and understood for what they do. According to Jamieson (2013a: 22), the process of supporting people in the profession requires efforts that will lead to “increases in individual productivity, job satisfaction and improved retention rates”. It is likely that this lack of recognition impairs the well-being of the child and youth care workforce and impacts on productivity, job satisfaction, and retention rates within the profession.

Sub-theme 2.7.3 Blurred auxiliary and professional roles

The study found that child and youth care workers experience no difference in terms of expectations of those operating at the auxiliary level and those operating at the professional level. Research undertaken in South Africa found that child and youth care workers were concerned that they did not receive recognition for obtaining qualifications in the child and youth care field (Molepo and Delport 2015: 155). Further evidence of this experience exists in that professionally qualified child and youth care workers are often paid at the same rates as those with auxiliary level qualifications (Jamieson 2013a: 24). Likewise, the national framework, which defines occupations, does not make a distinction between child and youth care workers at professional and auxiliary levels (South Africa, Department of Public Service and Administration 2008: 5-14). In relation to employment in the State, there is thus no mechanism for the distinction in employment opportunities between the two different levels of registration with the SACSSP. The data showed that whilst NGO employers were appreciative of the difference in the two levels of registration, they noted that financial constraints impacted on their ability to employ professional level child and youth care workers.

This points to two concerns. The first is a lack of consistency in the national policy framework related to child and youth care workers, where legislation on the regulation of child and youth care workers is inconsistent with the framework which deploys this cadre of workers. The second relates to fair labour practices, where either too much or too little could be expected of child and youth care workers at the different levels

due to the lack of distinction in their job descriptions. This is compounded by the fact that there are few opportunities for promotion as a child and youth care worker (Molepo and Delport 2015: 156).

Magnuson and Baldwin (2014: 13) asserted that efforts towards professionalism must be evaluated, and “self-correcting”. This evidence raised a question about the journey of professionalism of the field in South Africa, in that whilst legal recognition of the profession is in place, this has not been followed by widespread information sharing on the capabilities of child and youth care workers, or indeed reform of policy and legislation in other spheres of government that should reflect this change.

Theme 2.8 Practice settings

Gharabaghi (2008: 152) observed that child and youth care workers are employed in increasing numbers of contexts. Across such varied employment contexts, it is necessary that child and youth care workers understand the role to be played in such contexts (Gharabaghi 2008: 324). Child and youth care workers in South Africa are deployed within specific settings. Ricks and Charlesworth (2003: 45) observed that child and youth care work practice “does not occur within a vacuum, isolated from the rest of the world”. Contexts impact on the way in which child and youth care work is practised. Participants noted the impact of different contexts and the varying applications of the roles of child and youth care workers across these diverse contexts. The following four sub-themes reflect these contexts as follows: child and youth care centres; community-based programmes; educational settings; and health care settings.

Sub-theme 2.8.1 Child and youth centres

The Children’s Act 38 of 2005 (South Africa, DSD 2005: 80-82) legislates the provision of child and youth care centres for the provision of the residential care of children. The data described child and youth care centres as a setting in which child and youth care workers practiced. Child and youth workers in residential care facilities are engaged in everyday life activities with children. However, the data showed that in State facilities, the opportunity for children’s involvement in everyday life activities is limited

by the fact that people are employed to undertake these functions, and most everyday living tasks are done for the child.

The data confirmed that child and youth care workers working in child and youth care centres frequently experience the behaviour of children as challenging, and they experience themselves as being negatively affected by being exposed and vulnerable to such behaviour. It is widely acknowledged that children who are admitted into residential care include those whose behaviours may be found to be too challenging for them to be able to live in family settings (Modlin 2019: 46). Success in residential care settings is dependent on numerous complex processes that involve all aspects of the organisation, from the strategic planning level, to the capacity of management, to a commitment related to the best interests of the child, to the quality of the relationships established with young people (Graham and Fulcher 2017: 105). The study found that participants in child and youth care centres were cognisant of the expectation on them to manage the behaviour of young people. This was experienced as a demanding role in which little support was received.

Residential care environments are complex in that they, by definition, include groups of young people who are placed in care due to family trauma, and who are likely to display pain-based behaviour (Modlin 2019: 47). The data supported the potential therapeutic value of the work of child and youth care workers in child and youth care centres with children who have been traumatised.

Sub-theme 2.8.2 Community-based programmes

Whilst child and youth care work was, in the past, focused on work in child and youth care centres, the profession is now engaged in work in family homes, in community programmes, and in public environments (Gharabaghi 2008: 150). The data showed that child and youth care workers are deployed in community-based programmes.

Participants described working in community-based programmes, which included *Isibindi* projects. They articulated the complexities of working in such contexts and their role as child and youth care workers at the community level. They described engaging with families and with children in community-based child and youth care settings, such as safe parks. One such programme is the *Isibindi* model, which was

developed by the NACCW (NACCW 2015: 19). This is “an established programme that has been designed, tested, and is currently being taken to scale” (Mkhwanazi *et al.* 2018:79). Anglin and Brendtro (2017: 8) observed that child and youth care work as implemented in community-based programmes, such as the *Isibindi* model, is expected to predominate in the future in developing world contexts where large numbers of children require care.

Sub-theme 2.8.3 Educational settings

The data indicated that child and youth care workers have begun to work in *educational settings*. Schools are considered ideal environments in which to deploy child and youth care workers (Gaitens 2020: 8). Stuart (2014: 64) observed that child and youth care workers are presented with the challenge of “how to ‘live with’ children while not actually residing with them 24-hours a day” in non-residential settings. Participants described some of the functions of the child and youth care workers in these educational settings and indicated that they were able to contextualise the child and youth care methodology within educational settings. Services provided include preventing children from dropping out of school and assisting them to achieve positive educational outcomes. Child and youth care workers also support teachers to manage the behaviour of learners.

Sub-theme 2.8.4 Health care settings

Settings in which child and youth care workers have largely been deployed include those in residential care, school, and programmes in the community (Halliday 2020: 67). In the Canadian context, child and youth care workers are also based in hospitals (Halliday 2020: 67). In this context, it is acknowledged that, at present, no clear and broadly understood role or responsibility has been determined for child and youth care workers (Halliday 2020:67). The data showed that health care environments emerged as further settings in which child and youth care workers are deployed in South Africa. Child and youth care workers are working in the life-space of people when they are physically in health care settings. Their life-space is then physically situated and experienced inside a health care clinic or similar setting. Swanzen and Jadrijevic (2014: 135-135) identified “facilitating emotional resiliency” as a key function of child and youth care workers in health care settings. The data demonstrated that child and

youth care workers are engaged by health practitioners to provide psychosocial support and promote resilience, particularly for children and families who are HIV/AIDS infected or affected. Other functions described by Swanzen and Jadrijevic (2014: 136) include “creating stability and structure” and “promoting healthy lifestyles”. These functions were evident in the description provided by a participant of working in the life-space with people in the context of a clinic environment.

The data showed that health care settings present particular challenges for the provision of life-space work.

4.5 Data analysis, findings and discussion of Category 3

The analysis of the data in Category 3 resulted in four (4) themes and nine (9) sub-themes. These are presented below.

4.5.1 Data analysis of Category 3

Category 3: The educational preparation of child and youth care workers

Table 4.7 below outlines the themes and sub-themes that emerged under the category of *the educational preparation of child and youth care workers*.

Table 4.7 Themes and sub-themes in Category 3

Category 3: The educational preparation of child and youth care workers	
3.2 Educational preparedness for the workplace	3.1.1 Beneficial aspects of education 3.1.2 Disjuncture between theory and real-world practice
3.3 Curriculum	3.2.1 Indigenising current curriculum 3.2.2 Situating practice in SA education 3.2.3 Complex life-space work
3.3. Teaching approach	3.3.1 Theoretical focus 3.3.2 Inappropriate placement settings 3.3.3 Insufficient practical exposure 3.3.4 Increased supervisory support
3.4 Limited access to education	

Theme 3.1 Educational preparedness for the workplace

The data reflected a theme on the overall *preparedness* of students for the child and youth care workforce. Two (2) sub-themes emerged under this theme. The first was on the beneficial aspects of the education of child and youth care workers. The second related to the disjuncture between the theory component learned in the course of child and youth care worker education and the practice required of child and youth care workers in the workplace.

Sub-theme 3.1.1 Beneficial aspects of education

Participants described *positive aspects of the education* of child and youth care workers. Their comments are provided below:

“They write better reports by far [than those trained at auxiliary level]. There’s an, almost an element I want to say of a little bit of project management that they bring in ... Your BTech person can manage administration better and can hold the order and organising of things.” [EM Interview 4, Page 2]

“The person with the diploma develops faster than what the other person does. So we see more growth in that particular area in a shorter period of

time than what we do with the person coming in with the [FETC] qualification.” [EM Interview 3, Page 1]

“I have a degree, so it has brought confidence in my practice. I know that what I am doing is right, because the theories, the information I received, it taught me how to respond in certain situations as compared to before.” [PFG2, Page 8]

Sub-theme 3.1.2 Disjuncture between theory and real-world practice

Participants highlighted a *disjuncture* between their experience of learning child and youth care work in the educational setting, and their experiences of practice in the workplace. They observed as follows:

“The idea of child and youth care work we have when we are in varsity is very different to what we find when we get to the field of child and youth care work. When we are at DUT child and youth care work is not really what we find in the field and at work.” [PFG1, Page 7]

“When you observe people who been through the BTech degree and you observe people who have been through the qualification, the child and youth care practice somehow is far clearer understood by that person on the ground, the FETC one. Where the other person, there’s a lot of helping them with stuff, a lot of articulating for them what it is that you have to do here.” [EM Interview 4, Page 2]

Theme 3.2 Curriculum

The adequacy of the *curriculum* for child and youth care work students formed a second theme under reviewing the extent of preparation of child and youth care work students. Three sub-themes emerged under this theme, including the indigenising of the current curriculum, situating practice in a child and youth care work context, and complex life-space work.

Sub-theme 3.2.1 Indigenising current curriculum

Participants described their experience of aspects of the curriculum. They stated:

“This curriculum in level 8 is clearly in line with what child and youth care workers should be in terms of international thinking, international practice and [it is] current.” [LEX Interview 2, Page 1]

“It’s not as beautiful as it’s painted in the books [written by people from other countries], so I feel like it’s not good enough for our country. I think there are so many things that need to be tweaked in order for child and youth care to work for us. That’s why we are still in a bit of a pickle trying to explain what we do to people because it’s not our model.” [PFG3, Page 7]

“We don’t have a lot of maybe articles or books on child and youth care work in South Africa, even in Africa. If we had more of that it would also improve our practices. Just trying to ensure who are we as child and youth care workers in Africa. It would help.” [PFG2, Page 8]

Sub-theme 3.2.2 Situating practice in South African education

A further sub-theme that emerged related to the matter of *bringing the practice context into the focus of education*. Participants described this point as follows:

“[The education is] not adapted enough for the growing context already. Child and youth care workers are exploring their work in different settings. Already we don’t have material that shows our child and youth care workers, for example, work in schools. We don’t have enough material training child and youth care workers to work in the sexual offences courts.” [LEX Interview 4, Page 4]

“The sophistication required at implementation level, asks something far more in terms of training, and in terms of the integration of the contexts into the learning ... contexts are so vast in this country and programmatically fast.” [EM Interview 4, Page 3]

“It’s really understanding what I learn in class, is not what is going to be easy to implement and find, as a child and youth care worker. The satisfaction that I’m looking for in my job is going to have to shift.” [EM Interview 4, Page 8]

“When I look at what I hear from my social worker colleagues, they experience the same thing. There is no correlation between what it is that I am being taught at university, when I go do my practical is two total different worlds.” [LEX Interview 1, Page 13]

Sub-theme 3.2.3 Complex life-space work

The third sub-theme that emerged related to the extent of preparedness of students for undertaking *complex life-space work*. This is encapsulated in the following excerpts:

“Procedures are followed, protocols are in place, but in the actual praxis, at the day-to-day level, what I say to you and what the child says to me, and how I respond, there seems to be a slowness [in degreed child and youth care workers] in being able to understand what needs to be said and done and demonstrated in order to be really therapeutic.” [LEX Interview 2, Page 2]

“In our institution, we end up finding children who are just there for bed-and-breakfast, they do not respond to programmes and we tend to normalise that... but we are not assisting him then. What are we doing to the child? So I think that theory should expand to cover those elements as well.” [PFG3, Page 8]

“Child and youth care work isn’t just about providing the basic services to children. If any person comes in and I want to employ them, one of the key criteria for me is how perceptive are you to the challenges of the child, and then from that premise, what would your intervention strategies be? Very few of them [degreed child and youth care workers] could articulate what it is they think needs to happen here. So you have an opportunity to sit in a multidisciplinary team and give your opinion ... but you’re not able to tell me.” [EM Interview 1, Page 2]

Theme 3.3 Teaching approach

The third theme that emerged from the data was that of the *approach to teaching* child and youth care work. The three sub-themes associated with this theme are outlined below.

Sub-theme 3.3.1 Theoretical focus

The first sub-theme that emerged under the theme of the approach to teaching was that of a *theoretical focus*. Participants stated:

“So I think our education needs to come back to reality a bit and look at the challenges that are happening around the community in South Africa and try to make the theory to balance out what’s happening outside. Even now I am still struggling approaching a family as a whole – till today – I have been employed from January. I cannot deal with the whole family ... I feel that I’m not equipped to deal with the family as a whole. I would deal with a person on a one-to-one basis. In that way working up to the family. I can’t approach a family and deal with the whole family.” [PFG1, Page 8].”

“The problem we have is a historical one, in that the delay that we have had in the education and training of child and youth care workers at a fairly high academic level, more particularly masters and doctorates, has been incredibly slow. So we have a paucity of people with child and youth experience, who also have the right kind of academic qualification.” [LEX Interview 2, Page 1]

“There’s not enough of applying something into practice. Maybe their time in the actual experience, all the time in their degree is not enough. Or the person teaching them doesn’t have a broad or deep enough understanding of applying theory to practice.” [EM Interview 4, Page 2]

Sub-theme 3.3.2 Inappropriate placement settings

The second sub-theme that emerged related to *inappropriate placement settings*. Participants provided the following points:

“Maybe having like at least one day a month or even a week of practical. Not only like saying go to preschools, but can we also have an experience like work with colleagues like in Isibindi where you can ... work in communities. Get like different work areas of child and youth care workers.” [PFG2, Page 8]

“[The child and youth care staff at practice settings] did not show much of liking the job, so already with you going in with that passion and then you coming back from practical, it’s like a huge gap.” [PFG2, Page 9]

Sub-theme 3.3.3 Insufficient practical exposure

The third sub-theme that emerged was the *insufficient practical exposure*. The data showed that increased placement time for students in supervised practical settings was required. Participants provided the following observations:

“I think looking at the practical part of it ... Block placement somewhere in June or July, half the year has gone now. And coming in for one month and in one day in a week, by October they must be done ... So I think the time structure, the time structure needs to change there.” [EM Interview 5, Page 9]

“We need more practical in varsity before coming and working and getting the degree.” [PFG1, Page 6]

“One of the more powerful parts of most training programmes is the five or six hundred hours a year you’ve got to put in, in the field while you’re going to school.” [IE Interview 1, Page 7]

Sub-theme 3.3.4 Increased supervisory support

A sub-theme emerged in relation to a requirement for *increased supervision* of practical placement exposure. Participants indicated:

“And then when you come back from practical, there’s not much of how did you integrate the theory into practice? It’s reflection of what you did on a daily

basis. There is not much of a discussion to go around and say okay you had maybe a different experience because I understand going out to different crèches and different preschools will all come back with different learnings and different findings that we got there. There is not much of that unpacking. That now you guys have went. How was it after that? It was the theory interpreted into practice?" [PFG2, Page 9]

"The feedback from the lecturer [is absent] ... So we also need some feedback because what's happening, it's a one-way. You come here the first day, these are my students, you give them a rundown, orientation and whatever you're gone, as a lecturer and you leave your students." [EM Interview 5, Page 10]

"The way in which Isibindi would roll out, in terms of the learning taking place whilst at the same time practising ... the process of having learners in the community, learning, at the same time practising and reporting back. It closed that gap [between theory and practice] and it created an African model." [EX Interview 2, Page 3]

Theme 3.4 Limited access to education

The matter of *accessing child and youth care work education* emerged as a theme. Participants lamented the fact that there was a scarcity of opportunities to study child and youth care work. Participants expressed the following:

"There's a gap to a degree. Can you not bridge or do something? ... So how can we empower child and youth care workers to another level? I completed my FET. How do I get there to do my degree? And then you're not offering part-time. Is there anything else in between that the child and youth care workers can do? A diploma or something." [EM Interview 5, Page 9]

"We need more universities to take the child and youth care into a strictly child and youth degree." [LEX Interview 2, Page 2]

“We’ve also got to look and see how we can make it more accessible to people. So maybe the idea of it being, how can we do it online? When we say online on the Internet, you know, so can we do distance learning and is there a way to do that and so make it more accessible to people?” [EM Interview 2, Page 4]

4.5.2 Findings and discussion of Category 3

Theme 3.1 Educational preparedness for the workplace

The data provided perspectives linked to the overall preparedness of child and youth care work graduates for the workplace. This included two sub-themes, namely, the beneficial aspects of preparation, and the disjuncture between theory and real-world practice.

Sub-theme 3.1.1 Beneficial aspects of education

The data showed that degreed child and youth care workers were set up for the workplace, in that they were able to work in a systematic and orderly manner, having a project management capacity. Participants described child and youth care workers as having a foundation for future development within the profession that placed them on a rapid growth trajectory.

The capacity to think critically is generally considered to be attained through a university level education (Goodsett 2020: 1). Some participants noted that the theoretical understanding that they received in their education provided them with a level of professional confidence. “University education should equip graduates with the interest and ability to figure out what is the right thing to do for the right reason in each particular circumstance, and then how to align their actions with that judgement” (Schwartz and Sharpe 2010, cited in Bessant and Emslie 2014: 138). This professional self-assurance was described as resulting from practice being informed by its theoretical underpinnings, and the aforementioned capacity to discern appropriate intervention strategies based on an assessment of the idiosyncrasies of the situation and instant.

Sub-theme 3.1.2 Disjuncture between theory and real-world practice

Despite some participants expressing professional confidence resulting from their education, many others expressed a feeling of unpreparedness for the work after having graduated with a degree in child and youth care work. They experienced being ill-equipped for the difficulty of encountering the realities of the workplace. Curry, McCarragher and Dellman-Jenkins (2005, cited in Curry *et al.* 2011: 151) noted that there is increasing concern in various professions about the transferability of learning from a training environment to the job situation. The education of child and youth care workers should prepare students for the “nuances and challenges” that they are likely to experience within the workplace (Ranahan, Blanchet-Cohen and Mann-Feder 2015: 520).

Theme 3.2 Curriculum

The *curriculum* for child and youth care work education emerged as a further theme in relation to the extent of preparation of child and youth care work graduates for the realities of the work environment. The sub-themes of indigenising the curriculum, situating child and youth care work within South African practice contexts, and complex life-space work were sub-themes associated with this theme.

Sub-theme 3.2.1 Indigenising current curriculum

Due to its complexity, child and youth care work education may define the profession too broadly (Yakhnich, Grupper and Romi 2018: 47). However, the study showed that local curricula were up to date, focused appropriately, and based on an international understanding of the profession.

Nevertheless, participants were of the opinion that their education was not sufficiently relevant to the local context. This resonates with calls in the context of social work for teaching and practice to be adapted to local cultural contexts (Ibrahima and Mattaini 2019: 799). Participants viewed the learning that they had acquired to be not fit for purpose in the local context. Child and youth care practice was perceived as emanating from a different socio-political context and superimposed on the local reality. Hillman, O'Connor and White (2020: 57) observed that it is necessary to note “our field’s complicity in replicating dominant, racist, and Eurocentric views of normal childhood development”, warning that the discipline of child and youth care work is as

much susceptible to such a dominant perspective as others. “To correct erstwhile overemphasis on colonial and Eurocentric influences, there has been increasing emphasis on establishing Afrocentric paradigms and honouring Indigenous Knowledge systems in institutions of learning” (Hlongwane *et.al.* 2018: 53). Participants decried the paucity of African literature in their education and observed that the absence of an inherent African perspective within the course had limited their practice capacity.

Sub-theme 3.2.2 Situating practice in South African education

It is the responsibility of those teaching child and youth care workers to ensure that graduates are adequately prepared for the work environment (Shaw and Trites 2013: 12). As reflected in the data, students did not experience child and youth care practice as being contextualised within the South African practice reality. This limited their capacity as graduates to adapt to the work environment.

Participants observed that the varying contexts in which child and youth care workers are deployed were not referenced in the teaching environment. In addition, it appeared that the complexity encountered in the South African practice contexts were not brought across to students in the context of their studies. Shaw and Trites (2013: 12) further observed that child and youth care work characteristics were dissimilar in different practice settings. This lends credence to the notion that accurately representing the practice contexts of child and youth care workers is an essential element in their preparation for work. In conceptualising an integrative approach to teaching child and youth care work, Ranahan, Blanchet-Cohen and Mann-Feder (2015: 522) included, along with theory and knowledge and guiding principles and skills, the element of practice contexts in their model. In this regard, they referred to community-based, school-based, child protection and residential care practice contexts. The evidence suggested that the scant reference in the education of child and youth care workers to local child and youth care work practice contexts, limits their preparation for the work environment.

Sub-theme 3.2.3 Complex life-space work

It emerged that child and youth care work graduates are inadequately prepared to engage in *complex life-space work*. The education of child and youth care workers

must reflect the environments in which child and youth care workers will be engaged in the workplace, taking into account the complexities of such environments (Ranahan, Blanchet-Cohen and Mann-Feder 2015: 520). The data showed that child and youth care workers' education does not prepare them well enough for the critical reflection needed to meet the in-the-moment decision-making and response selection necessary for therapeutic child and youth care work, such as that required in residential care settings. Goodsett (2020: 1) observed that many graduates do not master the capacity to think critically, even when they have been exposed to pedagogy in this regard.

White (2008: 110) described child and youth care work practice as complex. As can be seen in the data, lack of competency in this regard impacts on the quality of services delivered to children, particularly those in residential care. Such environments are required to provide therapeutic services as per the Children's Act 38 of 2005 (Jamieson 2013b: 67-83; South Africa, DSD 2005). The failure on the part of child and youth care workers to work with complex young people in care settings can lead to their therapeutic needs not being met. Therapeutic child and youth care work incorporates a broad range of approaches to good practice. It also requires a nuanced approach about which there may be a variety of views in relation to "the challenging situations that confront direct care workers" (Curry *et al.* 2011: 157). White (2008: 130) noted that the teaching of child and youth care students needs to support "the development of reflexive, critically conscious, praxis oriented practitioners".

The data revealed that the nuanced approach required in providing therapeutic life-space work is not sufficiently incorporated in the preparation of students for professional child and youth care work.

Theme 3.3 Teaching approach

Sub-theme 3.3.1 Theoretical focus

The study found that child and youth care workers were not adequately prepared for practice. Magnuson (2014: 50) observed that within academic environments there is a movement towards "theories, discourses, and research methods that appear to be

unrelated to or uninterested in practice”. However, child and youth care work education must incorporate the teaching of a range of practical skills that would be applicable in child and youth care work practice settings (Ranahan, Blanchet-Cohen and Mann-Feder 2015: 520). However, the data showed that child and youth care workers felt inadequate when managing the demanding nature of the work situations that they encountered upon entering the practice environment.

Ward (2013: 56) asserted that there must be a commitment to “ensuring congruence between the relationship principles we are suggesting occur in practice, with the ways in which we are using relationship to promote development in child and youth students”. The data pointed to a concern in this regard, in that participants highlighted the limited practical experience of teaching staff. This impacted on the extent to which student child and youth care workers were exposed to practice. In teaching child and youth care work, it has been noted that theory and its application in practice must be connected (Huebner, Walker and McFarland 2003: 220). Those teaching child and youth care work are required to have more than a cursory understanding of the theory in the field and the methodology of intervention strategies (Ranahan, Blanchet-Cohen and Mann-Feder 2015: 528). A theoretical bias has been noted to disadvantage students of child and youth care work in that education should role model practical intervention (Curry *et al.* 2011: 155).

Sub-theme 3.3.2 Inappropriate placement settings

Participants concurred that *practical placement settings were frequently inappropriate* in that they did not provide learning contexts of a suitable standard for students. Placement experiences are frequently considered to have an impact, either positive or negative, on the internalisation of learning (Curry and Caplan 1996; Curry 2001; and Glisson and Hemmelgarn 1998, cited in Curry *et al.* 2011: 151). Participants observed that placement settings were considered to be inappropriate when they were not settings in which child and youth care workers are employed. Placements were also considered inappropriate when student child and youth care workers were exposed to jaded and unenthusiastic child and youth care workers in such settings. The latter demonstrated poor work performance, and did not provide the kind of role models needed for students to learn positive professional interventions.

Shaw and Trites (2013:3) stressed that faculty members should be “engaged in creative practice and building a pedagogical parody that models characteristics of practice and various current practice realities”. In contrast to this, participants observed that student child and youth care workers encountered fieldwork contexts that did not fit the paradigm that they had been exposed to in the university setting. The contrast between their exposure to the theory and their experience of the practice of child and youth care work was noted as a concern.

Sub-theme 3.3.3 Insufficient practical exposure

The study also found that *students’ exposure to practical fieldwork opportunities was insufficient* for optimal learning to be obtained from those experiences. The education of child and youth care workers “relies heavily on a practical component” (Shaw and Trites 2013: 12). Participants pointed to both the way in which the practical learning experiences were structured as well as to the duration of the practicum as being limitations. Curry *et al.* (2011: 155) noted that good education programmes strike a balance between exposure to theory and “an action orientation”. Participants noted the potential impact of the exposure of students to the practical fieldwork environment. This echoed the assertion that “internships are central for students to apply theoretical knowledge to youth work practice, and requires skills in a real-world context” (Ranahan, Blanchet-Cohen and Mann-Feder 2015: 529).

Sub-theme 3.3.4 Greater supervisory support

The need for *greater supervision* of students in their placement settings, emerged as a further sub-theme. Curry *et al.* (2011: 157) observed that in child and youth care settings, learning opportunities spontaneously emerge without the need for these being set up. This could be considered to be true of the practicum experience of student child and youth care workers. However, participants considered that there was insufficient reflective activity on the practicum experience after they returned to the university following practicum placements for them to maximise potential gains from such experiences. The matter of supervision of student placements has been a consideration in the literature for decades, as can be seen in the following point made by Vander Ven (1993: 277) about student supervision, where she posited that “another type of position must be developed: the practice teacher ... The practice teacher is a person specifically prepared to supervise and teach practitioners on-site”.

Participants pointed to the absence of a dedicated supervisor or mentor in the practicum situation. “Coaches work directly with practitioners to encourage the practitioner process of reflection in action” (Vander Ven 1993: 280). Such a role includes assisting students to apply knowledge gained in the practice situation (Vander Ven 1993: 281). The absence of such reflective thinking processes on the practicum experiences of students was also noted by participants. Such critical reflection can be defined as processes that involve students becoming conscious of their own cultural and psychological orientations, which influences how they view themselves and others (Mezirow 1978, cited in Samson 2015: 123). Participants observed that the translation of theory into practice was not consolidated in a reflective engagement with a lecturer or facilitator and, as a result, maximum benefit was not obtained from the fieldwork experience.

Theme 3.4 Limited access to education

A theme emerged on the subject of *access to child and youth care work education* by child and youth care workers in the field. Participants noted that there are few opportunities to study child and youth care work at university level in South Africa. Many participants had attained auxiliary level status through completing the SAQA level 4 qualification, the FETC: Child and Youth Care Work. However, upon completion of this course, participants noted that child and youth care workers are not able to access higher education.

It was observed that there is a move towards accessing higher education on online platforms (Stedman & (sic); Adams 2014, cited in Goodsett 2020: 1). Such offerings can be carefully created to provide simulated classroom experiences for people who are not able to access education opportunities due to distance (McClellan 2016, cited in Goodsett 2020: 1). It has been noted that critical thinking can be fostered through online education by “providing students with focused, provocative discussion questions and topics can help to promote this kind of thinking” (Goodsett 2020: 5). Participants noted that few universities offer bachelor degree training programmes in child and youth care work, thereby limiting the access of child and youth care workers to the courses; thus, online offerings were considered a potential remedy to this situation.

4.6 Data analysis, findings and discussion of Category 4

This section provides the data analysis, findings, and discussion of the knowledge and skills that were required by child and youth care workers in the course of their education.

4.6.1 Data analysis of Category 4

The data analysis of Category 4 gave rise to the following two (2) themes and five (5) sub-themes.

Category 4: Further knowledge and skills needed

Table 4.8 below outlines a summary of the two (2) themes and five (5) sub-themes that emerged under the category of determining the further knowledge and skills required by child and youth care workers.

Table 4.8 Themes and sub-themes in Category 4

Category 4: Further knowledge and skills needed	
4.1. Teaching the essence of practice	4.1.1 Application of theory to practice
	4.1.2 Self-development
	4.1.3 Complex life-space practice
4.2. Indigenisation of child and youth care work education	4.2.1 Indigenous practice knowledge
	4.2.2 Orienting to South African contexts

Theme 4.1 Teaching the essence of practice

This theme emerged in relation to the matter of teaching the essence of child and youth care work. This is noted as follows:

“How do we make sure that people come in and we actually write the DNA of child and youth care work into them? So when they go to the field, they have this understanding of what I can expect in the field.” [LEX Interview 1, Page 9]

The sub-themes derived from the data were as follows:

Sub-theme 4.1.1 Application of theory to practice

Participants observed the need to increase the *application of theory to practice* settings as follows:

“You don’t want to be sitting just teaching theory, I think that you’ll then lose child youth care work. You going to have to balance between the theory and then the practice, but you’ve got to link it and I think that’s vital, is to make sure that we are linking the practice and the theory.” [EM Interview 2, Page 9]

“Until we take a genuine trauma-informed, developmental trauma-informed approach to the education of staff, then I think we’re still going to continue to have this problem, which means that our group work for example, if I were teaching group work, the group work should be about us as a group as opposed to doing it to others ... If we are talking about families, let’s not talk about doing to families, start with our own family. Let’s build our own genograms and look at our own life history. And by starting that way, we can, I think, at least come close to providing an experience for people where they might be able to learn the skills necessary to, and actually help them work through some of their own stuff.” [IE Interview 4, Page 6]

Sub-theme 4.1.2 Self development

The need to focus on the *development of aspects of self* in the course of child and youth care worker training emerged as a sub-theme. Participants stated:

“You get those coming in with diplomas, they’re young, they’re sassy, they think they know everything. And you scratch a little bit under the surface, and they have massive issues ... that then gently you have to start confronting. And they start crumbling you know, and then you’ve got to be sure that you can hold them while they fall to pieces and help them kind of put themselves together to carry on”. [EM Interview 3, Page 5]

“If we don’t bring training in here that helps child and youth care workers, that holds them so as, to be able to look after themselves in that context, it’s

not going to last. Child and youth care workers are not going to last. Because of the harshness and the pressure.” [EM Interview 4, Page 6]

“A lot of people run away from relational practice because it demands a certain kind of intimacy and openness of boundaries – that then places you in a much more vulnerable position.” [IE Interview 4, Page 5]

Sub-theme 4.1.3 Complex life-space practice

Participants observed that an increased focus on therapeutic child and youth work practice was required, encapsulated as follows:

“We are working with children with cognitive disorders and with psychiatric conditions. The book does not cover this.” [PFG3, Page 8]

“[A child] will defy rules and it gets to a point where we as child and youth care workers don’t really know what to do. It’s not that you don’t want to assist the child, but you are literally stuck. You’ve applied your theory, you’ve applied whatever strategies you can think of, and there’s just something that doesn’t work.” [PFG2, Page 8]

“I don’t think that’s [only] South Africa’s problem. I think that we have lots of child and youth care workers almost everywhere that have a very simple approach to delivering some of the programmes, and they’re using buzzwords. And again, whether it’s the circle of courage, or the resiliency frameworks, or trauma informed care, I mean that they’re basically just not understanding how to individualise those approaches based on the developmental dynamics of each person. And really understanding their own developmental dynamics.” [IE Interview 1, Page 5]

Theme 4.2 Indigenisation of child and youth care work education

Another theme that emerged was the *need to indigenise the education* of child and youth care workers. Two (2) sub-themes emerged from the data under this theme. They are as follows:

Sub-theme 4.2.1 Indigenous practice knowledge

Participants noted that *practice knowledge* in child and youth care work needed to be indigenised. They said:

“We need to follow the pattern of social work in that they’ve got a huge movement to the indigenisation of their curricula and their material ... We can learn a lot from Isibindi in terms of indigenous practice, and it needs to be escalated into a more academic level of training and education.” [LEX Interview 2, Page 3]

“We’ve had such phenomenal cases that you’ve been given approval by families to share. We have so many stories. I can think of so many stories we’ve been given approval by families to share because they like the work that you did. Study those cases to actually understand what it is that I’m supposed to do as a child youth care worker.” [PFG1, Page 9]

“There is enough evidence and research out there, particularly around community child and youth care workers, that the university should give attention to extracting the richness [from].” [LEX Interview 4, Page 10]

Sub-theme 4.2.2 Orienting to South African contexts

Exposure and orientation to South African workplace settings during child and youth care work education emerged as a further sub-theme under the theme of indigenising all child and youth care work education. Participants stated:

“Whether we do enough of the community work I don’t know ... But maybe that’s got to come in, a certain understanding of how to do and how to work in a community.” [EM Interview 2, Page 8]

“Even videos like that could be helpful for us. Because it brings some of it into the classroom or into the educational environment. But if all we do is talk about [the work] people ... won’t get the picture that’s in your head because you’ve had the experience, and you know what it’s like. They hear you, but

because that's not within their realm of experiencing, they won't be able to create an image." [IE Interview 4, Page 7]

"Maybe if we could even add seminars of having a person who's worked in the community at NQF level 4, with degree students, not that doctored, well presented, well-prepared person – like the rawness of child and youth care work – so that people can actually understand what are the highlights of this profession what are the challenges. How do you overcome the obstacle?" [PFG1, Page 8]

"Their capacity to respond in different settings has to become the theory that is taught at universities and in training programmes. We need to build from the practice the experiences that need to be captured in more effective academic teaching." [LEX Interview 4, Page 9]

4.6.2 Findings and discussion of Category 4

Theme 4.1 Teaching the essence of practice

The process of learning child and youth care work is both complex and demanding (Hills 1998, cited in Shaw and Trites 2013: 12). Anglin and Brendtro (2017: 7) observed that "the enduring wisdom and enduring values of the professional culture need to be passed on". Participants noted that teaching child and youth care work needed to eventuate in students being able to function within a child and youth care work paradigm prior to them entering the workplace. The theme of teaching the essence of child and youth care work practice emerged in the study. This theme included several sub-themes, namely, the application of theory to practice, self-development, complex life work, and supervision training.

Sub-theme 4.1.1 Application of theory to practice

"Many faculty write and do research from theoretical positions and using methods that distance them from practitioners" (Magnuson 2014: 51). However, participants considered that an aspect of teaching the essence of child and youth care work included linking theory and practice in both the classroom and the practical teaching

process. Such an approach requires lecturers to model skills that they are teaching (Shaw and Trites 2013: 12). Education is made up of both content and the process of delivering the material (Sallah 2014: 73). Child and youth care work lecturers and facilitators need to “model skills such as effective engagement and advocacy” (Ranahan, Blanchet-Cohen and Mann-Feder 2015: 538).

In adopting such an approach, lecturers are able to make use of incidents which occur in the life-space in the context of teaching in order to provide teaching experiences for students, and the “training room becomes, in effect, a working model of the life space” (Feilberg 2007: 32). Likewise, well known experiential learning methods, such as the use of case studies, provide opportunities for engaging with child and youth care work practice in its complexity (Sanrud and Ranahan 2012, cited in Ranahan, Blanchet-Cohen and Mann-Feder 2015: 528). In this vein, child and youth care work educators can apply developmental thinking in the classroom (Curry *et al.* 2011: 152).

Participants noted that such approaches to educating child and youth care workers calls for a parallel process between what is taking place in the education process and what is required of child and youth care workers in practice. Ward (2013: 53) described such a parallel process and noted that teaching principles applied in a classroom needed to emulate the subject being taught, so that if resilience was a subject, the approach to teaching would be to promote the resilience of students. In order to establish a learning atmosphere where the qualities of respect and engagement prevail, “high levels of participation, discussion, discovery, action, and critical reflection” must be facilitated (Huebner, Walker and McFarland 2003: 210).

Sub-theme 4.1.2 Self development

The second sub-theme under the theme of ‘teaching the essence of child and youth care work’ was that of *self-development*. The emotional impact of the work on child and youth care workers themselves was noted by participants. The concept of self is central to child and youth care work (Stuart 2013: 60). Participants highlighted the emotional resilience that child and youth care workers need in order to work in the life-space of children and families. This notion of the use of self in relating to young people and the need to regulate the emotional toll of such relational work was noted by Feilberg (2007: 34). Participants highlighted the emotional vulnerability that the

demand for relational child and youth care work practice places on child and youth care workers. The personal pain of child and youth care workers can be triggered by the behaviour of young people resulting in child and youth care workers themselves displaying pain-based behaviour (Anglin 2002: 111). Ward (2013: 56) observed that it is important that teachers of child and youth care workers “commit to ensuring congruence between the relationship principles we are suggesting occur in practice, with the ways in which we are using relationship to promote development in child and youth students”. In the context of educating child and youth care workers, a safe space must be created for them to be able to explore a range of emotional experiences in order to develop self-awareness (Feilberg 2007: 35). Child and youth care curricula should therefore be designed to incorporate an “experience of self, relationship, and growth as a child and youth care professional” (Ward 2013: 52).

Sub-theme 4.1.3 Complex life-space practice

The third sub-theme under the theme of ‘teaching the essence of child and youth care work’ is that of *complex practice*. Participants felt they were insufficiently prepared for working in a therapeutic manner with complex psychological and psychiatric difficulties that children may present. It is acknowledged that child and youth care workers own emotional capacities are a factor impacting on providing therapeutic child and youth care services (Curry *et al.* 2011: 151). Feilberg (2007: 34) observed that given the personal vulnerability, which is an inherent factor when working in the life-space, the emotions of workers themselves, as well as their psychological defences, can become intertwined with those of the children. Therefore, child and youth care workers need to be trained to “manage the inherent anxiety in the complex tasks” of the work that they do (Feilberg 2007: 34). Curry *et al.* (2011: 158) pointed to the importance of modelling child and youth care work relationships while educating students to ensure that they not only learn how to manage situations, but also experience such interventions personally.

Participants pointed to the need for a greater understanding of psychology in order to be more effective in helping complex young people. Curricula for educating child and youth care workers should include aspects of a number of disciplines, including anthropology, education, criminology, sociology, law, and psychology (Yakhnich,

Grupper and Romi 2018: 49). The data showed that child and youth care workers require knowledge to enable them to accurately populate and use frameworks for understanding complex behaviour in an individualised manner.

Theme 4.2 Indigenisation of child and youth care work education

The next theme that emerged is the *need to indigenise the knowledge and skills* that students obtain from education. The following sub-themes were associated with this theme: indigenous practice knowledge, and understanding the South African child and youth work context.

Sub-theme 4.2.1 Indigenous practice knowledge

The first sub-theme included under the theme of ‘indigenisation of the child and youth care work education’ is that of *indigenous practice knowledge*. In South Africa, the social work profession “needs to be reconstructed, not only to fit the social structures and cultural environments in Africa, but also to serve African needs and aspirations” (Qalinge and Van Breda 2018: 1). In the context of social work, Ibrahima and Mattaini (2019: 806) observed that the development of indigenous methodologies requires the review of dominant models in the context of integrating “traditional values and practices”. They pointed to the importance of the development of indigenous knowledge, and noted that knowledge is the foundation for the design of interventions (2019: 805). Participants made reference to this indigenisation impetus in social work and pointed to a similar need within child and youth care work education. They noted that there is at present local practice know-how that has already been developed that should be included in the education of child and youth care workers.

The scarcity of local literature in the social work arena is an acknowledged fact (Qalinge and Van Breda 2018: 1). In the context of this study, participants suggested that local practice knowledge as well as local research on child and youth care work be incorporated in child and youth care work curricula. This echoed the assertion by Ibrahima and Mattaini (2019: 807) of the value of using teaching material sources outside of the arena of formal knowledge, and including “non-textual sources” in the curricula. Participants offered suggestions on how to source indigenous knowledge and incorporate it in the education of child and youth care workers. This resonated with the call for a decolonisation process to take place in the social work curriculum

where it is held that both the content of education as well as the teaching methods should be reviewed (Qalinge and Van Breda 2018: 1).

Sub-theme 4.2.1 Orienting to South African contexts

The second sub-theme under the theme of 'indigenisation of child and youth care work education' was that of *orienting child and youth work training to the South African contexts* in which child and youth care workers practice. Ranahan, Blanchet-Cohen and Mann-Feder (2015: 529) observed that local representations of practice ought to be sites for practice exposure of students. Qalinge and Van Breda (2018: 2) called for the adaptation of both curricula and teaching in social work to align to local contexts.

Participants were of the view that the broader South African context, as well as the variety of practice contexts in which child and youth care workers are deployed, should be brought into their education. "Locality relevance" takes into account variations in practice across different cultural groupings and contexts (Ibrahima and Mattaini 2019: 808). Participants provided various suggestions as to methodologies that could be used in orienting students to the South African work contexts for child and youth care workers. These included the use of videos, as well as seminars run by local practitioners working in various child and youth care work settings.

4.7 Conclusion

This chapter presented the data and a critical analysis of the findings made in the study. A total of seventeen (17) central themes and fifty (50) sub-themes were presented. The themes and sub-themes were clustered under four headings, which included *the roles and functions of child and youth care workers*, *the nature of child and youth care work*, *the educational preparation of child and youth care workers*, and *further knowledge and skills required in educating child and youth care workers*. A model for the practice and education of child and youth care workers was also presented.

In the next chapter, the conclusions reached, and the recommendations made for further research are discussed.

CHAPTER 5

DISCUSSION AND RECOMMENDATIONS

5.1 Introduction

This culminating chapter provides an overview of the major findings of the study in relation to each of the objectives as set out in Chapter 1. In addition to a detailed sketch of the findings (section 5.2), the chapter also provides a summation of the findings (section 5.3), a set of recommendations (section 5.4), and indicates the limitations of the study (section 5.5). The recommendations are targeted at three primary areas: the development of the profession (sub-section 5.4.1); the education of child and youth care workers (sub-section 5.4.2); and future research in the field (sub-section 5.4.3).

In a nutshell, this study focussed on exploring the current realities of child and youth care work and reflects the journey of the profession of child and youth care work in South Africa. Furthermore, it aimed to develop a model to guide child and youth care practice and education in South Africa.

To recap, the objectives of the study were to:

- 1) Determine the roles and functions of child and youth care workers in varied settings across South Africa;
- 2) Explore the nature of child and youth care work in South Africa;
- 3) Explore the tertiary educational preparation of child and youth care workers;
- 4) Investigate further knowledge and skills required by students; and
- 5) Develop a model to inform child and youth care practice and education in South Africa.

The data presented in Chapter 4 reflected that 17 primary themes and 50 sub-themes emerged from the study. This data was obtained from five (5) samples which comprised international child and youth care work experts; local child and youth care work experts; local employers of child and youth care workers; and child and youth care workers – registered at the professional level and auxiliary level. Individual in-depth interviews were conducted to obtain data from the first three (3) of the

aforementioned samples. Focus groups were conducted to obtain data from the two (2) samples of child and youth care workers.

In essence, the study found that child and youth care work in South Africa is rooted in the international knowledge and practice base associated with the profession. The South African scope of practice (South Africa, DSD 2014: 17-18) was found to list most of the roles and functions of child and youth care workers. An additional role not included in the scope of practice of managing stakeholders and referrals was found to be a distinct area of the work of child and youth care workers. The scope of practice was found to appropriately distinguish between auxiliary and professional level child and youth care work functional levels. However, it was determined that the linear structure of the scope of practice does not convey the complexity of child and youth care work that emerges when the elements of practice are integrated in the life-space of children and families as life unfolds.

Of significance was that the study found that the context of poverty in which practice takes place impacted on all aspects of child and youth care work practice. Moreover, the roles and functions were likewise filtered through the lens of children's rights and social justice. These two elements, the context of poverty and the framework of children's rights, influenced the practice of child and youth care work in South Africa. Life-space work emerged as the central defining element of South African child and youth care work, and all other elements were contextualised within this methodology. The development of egalitarian relationships with children and families was also found to be an element of the nature of South African child and youth care work, as was the quality of spiritedness in the provision of care for children and families. Spirited care is the infusion of caring actions with genuine depth of concern for, and commitment to the caring for the other, which gives expression to the spirit of Ubuntu and enlivens such actions with love. A crucial finding related to family work which was also found to be an element of the nature of child and youth care work in South Africa, which is not articulated in the scope of practice. Child and youth care workers were found to be functioning in four different practice settings, namely: residential care environments, community-based programmes, educational contexts, and health settings. However, the effectiveness of practitioners was found to have been affected by the limited recognition of the profession.

The education of child and youth care workers was found to be limited to and constrained by Western theoretical frameworks. There was a dearth of indigenous profession-specific material in the curriculum. The teaching was found to be insufficiently situated within a South African child and youth care work practice context, and life-space work at therapeutic level was not taught in depth. The teaching approach was found to insufficiently prepare child and youth care work students for the contextual realities, and practicum placements provided insufficient exposure to good practice and supervisory support.

The study found that areas of knowledge and skill augmentation for child and youth care students fell into two categories, namely: 1) enhancing the teaching of the essence of complex practice, and 2) the indigenisation of child and youth care work education. It further argued that an Afrocentric educational base would contribute to enhancing indigenous practice knowledge and orienting students to South African practice contexts.

5.2 Major findings

The discussion that follows presents the critical findings made in terms of the objectives of the study.

5.2.1 The roles and functions of child and youth care workers

The first objective of this study was to *determine the roles and functions of child and youth care workers across varied practice settings in South Africa*. In relation to this objective, the data revealed that the roles and functions of child and youth care workers as set out in legislation (South Africa, DSD 2014: 17-18) describe most of the roles and functions of child and youth care workers in practice settings.

In line with the specifications on the acts which may be performed by child and youth care workers at both the professional and the auxiliary level, the data revealed that child and youth care workers provide care; manage behaviour; implement developmental programmes; engage in developmental assessment; maintain planned environments; support developmental play; advocate for children; work in multidisciplinary teams; and undertake administration.

These roles and functions are aligned with those that are outlined in the CYCCB (Mattingly, Stuart, and Vander Ven 2010: 10-25), which reflect expectations of child and youth care workers in North American contexts. South African child and youth care work was therefore found to be closely aligned to and rooted in international, specifically North American, articulation of the profession. The data showed that the scope of practice (South Africa, DSD 2014: 17-18) is largely applicable to the profession of child and youth care work in South Africa. In addition to the stipulated roles and functions, child and youth care workers perform a further function, which is not included in the list of acts that may be undertaken by child and youth care workers in the scope of practice (South Africa, DSD 2014: 17-18). The study identified the function of managing stakeholders and referrals to appropriate service providers as being a role that is a key element of child and youth care work practice in South Africa.

5.2.2 The nature of South African child and youth care work

The second objective related to *exploring the nature of child and youth care work as practised in South Africa*. These core practice elements and their constituent components are represented schematically in Figure 5.1 overleaf.

The data revealed that South African child and youth care work is impacted by the local socio-economic context of poverty. Omotso and Koch (2018: 418) observed that there is evidence that children in South Africa face “multiple forms of deprivation.” This context presents particular challenges in the implementation of child and youth care work services. Child and youth care workers described the ways in which they were able to adapt their practice to the demands of the context of poverty in order to be able to be effective practitioners. The data described child and youth care workers as resilient in the face of the complexity associated with working in a context of poverty. This context influenced all aspects of practice and demonstrated that child and youth care work is able to be adapted to meet the needs children in the South African context of poverty.

A further element of the local context which impacted on the nature of child and youth care work in South Africa was the framework of children’s rights. Child and youth care workers practice in a way that both references and gives depth to the notion of children’s rights. The data showed that child and youth care workers broadly uphold

children's rights and unhesitatingly and vociferously *challenge rights violations*. The principle of *working in the best interests* of the child guided child and youth care workers in their practice, while the principle of *participation* was manifested in their work with children and families.

In addition to the context of poverty and the framework of children's rights nuancing South African child and youth care work practice, the evidence showed that life-space work was a central feature of the way in which child and youth care work is practised and understood in South Africa. Working with the self in undertaking life-space work, child and youth care workers physically and emotionally enter into the life contexts of young people and family members, and in such contexts support the agency of service recipients in the course of them living their lives. Participants described understanding how to work in the life-space of children and families in the context of poverty and within the ideological framework of children's rights.

In the life-space child and youth care workers build relationships with children, youth and families which are egalitarian in nature. They engage in attentive, non-judgemental listening, building relationships in culturally diverse as well as time-bound contexts. Another aspect of the nature of child and youth care work in South Africa was the spirited care which child and youth care workers provided. The approach to caring was embedded in the spirit of Ubuntu, and in a sense of love for those whom they served. Many child and youth care workers saw their work as a calling.

The data showed that child and youth care workers practice in the life-space of families, as well as with children in their life-space outside of their families. The establishment of relationships with children and families in the context of the life-space was fundamental to their practice. The study revealed that the contexts in which child and youth care work took place in South Africa include community-based programmes, education settings, health settings, and residential care settings. The struggle for recognition impacted on child and youth care workers' sense of professional dignity, and they expressed feeling that their role was not well understood by other professionals and community members. This impacts on their ability to perform their work optimally.

5.2.3 The preparation of students for child and youth care practice

The third objective sought to understand the preparation of child and youth care work students for practice. The education of child and youth care workers is a complex endeavour (Shaw 2012: 167). The data showed that there was a disjuncture between the current academic training and South African practice realities. While the curriculum was considered to encompass child and youth care practice, it was also found not to have been indigenised. The education of students was focused towards a theoretical, rather than a practical approach. The practice component of the training failed to reflect the breadth and demanding nature of the local child and youth care work practice contexts, and students had not been exposed to complex therapeutic life-space work.

5.2.4 Further knowledge and skills needed by child and youth care workers

The fourth objective was to explore what further knowledge and skill areas were needed in educating child and youth care workers for practice in South Africa. The data reflected that child and youth care work students' education would be enhanced by a greater focus on self-development in order to support the development of the resilience required of child and youth care workers in practice. It was found that a greater focus on practice was required. This included a focus on the application of child and youth care work theory into practice, as well as on the application of theory in local practice contexts. Augmenting the curriculum with indigenous practice knowledge would further equip students to deal with local practice realities. Exposure of students to practice complexities was another area of skill and knowledge required for the preparation of students for local work settings. It emerged that students needed to be immersed in non-traditional practice spaces in order to adequately prepare for the work environment.

5.2.5 A model for the practice and education of child and youth care workers

The fifth objective of the study was to develop a model to guide child and youth care practice and education. The study described the roles and functions of child and youth care workers; the nature of child and youth care work in South Africa; the education of child and youth care workers; and further skills and knowledge to be included in the education process. The analysis of the data provided salient information to inform the practice and education of child and youth care workers in South Africa. This

information was consolidated into the key elements that underpin practice and guide education. This is presented schematically in Figure 5.1 below.

The model outlines the key features of child and youth care work in the South African context. The roles and functions of South African child and youth care workers are drawn from the body of knowledge and practice skill developed in North America. These find expression in the South African context in three core practice elements. The element of life-space work is the all-encompassing feature of child and youth care work, but local influencing factors in its expression are working in the context of poverty, and the commitment to a rights-based approach. A further key practice element is egalitarian relationship building, and the final core element, is spirited caring.

The life-space approach is applied in the context of work with families, as well as with individual children and groups of young people. As yet struggling for recognition, the profession has been positively impacted by being professionalised, but its relative obscurity in community and social services contexts limits the potential contribution of the profession to children's services.

Threaded through South African child and youth care practice is the dual concern with the individual, and the socio-political and economic context in which children and families live out their lives, and workers apply their professional approach at the personal and the systemic levels. A deep regard for the value of persons from diverse backgrounds is present in child and youth care work, as the spirit of Ubuntu, existence-in-relation (Ibrahima and Mattaini 2017:800), enlivens caregiving. Beneficiaries matter to child and youth care workers who work towards realising social justice on a case-by-case basis.

Settings in which child and youth workers are deployed include the traditional setting of child and youth care centres, education environments and health settings, as well as community-based programmes. The latter, pioneered by the Isibindi model, harness and amplify individual beneficiary, local community and worker agency, mobilising human and material resources to strengthen young people and families suffering the hardships of poverty. Child and youth work in South Africa was found to

synthesise “orthodox ideas about practice...and counter movement ideas about... oppression” (Stephen and Gharabaghi 2019:53).

Educating student child and youth care workers requires a focus on the indigenisation of the curriculum, adaptation to local practice settings, and a concerted approach to teaching the essence of child and youth care practice.

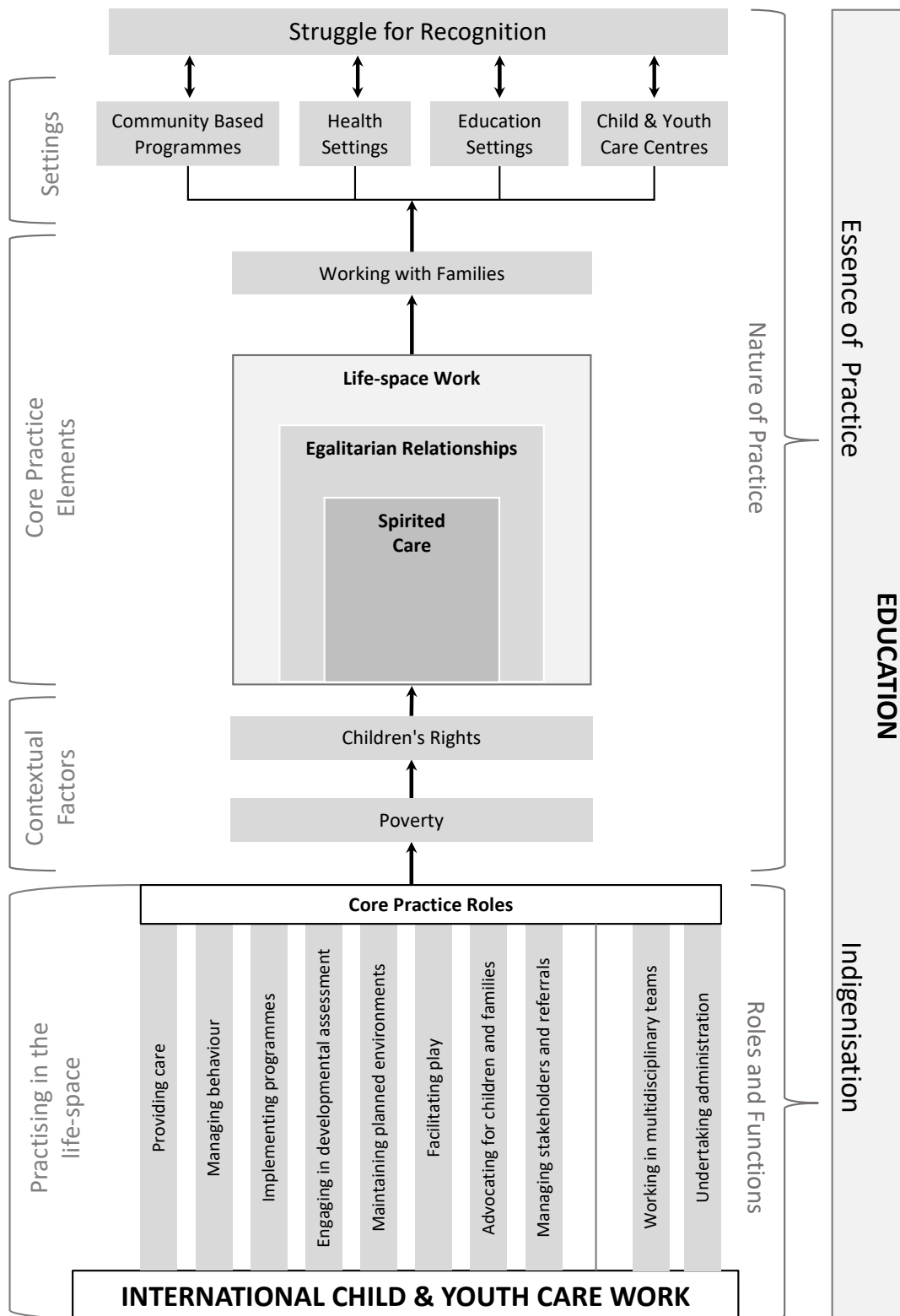


Figure 5.1 A model for the practice and education of child and youth care workers in South Africa

5.3 Summation of findings

In South Africa, child and youth care workers provide services to children as well as their families, applying the methodology of life-space work in a holistic approach, using daily life events for developmental and therapeutic ends as service recipients live their lives. By listening to people, working with love, and being respectful of diverse cultural groups, child and youth care workers build egalitarian relationships, using their presence in people's lives to create opportunities for growth, development, and increased personal and collective agency. They provide care which is spirited in nature and connected to the wellspring of Ubuntu.

Child and youth care work practice in South Africa is rooted in an international child and youth care work knowledge and practice base. The scope of practice of child and youth care workers (South Africa, DSD 2014:17-18) aligns itself with the professional responsibilities of child and youth care workers in North American contexts. Local socio-economic conditions of poverty impact on the professional expression of child and youth care work in South Africa. Practitioners are adept at applying child and youth care work practice with children and families who are challenged by a myriad hardships that are associated with living in poverty. South African child and youth care work is also influenced by the ideology and framework of children's rights. Upholding children's rights, challenging violations of rights, and working with the 'best interests' concept as a lodestar, child and youth care workers facilitate the participation of children in all matters that affect them.

Settings for the deployment of child and youth care workers have expanded from residential care settings to community-based settings, and latterly to include health settings and educational contexts. Practitioners, notwithstanding the growth of the profession and the increased professionalisation of the field, struggle for recognition in the context of their everyday work. The limited understanding of their potential contribution in both societal and professional situations is experienced as an impeding factor in their effective deployment.

The curriculum for the education of child and youth care workers is based on international child and youth care work knowledge, and indigenising the curriculum

through the inclusion of local Afrocentric material is required. Teaching towards undertaking complex life-space work is needed. Students will also be better equipped to deal with the demands of local practice settings through increased exposure to practice in the course of their studies. Lastly, greater access to tertiary education in child and youth care work is needed.

5.4 Recommendations

A number of recommendations emerged from the study. These are outlined in more detail below.

5.4.1 Recommendations related to developing the profession

The following recommendations have been made in relation to the development of the child in the care profession:

- Child and youth care workers engage in life-space work with families, and manage stakeholders and referrals. These areas of practice are not included in the scope of practice for child and youth care work (South Africa, DSD 2014: 17-18). It is recommended that the SACSSP revise the scope of practice (South Africa, DSD 2014: 17-18) to incorporate family work, and the management of stakeholders and referrals.
- The value that child and youth care workers are able to bring to social service delivery is not widely understood by other social service professions. It is recommended that NDSD, the SACSSP, and the NACCW undertake awareness-raising with other social service professions on the potential contribution of child and youth care workers to social development services, and integrated service delivery in South Africa.
- The profession of child and youth care work is not well known or understood by society at large, and it is recommended that the NDSD, the SACSSP, and the NACCW engage in initiatives to increase the visibility of the profession in society.
- Child and youth care worker job descriptions do not always reflect the scope of practice of child and youth care workers. It is recommended that NDSD review the job descriptions of child and youth care workers in its employ, as well as those of child and youth care workers in registered and subsidised service

delivery agencies, in line with the legal parameters set for child and youth care work practice.

- There is a lack of distinction in the field with respect to the job functions of auxiliary level and professional level child and youth care workers. It is recommended that the national DSD review the employment mechanisms for child and youth care workers at the two levels and make provision for a distinction in the job requirements for the two levels.
- Child and youth care workers function in various settings. It is recommended that the SACSSP develop specialisations within child and youth care work in relation to practice in these different settings.

5.4.2 Recommendations related to the education of child and youth care workers

The following recommendations have been made in relation to the education of child and youth care workers:

- The curriculum for the child and youth care bachelor's degree programme needs to be evaluated in relation to practice needs.
- The child and youth care work curriculum should be made Afrocentric through the inclusion of local informal practice knowledge, greater linkage between academic knowledge and local practice realities, and the incorporation of local research in child and youth care work.
- Academic teaching and practical experience of complex life-space work should be included in the curriculum.
- Students' exposure to practical child and youth care work should be increased in duration, and supervision of practicums should be intensified.
- The students' practicum experience should be limited to child and youth care work practice settings only and broadened to include the full range of local practice settings.
- A bachelor's degree in child and youth work should be made more widely available in South Africa, and the possibility of using technology to obtain further reach in the education of child and youth care workers should be explored.

5.4.3 Recommendations for further research

The study illuminated numerous areas in which research needs to be undertaken in order to articulate South African child and youth care work practice. The following recommendations are made in this regard:

- Child and youth care workers in South Africa are practising in contexts of poverty. Further research needs to be undertaken at a granular level to explain the manner in which international child and youth care work concepts have been adapted to fit this practice context.
- A process of decolonising and indigenising local child and youth care knowledge and practice wisdom should be undertaken with special reference to articulating the role of Ubuntu in South African child and youth care practice.
- Child and youth care work is being undertaken in new settings, including health and education settings. Thorough research needs to be embarked on to formalise practice knowledge gained in these settings.
- Informal child and youth care work practice knowledge needs to be raised to the formal level through academic research on practice.
- In order to create a relevant educational base, Afrocentric research on child and youth care work practice should be generated to understand local child and youth care practices and strengthen the knowledge base.
- The process of training of child and youth care workers at auxiliary level should be examined with the view to articulating good practice in this regard.

5.5 Limitation

The limitation of the present study should be noted. This limitation is due to the qualitative nature of the study where smaller samples are customarily employed. However, the impact of this limitation was offset by the fact that data was obtained from three (3) centres across the country and by the richness of the data obtained in the data collection process.

5.6 Conclusion

This chapter provided a summary of the major findings of the study in relation to the study's objectives. It outlined findings related to the roles and functions of child and

youth care workers; the nature of child and youth care work in South Africa; student preparation for practice; and further knowledge and skills to be included in education. It also presented a model for the practice and education of child and youth care workers. In addition to presenting a summary of the findings, a set of recommendations were made. The latter were directed at developing the profession; the education of child and youth care workers; and further research in the field. The final section articulated the limitation of the study and the way in which it was mitigated.

The chapter closes with the following quote:

“Child and Youth Care is not a static profession located in a specific moment in time; rather, it is a highly creative discipline rooted in a continuous process of being and becoming, the horizons of which are ongoing” (Bellefeuille and Ricks 2008:1).

REFERENCES

- Aichorn, A. 1935. *Wayward youth*. New York, New York: Viking Press.
- Allsopp, M. 1999. From the director. *Child & Youth Care*, 17(1):19.
- Allsopp, M. 2001. 2001 – The next right steps along the path. *Child & Youth Care*, 19(11): 2-3.
- Allsopp, M. 2006. Simply live space work. *Child & Youth Care Work*, 24(2): 2.
- Allsopp, M. 2008. The next quarter century. *Child and Youth Care Work*, 26(1): 3.
- Allsopp, M. 2013. *An enquiry into the factors that have contributed to the growth of the field of child and youth care work in South Africa*, Pretoria: South Africa.
- Allsopp, M. 2014. Congratulations to the South African child and youth care field. *Child & Youth Care Work*, 32(3): 2.
- Allsopp, M. 2015. New beginning for child and youth care workers in South Africa. *Relational Child & Youth Care Practice*, 28(2): 29-41.
- Allsopp, M. 2019. South Africa hosts a global child and youth care conference. *Child & Youth Care Work*, 37 (3 & 4): 2 & 11.
- Allsopp, M., Dlamini, H., Jacobs, L., Mamabolo, S. and Fulcher, L. 2018. Supporting young HIV/AIDS survivors and disabled children in family households in rural South Africa: the Isibindi model. In: Miller, L., Cameron, C., Dalli, C. and Barbour, N. eds. *The SAGE Handbook of Early Childhood Policy*. London, UK: SAGE Publications Inc., 338-353.
- Anglin, J.P. 1995. Curriculum content for child and youth care practice: Recommendations of the task force of the North American Consortium of Child and Youth Care Education Programs (NACCYCEP). *Child Youth Care Forum* 24, 269–278 (1995). <https://doi.org/10.1007/BF02128593>

Anglin, J. 1999. The uniqueness of child and youth care: a personal perspective. *Child & Youth Care Forum*, 28, 143-150. Available: <https://doi.org/10.1023/A:1021945306842> (Accessed 23 September 2020).

Anglin, J.P. 2001. Child and youth care work: a unique profession. *CYC-Online*, 35(12): 1.4. Available: <http://www.cyc-net.org/cyc-online/cycol-1201-anglin.html>. (Accessed 23 September 2020).

Anglin, J. P. 2002. *Pain, normality, and the struggle for congruence: reinterpreting residential care for children and youth*. New York, USA: The Haworth Press.

Anglin J. 2013. The impact of child and youth care work: how we make a difference in the lives of children, youth, families and communities. *Child & Youth Care Work*, 33(3&4): 4-9.

Anglin, J. 2015a. Keynote address – In search of the soul of child and youth care: from stardust to Isibindi. *Child & Youth Care Work*, 31 (2 & 3): 6-15.

Anglin, J. 2015b. Definitional framework for child and youth care work. *Child & Youth Care Work*, 31 (2 & 3): 41-42.

Anglin, J. 2019. The legacy of 'The other 23 hours' and the future of child and youth. *Residential Treatment for Children & Youth*, 36 (1): 27-34.

Anglin, J. P. and Brendtro L. K. 2017. Enduring wisdom: towards a comprehensive history of professional child and youth care. *Scottish Journal of Residential Child Care*, 16 (3): 1-14.

Batar-Jojnie, S. 2019. Exploring the role of supervision for child and youth practitioners in the education system in Ontario. *Relational Child & Youth Care Practice*, 32 (1): 57-71.

Bath, H. 2019. Pain and the unspoken emotion: shame. *International Journal of Child Youth & Family Studies*, 10 (2-3): 126-141. Available: <https://journals.uvic.ca/index.php/ijcyfs/issue/archive> (Accessed 17 June 2020).

Beker, J. 1971. Editorial: a new journal for an emerging profession. *Child Care Quarterly*, 1(1), 5–6.

Beker, J. 1975. The child care professional: an agenda for professional role identity for employment and mobility in today's service structure. *Child Care Quarterly*, 4(4): 256–257. Available: <https://doi-org.ezproxy.uct.ac.za/10.1007/BF01554542> (Accessed 30 October 2020).

Beker, J. 2001a. Development of a professional identity for the child care worker. In: *Child & Youth Care Forum*, 30 (6): 345-354.

Beker, J. 2001b. Toward the unification of the childcare field as a profession. *Child & Youth Care Forum*, 30 (6): 355-362.

Beker, J. and Maier, H. W. 2001. Emerging issues in child and youth care education: a platform for planning. *Child & Youth Care Forum*, 30(6): 377-386.

Bellefeuille, G. and Jamieson, D. 2008. Relational-centred planning: a turn toward creative potential and possibilities. In: Bellefeuille, G. and Ricks, F. eds. *Standing on the precipice: inquiry into the creative potential of child and youth care practice*. Alberta, Canada: MacEwan Press, 35-72.

Bellefeuille, G. and Jamieson, D. 2008. Foreword: expanding our creative potential. In: Bellefeuille, G. and Ricks, F. eds. *Standing on the precipice: inquiry into the creative potential of child and youth care practice*. Alberta, Canada: MacEwan Press, 1-3.

Bessant, J. and Emslie, M. 2014. Why university education matters: youth work and the Australian experience. *Child & Youth Services*, 35:137-151.

Bettelheim, B. 1950. *Love is not enough*. New York: Free Press.

Beukes, K. 1990. Evaluation of certain aspects of a training course in childcare, University of South Africa.

Beukes, K. and Gannon, B. 1996. *An orientation to child & youth care*. Cape Town: NACCW.

Beukes, K. and Gannon, B. 1999. *An orientation to child & youth care*. 2nd ed. Cape Town: NACCW.

Beukes, J. and van der Westhuizen, M. 2018. Moving from faith-based concerns to demarginalising youths through the Circle of Courage. *HTS Teologiese Studies/Theological Studies*, 74(3). Available: <https://hts.org.za/index.php/hts/article/view/5013/11685> (Accessed 30 October 2020).

Bhardwaj, S. Sambu, W. and Jamieson, L. 2017. Setting an ambitious agenda for children: the sustainable development goals. *South African Child Gauge 2017*, Cape Town: Children's Institute, University of Cape Town.

Blanchet-Cohen, N. and Bedeaux, C. 2014. Towards a rights-based approach to youth programs: duty bearers perspectives. *Child & Youth Services Review*, 38:75-81.

Brendtro, L. K. 2006. The vision of Urie Bronfenbrenner: Adults who are crazy about kids. *Reclaiming Children and Youth*, 15(3): 162-166.

Brendtro, L. K. 2019a. Creating Powerful Environments. *Residential Treatment for Children & Youth*, 36(1): 0-17. Available: DOI: 10.1080/0886571X.2018.1515601 Accessed 12 May 2020).

Brendtro, L. K. 2019b. Pathways from pain to resilience. *International Journal of Child and Family Studies*, 10 (2-3): 5-24. Available: <https://journals.uvic.ca/index.php/ijcyfs/issue/archive> (Accessed 17 June 2020).

Brendtro, L. K., Brokenleg, M. and Van Bockeren, S. 1990. *Reclaiming youth at risk: our hope for the future*. Indiana: National Educational Service.

Brendtro, L. K., and Du Toit, L. 2005. *Response ability pathways*. Cape Town, South Africa: Pretext Publishers.

Brendtro, L. K. and Ness, A. E. 1983a. Bridging theory and practice. In: Brendtro, L. K. and Ness, A. E. eds. *Re-educating troubled youth*. New York, USA: Aldine De Gruyter, 3-28.

Brendtro, L. K. and Ness, A. E. 1983b. The interpersonal relationship: reaching the reluctant. In: Brendtro, L. K. and Ness, A. E. eds. *Re-educating troubled youth*. New York, USA: Aldine De Gruyter, 36- 66.

Brown, E. D., Steyler, M. D., Knorr, A. M. and Garnett, M. L. 2016. Daily poverty-related stress and coping: associations with child learned helplessness. *Family Relations*, 65 (October): 591-602.

Brynard, D. J., Hanekom, S. X. and Brynard, P. A. 2014. *Introduction to research*. 3rd ed. Pretoria: Van Schaik Publishers.

Cantwell, N. 2008. The changing landscape on a 60-year journey. In: Shaw, R. *Children, families and care: reflections on the first 60 years of FICE*. UK: Trentham books, 3-20.

Charles, G. and Garfat, T. 2009. Child and youth care practice in North America: historical roots and current challenges. *Relational Child and Youth Care Practice*, 22 (2): 17-28.

Chereni, A. 2017. Advocacy in the South African social welfare sector: current social work research and possible future directions. *International Social Work*, 60 (2): 507-520.

Children's Institute. 2019. *Landmark moment for child rights in South Africa*. (press release). Available:

http://www.ci.uct.ac.za/sites/default/files/image_tool/images/367/18%2009%202019%20_Press%20Statement_ConCourt%20Respondents%20Press%20Release%20o

[n%20Corporal%20Punishment %20%28IM-logos%29.pdf](#) (Accessed 12 August 2020).

Children's Institute. 2019. *Landmark moment for child rights in South Africa*. (press release). Available:

http://www.ci.uct.ac.za/sites/default/files/image_tool/images/367/18%2009%202019%20Press%20Statement%20ConCourt%20Respondents%20Press%20Release%20o%20Corporal%20Punishment %20%28IM-logos%29.pdf (Accessed 12 August 2020).

Children's rights to be protected from violence: a review of South Africa's laws and policies. In: Proudlock, P. *South Africa's progress in realising children's rights: A law review*. Cape Town: Children's Institute, University of Cape Town and Save the Children South Africa.

Collins, T. M. 2017. A child's right to participate: implications for international child protection. *The International Journal of Human Rights*, 21 (1): 14-46.

Creswell, J. W. 2009. *Research design: qualitative and quantitative and mixed method approaches*. 3rd ed. Thousand Oaks, California: SAGE Publications.

Creswell, J. W. 2015. *A concise introduction to mixed methods research*. USA: SAGE Publications.

Creswell, J. W. and Creswell J. D. 2018. *Research design: qualitative, quantitative, and mixed methods approaches*. 5th ed. Los Angeles: SAGE.

Creswell, J. W. and Plano Clark, V. L. 2011. *Designing and conducting mixed methods research*. 2nd ed. USA: SAGE. Cross, T. L. 2012. Cultural competence continuum. *The Journal of Child and Youth Care Work*, 24: 83-85.

Cross, T. L. 1988. Services to minority populations: The cultural competence continuum. *Focal Point*, 3: (1-4).

Curry, D., Lawler, M.J., Schneider-Munoz, A.J. and Fox, L. 2011. A child and youth approach to provisional development and training. *Relational Child & Youth Care Practice*, 24(1-2): 148-161.

Curry, D., Schneider-Munoz, A. and Carpenter-Williams, J. 2012. Professional Child and youth work practice – five domains of competence: a few lessons learned while highlighting the knowledge base. *Journal of Child and Youth Care Work*, 24:6-15.

CYC-Net. n.d. *Professional associations*. Available: <https://cyc-net.org/profession/pro-associations.html> (Accessed 28 July 2016).

Damiani-Taraba, G., Sky, I., Hegler, D., Woolridge, N, Anderson, B. and Koster, A. 2018. The listen to me: creating lasting changes in voice and participation for children in care through a youth-led project. *Child & Youth Services*, 39 (1): 75-95.

Daniel, J. 2012. *Sampling essentials: practical guidelines for making sampling choices*. Thousand Oaks, California: SAGE.

De Chalian, M. and Swanzen, R. 2019. The role of parenting programmes in the disruption of family abuse cycles. In: *Relational Child & Youth Care Practice*, 32 (3): 21-40.

De Kock, D. 1999. *Child and youth care and social auxiliary work as occupational groups in the field of social welfare*. D.Litt. et Phil. (SW), University of South Africa.

De Vos, A.S. and Strydom, H. 2011. Scientific theory and professional research. In: De Vos, A.S., Strydom, H., Fouché, C.B. and Delport, C.S.L. eds. *Research at grass roots*. 4th ed. Pretoria, South Africa: Van Schaik, 28-44.

De Vos, A.S., Strydom, H., Fouché, C.B. and Delport, C.S.L. 2011. Building a scientific base for the helping professions. In: De Vos, A.S., Strydom, H., Fouché, C.B. and Delport, C.S.L. eds. *Research at grass roots*. Pretoria, South Africa: Van Schaik, 507-513.

De Vos, A.S., Strydom, H., Schultze, S. and Patel, L. 2011. The sciences and the professions. In: De Vos, A.S., Strydom, H., Fouché, C.B. and Delport, C.S.L. eds. *Research at grass roots*. 4th ed. Pretoria, South Africa: Van Schaik, 2-27.

Dekker, J. H. 2002. Demystification in the century of the child: the conflict between romanticism and disenchantment in (residential) youth care from the 1830s to 2000. In: Knorth, E. J., Van den Bergh, P. M. and Verheij, F. eds. *Professionalisation and participation in child and youth care*. England: Ashgate. 27-48.

Delport, C. S. L. and Roestenburg, W. J. H. 2011. Quantitative data collection methods In: De Vos, A.S., Strydom, H., Fouché, C.B. and Delport, C.S.L. eds. *Research at grass roots*. 4th ed. Pretoria, South Africa: Van Schaik, 171-205.

Denholm, C. J. 1990. 2000 and beyond: future career directions for child and youth care professionals. In: Anglin, J. P., Denholm, C. J., Ferguson R. V. and Pence, A. R. eds. *Perspectives in professional child and youth care*. Binghampton, New York: The Haworth Press.

Denzin, N. K. 2019. Grounded theory and the politics of interpretation, redux. In: Bryant, A. and Charmaz, K. eds. *The SAGE handbook of current developments in grounded theory*. London, UK: SAGE, 449-469.

Denzin N. K. and Lincoln, Y. S. 2018. Preface. In: Denzin N. K. and Lincoln, Y. S. eds. *The SAGE handbook of qualitative research*. London, UK: SAGE Publications Inc., 10-71.

Du Toit, L. 1999. Child and youth work in South Africa: Recognition and regulation through registration, at last! *Child & Youth Care*, 17 (11): 8-9.

Du Toit, L. 2000. Legislated professional boards: Child and youth care soon to achieve full recognition as a profession in South Africa? *Child & Youth Care*, 18 (4): 12-13.

Duerden, M. and Witt, P. A. 2010. And ecologically systems theory perspective on youth programming. *Journal of Park and Recreation Administration*, 28(2): 108-120.

Eckles, F., Carraway-Wilson, C., Zwicky, D., Sr.Rybicki, M., CSFN, Stuart, C., Curry, D., Schneider Muñoz, A., Rodgers, T., Carpenter-Williams, J., Clark, P. and Gaffely, M. 2012. Workforce crisis and opportunity: the evolving field and emerging profession. *Journal of Child and Youth Care Work*, 24:54-76.

Edmonds, W. A. and Kennedy, T. D. 2017. *An applied guide to research designs: quantitative, qualitative, and mixed methods*. 2nd ed. Los Angeles: SAGE.

Eisikovits, Z. and Beker, J. 2001. Beyond professionalism: the child and youth care worker as craftsman. *Child & Youth Care Forum*, 30 (6): 415-434.

Elliott, S. and Davis, M. 2020. Challenging taken-for-granted ideas in early childhood education: a critique of Bronfenbrenner's ecological systems theory in the age of post-humanism. In: Cutter-Mackenzie-Knowles, A., Malone, K., Barratt Hacking, E. eds. *Research Handbook on Childhood Nature*. Springer International Handbooks of Education, 1120-1154. Available: https://doi.org/10.1007/978-3-319-67286-1_60 (Accessed 26 September 2020).

Emslie, M. 2013. Toward a youth work profession. *Child & Youth Services*, 34 (2): 125-138.

Erickson, F. 2018. A history of qualitative enquiry in social and educational research 1. In: Denzin N. K. and Lincoln, Y. S. eds. *The SAGE handbook of qualitative research*. London, UK: SAGE, 87-141.

Etieyibo, E. 2017. Moral education, Ubuntu and Ubuntu-inspired communities. *South African Journal of Philosophy*, 36(3): 311-325. Available: <http://dx.doi.org/10.1080/02580136.2017.1269995> (Accessed 02 April 2020).

Fédération Internationale des Communautés Educatives (FICE). 1997. *Code of ethics for people working with children and young people*. Erfurt: FICE. Available: docs.wixstatic.com/ugd/b9f7fe_d8ce2f6a8c0842beaa9b94ba2ba54bd1.pdf (Accessed 29 October 2020).

- Feilberg, F. 2007. Teaching Life Space Working by Using the Life Space in Teaching. *Scottish Journal of Residential Child Care*, 6 (1): 32-36.
- Feilberg, F. 2011. Use of self in residential child care. In: *In residence*. Glasgow: Scottish Institute For Residential Child Care, University of Strathclyde, 60-65.
- Feldman, G., Strier, R. and Korech, M. 2017. Liquid advocacy: social welfare advocacy in neoliberal times. *International Journal of Social Welfare*, 26: 254-262.
- Fenton, M. 2019. Feel the Pain and Do It Anyway. *International Journal of Child, Youth and Family Studies*, 10 (2-3): 81-102. Available: Available: <https://journals.uvic.ca/index.php/ijcyfs/issue/archive> (Accessed 17 June 2020).
- Ferguson, R. 2008. You can't rollerskate in a buffalo herd: embracing a new metaphor for child and youth care in the 21st-century. *Relational Child and Youth Care Practice*, 8 (1): 59-66.
- Fewster, G. 2003. My place or yours? Inviting the family into child and youth care practice. In: Garfat, T. ed. *A child and youth approach to working with families*. Binghamton, New York, USA: The Haworth Press, 79-94.
- Fewster, G. 2014. Be gone, dull care. In: Gharabaghi, K., Skott-Myhre, H. A., and Krueger, M. eds. *With children and youth: emerging theories and practices in child and youth work*. Ontario, Canada: Wilfred Laurier University Press, 189-205.
- Flick, U. 2007. *Designing qualitative research*. London, UK: SAGE Publications, Inc.
- Flick, U. 2011. *Introducing research methodology: a beginner's guide to doing a research project*. Thousand Oaks: SAGE.
- Flick, U. 2014. *The SAGE handbook of qualitative data analysis*. Los Angeles, USA: SAGE.
- Flick, U. 2015. *Introducing research methodology: a beginners guide to doing a research project*. London, UK: SAGE.

Flick, U. 2018. *An introduction to qualitative research*. 6th ed. London, UK: SAGE.

Fossey, E., Harvey, C., McDermott, F. & Davidson, L. 2002. Understanding and evaluating qualitative research. *Australian and New Zealand Journal of Psychiatry*, 36: 717-732.

Fouché, C.B., and Delport, C.S.L. 2011. Introduction to the research process. In: De Vos, A.S., Strydom, H., Fouché, C.B. and Delport, C.S.L. eds. *Research at grass roots*. 4th ed. Pretoria, South Africa: Van Schaik, 61-76.

Fouché, C. B., and De Vos, A. S. 2011. Formal formulations. In: De Vos, A.S., Strydom, H., Fouché, C.B. and Delport, C.S.L. eds. *Research at grass roots*. 4th ed. Pretoria, South Africa: Van Schaik, 89-100.

Fouché, C.B., and Schurink, W. 2011. Qualitative research designs. In: De Vos, A.S., Strydom, H., Fouché, C.B. and Delport, C.S.L. eds. *Research at grass roots*. 4th ed. Pretoria, South Africa: Van Schaik, 307-327.

Fouché, C.B., Delport, C.S.L. and De Vos. 2011. Quantitative research designs. In: De Vos, A.S., Strydom, H., Fouché, C.B. and Delport, C.S.L. eds. *Research at grass roots*. 4th ed. Pretoria, South Africa: Van Schaik, 142-158.

Franklin, A. And Goff, S. 2019. Listening and facilitating all forms of communication: disabled children and young people in residential care in England. *Child Care in Practice*, 25 (1): 99-111.

Fransman, T. and Yu, D. 2019. Multidimensional poverty in South Africa in 2001-16. *Development Southern Africa*, 36 (one): 50-79.

Freado, M. 2019. Transforming assessment. *Thriving*, 4 (2): 1-6.

Freeman, J. 2013. The field of child and youth care: we there yet? *Child and youth services*, 34 (2): 100-111.:

Fulcher, L. 1991. Teamwork in residential care. In: Beker, J. and Eisikovits, Z. eds. Knowledge utilisation in residential child and youth practice, Washington: Child Welfare League of America, 5-235.

Fulcher, L. and Garfat, T. 2008. *Quality care in a family setting: a practical guide for foster carers*. Cape Town: Pretext.

Fulcher, L. and Garfat, T. 2015. Child and youth care practice with families. In: Fulcher, L. and Garfat, T. eds. *Child and youth care practice with families*, Cape Town: Pretext Publishing, 7-30.

Fulcher, L. and Garfat, T. 2015. Family participation in decision-making about the care and supervision of their children and young people. In: Fulcher, L. and Garfat, T. eds. *Child and youth care practice with families*, Cape Town: Pretext Publishing, 42-59.

Fulcher, L. C. and McGladdery, S. 2011. Re-examining Social Work Roles and Tasks with Foster Care. *Child & Youth Services*, 32:1, 19-38.

Gaitens, C. 2020. Rhythmicity, relationship, ritual, and routine: the 4 “R”s in the school-based child and youth care practice. *Relational Child & Youth Care Practice*, 32 (2): 7-19.

Gannon, B. ed. 1977. Editorial foreword. In: Gannon, B. ed. Report of the first biennial conference of the National Association of Child-Care Workers, NACCW, 1.

Gannon, B. 1988. Readers and writers. *The Child Care Worker*, 6(11): 2.

Garfat, T. 1988. The Child care training and education in North America. In: Gannon, B., ed. *Today's child tomorrow's adult. Proceedings of the Sixth Biennial National Conference of the National Association of Child Care Workers*. Cape Town: NACCW, 13-22.

Garfat, T. 1998. The effective Child and youth care intervention: a phenomenological inquiry. *Journal of Child and Youth Care*, 12 (1-2): 1-178.

Garfat, T. 2003. Introduction. In: Garfat, T ed. *A child and youth approach to working with families*. Binghamton, New York, USA: The Haworth Press, Inc., 1-6.

Garfat, T. 2008. The inter-personal in-between: an exploration of relational child and youth care practice. In: Bellefeuille, G. and Ricks, F. eds. *Standing on the precipice: inquiry into the creative potential of child and youth care practice*. Alberta, Canada: MacEwan Press, 7-34.

Garfat, T. 2013. The meaningful use of everyday life events in child and youth. In: Garfat, T., Fulcher, L. C. and Digney, J. D.eds. *Making moments meaningful in child & youth care practice*, Claremont, South Africa: Pretext Publishing, 1-6.

Garfat, T. 2015. Working in their world: relational Child and youth care practice with families. In: Fulcher, L. and Garfat, T. eds. *Child and youth care practice with families*, Cape Town: Pretext Publishing, 31-41.

Garfat, T., Freeman, J., Gharabaghi, K., and Fulcher, L. 2018. Characteristics of a relational child and youth care approach revisited. *CYC-Online* 10: 7-45. Available: <https://cyc-net.org/pdf/Characteristics%20of%20a%20Relational%20CYC%20Approach%20Revisited.pdf> (Accesed 24 October 2020).

Garfat, T. and Fulcher, L. 2012a. Hanging in: child and youth in practice. In: Garfat, T. and Fulcher, L. C. eds. *Child and youth care in practice*. Cape Town: Pretext, 1-4.

Garfat, T. and Fulcher, L. 2012b. Characteristics of a relational Child and youth care approach. In: Garfat, T. and Fulcher, L. C. eds. *Child and youth care in practice*. Cape Town: Pretext, 5-24.

Garfat, T. and Fulcher, L. C. eds. 2012. *Child and youth care in practice*. Cape Town: Pretext.

Garfat, T. and Fulcher, L. 2013. Characteristics of a relational Child and youth care approach. In: Garfat, T., Fulcher, L. C. and Digney, J. D. eds. *Making moments*

meaningful in child & youth care practice, Claremont, South Africa: Pretext Publishing, 7-28.

Garfat, T and Gannon, B. eds. 2005. *Aspects of Child and youth care practice in the South African context*. Cape Town: Pretext.

Gharabaghi, K. 2008a. Professional issues in child and youth care. *Child & Youth Services*, 30 (3/4): 145-163.

Gharabaghi, K. 2008b. Professional issues of child and youth through the language lens. *Child & Youth Services*, 30 (3/4): 279-300.

Gharabaghi, K. 2014. The purpose of youth work. In: Gharabaghi, K., Skott-Myhre, H. A., and Krueger, M. eds. *With children and youth: emerging theories and practices in child and youth work*. Ontario, Canada: Wilfred Laurier University Press, 3-24.

Gharabaghi, K. 2018. Professionalization through doing. *CYC-Online*, 243, May: 32-35. Available: <https://cyc-net.org/cyc-online/may2019.pdf> (Accessed 30 October 2020).

Gharabaghi, K. 2019a. South Africa, again and again. *CYC-Online*, 238, April: 28-36. Available: <https://cyc-net.org/cyc-online/apr2018.pdf> (Accessed 30 October 2020).

Gharabaghi, K. 2019b. The future is here! *Relational Child & Youth Care Practice*, 32(3): 3-6.

Gharabaghi, K and Stuart, C. 2013a. *Right here, right now: exploring life-space interventions for children and youth*. Toronto, Canada: Pearson.

Gharabaghi, K. and Stuart, C., 2013b. Life-space intervention: implications for caregiving. *Scottish Journal of Residential Child Care*, 12(3): 11-19. Available: https://www.celcis.org/files/2014/3817/9572/2013_vol12_no3_gharabaghi_lifespace_intervention.pdf (Accessed 23 September 2020).

Gharabaghi, K., Skott- Myhre, H. and Krueger, M. 2014. Introduction. In: Gharabaghi, K., Skott- Myhre, H. and Krueger, M. eds. *With children and youth: emerging theories and practices in child and youth work*. Ontario, Canada: Wilfred Laurier University Press, ix-xiv.

Gibbs, G. R. 2007. *Analysing qualitative data*. London: SAGE.

Gilber, S. and Charles, G. 2002. Child and youth care practice: the foundation for greater supervision. *Journal of Child and Youth Care* 15 (2): 23-31.

Giles, R. 2016. Social workers' perceptions of multidisciplinary team work: a case study of health social workers at a major regional hospital in New Zealand. *Aotearoa New Zealand Social Work*, 28 (1): 25-33.

Gillham, B. 2000. *The research interview*. New York: Continuum.

Global Social Service Workforce Alliance Interest Group on Para Professionals. 2020. *Para professionals in the social service workforce: guiding principles, functions and competencies*. 2nd ed. Available: http://www.socialserviceworkforce.org/system/files/resource/files/Para-Professionals-in-the-Social-Service-Workforce-2ndedition_0.pdf (Accessed 11 September 2020).

Global Social Service Workforce Alliance Interest Group on Para Professionals. 2020. *Para professionals in the social service workforce: guiding principles, functions and competencies*. 2nd ed. Available: http://www.socialserviceworkforce.org/system/files/resource/files/Para-Professionals-in-the-Social-Service-Workforce-2ndedition_0.pdf (Accessed 11 September 2020).

Goodsett, M. 2019. Best practices for teaching and assessing critical thinking in information literacy online learning objects. *Journal of Academic Librarianship*, 46(5): 102163. Available: <https://doi.org/10.1016/j.acalib.2020.102163> (Accessed 28 October 2020).

Graham, G. and Fulcher, L. 2017. Can the best interests of young people be made in residential care? An Ireland case study. *Child & Youth Services*, 38 (2): 98-107.

Greeff, M. 2011. Information collection: interviewing. In: De Vos, A.S., Strydom, H., Fouché, C.B. and Delport, C.S.L. eds. *Research at grass roots*. 4th ed. Pretoria, South Africa: Van Schaik, 341-375.

Grupper, E. 2002. Child and youth care worker at the crossroads of the century, from a recognised profession back to an amateur humanitarian mission? In: Knorth, the full J., Van den Bergh, P. M. and Verheij, F. eds. *Professionalization and participation*. England: Ashgate, 65-74.

Hall, G., Hadson, D., Boddy, J. and Chenoweth, L. 2014. Talking with teenparents, hearing young families: (in)forming welfare reform through local relations. *Child & Youth Services*, 35: 255-272. DOI: 10.1080/0145935X.2014.938737 (Accessed 18 March 2020).

Hall, K. 2019a. Demography of South Africa's children. In: Shung-King, M., Lake, L., Sanders, D and Hendricks, M. eds. *South African Child Gauge 2019*. Cape Town: Children's Institute, University of Cape Town, 216-220.

Hall, K. 2019b. Income poverty, unemployment and social grants. In: Shung-King, M., Lake, L., Sanders, D and Hendricks, M. eds. *South African Child Gauge 2019*. Cape Town: Children's Institute, University of Cape Town, 221-227.

Hall, K. 2019c. Children's access to education. In: Shung-King, M., Lake, L., Sanders, D and Hendricks, M. eds. *South African Child Gauge 2019*. Cape Town: Children's Institute, University of Cape Town, 240-247.

Hall, K., Nannan, N. and Sambu, W. 2019. Child health. In: Shung-King, M., Lake, L., Sanders, D and Hendricks, M. eds. *South African Child Gauge 2019*. Cape Town: Children's Institute, University of Cape Town, 228-233.

Halliday, N. 2020. Relational practice in brief interactions in the hospital setting. *Relational Child & Youth Care*, 33 (2): 66-77.

Hart, C. 2018. *Doing a literature review; releasing the research imagination*. 2nd ed. London: SAGE.

Health and Welfare Sector Education and Training Authority. 2016. *HWSETA constitution: Standard constitution regulations as contemplated in section 13(1) of the Skills Development Act, Act 26 of 2011 of the Health and Welfare Sector Education and Training Authority*. Available: <http://www.hwseta.org.za/resources/policies-legislation/> (Accessed 27 October 2020).

Hellinckx, W. 2002. Foreword. In: Knorth, E. J., Van den Bergh, P. M. and Verheij, F. eds. *Professionalisation and participation*. England: Ashgate, 65-74.

Hesjedal, E., Iversen, A. C., Bye, H.H. and Hetland, H. 2016. The use of multidisciplinary teams to support child welfare clients. *European Journal of Social Work*, 19 (6): 841-855.

Hesse-Biber, S. N. 2017. *The practice of qualitative research: engaging students in the research process*. 3rd ed. Los Angeles: Sage.

Hillman, M., O'Connor, K. D. and White, J. 2020. *International Journal of Child, Youth and Family Studies*, 11(2): 40–60. Available: <https://DOI: 10.18357/ijcyfs112202019518> (Accessed 20 October 2020).

Hlongwane, M., Govender, S. S., Makhubu, S., Makhonza, L., Kent, D., Ochiogu, S. N. Gumede, G., Nzima, D. and Edwards, S. 2018. African centered investigation into ways in which Ubuntu can promote social coherence. *African Journal of Indigenous Knowledge Systems*, 17(1): 53-66.

Holden, M. J. 2009. *Children and residential experiences: creating conditions for change*. 2nd ed. Virginia, USA: CWLA Press.

Holden, M. J. 2019. A collection of notions about 'The other 23 hours'. *Residential Treatment for Children & Youth*, (36 (1): 21-26.

Holden, M. J. and Sellers, D. E. 2019. An evidence-based program model for facilitating therapeutic responses to pain-based behaviour in residential care.

International Journal of Child Youth & Family Studies, 10 (2-3): 63-80. Available: <https://journals.uvic.ca/index.php/ijcyfs/issue/archive> (Accessed 17 June 2020).

Huebner, A. J., Walker, J.A. and McFarland, M. 2003. Staff development for the youth development professional: a critical framework for understanding the work. *Youth & Society*, 35 (2): 204-225. <https://scu.rl.talis.com/items/5348AD53-3D02-6FCA-9CEB-EA2624539791.html> (Accessed 17 June 2020).

Ibrahima, A.B. and Mattaini, M.A. 2019. Social work in Africa: Decolonizing methodologies and approaches. *International Social Work*, 62(2): 799–813. Available: <https://doi.org/10.1177/0020872817742702> (Accessed 03 August 2020).

Jackson, A. L., McKenzie, R. and Frederico, M. 2019. Addressing pain and pain-based behaviours for children and young people in child protection and out-of home care. *International Journal of Child, Youth and Family Studies*, 10(2-3): 103–125. DOI: 10.18357/ijcyfs102-3201918855 (Accessed 23 September 2022).

James, A. B. 2008. Roots: the life space pioneers. *Reclaiming Children and Youth*, 17 (2): 4-10.

Jamieson, L. 2013a. *Child and youth care workers in South Africa, technical brief*. Available: http://www.socialserviceworkforce.org/system/files/resource/files/Child%20and%20Youth%20Care%20Workers%20TechBrief_final.pdf (Accessed 11 August 2020).

Jamieson, L. 2013b. *Children's act guide for child and youth care workers*. 2nd ed. Cape Town: Children's Institute, University of Cape Town. Available: http://www.ci.uct.ac.za/sites/default/files/image_tool/images/367/publication/2013/Child%20and%20Youth%20Care%20Workers%20guide.pdf (Accessed 26 August 2020).

Jamieson, L. 2017. Children and young people's right to participate on residential care in South Africa. *The International Journal of Human Rights*, 21(1): 89-102. DOI:10.1080/13642987.2016.1248126 (Accessed 20 January 2020).

Jamieson, L. and Richter, L. 2017. Striving for the Sustainable Development Goals: What do children need to thrive? In: Jamieson L, Berry L. and Lake, L. eds. *South African Child Gauge 2017*. Cape Town: Children's Institute, University of Cape Town, 32-42.

Jamieson, L., Sambu, W. and Mathews, S. 2017. *Out of harm's way? Tracking child abuse cases through the child protection system in five selected sites in South Africa*. Cape Town: Children's Institute, University of Cape Town.

Jan L. Hagen, J. L. and Wang, L. 1993. Roles and Functions of Public Welfare Workers. *Administration in Social Work*, 17:2, 81-103. Available: http://dx.doi.org/10.1300/J147v17n02_06 (Accessed 12 October 2020).

Jansz, J. 2004. Psychology and society: an overview. In: Jansz, J. and Van Drunen, P. eds. *A social history of psychology*. Oxford, UK: Blackwell, 12-44.

Jenney, A. 2020. When relationships are the trigger: the paradox of safety and connection in child and youth. *Residential Treatment for Children & Youth*, 37(2): 94-107, DOI: 10.1080/0886571X.2019.1704671

Johannisen, J. C., Yates, H. and Van Wyk, C. 2019. Multidisciplinary meetings: Listening to the experiences of children in a child and youth care centre. *HTS Teologiese Studies/Theological Studies*, 75(1):a5493.

Key, E. 1900. *Das Jahrhundert des Kindes*. Berlin: Fisher.

Kilkelly, U. and Liefwaard, T. 2019. Legal implementation of the UNCRC: lessons to be learned from the constitutional experience of South Africa. *De Jure Law Journal*, 52(spe), 521-539. Available: <https://dx.doi.org/10.17159/2225-7160/2019/v52a30>

Kouri, S. 2019. Critical CYC counselling in secular colonial contexts. *Relational Child & Youth Care Practice*, 32(3): 68-84.

Kovach, M. 2018. Doing indigenous methodologies: a letter to a research class. In: Denzin N. K. and Lincoln, Y. S. eds. *The SAGE handbook of qualitative research*. London, UK: SAGE Publications Inc., 381-417.

Krueger, M. 1988. *Intervention techniques for child and youth care workers*. Washington DC, USA: Child Welfare League of America.

Krueger, M. 2002. A further review of the development of the child and youth care profession in the United States. *Child & Youth Care Forum*, 31 (1): 13-26. Available:

Krueger, M. 2012. Pictures of praxis. In: Garfat, T. and Fulcher, L. C. eds. *Child and youth care in practice*. Cape Town, South Africa: Pretext, 49-60.

Krueger, M. 2015. Central themes in child and youth care. *CYC-Online*, 200: 10-19. Available: <https://cyc-net.org/cyc-online/oct2015.pdf#page=10> (Accessed 28 October 2020).

Krueger, M. and Stuart, C. 1999. Context and competence in work with children and youth. *Child & Youth Care Forum*, 28 (three): 195-204.

Lane, D. 2018. *Characteristics of FICE International*. Available: https://docs.wixstatic.com/ugd/e21452_5af35a9f757e45c3a7aa7a5332214619.pdf (Accessed 15 October 2020).

Legard, R., Keegan, J. and Ward, K. 2003. In-depth interviews. In: Richie, J. and Lewis, J. eds. *Qualitative research practice: a guide for social science students and researchers*, California: SAGE, 38-169.

Lochhead, A. 2001. Reflecting on professionalization in child and youth care. *Child & Youth Care Forum*, 30(2): 73-82.

Lohr, S. L. 1999. *Sampling: design and analysis*. Pacific Grove: Duxbury.

Long, N. J. 1991. What Fritz Redl taught me about aggression: understanding the dynamics of aggression and counter aggression in students and staff. In: Morse, W.

C. ed. *Crisis intervention in residential treatment: the clinical innovations of Fritz Redl*. Binghamton, USA: The Haworth Press, 43-56.

Long, N. J. 2008. Breaking the trust barrier with troubled students. *Reclaiming Children and Youth*, 17(1):56-58.

Mackenzie, K. 2019. Unsettling the white settler problem in CYC. *Relational Child & Youth Care Practice*, 32 (3): 105-118.

MacLeod, K. 2016. Working with the multidisciplinary team. In: O'Donohue, W. T. and Fanetti, M. eds. *Forensic Interviews regarding Child Sexual Abuse, Switzerland*: Springer International Publishing, 41-56.

Magida, A. 2015a. The statutory regulation of South African child and youth care workers. *Child & Youth Care Work*, 33 (3 & 4): 49.

Magida, A. 2015b. Address by Representative of the South African Council for Social Service Professions. *Child & Youth Care Work*, 33 (3 & 4): 20-22.

Magida, A. 2019a. The progress of the professional board for child and youth: towards professionalising child and youth care work. *Child & Youth Care Work*, 37(3 & 4): 34-38.

Magida, A. 2019b. The statutory regulation of South African child and you care workers. *Child & Youth Care Work*, 37(3 & 4): 49.

Magnuson, D. 2012. Essential moral sources of ethical standards in child and youth care work. *Journal of Child and Youth Care Work*, 24: 27-33.

Magnuson, D. 2014. Stop breaking people into bits: A plea for a peopled youth work. In: Gharabaghi, K., Skott- Myhre, H. and Krueger, M. eds. *With children and youth: emerging theories and practices in child and youth work*. Ontario, Canada: Wilfred Laurier University Press, 43-56.

Magnuson, D. and Baldwin, C. 2014. A defense of professionalism: A response to Fusco and Baizerman. *Child & Youth Services*, 35(1): 4-15.

Maier, H. W. 1977. The child care worker. In J. Turner (Ed.). *Encyclopedia of social work*. New York: National Association of Social Workers, 1977, 130–134.

Maier, H. W. 1987. *Developmental group care of children and youth concepts and practice*. New York, USA: The Haworth Press.

Maier, H W. 1991. An exploration of the substance of child and youth care practice. *Child and Youth Care Forum*, 20(6): 393-411.

Malatjie, H. and Dube, N. 2015. Experiences and challenges related to residential care and the expression of cultural identity of adolescent boys at a child and youth care centre (CYCC) in Johannesburg. *Social work/Maatskaplike Werk* 53 (1): 109-126. Available:

Mand, C. L. 1983. Re-education through recreation. In: Brendtro, L. K. and Ness, A. E. eds. *Re-educating troubled youth*. New York: Aldine, 233-254.

Maree, K. and Pietersen, J. 2016. Sampling. In: Maree, K. ed. *First steps in research*. 2nd ed. Pretoria: Van Schaik, 192-202.

Martin, P., Hall, K., Lake, L. 2018. Supporting families in South Africa: a policy map. In: Hall, K., Richter, L., Mokomane, Z., and Lake, L. eds. *South African Child Gauge 2018: Children, families and the State. Collaboration and contestation*. Cape Town: Children's Institute, University of Cape Town, 113-128.

Mattingly, M. Stuart, C. and Vander Ven, K. 2010. Competencies for professional child & youth work practitioners. *Association for Child and Youth Care Practice*.

[https://cyc-net.org/pdf/2010 Competencies for Professional CYW Practitioners%20\(1\).pdf](https://cyc-net.org/pdf/2010%20Competencies%20for%20Professional%20CYW%20Practitioners%20(1).pdf)

(Accessed 15 January 2020).

Mattingly, M., Stuart, C. and Eckles, F. 2012. Professionalism. *Journal of Child and Youth Care Work*, 24:25-26.

McLeod, K. J. 2016. Working with the multidisciplinary team. In: O'Donoghue, W. T. and Fanetti, M. eds. *Forensic interviews regarding child sexual abuse*. Switzerland: Springer International Publishing, 41-56.

Meintjes, H., Hall, K., Marera, D.H. and Boulle, A. 2010. Orphans of the AIDS epidemic: The extent, nature and circumstances of child-headed households in South Africa. *AIDS care*, 22(1): 40-49.
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2840873/> (Accessed 2019/06/15).

Mellinger, M. S. 2016. What drives advocacy? An exploration of value, mission, and relationships. *Journal of Policy Practice*, August: 1-19.

Mellinger, M. S. 2017. Mission and advocacy structure: a perspective from human service organisations. *Journal of Policy Practice*, 16 (3): 292-309.

Melton, G. 2008. Beyond balancing: toward an integrated approach to children's rights. *Journal of Social Issues*, 64(4): 903—920. Available:
<http://web.colby.edu/ed334/files/2017/08/Melton-Beyond-Balancing.pdf> (Accessed 29 October 2020).

Mezmur, B. J. 2017. Foreword. *South African Child Gauge 2017*, Cape Town: Children's Institute, University of Cape Town.

Miel, A. 1992. Roaming through a life-space. *The Educational Forum*, 56(4): 457-463.

Mkhwanazi, N., Makuaha, T., Blackie, D., Manderson, L., Hall, K., and Huibregts, M. 2018. Negotiating the care of children and support for caregivers. In: Hall, K., Richter, L., Mokomane, Z. and Lake, L. eds. *South African Child Gauge 2018*. Cape Town: Children's Institute, University of Cape Town, 70-80.

Modlin, H. 2019. CYC-Net board of directors. *Child & Youth Care Work*, 37 (3 & 4): 7.

Moleiro, C., Marques, S. and Pacheco, P. 2011. Cultural diversity competencies in child and youth care services in Portugal: development of two measures and a brief training programme. *Children & Youth Services Review*, 33:767-733.

Molepo, L. P. 2014. *Challenges and coping strategies of child and youth care workers in the South African context*, Pretoria: University of South Africa.

Molepo, L and Delport, CSL. 2015. Professional challenges experienced by child and youth care workers in South Africa. *Children and youth services review*, 56:149-160. Available: <https://doi.org/10.1016/j.childyouth.2015.07.006> (Accessed 09 April 2020).

Morgan, D.L. 1997. *Focus groups as qualitative research*. 2nd ed. London: SAGE.

Mthembu, M. and Mkhize, N. Social workers' reflections on utilising indigenous games in child counselling. *South African Journal of Social Work and Social Development*, 31(2): 1-15.

NACCW. 1977. Recommendations. In: Gannon, B. ed. Report of the first biennial conference of the National Association of Child-Care Workers, NACCW, 55-60.

NACCW. 1988. Programmes and practice. In: Gannon, B., ed. *Today's child tomorrow's adult. Proceedings of the Sixth Biennial National Conference of the National Association of Child Care Workers*. Cape Town, South Africa: NACCW, 80-139.

NACCW. 1997. The Diploma in Child Care Administration. Cape Town: NACCW.

NACCW. 1998. *Today's child tomorrow's adult. Proceedings of the Sixth Biennial National Conference of the National Association of Child Care Workers*. Cape Town: NACCW, 13-22.

NACCW. 2000. Application for establishing a professional board in terms of section 14a of the Social Service Professions Act, 1978 (Act 110 of 1978) – Child and youth care. Cape Town: NACCW.

NACCW. 2003. Celebrating...the establishing of a Standards Generating Body. *Child & Youth Care*, 23(11): 19.

NACCW. 2014. *Isibindi – creating circles of care*. Available: <http://www.naccw.org.za/isibindi> (Accessed 26 August 2020).

NACCW. 2015. *Annual report 2014/15*. Cape Town: NACCW.

NACCW. 2018. *Isibindi Minimum Standards for Service and Practice Standard Operating Procedures*. Cape Town: NACCW.

NACCW. 2018. *The Isibindi guidelines*. Cape Town, South Africa: NACCW.

NACCW. 2019. *National roll-out of Isibindi year five and close-out report*. Cape Town: NACCW.

National Association of Child Care Workers. 2019. *The history of Isibindi*. Cape Town: National Association of Child Care Workers.

National Organisation of Child Care Worker Associations. 1992. The international leadership coalition for professional child and youth. *Journal of Child and Youth Work*, 8:69-83.

National Planning Commission. 2012. *National Development Plan 2030: Our Future – Make it Work*. Pretoria: Government Printer. Available: https://www.gov.za/sites/default/files/gcis_document/201409/ndp-2030-our-future-make-it-workr.pdf (Accessed 15 September 2020).

Neal, J. W. and Neal, Z. 2013. Nested or networked? Future directions for ecological systems theory. *Social Development*, 22 (4): 722–737. Available: <https://doi.org/10.1111/sode.12018>

Neill A. S. 1960. *Summerhill: a radical approach to child-rearing*. UK: Hart Publishers.

Neuman, W. L. 2012. *Understanding research*. Boston: Pearson/Prentice Hall.

Nieuwenhuis, J. 2016. Analysing qualitative data. In: Maree, K. ed. *First steps in research*. 2nd ed. Pretoria: Van Schaik, 103-132.

Nieuwenhuis, J. 2016. Qualitative research designs and data-gathering techniques. In: Maree, K. ed. *First steps in research*. 2nd ed. Pretoria: Van Schaik, 71-102.

Nightingale, E. 1990. The development of a short-term family service model. In: Biederman-Pam, M. and Gannon, B. eds. *Competent care competent kids*. Claremont: NACCW, 155-166.

Nilsson, B., Edin, K. Kinsman, J., Khan, K and Norris, S. A. 2020. Obstacles to intergenerational communication in caregivers' narratives regarding young people's sexual and reproductive health and lifestyle in rural South Africa. *BMC Public Health*, 20:791-801.

Omotoso, K.O. and Koch, S.F. 2018. Exploring child poverty and inequality in post-apartheid South Africa: a multidimensional perspective. *Journal of Poverty and Social Justice*, 26(3): 417–431.

Palays, T. 1992. *Research decisions: quantitative and qualitative perspectives*. Canada: Harcourt Brace Jovanovich.

PEPFAR. 2019. *Monitoring, evaluation, and reporting indicator reference guide*. USAID.

Peters, F. 2008. Introduction: residential child care and its alternatives – professional approaches in a discursive field. In: Peters, F. *Residential child care and its alternatives: international perspectives*. UK: Trentham Books, 1-19.

Phelan, J. 2003 child and youth care family support work. In Garfat, T ed. *A child and youth approach to working with families*. New York, USA: The Haworth Press, Inc., 67-77. 39-53.

Phelan, J. 2008. The profession called child and youth care work. *CYC-Net Online*. Available: <https://cyc-net.org/cyc-online/cycol-0308-phelanguest.html> (Accessed 24 October 2020).

Phelan, J. 2014. Thinking through a relational and developmental lens. In: Gharabaghi, K., Skott-Myhre, H. A., and Krueger, M. eds. *With children and youth: emerging theories and practices in child and youth work*. Ontario, Canada: Wilfred Laurier University Press, 81-100.

Phelan, J. 2015. *The long and the short of it child and youth care*. Cape Town, South Africa: The CYC-Net Press.

Phelan, J. 2017. *Intentional CYC supervision a developmental approach*. Cape Town, South Africa: The CYC-Net Press.

Proudlock, P., Mathews, S., and Jamieson, L. 2014. Children's rights to be protected from violence: a review of South Africa's laws and policies. In: Proudlock, P. ed. *South Africa's progress in realising children's rights: a law review*. Cape Town: Children's Institute, University of Cape Town; Save the Children South Africa. 166-212. Available: http://www.ci.uct.ac.za/sites/default/files/image_tool/images/367/publication/2014/Realising_childrens_rights_law_review_2014.pdf (Accessed 28 October 2020).

Qalinge, L. and Van Breda, A. 2018. Editorial: Decolonising social work education in South Africa. *Southern African Journal of Social Work and Social Development*, 30(4): 1-4. Available: DOI: 10.25159/2415-5829/4192 (Accessed 30 June 2020).

Quintrell, G. and Crowley, M. 1988. Work with families: a South African practice model. In Gannon, B. ed. *Today's child tomorrow's adult: proceedings of the Sixth Biennial National Conference of the National Association of Child Care Workers*. Cape Town: NACCW, 110-116.

Ranahan, P. 2018. De/valuing youth work: revealing tensions in professional identity development while enhancing and applying mental health literacy. *Child & youth services*, 39 (2-3): 137-157.

Ranahan, P. Blanchet-Cohen, N. and Mann-Feder, V. 2015. Moving towards an integrated approach to youth work education. *International Journal of Child, Youth and Family Studies*, 6 (4): 516-538.

Redl, F. and Wineman, D. 1951. *Children who hate*. Glencoe, IL: The Free Press.

Redl, F. and Wineman, D. 1952. *Controls From Within: Techniques for treatment of the aggressive child*. Glencoe, IL: The Free Press.

Reisch, M. and Wenocur, S. 1982. Professionalization and voluntarism in social welfare: Changing roles and functions. *Journal of Voluntary Action Research*, 11(2-3): 11-31. Available: <https://doi.org/10.1177/089976408201100204> (Accessed 23 March 2020).

Richie, J. 2003. The applications of qualitative methods to social research. In: Richie, J. and Lewis, J. eds. *Qualitative research practice: a guide for social science students and researchers*, California: SAGE, 24-46.

Richie, J., Spencer, L. and O'Connor, W. 2003. Carrying out qualitative analysis. In: Richie, J. and Lewis, J. eds. *Qualitative research practice: a guide for social science students and researchers*, California: SAGE, 219-262.

Ricks, F. and Charlesworth, J. 2003. *Emergent Practice Planning*. New York: Kluwer Publishing.

Ruch, G. 2018. The contemporary context of relationship-based practice. In: Ruch, G., Turney D. and Ward, A. eds. *Relationship-based social work: Getting to the heart of practice*. 2nd ed. Philadelphia: Jessica Kingsley Publishers, 19-36.

Rukuni, M. 2007. *Being Afrikan*. South Africa: Mandala Publishers.

Sallah, M. 2014. *Global youth work: provoking consciousness and taking action*. Dorset, UK: Russell House Publishing.

Sambu, W. 2019. Child health: nutrition. In: Shung-King, M., Lake, L., Sanders, D and Hendricks, M. eds. *South African Child Gauge 2019*. Cape Town: Children's Institute, University of Cape Town.

Samson, L. 2015. Practice wisdom: the art and science of social work. *Journal of Social Work Practice*, 29 (2): 119-131.

Schurink, W., Fouché, C.B. and De Vos, A, S. 2011. Qualitative data analysis and interpretation. In: De Vos, A.S., Strydom, H., Fouché, C.B. and Delport, C.S.L. eds. *Research at grass roots*. 4th ed. Pretoria, South Africa: Van Schaik, 397-424.

Scott, K. 1999. It is amazing what you find when you look. *Child & Youth Care*, 17(6): 9-10.

Shaw, K. 2012. Child and youth care education: on discovering the parallels to practice. In: Garfat, T. and Fulcher, L. C. eds. *Child and youth care in practice*. Cape Town, South Africa: Pretext, 161-168.

Shaw, K. and Garfat, T. 2003. From frontline to family home: a youth approach to working with families. In: Garfat, T ed. *A child and youth approach to working with families*. Binghamton, New York, USA: The Haworth Press, Inc, 39-53.

Shaw, K. and Trites, J. 2013. Child and youth care education is child and youth care practice: connecting with the characteristics of practice. *Relational Child & Youth Care Practice*, 26 (4): 11-15.

Shaw, K., Reid, J. and Trites, J. 2013. Daily life events in the context of CYC education. In: Garfat, T., Fulcher, L. and Digney, J. eds. *Making moments meaningful in child and youth care practice*. Cape Town, South Africa: Pretext, 88-96.

Shier, M. L. and Handy, F. 2015. From advocacy to social innovation: a typology of social change efforts by nonprofits. *International Society for Third-Sector Research*, 26:2581-2603.

Skott-Myher, H. A. and Skott-Myher, K.S.G. 2007. Radical youth work: love and community. *Relational Child & Youth Care Practice*, 20 (3): 48-57.

Skott-Myher, H. A. and Skott-Myher, K.S.G. 2009. Towards a radical ethics of care. *Journal of Child and Youth Care Work*, 22:228-242.

Skott-Myhre, K. and Skott-Myhre, H. A. 2012. Theorising and applying child and youth praxis as politics of care. In: Garfat, T. and Fulcher, L. C. eds. *Child and youth care in practice*. Cape Town, South Africa: Pretext, 169-185.

Smiar, N. 2019. Why do we need a code of ethics anyway? *Child & Youth Care Work*, 37 (1): 19.

Smith, M. 2006. Act justly, love tenderly, walk humbly. *Relational Child & Youth Care Practice*, 19(4): 5-15.

Smith, M. 2009. *Rethinking residential child care: positive perspectives*. Bristol: The Policy Press.

Smith, M. 2012. Love and the child and youth care relationship. In: Garfat, T. and Fulcher, L. C. eds. *Child and youth care in practice*. Cape Town, South Africa: Pretext, 67-73.

Smith, M., Fulcher, L. and Doran, P. 2013. *Residential child care in practice: making a difference*. Bristol, UK: The Policy Press.

Snell, H. and Kenszierski, M. 2019. Child and youth education – the illustrated edition. *Relational Child & Youth Care Practice*, 32 (1): 31-39.

South Africa, Constitutional Assembly. 1996. Pretoria: Government Printer.

South Africa, Department of Public Service and Administration. 2009. *Annexure D: Occupation Specific Dispensation (OSD). Child and Youth Care Worker*

(Institutions). Available:

<http://www.fshealth.gov.za/phsdsbc/Implemetation%20Directives%20Resolution%201%20&%202%20of%202009/annexure%20d.pdf> (Accessed 28 October 2020).

South Africa, Department of Social Development. 1978. *Social Service Professions Act (Act No. 110 of 1978)*. Pretoria: Department of Social Development.

South Africa, Department of Social Development. 1997. *White Paper for Social Welfare*. Pretoria: Department of Social Development.

South Africa, Department of Social Development. 2005. *Children's Act (No. 38 of 2005)*. Pretoria: Department of Social Development.

South Africa, Department of Social Development. 2007. *Children's Amendment Act (No. 41 of 2007)*. Pretoria: Department of Social Development.

South Africa, Department of Social Development. 2010a. *Norms, standards and practice guidelines for the Children's Act*. Pretoria: Department of Social Development.

South Africa, Department of Social Development. 2010b. *Manual on family preservation services*. Pretoria: Department of Social Development.

South Africa, Department of Social Development. 2013. *Norms and standards for services to families*. Pretoria: Department of Social Development.

South Africa, Department of Social Development. 2014. *Social Service Professions Act, 1978 (Act No. 110 of 1978): Regulations for Child and Youth Care Workers, Auxiliary Child and Youth Care Workers, and Student Child and Youth Care Workers*. Government Gazette 38135: 31 October. Pretoria: Government Printer.

South Africa, Department of Social Development. 2016. *Comprehensive Report on the Review of the White Paper for Social Welfare, 1997*. Pretoria: Department of Social Development.

South Africa, Department of Social Development. 2016a. *Policy for social service practitioners*. Pretoria: Pretoria: Department of Social Development.

South Africa, Department of Social Development. 2016b. *Sustainability plan for the rollout of community-based child and youth care services*. Pretoria: Department of Social Development

South Africa, Department of Social Development. 2017. *Manual for the induction of social service practitioners (child and youth care workers) in the Department of Social development: strengthening the social service workforce*. Pretoria: Department of Social Development.

South Africa, National Planning Commission. 2012. National Development Plan 2030: Our Future – Make it Work. Pretoria: Government Printer. Available: https://www.gov.za/sites/default/files/gcis_document/201409/ndp-2030-our-future-make-it-workr.pdf (Accessed 15 September 2020).

South African Council for Social Service Professions. 2020. *Child and youth care and social worker data per province*. Pretoria: South African Council for Social Service Professions.

South African Council for Social Service Professions. 2020a. *Registrations report to Council*. Pretoria: South African Council for Social Service Professions.

South African Council for Social Service Professions. 2020b. *General notice 13 of 2020*. Pretoria: South African Council for Social Service Professions. Available: <http://www.hwseta.org.za/wp-content/uploads/2020/10/SACSSP-GENERAL-NOTICE-13-OF-2020-002.pdf> (Accessed 27 October 2020).

South Africa, Qualifications Authority. 1995. South African Qualifications Authority Act No 58 of 1995. Pretoria: Government Printer. Available: https://www.saqqa.org.za/sites/default/files/2019-11/SOUTH%20AFRICAN%20QUALIFICATIONS%20AUTHORITY%20ACT%2C%20NO.58%20OF%201995_8.pdf (Accessed 23 September 2020).

South African Qualifications Authority. 2007. *Further Education and Training Certificate: Child and Youth Care Work*. Available: <https://allqs.saqa.org.za/showQualification.php?id=49093> (Accessed 12 August 2020).

South African Qualifications Authority. 2012. *Level descriptors for the South African National Qualifications Framework*. Available: https://www.saqa.org.za/sites/default/files/2019-11/level_descriptors.pdf (Accessed 21 August 2020).

South African Qualifications Authority. 2018. *Bachelor of Child and Youth Care*. Available: <https://allqs.saqa.org.za/showQualification.php?id=94178> (Accessed 25 August 2020).

South African Qualifications Authority. 2018a. *Bachelor of Child and Youth Care*. Available: <https://allqs.saqa.org.za/showQualification.php?id=94178> (Accessed 25 August 2020).

South African Qualifications Authority. 2018b. *Further Education and Training Certificate: Child and Youth Care Work*. Available: <https://allqs.saqa.org.za/showQualification.php?id=60209> (Accessed 12 August 2020).

South African Qualifications Authority. 2018c. *Occupational Certificate: Child and Youth Care Worker*. Available: <https://allqs.saqa.org.za/showQualification.php?id=99510> (Accessed 25 August 2020).

South African Qualifications Authority. 2020. *Policy and criteria for recognizing professional body and registering a professional designation for the purposes of the National Qualifications Framework Act, Act 67 of 2008 (as amended, 2020)*. Available: https://www.saqa.org.za/sites/default/files/2020-04/Policy_Prof%20bodies01042020.pdf (Accessed 21 August 2020).

Statistics South Africa. 2018. *Statistical release: Mid-year population estimates*. Pretoria: Statistics South Africa. Available: <https://www.statssa.gov.za/publications/P0302/P03022018.pdf> (Accessed 27 October 2020).

Statistics South Africa. 2019. General household survey 2018. Pretoria: Statistics South Africa. Available: <https://www.statssa.gov.za/publications/P0318/P03182018.pdf> (Accessed 27 October 2020).

Statistics South Africa. 2020. *Statistical release, P0302, Mid-year population estimates 2020*. Pretoria: Statistics South Africa. Available: <http://www.statssa.gov.za/publications/P0302/P03022020.pdf> (Accessed 27 October 2020).

Stebbins, R. A. 2011a. Exploration: Its future in the social sciences. In: *Exploratory research in the social sciences*. Thousand Oaks, USA: SAGE, 59-61.

Stebbins, R. A. 2011b. What is exploration? In: *Exploratory research in the social sciences*. Thousand Oaks, USA: SAGE, 2-17.

Steckley, L. 2013. Is Life-space a Threshold Concept? *CYC-On line* June Issue 172: 23-29. Available: https://www.academia.edu/7327116/Is_life_space_a_threshold_concept (Accessed 09 April 2020).

Steckley, L. 2020. Threshold concepts in residential childcare: part 2, relational practice as threshold. *Children and Youth Services Review*, February: 1-10.

Stephen, J. and Gharabaghi, K. 2019. Of orthodoxies, counter-movements and pragmatism: exploring transcendental child and youth care in South Africa. *Relational Child & Youth Care Practice*, 32 (1): 40-56.

Strydom, H. 2011. Ethical aspects of research in the social sciences and human service professions. In: De Vos, A.S., Strydom, H., Fouché, C.B. and Delport, C.S.L. eds. *Research at grass roots*. 4th ed. Pretoria, South Africa: Van Schaik, 113-130.

- Strydom, H. and Delpont, C.S.L. 2011. Sampling and pilot study in qualitative research. In: De Vos, A.S., Strydom, H., Fouché, C.B. and Delpont, C.S.L. eds. *Research at grass roots*. 4th ed. Pretoria, South Africa: Van Schaik, 319-396.
- Stuart, C. 2012. Dichotomizing our work. In: Garfat, T. and Fulcher, L. C. eds. *Child and youth care in practice*. Cape Town, South Africa: Pretext, 61-66.
- Stuart, C. 2013. *Foundations of child and youth care*. 2nd ed. USA: Kendall Hunt.
- Stuart, C. 2014. Developing the profession from adolescence into adulthood: generativity versus stagnation. In: Gharabaghi, K., Skott- Myhre, H. and Krueger, M. eds. *With children and youth: emerging theories and practices in child and youth work*. Ontario, Canada: Wilfred Laurier University Press, 57-80.
- Swanzen, R. 2011. The coexistence of the social work and child and youth care professions. *Revista de Asistență Socială*, 10(2): 19-38.
- Swanzen, R. and Jadrijevic, T. I. 2014. The Child and youth care worker's role in the health and safety of children. *African Journal for Physical, Health Education, Recreation and Dance*, 2(September): 131-140.
- Thaba-Nkadimene, K.L, Wilfred Molotja, W. and Mafumo, T.N. 2019. The scourge of poverty among South African rural women: in defence of social justice. *Journal of Gender, Information and Development in Africa*, 69-89. Available: DOI: <https://doi.org/10.31920/2050-4284/2019/8n3a4> (Accessed 02 April 2020)
- The International Child and Youth Care Network (CYC-Net). n.d. *The field of child and youth care*. Available: <https://cyc-net.org/profession/pro-associations.html> (Accessed 15 March 2020).
- Theron, L. Liebenberg, L. and Malindi, M. 2014. When schooling experiences are respectful of children's rights: a pathway to resilience. *School Psychology International*, 35 (3): 253-265. <https://DOI:10.1177/0142723713503254> (Accessed 20 January 2020).

Thumbadoo, Z. 2012. Isibindi: love in caring with a child and youth care approach. In: Garfat, T. and Fulcher, L. C. eds. *Child and youth care in practice*. Cape Town, South Africa: Pretext Publishers, 190-199.

Thumbadoo, Z. S. 2013. Exploring the role of community child and youth care workers in South Africa: where to in developing competencies? <https://cyc-net.org/profession/readarounds/ra-thumbadoo.html> (Accessed 2018/11/15).

Thumbadoo, Z. 2015. Para-social service competencies developed by the Global Social Service Workforce Alliance. *Child & Youth Care Work*, 31 (2 & 3): 44-45.

Thurman, T. R., Kidman, R., Taylor, T. M., and Chiroro, P. 2013. *Isibindi: a longitudinal evaluation of selected sites in KwaZulu-Natal*. New Orleans, Louisiana: Tulane University. Available: <https://doi.org/10.1080/0145935X.2011.553579> (Accessed 12 October 2020).

Treichsman, A. E. 1969. Understanding the nature of a therapeutic milieu. In: Treichsman, A. E., Whittaker, J. K., and Brendtro, L. K. 1969. eds. *The other 23 hours*. New York: Aldine De Gruyter, 1-50.

Treichsman, A. E., Whittaker, J. K., and Brendtro, L. K. 1969. eds. *The other 23 hours*. New York: Aldine De Gruyter.

Treichsman, A. E., Whittaker, J. K., and Brendtro, L. K. 1969. Preface. In: Treichsman, A. E., Whittaker, J. K., and Brendtro, L. K. 1969. eds. *The other 23 hours*. New York: Aldine De Gruyter, xi-xiv.

UNICEF. 2017. *Documentation of Isibindi family strengthening approach by Acmeret Solutions*. Pretoria: UNICEF.

UNICEF. 2019. *Guidelines to strengthen the social service for child protection*. New York: UNICEF.

United Nations Committee on the Rights of the Child. 2001. *General comment no. 13 (2011): The right of the child to freedom from all forms of violence*. Distr.: General.

18 April 2011. Available:

https://www2.ohchr.org/english/bodies/crc/docs/CRC.C.GC.13_en.pdf (Accessed 27 October 2020).

United Nations General Assembly. 1989. *United Nations Convention on the Rights of the Child*. New York: UN General Assembly.

<https://www.ohchr.org/en/professionalinterest/pages/crc.aspx> (Accessed: 10 January 2020).

United Nations General Assembly. 1989. *United Nations Convention on the Rights of the Child*. New York: UN General Assembly.

Vander Ven, K. 1991. How is child and youth care work unique – and different – from other fields? *Journal of Child and Youth Care*, 5 (1): 15-19.

Vander Ven, K. 1993. Advancing Child and youth care: a model for integrating theory and practice through connecting education, training, and the service system. *Child & Youth Care Forum*, 22 (4): 263-284.

Vander Ven, K. 1999. You are what you do and become what you've done: the role of activity in development of self. *Relational Child & Youth Care Practice: Journal of Child and Youth Care*, 13(2): 133-147.

Vander Ven, K. 2000. "Work is more fun than fun": on the contribution of Jerome Beker to the emerging profession of child and youth care work. *Child and Youth Care Forum* 29(3): 217-223 DOI: [10.1023/A:1026550302169](https://doi.org/10.1023/A:1026550302169)

Vrouwenfelder, E. 2011. Children's rights: how to implement a rights-based approach in residential child-care. In: *In residence*. Glasgow: Scottish Institute for Residential Child Care, University of Strathclyde, 20-27.

Ward, R. 2013. The importance of congruence in child and youth care education. *Relational Child & Youth Care Practice*, 26 (3): 52-57.

White, J. 2008. The knowing, doing and being in context: a praxis-oriented approach to child and youth care. In: Bellefeuille, G. and Ricks, F. eds. *Standing on the precipice: inquiry into the creative potential of child and youth care practice*. Alberta, Canada: MacEwan Press, 109-134.

Whittaker, J.K. 2019. 'The Other 23 Hours' at 50: some personal reflections. *Residential Treatment for Children & Youth*, 36(1): 3-9. Available: DOI:10.1080/0886571X.2018.1515600 (Accessed 10 March 2020).

Wilber, K. 1996. *A brief history of everything*. Boston, USA: Gateway.

Yakhnich, L., Grupper, E. and Romi, S. 2018. Focused training of child and youth-care workers for promoting social and educational inclusion of youth at risk. *Child & Youth Services*, 39 (1): 43-53.

Young, T. L. and Nelson-Gardell, D. 2018. A grounded theory study of collaboration in multidisciplinary teams. *Journal of Public Child Welfare*, 12 (5): 576-595.

APPENDICES

Appendix 1



Letter of information: Interview participants – employers of child and youth care workers

Dear XXX

Request for participation in an in-depth interview on child and youth care work related to research

I trust you are well and appreciate you reviewing this mail.

My name is Merle Allsopp and I am currently undertaking a PhD with Durban University of Technology where I will be conducting a study entitled: 'Child and youth care work in the South African context: Towards a model for education and practice'. My supervisors for the study are Prof Raisuyah Bhagwan (PhD) and Prof James Anglin (PhD).

This study seeks to document the current reality of child and youth care practice, and contribute to future improvements in child and youth care work. The aim of the study will be to develop a model to guide child and youth care practice and education in South Africa.

There is limited research on child and youth care practice in South Africa, and the roles and functions and duties undertaken by child and youth care workers across both residential and community-based settings of child and youth care workers. This study aims to articulate the work undertaken by child and youth care workers functioning at both auxiliary and professional levels in a range of practice settings.

As part of the study I will be undertaking a series of interviews with a select number of employers of child and youth care workers. The intention is to collate information gleaned from a employers in a number of different employment settings on their opinions of the nature of child and youth care work as practised in the setting in which they work. As one such person identified in this group, I respectfully request your consideration of this request.

Information on the process of holding the interview follows below:

- The interview will be conducted at a specific date and time specified well beforehand and at a mutually-agreed upon convenient venue for yourself.
- The interview will be conducted either in person, or via Skype or any other communication modality preferred by you.
- The interview will be conducted by me.
- The interview will be recorded for purpose of data collection.
- You will be asked to participate in the interview by providing your views on the questions asked.

- The questions will relate to the scope of practice of child and youth care workers in South Africa, the outline of which will be mailed to you at least two weeks before the interview.
- Confidentiality will be ensured by changing your name, address and identifying details so that your views and information provided will not be able to be traced back to you.
- You will have access to documents resulting from the research.
- You will be able to change your mind in relation to participating in the research process at any point of the process, even if you have already provided consent.
- You are assured that during the research process you they may decline the sharing of any information or answering of any particular question.

Should you agree to participate you will be required to:

- Be available for an interview of approximately 1 – 2 hours which will be recorded and later analysed;
- Provide your views on the topic of the research without being remunerated for this;
- Give consent for the information gathered from the interview to be used in the research study;
- Give consent for the interview to be recorded.

It is expected that the research will contribute to the continued development of the child and youth care work profession in South Africa. I stress that involvement in the research study is voluntary.

Should you feel aggrieved in any manner in relation to this study, as a participant you have recourse to myself as well as the persons listed below:

- Prof Raisuyah Bhagwan (Research supervisor) – contactable at: bhagwanr@dut.ac.za
- Institutional Research Ethics Administrator – contactable at 031 373 2900.
- Acting Director: Research and Postgraduate Support – Prof Carin Napier on 031 373 2577 or carinn@dut.ac.za

Your favourable consideration of this request will be deeply appreciated.

Kind regards,

Merle Allsopp (Researcher)

Contactable at: (082 375 2477) or merle@naccw.org.za

Appendix 2



Statement of consent to interviews by employers of child and youth care workers

Statement of Agreement to Participate in the Research Study:

- I hereby confirm that I have been informed by the researcher Merle Allsopp about the nature, conduct, benefits and risks of this study - Research Ethics Clearance Number: _____,
- I have also received, read and understood the above written information (Participant Letter of Information) regarding the study.
- I am aware that the results of the study, including personal details regarding my sex, age, date of birth, initials and diagnosis will be anonymously processed into a study report.
- I am aware that the interview will be taped.
- In view of the requirements of research, I agree that the data collected during this study can be processed in a computerised system by the researcher.
- I may, at any stage, without prejudice, withdraw my consent and participation in the study.
- I have had sufficient opportunity to ask questions and (of my own free will) declare myself prepared to participate in the study.
- I understand that significant new findings developed during the course of this research which may relate to my participation will be made available to me.

Full Name of Participant	Date	Time	Signature	Right Thumbprint

I, _____ (name of researcher) herewith confirm that the above participant has been fully informed about the nature, conduct and risks of the above study.

Full Name of Researcher	Date	Signature
Full Name of Witness (If applicable)	Date	Signature
Full Name of Legal Guardian (If applicable)	Date	Signature

Appendix 3



Interview schedule for in-depth interviews with employers of child and youth care workers

1. What are your views regarding whether the scopes of practice for child and youth care workers at auxiliary and professional levels, as outlined in the regulations to the Social Service Professions Act No110 of 1978, accurately describe the nature of child and youth care work practice at each level?
2. What are some of the possible additional elements, not included in these scopes of practice that you would consider to be part of the practice child and youth care workers at each level? Can you describe these?
3. Can you identify any of the elements included in the scope of practice that you would consider not to be part of the practice of child and youth care workers at each level? Can you describe these?
4. Given your knowledge of the South African context within which child and youth care work is practiced, how would you describe the *nature* of child and youth care work at each level?
5. Please provide your thoughts or views around the differentiation between child and youth care workers at auxiliary level, and child and youth care workers at professional level, as described in the Social Services Professions Act No 110 of 1978. Can you tell me more about whether the scopes of practice accurately distinguish between the roles of child and youth care workers registered at the two different levels? Can you explain your perspective in this regard?
6. Please describe the roles and functions of child and youth care workers at each level?
7. How does the description of the scopes of practice for child and youth care workers in South Africa align to or differ from your understanding of what is internationally considered to be the nature of child and youth care work practice?
8. Are there specific aspects of child and youth care practice that you believe need to be integrated into the education and training process of child and youth care workers at each level? Can you describe these aspects?
9. Given your understanding of the South African context for the practice of child and youth care work, how should local child and youth care training and education be focused?
10. Are there changes that should be introduced to the training and education of child and youth care workers, and if so, what are these?

Appendix 4



Letter of information: Child and youth care worker focus group participants at auxiliary level

Dear XXX

Request for your participation in a focus group on child and youth care work related to research

I trust you are well and appreciate you reviewing this mail.

My name is Merle Allsopp and I am currently undertaking a PhD with Durban University of Technology where I will be conducting a study entitled: 'Child and youth care work in the South African context: Towards a model for education and practice'. My supervisors for the study are Prof Raisuyah Bhagwan (PhD) and Prof James Anglin (PhD).

This study seeks to document the current reality, and contribute to future improvements in child and youth care work. The aim of the study will be to develop a model to guide child and youth care practice and education in South Africa.

There is limited research on child and youth care practice in South Africa, and the roles and functions and duties undertaken by child and youth care workers across both residential and community-based settings of child and youth care workers. This study aims to articulate the work undertaken by child and youth care workers functioning at both auxiliary and professional levels.

As part of the study I will be undertaking a series of focus groups including child and youth care workers who will be asked to provide their thoughts (in focus groups of approximately 8 other child and youth care workers) related to a series of questions on the research question. I respectfully request your consideration of this request.

Information on the process of holding the groups follows below:

- The focus groups will be conducted at a specific date and time specified well beforehand and at a convenient venue.
- Transport costs to travel to the venue will be provided by the researcher.
- You will be asked to participate in the focus group by providing your views on the questions asked;
- Confidentiality will be ensured by changing the name, address and identifying details of participants so that the views and information provided will not be able to be traced back to any individual or organisation.

- You will have access to documents resulting from the research.
- You will be able to change your mind in relation to participating in the research process at any point of the process, even if you have already provided consent.
- You are assured that during the research process you may decline the sharing of any information or answering of any particular question.
- The focus groups will be undertaken in a professional environment that it is anticipated will be comfortable for you and all participants.

Should you agree to participate you will be required to:

- Be available for a focus group of approximately 1 – 2 hours which will be recorded and later analysed;
- Provide your views on the topic of the research without being remunerated for this;
- Give consent for the information gathered from the focus groups to be used in the research study;
- Give consent for the focus group to be recorded.

It is expected that the research will contribute to the continued development of the child and youth care work profession in South Africa. I stress that involvement in the research study is voluntary.

Should you feel aggrieved in any manner in relation to this study, as a participant you have recourse to myself as well as the persons below:

- Prof Raisuyah Bhagwan (Research supervisor) – contactable at: bhagwanr@dut.ac.za
- Institutional Research Ethics Administrator – contactable at 031 373 2900.
- Acting Director: Research and Postgraduate Support – Prof Carin Napier on 031 373 2577 or carinn@dut.ac.za

Your favourable consideration of this request will be deeply appreciated.

Kind regards,

Merle Allsopp (Researcher)
Contactable at: (082 375 2477) or merle@naccw.org.za

Appendix 5



Statement of consent for focus group participants for focus group at auxiliary level

Statement of Agreement to Participate in the Research Study:

- I hereby confirm that I have been informed by the researcher Merle Allsopp
- about the nature, conduct, benefits and risks of this study - Research Ethics Clearance Number: _____,
- I have also received, read and understood the above written information (Participant Letter of Information) regarding the study.
- I am aware that the results of the study, including personal details regarding my sex, age, date of birth, initials and diagnosis will be anonymously processed into a study report.
- I am aware that the focus group will be taped.
- In view of the requirements of research, I agree that the data collected during this study can be processed in a computerised system by the researcher.
- I may, at any stage, without prejudice, withdraw my consent and participation in the study.
- I have had sufficient opportunity to ask questions and (of my own free will) declare myself prepared to participate in the study.
- I understand that significant new findings developed during the course of this research which may relate to my participation will be made available to me.

Full Name of Participant	Date	Time	Signature	Right Thumbprint

I, _____ (name of researcher) herewith confirm that the above participant has been fully informed about the nature, conduct and risks of the above study.

Full Name of Researcher	Date	Signature
Full Name of Witness (If applicable)	Date	Signature
Full Name of Legal Guardian (If applicable)	Date	Signature

Appendix 6



Interview schedule for focus groups of child and youth care workers at auxiliary level

1. What are your views regarding whether the scope of practice for child and youth care workers at auxiliary level as outlined in the regulations to the Social Service Professions Act No110 of 1978, accurately describe the practice of child and youth care workers registered at professional level?
2. What are some of the possible additional elements, not included in this scope of practice that you consider to be part of the practice child and youth care works at auxiliary level?
3. Can you identify any of the elements included in the scope of practice that you consider not to be part of the practice of child and youth care workers at auxiliary level?
4. How would you describe the nature of child and youth care work at auxiliary level?
5. Please provide your thoughts or views around the differentiation between child and youth care workers at auxiliary level, and child and youth care workers at professional level, as described in the Social Service Professions Act No 110 of 1978 Can you tell me more about whether the scopes of practice accurately distinguish between the roles of child and youth care workers registered at the two different levels? Can you explain?
6. Please describe the roles and functions of child and youth care workers at auxiliary level?
7. Has the training that you received adequately prepared you to function as a child and youth care worker at auxiliary level? Can you explain your answer to this?
8. What do you think may be, if any, specific aspects of child and youth care practice knowledge that may need to be integrated into the training process of child and youth care workers at auxiliary level?
9. Do you consider that the training methodology was appropriate for training child and youth care workers? Could you explain your answer?

Appendix 7



Letter of information: Child and youth care worker focus group participants at professional level

Dear XXX

Request for your participation in a focus group on child and youth care work related to research

I trust you are well and appreciate you reviewing this mail.

My name is Merle Allsopp and I am currently undertaking a PhD with Durban University of Technology where I will be conducting a study entitled: 'Child and youth care work in the South African context: Towards a model for education and practice'. My supervisors for the study are Prof Raisuyah Bhagwan (PhD) and Prof James Anglin (PhD).

This study seeks to document the current reality, and contribute to future improvements in child and youth care work. The aim of the study will be to develop a model to guide child and youth care practice and education in South Africa.

There is limited research on child and youth care practice in South Africa, and the roles and functions and duties undertaken by child and youth care workers across both residential and community-based settings of child and youth care workers. This study aims to articulate the work undertaken by child and youth care workers functioning at both auxiliary and professional levels.

As part of the study I will be undertaking a series of focus groups including child and youth care workers who will be asked to provide their thoughts (in focus groups of approximately 8 other child and youth care workers) related to a series of questions on the research question. I respectfully request your consideration of this request.

Information on the process of holding the groups follows below:

- The focus groups will be conducted at a specific date and time specified well beforehand and at a convenient venue.
- Transport costs to travel to the venue will be provided by the researcher.
- You will be asked to participate in the focus group by providing your views on the questions asked;
- Confidentiality will be ensured by changing the name, address and identifying details of participants so that the views and information provided will not be able to be traced back to any individual or organisation.
- You will have access to documents resulting from the research.
- You will be able to change your mind in relation to participating in the research process at any

point of the process, even if you have already provided consent.

- You are assured that during the research process you may decline the sharing of any information or answering of any particular question.
- The focus groups will be undertaken in a professional environment that it is anticipated will be comfortable for you and all participants.

Should you agree to participate you will be required to:

- Be available for a focus group of approximately 1 – 2 hours which will be recorded and later analysed;
- Provide your views on the topic of the research without being remunerated for this;
- Give consent for the information gathered from the focus groups to be used in the research study;
- Give consent for the focus group to be recorded.

It is expected that the research will contribute to the continued development of the child and youth care work profession in South Africa. I stress that involvement in the research study is voluntary.

Should you feel aggrieved in any manner in relation to this study, as a participant you have recourse to myself as well as the persons listed below:

- Prof Raisuyah Bhagwan (Research supervisor) – contactable at: bhagwanr@dut.ac.za
- Institutional Research Ethics Administrator – contactable at 031 373 2900.
- Acting Director: Research and Postgraduate Support – Prof Carin Napier on 031 373 2577 or carinn@dut.ac.za

Your favourable consideration of this request will be deeply appreciated.

Kind regards,

Merle Allsopp (Researcher)

Contactable at: (082 375 2477) or merle@naccw.org.za

Appendix 8



Statement of consent for focus group participants for focus group at professional level

Statement of Agreement to Participate in the Research Study:

- I hereby confirm that I have been informed by the researcher Merle Allsopp about the nature, conduct, benefits and risks of this study - Research Ethics Clearance Number: _____,
- I have also received, read and understood the above written information (Participant Letter of Information) regarding the study.
- I am aware that the results of the study, including personal details regarding my sex, age, date of birth, initials and diagnosis will be anonymously processed into a study report.
- I am aware that the focus group will be taped.
- In view of the requirements of research, I agree that the data collected during this study can be processed in a computerised system by the researcher.
- I may, at any stage, without prejudice, withdraw my consent and participation in the study.
- I have had sufficient opportunity to ask questions and (of my own free will) declare myself prepared to participate in the study.
- I understand that significant new findings developed during the course of this research which may relate to my participation will be made available to me.

Full Name of Participant	Date	Time	Signature	Right Thumbprint

I, _____ (name of researcher) herewith confirm that the above participant has been fully informed about the nature, conduct and risks of the above study.

Full Name of Researcher	Date	Signature
Full Name of Witness (If applicable)	Date	Signature
Full Name of Legal Guardian (If applicable)	Date	Signature

Appendix 9



Interview schedule for focus groups of child and youth care workers at professional level

1. What are your views regarding whether the scope of practice for child and youth care workers at professional level as outlined in the regulations to the Social Service Professions Act No110 of 1978, accurately describe the practice of child and youth care workers registered at professional level?
2. What are some of the possible additional elements, not included in this scope of practice that you consider to be part of the practice child and youth care workers at professional level?
3. Can you identify any of the elements included in the scope of practice that you consider not to be part of the practice of child and youth care workers at professional level?
4. How would you describe the nature of child and youth care work at professional level?
5. Please provide your thoughts or views around the differentiation between child and youth care workers at auxiliary level, and child and youth care workers at professional level, as described in the Social Service Professions Act No 110 of 1978. Can you tell me more about whether the scopes of practice accurately distinguish between the roles of child and youth care workers registered at the two different levels? Can you explain?
6. Please describe the roles and functions of child and youth care workers at professional level?
7. How has the education that you received prepared you to function as a child and youth care worker at professional level?
8. What other additional, if any, specific aspects of child and youth care knowledge do you believe need to be integrated into the education process of child and youth care workers at professional level?
9. What further additional inclusions do you think should be made in the curriculum for child and youth care workers?
10. How would you recommend any changes be made to the manner in which the course is delivered?

Appendix 10



Letter of information: Interview participants – local child and youth care experts

Dear XXX

Request for participation in an in-depth interview on child and youth care work related to research

I trust you are well and appreciate you reviewing this mail.

My name is Merle Allsopp and I am currently undertaking a PhD with Durban University of Technology where I will be conducting a study entitled: 'Child and youth care work in the South African context: Towards a model for education and practice'. My supervisors for the study are Prof Raisuyah Bhagwan (PhD) and Prof James Anglin (PhD).

This study seeks to document the current reality, and contribute to future improvements in child and youth care work. The aim of the study will be to develop a model to guide child and youth care practice and education in South Africa.

There is limited research on child and youth care practice in South Africa, and the roles and functions and duties undertaken by child and youth care workers across both residential and community-based settings of child and youth care workers. This study aims to articulate the work undertaken by child and youth care workers functioning at both auxiliary and professional levels.

As part of the study I will be undertaking a series of interviews with local child and youth care experts who will be asked to provide their thoughts related to a series of questions on the research question. The intention is to collate information gleaned from a group of local experts on their opinions of the nature of child and youth care work as practised in South Africa. As one such person identified in this group, I respectfully request your consideration of this request.

Information on the process of holding the interviews follows below:

- The interviews will be conducted at a specific date and time specified well beforehand and at a mutually-agreed upon convenient venue for yourself.
- The interview will be conducted by me, being the researcher in this instance.
- Transport costs to travel to the venue (should this be necessary) will be provided by the researcher.
- You will be asked to participate in the interview by providing your views on the questions asked.
- Confidentiality will be ensured by changing your name, address and identifying details so that the views and information provided by you will not be able to be traced back to you or your organisation.

- You will have access to documents resulting from the research.
- You will be able to change your mind in relation to participating in the research process at any point of the process, even if you have already provided consent.
- You are assured that during the research process you they may decline the sharing of any information or answering of any particular question.
- The interview will be undertaken in a professional environment that it is mutually-agreed upon as suitable.

Should you agree to participate you will be required to:

- Be available for an interview of approximately 1 – 2 hours which will be recorded and later analysed;
- Provide your views on the topic of the research without being remunerated for this;
- Give consent for the information gathered from the interview to be used in the research study;
- Give consent for the interview to be recorded.

It is expected that the research will contribute to the continued development of the child and youth care work profession in South Africa. I stress that involvement in the research study is voluntary.

Should you feel aggrieved in any manner in relation to this study, as a participant you have recourse to myself as well as the persons listed below:

- Prof Raisuyah Bhagwan (Research supervisor) – contactable at: bhagwanr@dut.ac.za
- Institutional Research Ethics Administrator – contactable at 031 373 2900.
- Acting Director: Research and Postgraduate Support – Prof Carin Napier on 031 373 2577 or carinn@dut.ac.za

Your favourable consideration of this request will be deeply appreciated.

Kind regards,

Merle Allsopp (Researcher)
Contactable at: (082 375 2477) or merle@naccw.org.za

Appendix 11



Statement of consent for interviews undertaken with local child and youth care work experts

Statement of Agreement to Participate in the Research Study:

- I hereby confirm that I have been informed by the researcher Merle Allsopp about the nature, conduct, benefits and risks of this study - Research Ethics Clearance Number: _____,
- I have also received, read and understood the above written information (Participant Letter of Information) regarding the study.
- I am aware that the results of the study, including personal details regarding my sex, age, date of birth, initials and diagnosis will be anonymously processed into a study report.
- I am aware that the interview will be taped.
- In view of the requirements of research, I agree that the data collected during this study can be processed in a computerised system by the researcher.
- I may, at any stage, without prejudice, withdraw my consent and participation in the study.
- I have had sufficient opportunity to ask questions and (of my own free will) declare myself prepared to participate in the study.
- I understand that significant new findings developed during the course of this research which may relate to my participation will be made available to me.

Full Name of Participant	Date	Time	Signature	Right Thumbprint

I, _____ (name of researcher) herewith confirm that the above participant has been fully informed about the nature, conduct and risks of the above study.

Full Name of Researcher	Date	Signature
Full Name of Witness (If applicable)	Date	Signature
Full Name of Legal Guardian (If applicable)	Date	Signature

Appendix 12



Interview schedule for in-depth interviews of local child and youth care work experts

1. What are your views regarding whether the scopes of practice for child and youth care workers at auxiliary and professional levels, as outlined in the regulations to the Social Service Professions Act No110 of 1978, accurately describe the nature of child and youth care work practice at each level?
2. What are some of the possible additional elements, not included in these scopes of practice that you would consider to be part of the practice child and youth care workers at each level? Can you describe these?
3. Can you identify any of the elements included in the scope of practice that you would consider not to be part of the practice of child and youth care workers at each level? Can you describe these?
4. Given your knowledge of the South African context within which child and youth care work is practiced, how would you describe the *nature* of child and youth care work at each level?
5. Please provide your thoughts or views around the differentiation between child and youth care workers at auxiliary level, and child and youth care workers at professional level, as described in the Social Services Professions Act No 110 of 1978. Can you tell me more about whether the scopes of practice accurately distinguish between the roles of child and youth care workers registered at the two different levels? Can you explain your perspective in this regard?
6. Please describe the roles and functions of child and youth care workers at each level?
7. How does the description of the scopes of practice for child and youth care workers in South Africa align to or differ from your understanding of what is internationally considered to be the nature of child and youth care work practice?
8. Are there specific aspects of child and youth care practice that you believe need to be integrated into the education and training process of child and youth care workers at each level? Can you describe these aspects?
9. Given your understanding of the South African context for the practice of child and youth care work, how should local child and youth care training and education be focused?
10. Are there changes that should be introduced to the training and education of child and youth care workers, and if so, what are these?

Appendix 13



Letter of information: Interview participants – international child and youth care experts

Dear XXX

Request for participation in an in-depth interview on child and youth care work related to research

I trust you are well and appreciate you reviewing this mail.

My name is Merle Allsopp and I am currently undertaking a PhD with Durban University of Technology where I will be conducting a study entitled: 'Child and youth care work in the South African context: Towards a model for education and practice'. My supervisors for the study are Prof Raisuyah Bhagwan (PhD) and Prof James Anglin (PhD).

This study seeks to document the current reality, and contribute to future improvements in child and youth care work. The aim of the study will be to develop a model to guide child and youth care practice and education in South Africa.

There is limited research on child and youth care practice in South Africa, and the roles and functions and duties undertaken by child and youth care workers across both residential and community-based settings of child and youth care workers. This study aims to articulate the work undertaken by child and youth care workers functioning at both auxiliary and professional levels.

As part of the study I will be undertaking a series of interviews with a select number of international child and youth care experts who are familiar with the field of child and youth care work in South Africa. The intention is to collate information gleaned from a group of international experts on their opinions of the nature of child and youth care work as practised in South Africa. As one such person identified in this group, I respectfully request your consideration of this request.

Information on the process of holding the interviews follows below:

- The interview will be conducted at a specific date and time specified well beforehand and at a mutually-agreed upon convenient venue for yourself.
- The interview will be conducted via Skype or any other communication modality preferred by you.
- The interview will be conducted by me.
- The interview will be recorded for purpose of data collection.
- You will be asked to participate in the interview by providing your views on the questions asked.
- The questions will relate to the scope of practice of child and youth care workers in South Africa, the outline of which will be mailed to you at least two weeks before the interview.
- Confidentiality will be ensured by changing your name, address and identifying details so that the views and information provided will not be able to be traced back to you or your organisation.

- You will have access to documents resulting from the research.
- You will be able to change your mind in relation to participating in the research process at any point of the process, even if you have already provided consent.
- You are assured that during the research process you they may decline the sharing of any information or answering of any particular question.

Should you agree to participate you will be required to:

- Be available for an interview of approximately 1 – 2 hours which will be recorded and later analysed;
- Provide your views on the topic of the research without being remunerated for this;
- Give consent for the information gathered from the interview to be used in the research study;
- Give consent for the interview to be recorded.

It is expected that the research will contribute to the continued development of the child and youth care work profession in South Africa. I stress that involvement in the research study is voluntary.

Should you feel aggrieved in any manner in relation to this study, as a participant you have recourse to myself as well as the persons listed below:

- Prof Raisuyah Bhagwan (Research supervisor) – contactable at: bhagwanr@dut.ac.za
- Institutional Research Ethics Administrator – contactable at 031 373 2900.
- Acting Director: Research and Postgraduate Support – Prof Carin Napier on 031 373 2577 or carinn@dut.ac.za

Your favourable consideration of this request will be deeply appreciated.

Kind regards,

Merle Allsopp (Researcher)
Contactable at: (082 375 2477) or merle@naccw.org.za

Appendix 14



Statement of consent by international child and youth care work experts

Statement of Agreement to Participate in the Research Study:

- I hereby confirm that I have been informed by the researcher Merle Allsopp about the nature, conduct, benefits and risks of this study - Research Ethics Clearance Number: _____,
- I have also received, read and understood the above written information (Participant Letter of Information) regarding the study.
- I am aware that the results of the study, including personal details regarding my sex, age, date of birth, initials and diagnosis will be anonymously processed into a study report.
- I am aware that the interview will be taped.
- In view of the requirements of research, I agree that the data collected during this study can be processed in a computerised system by the researcher.
- I may, at any stage, without prejudice, withdraw my consent and participation in the study.
- I have had sufficient opportunity to ask questions and (of my own free will) declare myself prepared to participate in the study.
- I understand that significant new findings developed during the course of this research which may relate to my participation will be made available to me.

Full Name of Participant	Date	Time	Signature	Right Thumbprint

I, _____ (name of researcher) herewith confirm that the above participant has been fully informed about the nature, conduct and risks of the above study.

Full Name of Researcher	Date	Signature
Full Name of Witness (If applicable)	Date	Signature
Full Name of Legal Guardian (If applicable)	Date	Signature

Appendix 15



Interview schedule for in-depth interviews of international child and youth care work experts

1. What are your views regarding whether the scopes of practice for child and youth care workers at auxiliary and professional levels, as outlined in the regulations to the Social Service Professions Act No110 of 1978, accurately describe the nature of child and youth care work practice at each level?
2. What are some of the possible additional elements, not included in these scopes of practice that you would consider to be part of the practice child and youth care workers at each level? Can you describe these?
3. Can you identify any of the elements included in the scope of practice that you would consider not to be part of the practice of child and youth care workers at each level? Can you describe these?
4. Given your knowledge of the South African context within which child and youth care work is practiced, how would you describe the *nature* of child and youth care work at each level?
5. Please provide your thoughts or views around the differentiation between child and youth care workers at auxiliary level, and child and youth care workers at professional level, as described in the Social Services Professions Act No 110 of 1978. Can you tell me more about whether the scopes of practice accurately distinguish between the roles of child and youth care workers registered at the two different levels? Can you explain your perspective in this regard?
6. Please describe the roles and functions of child and youth care workers at each level?
7. Does the description of the scopes of practice for child and youth care workers in South Africa align to a Canadian understanding of child and youth care work practice or are there differences? How would you understand these similarities and differences?
8. How does the description of the scopes of practice for child and youth care workers in South Africa align to or differ from your understanding of what is internationally considered to be the nature of child and youth care work practice?
9. Are there specific aspects of child and youth care practice that you believe need to be integrated into the education and training process of child and youth care workers at each level? Can you describe these aspects?
10. Given your understanding of the South African context for the practice of child and youth care work, how should local child and youth care training and education be focused?

Appendix 16



Gatekeeper Letter: Focus group participation

Dear XXX

Request for participation in a focus group for research on child and youth care work

I trust you are well and appreciate you reviewing this mail.

My name is Merle Allsopp and I am currently undertaking a PhD with Durban University of Technology where I will be conducting a study entitled: 'Child and youth care work in the South African context: Towards a model for education and practice'. My supervisors for the study are Prof Raisuyah Bhagwan (PhD) and Prof James Anglin (PhD).

This study seeks to document the current reality of child and youth care practice, and contribute to future improvements in child and youth care work. The aim of the study will be to develop a model to guide child and youth care practice and education in South Africa.

There is limited research on child and youth care practice in South Africa, and the roles and functions and duties undertaken by child and youth care workers across both residential and community-based settings of child and youth care workers. This study aims to articulate the work undertaken by child and youth care workers functioning at both auxiliary and professional levels in a range of practice settings.

As part of the study I will be undertaking a series of focus groups with a select number of employers of child and youth care workers. The intention is to collate information gleaned on opinions of the nature of child and youth care work as practised in the setting in which they work.

I wish to include a member of your organisation, namely XXXXX in this study and respectfully request your consent to her/his participation.

Information on the process of holding the groups follows below:

- The focus groups will be conducted at a specific date and time specified well beforehand and at a convenient venue.
- Transport costs to travel to the venue will be provided by the researcher.
- The participant will be asked to participate in the focus group by providing her/his views on the questions asked.
- Confidentiality will be ensured by changing the name, address and identifying details of participants so that the views and information provided will not be able to be traced back to any individual or organisation.
- The participant will have access to documents resulting from the research.
- The participant will be able to change your mind in relation to participating in the research process at any point of the process, even if you have already provided consent.
- The participant will be assured that during the research process you they may decline the sharing of any information or answering of any particular question.

- The focus groups will be undertaken in a professional environment that it is anticipated will be comfortable for all participants.

Should the participant agree to participate he/she will be required to:

- Be available for a focus group of approximately 1 – 2 hours which will be recorded and later analysed;
- Provide her/his views on the topic of the research without being remunerated for this;
- Give consent for the information gathered from the focus groups to be used in the research study;
- Give consent for the focus group to be recorded.

It is expected that the research will contribute to the continued development of the child and youth care work profession in South Africa. I stress that involvement in the research study is voluntary.

Information on the results of the study will be available to employing organisations of participants.

Should any party feel aggrieved in any manner in relation to this study, the party has recourse to myself as well as the persons listed below:

- Prof Raisuyah Bhagwan (Research supervisor) – contactable at: bhagwanr@dut.ac.za
- Institutional Research Ethics Administrator – contactable at 031 373 2900.
- Acting Director: Research and Postgraduate Support – Prof Carin Napier on 031 373 2577 or carinn@dut.ac.za

Your favourable consideration of this request will be deeply appreciated.

Kind regards

Merle Allsopp (Researcher)

Contactable at: (082 3752477) or merle@naccw.org.za

Appendix 17



Gatekeeper Letter: Interview participation

Dear XXX

Request for participation in an in-depth interview for research on child and youth care work

I trust you are well and appreciate you reviewing this mail.

My name is Merle Allsopp and I am currently undertaking a PhD with Durban University of Technology where I will be conducting a study entitled: 'Child and youth care work in the South African context: Towards a model for education and practice'. My supervisors for the study are Prof Raisuyah Bhagwan (PhD) and Prof James Anglin (PhD).

This study seeks to document the current reality of child and youth care practice, and contribute to future improvements in child and youth care work. The aim of the study will be to develop a model to guide child and youth care practice and education in South Africa.

There is limited research on child and youth care practice in South Africa, and the roles and functions and duties undertaken by child and youth care workers across both residential and community-based settings of child and youth care workers. This study aims to articulate the work undertaken by child and youth care workers functioning at both auxiliary and professional levels in a range of practice settings.

As part of the study I will be undertaking a series of interviews with a select number of employers of child and youth care workers. The intention is to collate information gleaned on opinions of the nature of child and youth care work as practised in the setting in which they work.

I wish to include a member of your organisation, namely XXXXX in this study and respectfully request your consent to her/his participation.

Information on the process of holding the interview follows below:

- The interview will be conducted at a specific date and time specified well beforehand and at a mutually-agreed upon convenient venue for myself and the participant.
- The interview will be conducted either in person, or via Skype or any other communication modality preferred by the participant.
- The interview will be conducted by me.
- The interview will be recorded for purpose of data collection.
- The participant will be asked to participate in the interview by providing your views on the questions asked.
- The questions will relate to the scope of practice of child and youth care workers in South Africa, the outline of which will be mailed to the participant at least two weeks before the interview.
- Confidentiality will be ensured by changing the name of the participant as well as his/her

address and identifying details so that his/her views and information provided will not be able to be traced back to the participant.

- The participant will have access to documents resulting from the research.
- The participant will be able to change his/her mind in relation to participating in the research process at any point of the process, even if she/he has already provided consent.
- The participant will be assured that during the research process he/she may decline the sharing of any information or answering of any particular question.

Should you agree to the participation of the above person, he/she will be required to:

- Be available for an interview of approximately 1 – 2 hours which will be recorded and later analysed;
- Provide his/her views on the topic of the research without being remunerated for this;
- Give consent for the information gathered from the interview to be used in the research study;
- Give consent for the interview to be recorded.

It is expected that the research will contribute to the continued development of the child and youth care work profession in South Africa. I stress that involvement in the research study is voluntary.

Should you feel aggrieved in any manner in relation to this study, as a participant you have recourse to myself as well as the persons listed below:

- Prof Raisuyah Bhagwan (Research supervisor) – contactable at: bhagwanr@dut.ac.za
- Institutional Research Ethics Administrator – contactable at 031 373 2900.
- Acting Director: Research and Postgraduate Support – Prof Carin Napier on 031 373 2577 or carinn@dut.ac.za

Your favourable consideration of this request will be deeply appreciated.

Kind regards,

Merle Allsopp (Researcher)
Contactable at: (082 375 2477) or merle@naccw.org.za
Information on the process of holding the groups follows below:

Appendix 18 – Editor’s Letter

Lee-Anne Roux

PROFESSIONAL EDITING SERVICES

BTH (Honors) Practical Theology UNISA 2006 • BA Honors (Psychology) UNISA 2009 • MTH (Practical Theology) Stellenbosch University 2013
PHD (Practical Theology) Stellenbosch University 2019

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31 October 2020

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TO WHOM IT MAY CONCERN

?

RE: LANGUAGE EDITING

?

?

This letter serves to confirm that I have edited the thesis titled:

?

**Child and Youth Care Work in the South African Context: Towards a Model for
Education and Practice**

By

?

JANET MERLE ALLSOPP

Student No. 21557593

?

?

Please feel free to contact me if you need any further information.

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?

?

Yours sincerely,

?

Dr Lee-Anne Roux

?

Email: leeanne@proof-reading.co.za

Cell: 082 825 7325

www.proof-reading.co.za