



**An Exploratory Study of Resilience Building Strategies in Community Based
Child and Youth Care in Inanda Kwa-Zulu Natal**

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DECLARATION

This dissertation is the product of my own original work, with appropriate attribution to any referenced sources. All cited materials have been properly acknowledged. Additionally, this dissertation has not been previously submitted to any higher education institution.

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Date: 18/9/2025

Supervisor: Dr F Dewan

Date: 18/9/2025

DEDICATION

I dedicate this dissertation, first and foremost to my late grandmother Nomthandazo Ntlokwana whose unwavering belief in me and relentless efforts to secure my education have shaped the person I am today. Her encouragement to reach for the stars continues to inspire me.

To my sisters, Nolwazi and Sesethu Sosibo who have been my biggest cheerleaders, thank you for constantly uplifting me and pushing me to strive for success. To my maternal family, as the first graduate in our family I hope I have encouraged and inspired future generations. Thank you for celebrating every win with me, your encouragement and support have meant the world to me. Your belief in my journey has made this achievement even more meaningful.

To my fiancé Nhlanhla who has been my pillar of strength since the beginning of my undergraduate journey- your unwavering support and belief in me has been a source of motivation and for that I am forever grateful.

I also dedicate this work to myself for my resilience, hard work and my determination to turn this dream into a reality. I will always honour my journey and give myself the recognition I deserve.

Finally, and above all I dedicate this work to God, my source of strength and guidance, my faith has carried me through the challenges and for that I am eternally grateful.

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ABSTRACT

Resilience building has been widely studied, yet there is limited literature on its practical implementation, particularly in the South African context. In community-based care settings, resilience plays a crucial role in helping children and youth overcome adversity, enabling them to lead meaningful lives despite challenging circumstances. This study explores resilience-building strategies used in community-based care in Inanda Durban, KwaZulu-Natal, with a focus on the experiences of child and youth care workers (CYCWs). The study underpinned by ecological systems theory and the strength-based approach, which provided a lens to understand how CYCWs draw on both internal and external resources to support resilience.

Using a qualitative research approach, the study employed purposive and convenience sampling to recruit twenty CYCWs for semi-structured interviews. Participants shared their experiences and the strategies they used to foster resilience among children in their care. Through thematic analysis, five key themes emerged: CYCWs' understanding of resilience, the importance of resilience building in child and youth care, effective resilience-building strategies, challenges faced in resilience building, and suggestions for improvement.

The findings reveal that resilience building involves strategies such as encouraging and building children up, facilitating behaviour change, promoting positive coping skills, ensuring academic success, and fostering participation in sports. A strength-based approach, spirituality, and mentorship programs were also identified as key resilience-building methods. However, resilience efforts are constrained by contextual challenges such as lack of parental and community support, emotional strain on CYCWs, inadequate services, and limited access to basic resources. In addition, children in their care are often exposed to poverty, violence and the effects of HIV/AIDS, which exacerbate their vulnerabilities. The study also highlights the need for continuous professional development, training, and improved reunification processes with families.

These insights contribute to the growing body of knowledge on resilience in community-based care and also provide practical recommendations for strengthening resilience-building strategies among vulnerable children not only in South Africa but around the world.

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LIST OF ACRONYMS

ADHD	Attention-Deficit/ Hyperactivity Disorder
AIDS	Acquired Immunodeficiency Syndrome
CEN	Childhood Emotional Neglect
CYCWs	Child and Youth Care Workers
ELA	Early Life Adversity
HIV	Human Immunodeficiency Virus
NSNP	National School Nutrition Programme
SRGBV	School Related Gender Based Violence
TB	Tuberculosis

CHAPTER 1: INTRODUCTION

1.1 INTRODUCTION

Stein (2019: 400), in a study examining how young people are supported from childhood to adulthood, defined resilience as the qualities that young people possess to find fulfilment in life despite their adverse backgrounds and experiences. He further reiterated that resilience is the ability to thrive in adversity, effectively cope with challenges, and recover from difficult circumstances. Early studies on resilience primarily focused on childhood adversities but were later expanded to include negative life experiences throughout the lifespan. These events were statistically linked to adjustment challenges or subsequent mental health issues, including deficient experiences, natural disasters, violence, war, and physical illness. However, more recent research has investigated protective factors and investigated if they can contribute to positive outcomes (Stein 2019: 400). The current study will help uplift and motivate children living in disadvantaged communities so they can rise above their circumstances and take the necessary steps to ensure they get the n the help and support they need. The purpose of this chapter is to provide an overview of the study, the rationale, the research problem, the aim and the research objectives. Furthermore, the research methodology and theoretical framework will be discussed.

1.2 BACKGROUND OF THE STUDY

The development and welfare of children globally are threatened by disasters, political conflict, pandemics, and other adversities that can profoundly alter lives and severely impact individuals, families, and the future of societies. Families in KwaZulu- Natal are still grappling with the lasting effects of COVID-19, which struck South Africa in 2020 and left many households devastated. Their recovery has been further compounded by the destructive floods of 2022. The floods devastated many families in townships like Inanda, leaving some homeless and resulting in loss of life. Infrastructure and roads were damaged which negatively impacted the economy (Bouchard *et al* 2022).

In recent years, significant childhood adversity, including experiences of physical and sexual abuse, has disrupted young people's progression into adulthood due to social and behavioural factors. Townships in South Africa are also affected by adversities

such as poverty, abuse and crime. Rahmani *et al* (2022:481) stated that recent global events such as conflict and natural disasters have heightened concerns about the threats facing children and the future of society, while also exposing the lack of preparedness to address such disasters. These concerns have put a renewed emphasis on resilience across various research domains, as governments and international organisations seek evidence and guidance to reduce risks and foster resilience and recovery.

Many people have been in awe by stories of resilience for many years, but it was not until the late 1960s and early 1970s that scientific research into resilience began. According to Leal and Silvers (2021:323) exposure to early-life adversity (ELA) is associated with worsening mental and physical health. It has also been proven that it is responsible for 30% of adult mental illness. However, many individuals respond differently to ELA and others show resilience in one or more areas. The present research will identify factors that promote resilience and target intervention. Resilience is essential for helping children and young people give their best and effectively overcome life's challenges.

Ungar (2013:328) stated that previous study findings indicate that resilience is a multi-dimensional construct influenced by a complex interplay of individual, family, and community factors. Research has demonstrated that individuals who exhibit resilience often possess a strong ability to regulate their emotions, a high degree of self-efficacy or confidence in their abilities to overcome challenges, and an optimistic, positive outlook on life. Moreover, supportive family environments and strong community ties can provide the social resources needed to buffer the negative impacts of adversity (Zolkoski & Bullock, 2012). To build on this existing knowledge, the present study delved deeper into the nuances of resilience through in-depth interviews with child and youth care workers in KwaZulu- Natal an area that has not been the focus of prior resilience research.

1.3 PROBLEM STATEMENT

According to Sayeed (2023), South African children and youth face many adversities especially because the country is still a developing one with high poverty rates. It is estimated that 55.5% (30.3 million) of South Africans are living in poverty. Many other challenges hinder their success such as lack of proper education and exposure to

abuse. Chanchalani *et al* (2020:921), stated that food insecurity and poverty have been linked to cardiovascular disease, obesity and mental health issues later on in life. In addition, young people who were forced into social isolation during the COVID-19 pandemic are more likely to have these kinds of experiences, especially those who live in rural areas or are members of marginalised groups who already struggle with proper housing, financial strain and food security.

Shah and Patel (2020:1052) highlighted that 5% to 10% of young adults who lost a parent due to COVID-19 will experience traumatic, prolonged grief that will require some resilience intervention strategies.

While these adversities underscore the importance of resilience for children and youth, limited attention has been given to the role of child and youth care workers in fostering resilience. As a relatively new profession child and youth care workers have different levels of training skills and experience which affects how they understand and use resilience building strategies, especially in under-resourced communities like Inanda, Durban. There is a paucity of studies of this nature in Kwazulu-Natal, hence the current study will fill that research gap and contribute significant insights for the sustainable community-based care and holistic development of children and youth in South Africa.

1.4 AIM OF THE STUDY

This study aims to investigate which resilience strategies child and youth care workers use in community-based care to build resilience in children in Inanda, Kwazulu-Natal.

1.5 OBJECTIVES OF THE STUDY

The objectives of the study are as follows:

1. To explore the relevance of resilience building in community-based child and youth care.
2. To identify the interventions that child and youth care workers use to build children's resilience in a community-based setting.
3. To investigate challenges experienced by child and youth care workers when building resilience in a community-based setting.
4. To make recommendations on how resilience building can be enhanced in

community-based care.

1.6 RESEARCH QUESTIONS

The research questions for this study are as follows:

1. What is the relevance of resilience building in community-based care?
2. What interventions do child and youth care workers use to build resilience in community-based care for children?
3. What challenges do child and youth care workers face when building resilience?
4. What recommendations can enhance resilience in a community-based setting?

1.7 SIGNIFICANCE OF THE STUDY

According to Sher (2019), suicide is a major medical and social problem. Over the years, research on suicide has mainly focused on identifying the risk factors associated with suicidal behaviour while often overlooking protective factors such as resilience, which could aid in addressing this issue. Sher (2019) also reiterated that building resilience should be the central focus when trying to address mental health issues that many young people face today. A study by Govender *et al.* (2020), revealed high levels of severe depression (55.3%) among adolescents in KwaZulu-Natal due to various reasons such as lack of support from parents, verbal abuse, intimate partner violence and employment.

According to Finstad *et al* (2021:9453), resilience-building strategies are significant because they help individuals, communities and organisations develop the ability to overcome adversity. The strategies identified in this study will provide several benefits including mental and emotional well-being. These strategies will help individuals develop mental and emotional well-being, enabling them to cope effectively with trauma and setbacks. This, in turn, promotes improved mental health and reduces anxiety. By using these strategies, young people will enhance their problem-solving skills, adaptability, and optimistic mindset. This will ultimately improve their performance in both personal and academic aspects.

This study aims to explore and understand resilience building strategies used by child and youth care workers to build resilience in community-based care. It further aims to highlight both the professional experiences and developmental needs for child and

youth care workers and the potential benefits for the children and youth in their care. By exploring these strategies, the study may inform practice, training and policy, offering guidance on how to strengthen resilience among vulnerable children and youth.

DEFINITION OF CONCEPTS

1.7.1 Resilience

According to Luthar *et al.* (2000:543), the word resilience comes from the Latin word “resilire” which means rebound. He further stated that the term resilience describes a dynamic process that incorporates positive adaptations within the context of significant adversity. Walker (2020:45) defined resilience as the ability to cope with shock or adversity, while still functioning similarly.

1.7.2 Resilience Building

Building resilience involves enhancing and reframing thought patterns through a strength-based approach to overcome adversities, particularly related to mental, emotional, and behavioural issues (Seligman 2011:5).

According to Hurley (2022), resilience building refers to the process of developing the ability to withstand, adapt to and recover from adversity. It involves developing a set of skills, attitudes and strategies that can help individuals and communities persevere through challenges and recover from setbacks.

1.7.3 Strategies

A strategy is a broad plan or a collection of plans designed to achieve something over an extended period (Alonso 2023).

1.8.4 Community-based Child and Youth Care

Baldrige (2020:618) described community-based child and youth work/care as an intervention where child and youth care workers engage with young people in community-based educational spaces such as after-school programmes, youth organisations and out-of-school time settings, to name a few examples.

1.8 THEORETICAL FRAMEWORK

This study employs Seligman's 3P (1990) model of resilience. This theoretical framework suggests that the key factor is not the nature of the adversity itself but how individuals respond to it. Resilience enables us to recover and adapt in challenging circumstances. After years of studying how people handle adversity, Seligman discovered three important concepts: personalisation, pervasiveness and permanence which aid in recovery.

1.8.1 Personalisation

This aspect has to do with understanding that not everything that happens to us, is because of us. Some of the adversities or difficulties people face are not of their own doing. Therefore, personalisation looks at who an individual blames in response to an inconvenience. Do they blame themselves or factors beyond their control? (Hasbi *et al.* 2022). An example of this would be when a young person loses a family member due to illness and perhaps at the time of this person's passing, they may have disagreed. The illness is the root cause of the person's death, but the young person may blame themselves for not realising that this is something out of their control.

1.8.2 Pervasiveness

According to Hasbi *et al.* (2022), pervasiveness is the belief that one negative event will affect all areas of a person's life. When facing difficulties, people often think that everything else in their lives will also go wrong, leading to a negative outlook. However, Seligman recommends that people should shift their focus to all the positive aspects of their experiences. An example of pervasiveness would be: considering the scenario of young people having to change schools due to financial constraints at home. They may feel that every part of their lives will be affected, not realising that this situation could be an isolated incident. They can still maintain their family home and the friendships they have developed at their previous school.

1.9.3 Permanence

Lastly, permanence is the belief that the negative feelings one feels will last forever. This is not true because no problem lasts forever. Seligman further

emphasised that time will heal the pain. When permanence is not dealt with, it can turn into catastrophising or the assumption that the worst is yet to come (Hasbi *et al.* 2022). An example of permanence that affects young people can be a failure. When a young person has performed badly in a test or exam, they may begin to think that this has affected their report and that they will fail, not realising that this feeling will not last forever. They will get another opportunity to study harder and get better marks.

The above theory aligns with the study as it focuses on empowering individuals to reframe adversity, utilise support systems and develop long-term adaptive strategies.

1.9 OVERVIEW OF THE RESEARCH METHODOLOGY

In this section, the research design is introduced, which will be discussed in greater detail in Chapter Three. This study employs a qualitative research approach and aims to explore resilience building strategies used by child and youth care workers to build resilience in community-based care. The focus is on building resilience in disadvantaged communities. According to Bhandari (2021:80), qualitative research involves collecting and analysing non-numerical data such as text, video or audio. This research approach relies on empirical data that illustrate in detail how people think or respond to society. In qualitative research, the researcher may use focus group discussions and interviews to gather data. The discussions or interviews may be unstructured or semi-structured. Lastly, these types of interviews and discussions allow freedom for varied or unexpected answers.

Bhandari (2021:80) stated that data can be collected using one or more methods of data collection. For this study, one-on-one semi-structured interviews were conducted. Interviews allowed the interviewer (researcher) to ask participants questions in one-on-one conversations. This provided participants with an opportunity to express their thoughts and opinions.

According to Bhandari (2021:80), in semi-structured interviews, the interviewer generally has a framework of themes that will help guide the direction that the research will explore. In this study, data was collected from twenty participants using purposive and convenience sampling. The participants are qualified child and youth care workers in the Inanda Township. Khalefa and Selian (2021:35) stated that purposive sampling is a non-probability sampling method used in research where the researcher

deliberately chooses specific individuals or cases to include in the sample based on a predetermined purpose or criteria. In purposive sampling every member of the population has an equal chance of being selected, purposive sampling is done with a specific goal or purpose in mind. Convenience sampling is a non-probability sampling method where researchers choose participants or items for a study based on their accessibility or availability. This method is often chosen for its simplicity and convenience. However, it may not represent the entire population because it relies on individuals who are readily accessible (Etikan *et al* 2016:1). Data was collected until saturation.

Thematic analysis was used to analyse the data gathered from interviews. According to Braun and Clarke (2012), thematic analysis is a method used to examine qualitative data. This approach entails identifying, analysing, and reporting on patterns or themes within a dataset. It systematically organises and interprets textual or visual data to uncover meaningful themes, patterns, and insights. The thematic analysis involves a multifaceted approach, including becoming acquainted with the data, developing initial codes, identifying themes, reviewing and refining those themes, defining and naming the themes, and finally producing a concluding report.

Ethical considerations were fundamental to this study, as they ensured that all research activities upheld the principles of confidentiality, informed consent and voluntary participation. Participants were fully informed about the purpose of the study and their rights. Lastly, measures were taken to protect participants' privacy and well-being.

1.10 STRUCTURE OF THE DISSERTATION

Chapter 1 - Introduction to the study, purpose and rationale. This chapter includes research problems, aims and objectives

Chapter 2 – The literature review will focus on vulnerability and risk factors, resilience and why it is important, supportive relationships, self-efficacy and resilience, characteristics of resilient children, resilience-building strategies in community-based child and youth care and challenges in resilience building.

Chapter 3 - Research methodology. This section will include the search design, population, sample, data collection process and analysis of trustworthiness and ethical considerations

Chapter 4 - Data Analysis and findings. The chapter includes a discussion of the data analysis in iteration with literature.

Chapter 5 - Conclusion, recommendations and suggestions for future research.

1.12 CONCLUSION

Chapter One aimed to provide an overview of this study. It included the background, problem statement, research objectives, questions as well as the significance of the study. The theoretical framework was also discussed including the overview of the research methodology that was utilised. The next chapter will look at the review of the literature relating to the study.

CHAPTER 2: LITERATURE REVIEW

2.1 INTRODUCTION

According to Paul and Criado (2020), a literature review entails a thoughtful and thorough analysis of relevant scholarly works about a specific topic or research question. It serves several purposes such as the identification of gaps, summarisation, contextualisation and evaluation. Literature reviews are common in research settings, and they help provide a foundation for new research projects as they help researchers build on the work of others. The following literature review will focus on vulnerability and risk factors, resilience and why it is important, supportive relationships, self-efficacy and resilience, characteristics of resilient children, resilience-building strategies in community-based child and youth care and challenges in resilience building.

2.2 VULNERABILITY AND RISK FACTORS AFFECTING CHILDREN AND ADOLESCENTS

Children and adolescents are uniquely sensitive to a range of vulnerability and risk factors that can influence their holistic development. The factors discussed in these sections will focus on local and global factors, affecting the lives of children and adolescents.

Engle, Castle, and Menon (2016: 621) stated that risk factors can cause difficulties in the interaction between the child and the environment which can often lead to obstacles to learning and difficulty in mastering anxiety. Furthermore, they stated that circumstances do not necessarily hinder one's success. In a study they conducted, it was found that vulnerable and disadvantaged young people were determined to succeed. They noted that despite the adversities children and youth encounter, many still manage to develop well and prosper.

Werner and Smith (2019:2), conversely, argue that children growing up in impoverished circumstances and experiencing hardship are more likely to struggle with anxiety and depression later in life. This is because children labelled as resilient appear healthy and invincible and use internalised strategies to cope with their

experiences. However, they do not fully deal with their past trauma, instead, it is suppressed internally and “like a sponge they keep absorbing it” and internalising it. Thus, there is a range of vulnerability and risk factors that impact the development of children.

2.2.1 Malnutrition

According to Simwanza *et al.* (2023), malnutrition prevents children and youth from reaching their full potential. It also has a detrimental impact on their health and physical development as it can lead to delayed physical growth and motor development. Malnutrition can also cause behavioural problems, lack of social skills, low intellectual quotient and susceptibility to contracting diseases. According to the 2015 Millennium Development Goal report by Akombi *et al.* (2017), Sub-Saharan Africa accounts for one-third of all undernourished children globally. To counteract this in 1994, the National School Nutrition Programme (NSNP) was launched as one of Nelson Mandela’s lead projects. This programme aims to provide healthy nutrition to children and youth in schools to promote their ability to learn. The food is provided by provincial education departments as well as through local economic empowerment, for example, smallholder farmers provide fresh produce to schools. However, this programme is at risk due to non-payment of service providers by the Department of Education.

Furthermore, Simwanza *et al.* (2023) stated that for many children and youth living in poverty-stricken communities, the meal they receive at school is the only nutritious meal they receive for the day and often children come to school, particularly for this meal. Malnutrition in children can lead to children being underweight, perform poorly at school and have poor general health. In the long term, this can lead to the youth feeling demotivated and pessimistic. South Africa has faced challenges with child malnutrition which has affected the physical and cognitive development of many children. Contributing factors include poverty, food insecurity and limited access to healthcare, particularly in rural areas.

2.2.2 Homelessness

In 2019, the National Centre for Homeless Education reported that over 1.35 million children and youth aged 5-18 were identified as experiencing homelessness worldwide. Of these, 3.7% were residing in abandoned structures, 14.3% were in homeless shelters or awaiting foster care placement, and the remaining 75.8% were staying with extended relatives or friends. Losing a secure home can hurt children and youth as they go through stages of growth and development, attaining milestones, learning social roles and developing relationships outside the family. Warren *et al.* (2019) found a positive association between a history of family homelessness and emotional, developmental and behavioural problems.

According to Tenai and Mbewu (2019), street homelessness continues to be a challenge in South Africa. The government has tried to address this issue by increasing the number of shelters and children's homes post-apartheid, but many people can still be found sleeping on the streets in various areas around the province. The Human Sciences Research Council's study conducted between 2015-2019 estimated the number of homeless people in South Africa to be between 100,000 and 200,000. This wide range is due to the high level of mobility observed within the homeless population (Tenai and Mbewu 2019).

According to Obioha (2019: 24), efforts to address child homelessness in South Africa have involved a combination of social services, education programs and shelters that aim to protect and support the homeless. Non-governmental and government initiatives have also played their part. However, these challenges persist and comprehensive and sustainable efforts are still required to address homelessness effectively. It has also been a challenge for policymakers and legislators to gather comprehensive data to form policy frameworks that could address homelessness. Therefore, research is often conducted on the street but conclusions are based on assumptions because of the constant mobility of the homeless (Cross *et al.* 2010:6).

2.2.3 COVID-19 Pandemic

According to Ahmed *et al* (2020), the COVID-19 pandemic was unpredictable and said to be the biggest health crisis of this generation, as it affected over 200 countries around the world. Many people lost family members and relatives including children and young people. It also did not help that people were confined in their homes –although this was done to save lives. The pandemic also came with a lot of uncertainty as well as anxiousness, as many children and youth worried if they would ever see, their friends or family members. Some were unable to say their final goodbyes as funeral attendance was limited to only a few family members, and inter-provincial travel was prohibited.

Imran *et al.* (2020) revealed that there was an increase in feelings of anxiety and uncertainty. It also revealed that social distancing in an abusive home resulted in an increased risk of child abuse, neglect and exploitation. The latest report showed that feelings of restlessness and behavioural difficulties were elevated within over a month of lockdown among children and youth from lower-income families. Children and young people from lower-income families experienced feelings of unhappiness, worry, and physical symptoms associated with anxiety. The study indicated that the mental health of children and youth from poor backgrounds was severely impacted.

In addition, Bradbury-Jones and Isham (2020) stated that the COVID-19 pandemic had a huge impact on children, youth and their families. The advice to stay home and observe social distancing did not bring a sense of safety and peace of mind for everyone. The restrictions raised major concerns about the increased risks of harm to people living in violent households globally.

2.2.4 Climate Change

According to Sanson *et al.* (2019), children and youth are not only experiencing the impact of climate change first-hand, but they are also exhibiting psychologically disturbing reactions to perceptions of the climate crisis. Climate change is an imminent threat to future generations as children and youth are more susceptible to it than adults. Furthermore, it has immediate and lifelong effects on the physical and mental health of children and youth.

In April 2022, severe flooding and related geographical hazards overwhelmed the city of Durban, resulting in loss of life and extensive damage across the greater Durban region and large swaths of KwaZulu-Natal. The floods had a devastating toll on families and communities, many people were left without shelter and food. Many lives were also lost while people tried to retrieve the belongings that they had lost in the rumble. This meant that once again many children and youth lost homes and loved ones leaving them vulnerable and pessimistic (Grab and Nash 2022).

2.2.5 Exposure to Violence

According to Yule, Houston and Grych (2019: 406), children who experience violence whether at home or in the community are more likely to experience a wide range of psychological and behavioural problems. However, some children exhibit resilience or adaptive functioning following adversity. Understanding what promotes resilience is critical for developing effective prevention and intervention strategies. According to the World Health Organization (2020), children are more vulnerable to experiencing or becoming victims of violence compared to adults. Many children worldwide are exposed to violence due to larger societal forces that pose substantial risks to their healthy growth and well-being. Even when children do not directly witness or experience violence, they may still be indirectly impacted through displacement, refugee status, or their family's diminished capacity to provide support. Despite the adversities these children face, efforts have been made to help combat the issues.

For example, according to Yule, Houston and Grych (2019: 406), in one refugee camp in Mexico, community workers identify and use a method that helps to identify strengths in the community such as good community organisation. These community workers also help teach children from the camps to be teachers of the other children themselves. They also get to have discussions and discuss topics such as listening and resolving problems, alcoholism and family and ethnic history of their culture. They use these methods to help build and maintain resilience in the lives of the youth in the refugee camps. Research implies that children who are labelled as resilient after facing these adversities are those who have at least one stable and supportive relationship and a belief in a higher purpose (Yule, Houston and Grych 2019: 406).

Exposure to violence among South African youth is a significant concern. This may be due to different factors such as crime, domestic violence and community violence. All these factors can take a toll on a child's emotional and psychological well-being. Exposure to such traumatic experiences can also lead to depression, post-traumatic stress disorder as well and a cycle of violence perpetuation just to name a few. According to a study by Herrero-Romero *et al.* (2019:1) that examined the impact of violence exposure on school delay and academic motivation among youth living in disadvantaged South African communities, the results revealed high rates of violence experienced by the youth participants in the month before the survey. Specifically, 51.1% reported instances of domestic violence, while 63.2% had experienced physical violence perpetrated by their caregivers. Additionally, the study found that 76.1% of the youth had encountered emotional violence from their caregivers. According to McCrea *et al.* (2020:296), community violence is common among youth living in high-poverty communities in the United States more particularly in communities of colour. Furthermore, the study indicated that the causes of youth violence are complex, and they interact across multiple layers of social systems. Some of the factors found to contribute to community violence included institutional racism, police brutality, deep poverty, exposure to violence such as gender-based violence, and emotional and verbal abuse. The study also reiterated the importance of trauma treatment, empowerment approaches and positive youth development as a way of addressing the issue of violence in communities and schools.

Polanini *et al.* (2021:115) stated that South Africa has also faced challenges related to crime and community violence, particularly in schools. Incidents of violence in schools have been reported, such as bullying, corporal punishment, sexual assault and assaults of fellow students and teachers. There have been many reports of learners arriving in school with weapons threatening the lives of other children, youth and teachers.

According to Chitsamatanga and Rembe (2020:65), in a study set to explore school-related gender-based violence (SRGBV), as well as a violation of children's rights to education in South Africa, the study found that there were different forms of SRGBV namely bullying, sexual abuse, corporal punishment and physical assault just to

name a few. These many forms of SRGBV were found to be very high in rural schools across South Africa. The study also found that these forms of SRGBV can emanate from cultural and societal beliefs on issues of gender. Exposure to such treatment can lead to numerous consequences for the victims including low self-esteem, impaired concentration, death ideation, high health risks for the girl child and school dropout just to name a few.

According to Pereda and Diaz-Faes (2020:1), reports and studies indicated an increase in family violence among children during the COVID-19 pandemic. The lockdowns, social isolation and economic stress implemented to curb the spread of the virus created and escalated existing tensions in many households. This also meant that victims had difficulties in seeking help or escaping abusive situations due to the restrictions on movement.

In contrast to increasing reports of domestic abuse during the pandemic, Campbell *et al* (2020:652) noted a decrease in reports of child abuse or neglect during the pandemic. This may have been a result of fewer opportunities for detection rather than an actual decrease in incidence. In the United States alone 67% of abuse is reported by teachers, counsellors and social workers. The closure of schools and other facilities of support used by children and youth may have played a huge role in the decrease in reports. Campbell *et al* (2020:652) further stated that there may be an overwhelming increase in reports of child abuse once restrictions were eased and children returned to school and this indeed was the case as children were once again able to freely express themselves and the challenges they faced.

Family violence, especially child abuse, is widely considered a significant risk factor for delinquent and violent behaviour. Abused children and youth are more likely to express problems in a wide array of developmental domains including crime and antisocial behaviours like substance abuse, underage and isolating from themselves and others. Often these behaviours are a result of trying to escape an abusive home life (Bozzay *et al* 2020:5726).

Rizal and Djannah (2020:348) described a family as the smallest society in a child's life that is supposed to provide attention, affection and protection to the child. The family plays a vital role in the child's development. Exposure to violence can be

detrimental to a child's life. Adults who commit these violent crimes on children and youth display a lack of empathy and understanding of the process of growth and development of children and youth.

2.2.6 Emotional Neglect

Childhood emotional neglect (CEN) refers to the neglect of a child's fundamental emotional needs, which can result in impaired interpersonal skills and psychological well-being among young people. It encompasses being unresponsive to the child's distress and disregarding their social and emotional growth (Teicher and Samson 2013).

Often when children feel ignored or lack a sense of belonging and trusting relationships, they tend to misbehave or end up feeling depressed. Often bad behaviour such as alcohol and substance abuse, gangsterism, bunking school and suicide attempts are a cry for help. CEN also leads to long-term impacts on social functioning, including heightened social anxiety and decreased quality of relationships. Children and youth need people they can trust, open up to and depend on. This is because they need reassurance and support to fully thrive in various aspects of their lives (Grummitt *et al.* 2022).

According to Phiriepa and Matlakala (2021: 18127), childhood emotional neglect is a common occurrence in rural areas and often goes unnoticed. This could be because it happens quietly and leaves hidden emotional wounds. Many parents tend to think that providing physical care such as buying food, clothes and providing shelter is all that they need to do to show care. The study went on to prove that emotional neglect of children is a form of maltreatment, and it may be influenced by general culture and stress factors that are associated with the low socio-economic status of people.

2.2.7 Abuse

Child maltreatment is a global public health concern. The World Health Organization defines child abuse as encompassing physical, emotional, and sexual mistreatment that can result in possible harm to the child's life (Dapic *et al* 2020:181). Research has also shown that children who have been victims of abuse often display

aggressive behaviour, antisocial tendencies, or mental health issues. Approximately one out of every five children worldwide experienced some type of abuse. Studies from 28 different countries worldwide revealed that African children were the most likely to experience abuse. A significant majority (83.2%) reported experiencing psychological abuse, while 64% reported experiencing moderate physical abuse, and 43% experienced serious physical abuse (Dapic, Flander and Prijatelj 2020:181).

It is unfortunate that many children and youth still grow up and experience violence, be it domestic abuse, physical, sexual or verbal. According to Matthews and Martin (2016), child abuse is widespread in South Africa, with an increase in incidents of physical and sexual abuse against children. South Africa was labelled as the world's rape capital by Interpol in 2012. By December 2016, the South African Police had received reports of 30,069 cases of rape. A study conducted in Gauteng revealed that 37.4% of men admitted to committing a sexual offence in the province (Matthews and Martin 2016). In the year 2024, police released the second quarterly crime stats in Pretoria, revealing that 10,191 cases of rape were recorded throughout the country (de Klerk 2024: 1262)

Pereira *et al.* (2020:101423) stated that experiencing any type of abuse, whether sexual, physical or verbal has major consequences for the victim such as poor self-esteem, anxiety and stress. Children and youth who have been abused tend to have a negative outlook on life and often threaten or contemplate taking their own lives. They feel like they are at fault and are afraid to open up and talk about their abuse because they have been threatened, or they worry that no one will believe them (Matthews and Martin 2016).

According to police recorded crime statistics of South Africa (2022), between October 2022 and December 2022, South Africa saw the tragic loss of 319 children's lives. Additionally, there were 488 instances where children survived attempted murder, and a total of 2,039 children experienced physical assault. In the same period the following year (October to December 2023), police recorded 285 child murders and 2707 cases where children survived attempted murder, assault or grievous bodily harm.

2.2.8 Poverty and Poor Economic Conditions

Tshishonga (2019:167) stated that poverty and poor economic conditions have been prevalent in South Africa since the beginning of the apartheid era as the policies that were set in place disadvantaged non-white populations. However, despite progress being made since the end of apartheid in 1994, many South Africans still struggle with unemployment, poverty and inequality. According to Francis and Webster (2019:788), the employment rate continues to climb towards 30%. One key contributing factor that has been identified is income inequality. The country has one of the highest levels of income inequality globally and this has led to a large wealth gap between the rich and the poor.

Schotte and Zizzamia (2023:1) stated that the most recent statistics suggest the unemployment rate is 35.3%, marking the highest recorded statistic since South Africa commenced collecting data from quarterly labour force surveys in 2008. Another factor in unemployment is education disparities that have led to unequal access to quality education. In disadvantaged communities, one will find that they lack proper educational infrastructure and resources. Lastly, health disparities have also led to limited access to healthcare services and the burden of diseases such as TB and HIV/AIDs which also have an impact on poverty (Burger and Christian 2020:43).

According to Jain *et al.* (2020), there was a 40% decline in active employment in 2020. This decline was a result of the COVID-19 pandemic which led to job loss as many companies took a huge financial strain due to the foreclosure of business during lockdown. The sudden shutdown of numerous businesses, both formal and informal, led to an immediate decline in income for many individuals, posing a risk to household food and healthcare stability. According to the World Food Programme, over 200 million people were forced into severe food insecurity during the pandemic. This meant many children were going to bed hungry as parents were unable to put food on the table (Govender *et al.* 2020).

2.2.9 Child-headed Households

Child-headed households are a common family structure in South Africa. It is where children under the age of eighteen years, take on the responsibility of heading the household due to various reasons such as death or absence of parents or caregiver. This can be a result of factors such as HIV/AIDs, other illnesses, accidents or socioeconomic challenges that leave children orphaned and without adult supervision and support. Child-headed households face many challenges which include limited resources. Children and youth in these situations may struggle to meet basic needs, such as food and shelter. Additionally, educational disruptions arise, as the responsibilities of running a household can interfere with a child's ability to attend school. Lastly, the absence of an adult caregiver can lead to a lack of guidance, emotional support and protection for the children (Hall *et al* 2019:216).

According to Maushe and Mugumbate (2015:33), statistics show that child-headed households are mostly common in African countries. In Zimbabwe, the family systems have been greatly affected due to the economic meltdown as well as HIV and Aids. Children and youth have dropped out of school to try to provide for their families, by selling fruits and vegetables in the streets. With poverty at its peak, many female older siblings have resorted to prostitution or being involved in sexual relationships with older men as a means to get money and provide for their younger siblings. This has placed them at greater risk of teenage pregnancy and contracting sexually transmitted infections and diseases.

2.2.10 Substance Abuse

According to Nawi *et al.* (2021:1), substance abuse is a worldwide problem, and it typically begins during adolescence. Substance abuse during adolescence is often associated with delinquency and aggressive conduct. These factors are common among children and youth who have experienced parental neglect, abuse, trauma or family conflict. Saldino, Hoelzlhammer and Verrastro (2020:16) highlighted two parenting styles that play a role in adolescents' behaviours. They are authoritative and negligent parenting styles. Adolescents whose parents use an authoritative style of parenting are less likely to participate in substance abuse, as this style is characterised by high levels of both affect and control. These children and youth

show more resilience and have good self-esteem. A negligent parenting style is characterised by a low level of affection and control; this style affects the self-regulation skills of youth. This may lead to children and youth participating in risky behaviours such as substance abuse.

According to Nzama and Ajani (2021:219), the increase in substance abuse among children and youth in South Africa is a serious concern. Despite the government's efforts to address the issue with the use of community programmes and school-based awareness programmes, young people are still abusing substances such as alcohol, marijuana, methamphetamine and prescription drugs. Nzama and Ajani (2021:219) also determined that youth involvement in these substances was linked to challenges from home such as living with a single parent, inadequate care or neglect and inadequate teacher support. The study also identified the most commonly used substances in schools to be cigarettes, marijuana and alcohol in South Africa.

2.3 COMMUNITY-BASED CHILD AND YOUTH CARE

2.3.1 What is Community-based Care?

According to Baldrige (2020:618), community-based care is an approach that involves engaging children and youth in community-based educational spaces such as after-school programmes and youth organisations. Children and youth are also provided with support, interventions and services within their local community. This approach emphasises collaboration with families, schools and other community resources to address the unique needs of children and youth. It involves using a holistic approach to promote the well-being, development and overall success of young people.

Community-based care also refers to healthcare or support services provided within the local community. This approach emphasises delivering care that is accessible, patient-centred and culturally sensitive. It often involves a collaborative effort among healthcare professionals, social services and community organisations to address the holistic needs of individuals. Lastly, community-based care can encompass services such as home healthcare, mental health support and various preventative

programmes tailored to meet the specific needs of the community. The primary goal of community-based care is to provide healthcare in a familiar and supportive environment while promoting the overall well-being of community members (Costanza-Chock 2020).

2.3.2 Benefits of Community-based Child and Youth Care

According to Fyfe *et al.* (2018:1), community-based child and youth care offers several benefits which include:

- Holistic support as it focuses on several aspects such as the academic, social, emotional, spiritual and physical aspects of a child's life.
- Cultural sensitivity is enhanced by operating within local communities. This approach can be more attuned to cultural nuances, ensuring that interventions are culturally sensitive and relevant.
- Family involvement is emphasised by collaboration with families. Partnerships are fostered with the caregivers and this can enhance the effectiveness of interventions and support systems.
- Accessibility is also a benefit of community-based child and youth care as services are often within reach in or near the community. Often, reducing barriers such as transportation increases the likelihood of participation and engagement in programs.
- Focusing on prevention allows challenges faced by children and youth to be addressed early, which helps prevent the escalation of issues later on promoting long-term positive outcomes.
- Community-based child and youth care also allows for community resources to be utilised tapping into local organisations, schools and networks to provide a network of support for children and youth.
- Community-based child and youth care promotes empowerment by actively involving the community in the caregiving process. This process enables individuals to actively participate in decision-making and problem-solving. Additionally, it promotes social inclusion by integrating children and youth within their communities, which helps reduce stigma and fosters a sense of belonging.

- Lastly long-term impact is a benefit of community-based child and youth care as it allows challenges to be addressed within the community context. This approach creates sustainable long-term positive impacts on the well-being and development of children and youth.

2.4 WHAT IS RESILIENCE?

According to Hellige (2019:30) over the past few years' severe childhood challenges, such as physical and sexual abuse, have changed the way young people transition into adulthood because of social and behavioural factors. Norman Garmezy introduced a theoretical model for resilience in 1991 which outlined three categories of protective factors: personal characteristics, strong family bonds, and external social support systems (Schechter and Halevi 2023:13).

According to Walker (2020), resilience is the ability to bounce back and adapt in the face of adversity. It involves being able to cope with stress, trauma or significant life changes positively and effectively. Resilient people are often described as strong, flexible and learn and grow from their experiences. Being resilient is an important psychological trait that helps people to effectively navigate life's challenges.

Resilience currently remains a vital and relevant quality. This is mainly because of the challenges and uncertainties of the modern world. Resilience is about one's ability to adapt to a rapid change in circumstances, be it technological advancements, economic fluctuations or global crises like pandemics. Resilience in this context is about being adaptable, resourceful and mentally strong to face both individual and societal challenges (Bhamra *et al* 2011: 5375)

According to Luther and Cicchetti (2000), resilience involves individuals adjusting to challenging situations rather than being defined by their characteristics. Fergus and Zimmerman (2005) distinguished resilience into two main aspects: assets and resources. Assets encompass personal traits, such as competence or coping skills, while resources involve external protective factors such as family support or community organisations. Resilience involves effectively utilising both assets and resources to achieve a positive outcome.

2.5 THE IMPORTANCE OF RESILIENCE TO CHILD WELL BEING

Maurovic *et al* (2020:337) stated that resilience building in child and youth care is an important factor as it allows children and youth to have access to supportive environments. It also encourages healthy relationships in families and it promotes the development of essential life skills which contribute to a healthy and positive life. Through resilience building, children are equipped with the necessary tools to overcome adversity, trauma and stress. Maurovic *et al* (2020:337) further highlighted the importance of family resilience as a possible solution for protective factors and good outcomes in children and youth. Resilience can also be facilitated by child and youth care workers in their work with families, through the use of counselling and conflict resolution skills.

According to Sher (2019:33), building resilience should be part of universal suicide, depression and drug use prevention interventions. Resilience is regarded as a protective factor that may help address many issues which children and youth experience. Mental health professionals have opted for the concept of resilience in reducing suicide risk in psychiatric patients.

Furthermore, Korosteleva and Petrova (2022:137) stated that resilience allows for adaptation to changing circumstances as it fosters the ability to adjust to new challenges and opportunities. Children and youth need to be resilient as it allows them to excel academically, socially, physically, emotionally and socially. When children are resilient, they can tackle things they face head-on and can bounce back from any setback. Resilience also enables children and young people to develop and progress in any circumstances. It empowers them to tackle new situations, people, or experiences with optimism and confidence, increasing their chances of success (Johnston-Wilder *et al.* 2021).

2.5.1 Social and Emotional Competency

According to Cahill *et al.* (2014:2020), resilience-building in children and youth is important, as it promotes social and emotional competencies. Resilient children and youth can effectively regulate their emotions, lowering the likelihood of experiencing

mental health problems like depression and anxiety. When children and youth are emotionally and socially competent, they can do and give their best.

Collie (2020:76) stated that the social context has a major influence on social and emotional skills. Collie (2020:76) further reiterated that having social support is crucial for young people, as it can motivate them to consider different ways of handling difficult interpersonal interactions. Ultimately, an individual's ability to fulfil their needs while nurturing positive relationships with others contributes to their social and emotional competence.

2.5.2 Minimizes Developmental Risks

Resilience-building can also aid in reducing risks and act as a protective factor. This is because if youth are equipped with resilience-building skills, they will not resort to unhealthy coping mechanisms or risky behaviours in times of adversity such as drug and alcohol abuse, self-harm, suicide and so forth. Instead, they will use resilience-building tools to cope, such as activities that can enhance their confidence i.e. a sport. They can also talk to an adult they trust who will help them express themselves and manage their feelings. This also means they will get to work on their decision-making and problem-solving skills (Cahill *et al.* 2020).

Reducing risks can minimise the likelihood of negative outcomes and promote resilience. For example, being able to identify and address potential risks can prevent adverse events or challenges from happening. This is a proactive approach which reduces exposure to harm and potential threats. Individuals and communities can also create safer environments by reducing risks which can provide a foundation for resilience, allowing individuals to cope better with stressors when they arise. Addressing risk factors such as unhealthy behaviours or environmental hazards can also lead to better healthy lifestyle choices and contribute to physical and mental well-being. Individuals can also be empowered to address risks as they can be equipped with knowledge, skills and resources to navigate challenges. Lastly reducing societal risks contributes to community resilience. Communities that actively work together to mitigate potential threats are better prepared to withstand challenges (Stainton *et al.* 2019:725).

2.5.3 Sets Strong Foundation for the Future

Resilience allows one to cope with loss, change and trauma. Individuals continually encounter trials and tribulations and outcomes do not always go as planned. There is no way to avoid heartache, adversity and pain in life but there are ways to overcome the storm and regain a sense of control. People have endured considerable issues over the past few years from a global pandemic, economic uncertainty and political and social turmoil. Many have lost loved ones in the process. However, it is important to remain optimistic because things always get better with time, and one needs to remain patient (Robinson and Smith 2023).

2.5.4 Academic Success in Resilient Children and Youth

Resilient children often exhibit better academic performance. Their ability to persevere through challenges and setbacks can lead to improved learning outcomes. According to Madden *et al* (2020:297), children spend a lot of their time at school, but there are many children today who dislike school or cannot meet the minimum requirements when it comes to work. However, the outcome of this can change if a different approach was to be used, such a strength-based approach that will take advantage of existing strengths that children and young people possess. This will promote a sense of well-being and resilience among them and subsequently encourage them to do their best and further enhance the skills they already possess. Positive psychology has had a great influence on people thriving. The focus of positive psychology lies in not trying to fix what is wrong with people but rather fostering what is right (Csikszentmihalyi and Seligman 2000).

In addition, Fullerton *et al* (2021: 2) stated that academic success can provide children with valuable skills and resources to navigate challenges and setbacks. This can be achieved by fostering a sense of competence and mastery. Children who perform well in school are more likely to develop confidence in their abilities which is beneficial for their self-image. They also acquire good critical thinking and problem-solving skills that can be applied in various life situations. Academic environments also expose children to diverse experiences and learning opportunities teaching them how to adapt. Adaptable individuals can adjust to changing circumstances and setbacks more effectively.

2.6 SUPPORTIVE RELATIONSHIPS AND RESILIENCE

A study done by Crosnoe and Elder (2004), determined that nonparent sources of support, such as friends, siblings, and teachers, served as comforting environments that fostered academic perseverance in the lives of young people who were exposed to family violence, divorce and exposure to domestic violence. The study further found that close relationship with teachers and involvement with friends protects youth against parent-related risk.

According to Engle, Castle and Menon (2016: 621), children who grow up in poverty and emotional instability can succeed, provided that they have a healthy relationship with at least one adult particularly a parent or a caregiver. When the caregiver provides unrestricted positive attention, the child is often motivated and encouraged to overcome challenges. They are then described as resilient. It is also possible for children and youth to seek encouragement from friends, teachers, child and youth care workers, social workers and the community at large due to the lack of support they receive from parents. It is also possible for children and youth to overcome their adversities and excel in life through the concept of positive reinforcement and support from parents and guardians.

Stability is important as children and youth who experience stability in their lives are more likely to succeed educationally, emotionally and socially than those children and youth who move around between parents, caregivers or places of care. Stability and secure attachment with at least one parent or caregiver can provide children and youth with opportunities and active encouragement to explore and become more confident as they grow (Engle, Castle and Menon 2016: 621).

2.6.1 Supportive Relationship with Caregiver

Stability is important as children and youth who experience stability in their lives are more likely to succeed educationally, emotionally and socially than those children and youth, who move around between parents, caregivers or places of care. Stability and secure attachment with at least one parent or caregiver can provide children and youth with opportunities and active encouragement to explore and become more confident as they grow (Engle, Castle and Menon 2016: 621).

According to Bethell *et al* (2019: 279), family resilience and connection promote flourishing among US children, even amid adversity. Their study determined that when children have caring adults in their lives and strong family bonds, they tend to prosper regardless of the adversities they face. When families work together and provide support to one another they can overcome many challenges. The research also discovered a significant link between the parent-child bonding aspect of family resilience and scientific evidence emphasising the importance of secure, consistent, and nurturing relationships for optimal child growth.

According to Hawang *et al.* (2023: 237), resilience is closely linked to the growth of social and emotional skills in young people, enabling them to effectively combine thoughts, emotions, and actions for positive personal and interpersonal interactions. These capabilities serve as protective and supportive elements that reduce risk factors and promote well-being, ultimately strengthening resilience.

2.6.2 Social Support Promotes Positive Mental Health

Li *et al.* (2021:1) defined social support as the assistance available to a person through connections with others, including individuals, groups, and the wider community. Support can come from informal sources such as family and friends or formal sources such as mental health professionals or community organisations. It is crucial to take into account the various forms of social support when investigating the connection between social support and mental well-being. Very often when one experiences adversities like the loss of a loved one or abuse, it can take a huge toll on a person and as a result affect their mental health leading to depression and anxiety. Having someone who is trustworthy and who one can easily talk to about their feelings can help ease the feeling of anxiousness. Children often do not know how to express their feelings, but having someone there who constantly checks up on them and is consistent, can help them open up and share their feelings about things that bother them (Howard and Hughes 2012).

2.6.3 Peer Support

Watson (2019:6) described peer support as the provision of emotional, social or informational assistance by individuals who share similar experiences or

backgrounds. This type of support is offered by peers who may not have formal training but can offer empathy, understanding and practical advice based on their own experiences. There are several benefits of peer support especially for youth at risk who feel alone and hopeless. Peer support allows children with similar experiences to come together and share insights and understanding. There is a sense of connection and reliability that is also fostered (Watson 2019:6).

Peers can also provide a level of empathy and understanding that comes from first-hand experience, which can create a safe and non-judgemental space for children and youth where they can express themselves freely. It also promotes role modelling as children and youth can speak to peers who have successfully navigated through difficult challenges and overcome them. Their experiences can inspire hope and confidence in others facing similar challenges. Many children and youth tend to isolate themselves during challenging times, however, peer support reduces the risk of isolation as it creates a sense of belonging and where they do not feel alone (Shalaby and Agyapong 2020:15572).

2.7 SELF-EFFICACY AND RESILIENCE

Bandura (2000) described self-efficacy as being specific to particular situations and emphasised the importance of overcoming adversity. Often people with high self-efficacy will master rejecting negative thoughts which affects their capabilities. According to Djourova *et al.* (2020: 256), resilience is coupled with self-efficacy. They stated that self-efficacy involves an individual's perception of their capabilities. It includes a unique self-assessment component that influences whether one has high or low self-efficacy. Research shows that perceived self-efficacy varies among individuals and is more predictive of performance than past accomplishments and abilities, especially in the face of challenges. Their analysis determined that resilient children and youth have high self-efficacy.

According to Graham (2022:186), self-efficacy is also centred around a person's sense of control and ability to maintain composure during adversity. Benight and Cieslak (2011:45) emphasised that retaining control has been linked with individuals who possess greater persistence and successful adaptations to stress. These beliefs may be significant in the development of competence in resilient young people.

Likewise, coping skills in children and youth can help them maintain positive adaptations to stressors.

Several coping skills can promote resilience in children and youth such as healthy thinking, wellness and finding a sense of meaning and purpose. Healthy thinking has more to do with acknowledging and accepting one's thoughts and emotions during adversity. Often when faced with adversity, a million things go through one's head, but it is always better to divert negative thoughts to more positive and healthier ones that can help one cope. This can be done by identifying areas of hope or people that make one feel grateful. By doing this, negative thoughts are replaced with more positive ones that change the focus of one's thinking. Also accepting the things you cannot change, helps one not feel helpless (Bemis 2020).

Another example of a coping skill that builds resilience is wellness which involves self-care. This is because according to Bemis (2020), stress is not only emotional but physical. Poor sleeping patterns and unhealthy eating habits also contribute to feelings of hopelessness. Participating in activities such as yoga, art, prayer and meditation can help a person to express emotions, which is beneficial. Lastly finding meaning and purpose in uncertain times, through goal setting one can begin to work towards and take small steps towards building resilience.

2.8 CHARACTERISTIC OF RESILIENT CHILDREN

Studies have shown that resilient children and youth possess several characteristics, the first being that they can cope with stress or display unusual levels of mental toughness for their age. They also have temperamental traits that elicit positive responses from family members and strangers. They also tend to have a close bond with at least one parent or caregiver and strong social skills that foster supportive connections with peers and adults (Hildebrand *et al.* 2019).

According to Lockhart (2020), resilient children and youth tend to have more compassion because they understand that life is imperfect and they do not beat themselves up, about it. They treat themselves kindly with less judgment or criticism. They are also more in control of their situations because they possess a lot of inner strength as they are not used to being rescued or having things done and solved for

them. They also have good problem-solving skills and when things get tough, they do not complain or worry, but they understand that they can always improve or view their situation through a different lens. They also have a sense of purpose and goals that motivate them, this helps them persevere during difficult times.

Mohammadinia *et al.* (2018:1479584) in a study on children's resilience during disasters in Iran, found that resilient children experience quick mental recovery. They also demonstrate high levels of self-care, positive self-esteem, kindness, empathy and sensitivity towards others' well-being. Resilient children and youth see solutions rather than problems. They do not compare themselves to others, as they understand that social comparison leads to two things: feeling superior or feeling like a nobody which is a lose-lose situation. Furthermore, resilient children and youth possess strong emotional regulation skills, allowing them to manage and express their emotions in healthy and constructive ways. Lastly, resilient children and youth have a well-developed emotional vocabulary, which means they can identify and express their feelings with the understanding that internal struggles are expressed, and can move toward healing while maintaining connections with others (Lockhart 2020).

2.9 RESILIENCE BUILDING STRATEGIES

Intervention strategies that promote resilience aim to narrow down the zone of vulnerability in at-risk children and youth. Preventative intervention strategies include adopting a strength-based approach, increasing bonding between children and caring adults, community support, early identification of child and family needs and the development of social and academic competence (Halter and Sturgeon 2013).

2.9.1 Using the Strength-based Approach

There is substantial support for strengths-based approaches in social care. These approaches emphasise leveraging individuals' personal, social, and community resources to help them achieve their desired outcomes and build resilience.

Community workers have successfully utilised this approach to empower young people by focusing on their strengths and motivating them to identify areas of talent

that they can pursue as a potential career (Caiels, Milne and Beadle-Brown 2021: 401).

By focusing on what children and youth are good at, positive self-perception is fostered, this means young people have a positive self-image allowing them to face challenges confidently. Their problem-solving skills are also enhanced enabling them to apply different solutions to different situations. Building on strengths also contributes to the emotional well-being of children and youth as they can regulate their emotions and manage stress. Lastly, strength-based approaches often involve collaboration and teamwork. This contributes to a supportive network as it allows children and youth to know their strengths and appreciate those of others thereby enhancing interpersonal relationships (Caiels *et al* 2021: 401).

In the context of resilience, the strength-based approach recognises that individuals possess inherent strengths that can be utilised to overcome adversity. When child and youth care workers emphasise and build on the strengths that children and youth already possess, young people will have better coping skills, as they will feel empowered, supportive relationships will form and children and youth will become more resilient (Van Hook 2019).

2.9.2 The Role of Schools

Schools play a crucial part in children's growth in numerous communities worldwide, serving a dual purpose similar to that of families by contributing to child resilience. This is because they provide normality, relationships and resources that support and nurture the concept of resilience (Masten and Motti-Stefanidi 2020). Many schools can provide effective qualities such as strong leadership, positive routines, opportunities to learn new skills, caring relationships and a sense of belonging for learners. All these factors help children and youth develop tools to cope with life's challenges.

Schools also provide social support networks for children and youth, as they have access to peers, teachers, counsellors, coaches and mentors. These social connections can serve as a crucial support network during adversity. In addition, schools can provide access to resources, particularly for struggling children. It can

open many doors including educational opportunities, scholarships and career options. Access to these resources can boost a child's confidence and leave them feeling hopeful about their future (Fullerton *et al* 2021: 2). Examples of strategies and practices found in schools include positive reinforcement, encouraging risk-taking, mental health support and extracurricular activities to name a few (Masten and Motti-Stefanidi 2020).

2.9.2.1 Positive reinforcement

Positive reinforcement is an aspect of resilience that rewards a child's efforts and achievements. It reinforces their sense of self-worth and competence, which can, in turn, assist in boosting their confidence and resilience. Positive reinforcement is effective as it generates a pleasant and rewarding experience that motivates the child or young person to repeat the desired behaviour. It increases motivation and self-confidence and can assist in promoting positive routines and habits (Rumfola 2017:1).

2.9.2.2 Encouraging risk-taking

According to Henriksen *et al.* (2021), this aspect fosters resilience by creating an environment where taking calculated risks and making mistakes, is seen as a part of the learning process. Taking risks can also expose children and youth to new challenges and force them to adapt and use problem-solving skills. This experience can assist children in overcoming the fear of failure in things they want to do and, ultimately, instil resilience within them.

2.9.2.3 Mental health support

According to Lee (2021:421), school routines are essential as they provide coping mechanisms for children and youth with mental health issues. When schools are closed like when the nation was experiencing COVID-19 many children lose an anchor in life and their symptoms relapse. Although the government continues to provide funding to train school staff on mental health issues and to establish comprehensive school-based mental health systems of support, many children and

youth are still experiencing severe mental health issues and more still needs to be done to reach more children in schools (Duong *et al.* 2021:420).

Access to mental health support in schools such as counselling services and mental health resources can help address mental health issues effectively and efficiently. Once this has been done successfully children and youth will be able to cope with stress and it will build resilience. Access to mental health support can include teaching children coping strategies to manage stress and anxiety. Children can also develop emotional regulation skills, which enable them to manage their feelings. Lastly, through mental health support, children will be able to address trauma which prevents long-term negative impacts. (Ormiston *et al.* 2021:2148).

2.9.2.4 Extracurricular activities

According to King *et al.* (2021:42), participating in sports or cultural activities can allow young people to explore their interests and passions. Participation in activities such as sports or arts provides children and youth with an opportunity to develop a skill that enhances a child's sense of competence and capability. It also promotes teamwork and social skills; children learn to foster positive relationships and interact with others. In addition, extracurricular activities often involve interactions with coaches, mentors and peers. These additional support structures provide encouragement, guidance and a sense of belonging for children and youth as protective factors of resilience.

Winstone *et al.* (2022:81) stated that children and youth participation in extracurricular activities can positively impact their development as well as create a sense of community. However, individual characteristics such as sociability can also play a role in children and the youth choosing whether or not to participate in these activities. Not all children and youth benefit equally from participating in extracurricular activities, so schools must provide a variety of opportunities that are accessible to a wide range of children. This can help promote equity in the participation of extracurricular activities.

2.9.3 The Role of Communities

According to Masten and Motti-Stefanidi (2020), children and young people rely not only on the strength of families and schools but also on the resilience of their communities. Communities also contribute to the social and economic well-being of children and families. Resources for families and schools such as health and emergency services, clean water and sanitation, electricity and many other services that maintain community order are important in building resilience in young people. Communities also provide support to religious organisations and events in addition to coordinating community celebrations. Mentorship programmes, youth centres and safe spaces, community involvement, crisis response and support and lastly, community-based education and life skills workshops are all strategies and practices that can be used to foster resilience (Osterling and Hines 2006:242).

The livelihood of communities around the world is currently under transformation. These transformations are amplifying cultural, social environmental and economic vulnerabilities. Communities with well-established networks are often more successful in achieving their goals than communities that lack a network and a sense of togetherness. Many communities are currently negatively affected by incomplete projects by the government this has negatively impacted the communities' perception of resilience and has left them feeling hopeless (Markantorni *et al* 2023:127)

2.9.3.1 Mentorship programmes

The establishment of mentorship programmes that connect youth with caring adults in the community can foster resilience building in children and youth. These mentors serve as role models as they demonstrate resilience in their own lives. Children who witness resilience are more likely to adopt similar attitudes and behaviours. Mentorship programmes also provide emotional support, as it is important for young people to have a caring adult who listens and encourages the child through challenges. Lastly, they provide guidance in decision-making and problem-solving which will equip children and youth with critical thinking skills enabling them to make informed choices (Coyne-Foresi *et al.* 2019:531).

2.9.3.2 Youth centres and safe spaces

According to Steinmann *et al.* (2021:56), communities can create safe and inclusive spaces such as youth centres where children and youth can gather, interact and engage in constructive activities such as sports, arts and education programmes. This can help them focus on more positive things in life rather than participating in risky behaviours as a coping mechanism. Youth centres and safe spaces offer a supportive environment where children feel included and have a sense of belonging. Centres often also encourage independence and responsibility which can equip young people with the confidence to face life's challenges head on.

2.9.3.3 Community involvement

Communities may also encourage the youth to participate in community service and volunteer opportunities to build resilience. When children and youth contribute to the community, they will feel a sense of purpose and belonging. Engaging in community projects also allows individuals to contribute to the well-being of others. Acts of helping and generosity build a sense of purpose which increases resilience. Lastly, community involvement allows individuals to develop various skills, such as communication, teamwork and leadership. Acquiring these skills enhances one's ability to navigate and adapt to challenges (Brennan *et al.* 2007:203).

2.9.3.4 Crisis response and support

According to Masten (2021:1), communities can also ensure that there are resources and services available for children and young people who face adversities and crises. These resources can include essentials such as food, shelter and medical care. Counselling and emotional support from trained professionals such as child and youth care workers are also a form of support which can assist children and youth with the emotional toll of a crisis. Crisis support also involves teaching effective coping strategies, like learning to manage stress, anxiety and trauma which promotes resilience. Lastly, it fosters a sense of community solidarity, because the act of coming together in the face of adversity strengthens social bonds and creates a supportive environment.

2.9.3.5 Education and life skills workshops

Ayala (2019) stated that communities may offer workshops on life skills, such as providing education on stress management and problem-solving techniques which equip individuals with practical skills to cope with challenges. Workshops may also teach time management, enabling individuals to balance various responsibilities they may have which will result in maintaining stability. Children and youth can also learn teamwork and effective communication, which contributes to both the personal and professional development of the young person.

The author further suggested that these workshops are extremely helpful because young people are gifted differently. Some young people may not be doing well academically (for example their maths, English and natural science marks may be low). However, participating in these workshops exposes them to practical and technical skills which can leave them hopeful about their future, as they can enrol in vocational school and pursue careers where they do more practical work. This can positively contribute to the resilience of children and youth (Ayala 2019).

2.10 CHALLENGES IN RESILIENCE BUILDING

Building resilience in individuals, especially children and youth, can be very challenging. Some of these challenges are outlined in the discussion below.

2.10.1 Trauma and Adversity

According to Gartland *et al.* (2019), children who are exposed to social adversity due to social circumstances such as poverty are more likely to be at risk of poor outcomes. This means that these children are less likely to succeed and they often fall victim to the circumstances into which they are born.

Children and youth who are still learning to overcome past trauma or current ongoing adversity can have a difficult

time building resilience effectively, this is because resilience involves effectively managing stress. However prolonged stress can strain an individual's resilience capacity. Traumatic experiences can also evoke intense emotions of fear; anger or

sadness which makes it difficult for a person to be resilient. Lastly, trauma can strain relationships and if relationships are disrupted, it can be difficult to rebuild and maintain them and this can affect one's resilience (Osofsky and Osofsky 2018:115).

2.10.2 Lack of Support System

According to Cacioppo *et al* (2021 101429), having a lack of support can have a significant negative impact on children across several aspects of their lives, which include their emotional well-being as they may often feel lonely. They may also experience behavioural issues such as aggression and defiance.

Osofsky and Osofsky (2018:115) also stated that the absence of supportive relationships with parents or a caring adult can impede the development of resilience in children and youth. It can be hard to be resilient when one has to bear the emotional burden of challenges alone. Lack of support can also lead to children isolating themselves which increases vulnerability. This also means that children and youth have fewer chances of sharing experiences and receiving advice from others which may affect their resilience.

2.10.3 Educational Barriers

Challenges within the educational system such as limited access to quality education and supportive learning environments, can be very discouraging to children and youth. It may also hinder them from acquiring skills that are essential for building resilience such as fostering a sense of competence, goal setting and problem-solving skills just to name a few. Being unable to get quality education may also leave them feeling hopeless for their future and this can also result in them participating in risky activities because they feel they have no future (Osofsky and Osofsky 2018:115).

In addition, Alam and Mohanty (2023:2270662) stated that educational barriers can affect children in various aspects such as academic achievement. This is because children facing educational barriers may struggle to perform well academically due to limited resources or learning disabilities. They may also have poor social

development; as educational barriers may hinder their opportunities to interact with others.

2.10.4 Inadequate Mental Health Services and Stigma

According to Javed *et al.* (2021:102), inadequate mental health services and stigma can negatively affect children as they may go untreated for mental health conditions such as anxiety, depression and ADHD. Children facing stigma may also internalise negative beliefs about themselves and this may lead to feelings of shame and worthlessness which can affect the resilience-building process.

Furthermore, Osofsky and Osofsky (2018:115) suggested that limited availability and accessibility of mental health services can be a significant obstacle to resilience-building, especially in areas with insufficient mental health infrastructure. Many children and youth in townships and rural areas do not have access to mental health services. The stigmatisation of mental health issues can also create barriers to seeking and receiving the necessary mental health support, which can further impact the resilience-building process in children and youth.

2.10.5 Environmental Challenges

Natural disasters, climate change or other environmental factors can also pose significant challenges to resilience-building. These situations can often cause an abrupt disruption in the lives of children and youth, as they often lack access to the adaptive strategies and support required to effectively overcome these challenges. Natural disasters may also result in infrastructure damage and affect essential services such as water, electricity and transportation. This can be damaging especially for children and youth living in disadvantaged communities (Osofsky and Osofsky 2018:115).

According to Spinelli *et al.* (2021:639) living in environments affected by natural disasters, community violence or other environmental stressors can also increase children's risks of experiencing anxiety and post-traumatic stress disorder. They may also experience uncertainty about the future due to losing their homes,

belongings or loved ones. This ultimately affects the resilience-building process in children and youth.

2.11 CONCLUSION

This chapter aims to provide a critical and systematic analysis of existing research from articles, books and other sources related to this study. This chapter has provided a foundation for this research study as it looked at vulnerability and risk factors that children and youth face, the term resilience was defined, and its importance was explained. It further looked at community-based child and youth care and the challenges encountered in building resilience. The chapter also addressed characteristics of resilient children and youth, and how supportive relationships and self-efficacy foster resilience. In addition, resilience-building strategies were also identified. The next chapter will outline the research methodology and design of the study.

CHAPTER 3: RESEARCH METHODOLOGY

3.1 INTRODUCTION

According to Mukherjee (2020), research methodology is an approach used to ensure that research problems are thoroughly solved. It allows researchers to use a systematic approach and a set of techniques. Often research methodology encompasses the processes, tools and procedures used by researchers to plan, gather, analyse and interpret data in a structured and reliable manner. Research methodology also includes selecting research methods, designing surveys, collecting and processing data and drawing valid conclusions. Finally, it plays a vital role in guaranteeing the quality and reliability of research results (Osuagwu 2020:46).

This chapter presents an in-depth description of the qualitative study design, research strategy, study population, sampling method, data collection process, data analysis, trustworthiness and ethical considerations which were used as guidelines in this study.

3.2 RESEARCH DESIGN AND RESEARCH STRATEGY

According to Baran (2022:312), a research design plays a vital role in achieving research outcomes. The design serves as a structured framework that guides a research project by specifying the type of data required, the methods for data collection and analysis, and the ways in which these elements address the research questions. As Sileyew (2019:1) notes, a research design provides an appropriate framework for a study, detailing the specific procedures and methods to be employed in conducting the investigation.

A research strategy is an important part of research planning, it guides researchers in making informed decisions about the techniques and methods that will be most effective in addressing their questions or objectives. Examples of strategies used in A research design includes narratives, phenomenology, ethnographies, grounded theory studies or case studies (Ansari and Azhar 2022:14).

According to Aspers and Corte (2021:1), qualitative research is an iterative method for gaining a deeper insight into the scientific community by discovering new and significant differences that emerge from investigating the phenomenon under study. According to Bhandari (2021:80), qualitative research includes gathering and analysing non-numeric information like written text, videos, or audio recordings. This research approach relies on personal accounts or documents that illustrate in detail how people think or respond to society.

According to Hunter *et al* (2019), an exploratory qualitative design is a research approach that is used to gain a deeper understanding of a phenomenon. This design makes it easier to uncover patterns, generate hypotheses and provide detailed insights. An exploratory qualitative design also allows for flexibility as the researcher can adjust their methods and focus on new information that has emerged.

Small (2021:1) defines qualitative research as a broad concept encompassing various approaches and methods for carrying out investigations to uncover attitudes, beliefs, behaviours, experiences, and social interactions. It provides valuable insights and a holistic view of complex phenomena, making it a valuable complement to quantitative research, which focuses on numerical data and statistical analysis. For this study, a qualitative research design was used to enable participants to share their experiences about resilience building strategies used in community-based child and youth care.

3.3 STUDY SETTING

A study setting in research pertains to the physical, social, or environmental context where a research study is conducted. It serves as the backdrop for data collection and observations. The selection of a study setting plays a crucial role in the research design and can have a notable impact on the study's outcomes and findings. Study settings often differ based on research objectives and the nature of the investigation. Research findings are viewed as reliable and naturalistic when the research project blends into and is a part of the daily experiences of participants (Singh *et al*. 2023:125).

Inanda was specifically chosen because it is the second most populated township in Durban KwaZulu-Natal. Many young people living there face many adversities that they need to overcome, such as poverty as they live in low-income households, gangsterism, and alcohol and substance abuse. This study aimed to shed light on how community-based child and youth care workers help encourage and build resilience in these children and young people with such discouraging backgrounds.

For this study, data was collected at two child and youth care centres that provide community-based care in the Inanda township of Durban, KwaZulu-Natal. The researcher was advised by the ward counsellor to approach two centres to ensure that data saturation was reached. These two child and youth care centres are in the heart of Inanda and provide shelter and safety to over eighty children collectively.

Community-based setting one

This organization was chosen because it houses the most children and youth in Inanda with a total of fifty children between the ages of three and twenty-one years. This community-based care centre was founded in 1970, and it started as a home for the elderly. In 1994 the residential child care facility was established as there was a growing number of children who came along to the centre with their grandmothers and others who were found loitering on the streets. The centre which is registered with the Department of Social Development has the most child and youth care workers as it employs over fifteen child and youth care workers who are working together to provide care to these young people. The organisation's main objective is to provide the necessities to the underprivileged children of Inanda and to those who are victims of child abuse and neglect. They provide food, shelter and clothing to those in need. There is also a residential facility for the elderly within the same centre that provides shelter and care to the elderly. The organization also generates income through a bakery, vegetable garden and sewing project. Sometimes young people participate in the programmes and learn new skills.

Community-based setting two

This faith based NPO which is registered with the Department of Social Development, was formed in 2006. Its vision is to be a leading organisation in caring for and developing the independence of underprivileged children and youth. The

mission is to enable the disadvantaged to access life's basic resources to uplift them to a better quality of life. This organisation provides care to thirty children and youth in Inanda. It has six child and youth care workers in total who assist in providing a safe and caring environment for the children. The organisation assists young people in getting life's basic needs such as food, shelter and clothing. It also focuses on skills development by hosting sewing and crocheting classes, with the hope that these skills will encourage the youth to work and learn to earn a living.

3.4 STUDY POPULATION

Palmer *et al.* (2024:857) described a study population as the entire group of individuals that participate in the study, that often share common characteristics and from which a sample is drawn for a particular study. The population is defined based on specific criteria relevant to the research questions. Weitzel *et al.* (2022:9601) defined the population or population of interest as the specific group that a study aims to investigate or address. The population of this study is qualified child and youth care workers who provide community-based care to young people and their families who are at risk in Inanda, Kwa-Zulu Natal. There are more than three child and youth care centres in the Inanda community and the two chosen for this study are currently the largest.

3.5 STUDY SAMPLING

Bekele and Ago (2022:42) described sampling as the action or procedure of choosing a representative individual from a population to assess the features of the entire population. Research sampling involves selecting a portion of elements from a larger population to conclude the population using the characteristics of the sample. The chosen sample should represent the entire population and it allows for generalisations and conclusions to be drawn from the study results (Mthuli, Ruffin and Singh 2022:809).

Two types of samplings exist probability and non-probability sampling. For this study, a non-probability sampling approach was used as it allows for the non-random selection of participants and provides convenient data collection for the researcher. For this research, purposive and convenient sampling were used. Purposive sampling is also known as judgemental sampling. In this method, researchers are

intentional about the participants they choose to participate in the study. This is because these participants are most likely to provide rich and relevant information that answers the research question (Campbell *et al.* 2020:652).

Through purposive sampling, participants were deliberately chosen for this study because they met the study's inclusion criteria — specifically, being child and youth care workers in Inanda, KwaZulu-Natal, with direct experience in resilience-building strategies within community-based care. These participants were identified with the assistance of community leaders and organisational gatekeepers. Furthermore, Sexton (2022:102539), stated that purposive sampling allows the researcher to select participants who are most useful to the study and who are within proximity and are easily accessible. Participants who work within the Inanda community were selected as this made it easy for them to travel to the centre where interviews were being conducted.

Emerson (2021:76) described convenience sampling as a method used by researchers to select readily available participants within proximity to the researcher. This method is quick and inexpensive, allowing the researcher to collect data without worrying about extensive travel and using lots of money to access participants. Convenience sampling was then applied to engage participants who met these criteria but were also available during the research period. This was necessary to accommodate practical constraints such as work schedules, programme activities, and the limited time frame for fieldwork.

Convenience sampling was chosen for this study as the researcher currently resides in Durban and Inanda is one of the biggest townships in KwaZulu Natal with more than three community-based child and youth care centres. The research study included twenty child and youth care workers, ten from each setting. Data collection continued until saturation was reached. Using both methods ensured that participants had the relevant expertise and that data collection was efficient and feasible within the context of Inanda's community-based child and youth care settings.

3.5.1 Inclusion Criteria

According to Beiene *et al.* (2024:553), the inclusion criteria in research is a predefined characteristic that determines whether individuals or entities can participate in a study. If participants do not meet these specific conditions they may not be included in the study as they may compromise the findings and relevancy of it.

According to Patino and Ferreira (2018:84), the inclusion criteria have specific characteristics or conditions that individuals must possess or meet to participate in a research study. The criteria are defined by the researcher and it ensures that the study's participants share common attributes. This study included:

- Qualified child and youth care workers with a minimum of two years of work experience.
- Male and female participants.
- Child and youth care workers employed in one of the two chosen community-based settings in Inanda.

3.5.2 Exclusion Criteria

The exclusion criteria in research ensure the validity of the study by excluding individuals who may introduce bias or variability in the study (Yazdani *et al.* 2020:99).

Patino and Ferreira (2018:84) defined the exclusion criteria as the conditions that disqualify individuals from participating in a research study. These participants are excluded because they may complicate the interpretation of the results. Exclusion criteria ensure that the participant selection process is refined and that the study outcomes are fair. This study excluded:

- Any person who is not a qualified child and youth care worker.
- Any child and youth care worker who had less than two years of experience working in community-based settings.
- Child and youth care workers who did not work in Inanda.

3.6 DATA COLLECTION PROCESS

Taherdoost (2021:10) describes data collection as the systematic and organised gathering and measurement of information on variables of interest. In the present study, data were gathered to address the research questions by obtaining first-hand accounts from qualified child and youth care workers. According to Aguinis *et al* (2021:678), data collection techniques include procedures such as interviews, observations, focus groups, and experiments. Guided by this framework, semi-structured interviews were selected as the primary data collection method to facilitate the exploration of participants' professional experiences while maintaining consistency in the coverage of key research topics. Ten child and youth care workers were interviewed from each child and youth care centre.

Semi-structured interviews, as outlined by Adeoye-Olatunda and Olenik (2021:1358), combine structured and unstructured elements. An interview guide containing predetermined open-ended questions aligned with the research objectives was developed to provide structure. Flexibility was maintained by adapting the sequence of questions and incorporating probing techniques to explore emerging issues raised by participants, thereby incorporating the unstructured component.

Consistent with Vindrola-Padros and Johnson's (2020:1596) suggestion that open-ended questions enable the collection of detailed and meaningful responses, the interview questions were designed to elicit in-depth narratives concerning participants' work in community-based settings in Inanda. Questions prompted descriptions of specific challenges encountered in daily practice, with participants encouraged to provide illustrative examples and reflections, resulting in the generation of rich qualitative data. The questions were set out in a way that participants could fully describe what they understood by resilience-building strategies and the different interventions they used to build resilience in children and young people they work with.

Before gathering the data, the researcher obtained full approval from both the Faculty Research Committee and the Institutional Research Ethics Committee at

Durban University of Technology. Once permission and full approval was granted the researcher was able to proceed with data collection. The first step in recruiting participants involved sending a well-detailed gatekeeper letter (Appendix A) to the ward counsellor, to notify him about the study. Once he granted permission to access the community, a gatekeeper letter was sent to the managers of the community-based settings, one and two. The researcher requested the centre's manager to notify the child and youth care workers at the centre to contact the researcher if they wished to participate in the study.

Potential participants were invited to meet with the researcher on set dates at the different centres. During these meetings, the researcher explained the study and also went through the Letter of Information (Appendix B), which outlined the study's objectives. The letter also highlighted that participant information would be kept confidential and safe and that their identities would remain anonymous. It also emphasised that their involvement in the research was voluntary and that no remuneration would be offered for participating. Lastly, participants were given consent forms to sign (Appendix C) and also provided their cell phone numbers for the researcher to contact them with further details. For the participants who agreed to participate in the study, one-on-one interviews were scheduled at mutually agreed times and dates. A week before the interviews, the researcher contacted all the participants to confirm the date, time and venue of the interview.

3.6.1 Interview Setting

An interview setting is the physical, experimental or social context within which research is conducted (Vindrola-Padros and Johnson 2020: 1596). In this study, interviews were conducted at two community-based child and youth care centres in Inanda. In setting one, the interviews took place in the dining hall where a comfortable place was set up for the researcher and participant. In setting two, the interviews took place in the function room. The venues at both settings were conducive as the interviews were conducted in the morning when the children were at school or out doing other activities. Ten child and youth care workers were interviewed from each setting.

3.6.2 The Interview Process

During the interview process, participants were asked standard open-ended questions, as outlined in Appendix E. These questions allowed them to thoroughly share their personal experiences and the strategies they used to build resilience. The interview guide helped the researcher collect rich and detailed responses from the participants, enabling them to provide insight into their experiences and opinions. The interviews were conducted in English however, the participants were allowed to answer in IsiZulu and also asked the researcher to translate the questions into IsiZulu. The interviews lasted about 40 minutes each. Interviews were also recorded with a digital voice recorder for the sake of record keeping with the permission of the participants. The recordings and notes were saved and later used by the researcher to transcribe the data.

Upon arrival, each participant was welcomed and given some refreshments. Once participants were settled the interview process began. The researcher reminded participants that participation was voluntary and that no remuneration would be provided. The researcher also reminded participants that they were allowed to withdraw from the study should they wish. Permission was sought for the interviews to be recorded. Lastly, the researcher assured the participants that confidentiality would be maintained and none of their personal information would be used. This would be achieved by securing all the written information gathered and recordings in a locked cupboard for a total of five years after which the data collected would be destroyed and shredded.

3.7 PILOT STUDY

Ismail, Kinchin and Edwards (2018:1), describe a pilot study as a small investigative project carried out before the main research study. It aims to gather information on variables of interest systematically. Its purpose is to test and refine research methods, tools and procedures before the commencement of the actual study. A pilot investigation enables the researcher to recognise and deal with any potential problems that may occur during the actual study. There are multiple benefits of the pilot study such as minimising risks, new insights are gained, adjustments and

improvements can be made and lastly, it ensures that the final study is of good quality.

This study conducted a pilot study where four child and youth care workers not in the sample were interviewed as part of the pilot study. The researcher followed all the necessary guidelines in conducting the study and the interviews were recorded. The pilot study aimed to determine whether the interview process, interview questions and consent forms were clear and understandable to participants. It also tested the reliability of the study and to see whether participants felt comfortable participating in the study. Participants found the process, questions and consent forms to be straightforward to understand. They also felt comfortable in providing their information. No changes were recommended at the end of the pilot study.

3.8 DATA ANALYSIS

Kent (2020) described data analysis as the process of examining and interpreting data to discover and set apart useful information. Once this is done the researcher can then conclude their study. Various techniques and tools are used to extract relevant information from raw data. According to Mayer (2015), data analysis represents a central step in a research study which uses various methodologies and techniques to retrieve patterns and trends from structured and unstructured data sets. The researcher then uses these insights to draw conclusions or solve existing problems. Thematic data analysis was employed in this study.

According to Terry *et al.* (2017:25), thematic analysis has been used to refer to data analysis techniques in social sciences. It was also described as a method of identifying themes in qualitative data. Braun and Clarke (2012:297) defined thematic analysis as a technique for recognising, examining, and understanding patterns of significance or themes within qualitative data. It involves systematically coding and categorising data such as interview transcripts, survey responses, or open-ended questions to identify recurring patterns of meaning or topics. Lastly, thematic analysis allows researchers to explore the underlying themes and concepts present in the data.

Table 3.1: Applying the Various Thematic Content Analysis Steps (Soratto *et al.* 2020: 19)

Step	Explanation of the steps
Step 1	Pre-analysis stage and becoming familiar with the data and reading through the documents.
Step 2	Exploring the material and generating initial themes. Read through the data, select data segments and then identify themes by either applying existing themes or creating new ones.
Step 3	Building a structured theme system. Group the themes and use them as filters. The themes can then be split up and sub-themes can be created under each theme.
Step 4	Begin writing a memo for each theme and explore the different categories and their potential fit with the theme.
Step 5	Review the final themes and explore them further to determine whether relations hold across the entire dataset. Refine themes accordingly if needs be. Lastly, relate themes to each other in networks

3.9 TRUSTWORTHINESS IN QUALITATIVE RESEARCH

Lincoln and Guba (1985) introduced the concept of trustworthiness by introducing the standards of credibility, applicability, reliability, and objectivity. According to Rose and Johnson (2020:432) trustworthiness in qualitative research encompasses the credibility, reliability, confirmability, and transferability of research findings. Ensuring trustworthiness is crucial for upholding the validity and dependability of qualitative research outcomes. Stahl and King (2020:26) described trustworthiness as an important and imperative aspect of qualitative research. They further stated that the level of trust in the storyteller significantly influences how much trust is placed in the story. Lastly, according to Nowell *et al.* (2017:1609), trustworthiness is a tool used by researchers to persuade readers that their research findings are worthy of attention.

3.9.1 Credibility

Nowell *et al.* (2017:1609) explained that credibility relates to how well a study's findings accurately reflect the viewpoints or experiences of the participants. Credibility is often rooted in the truth. It can also be enhanced through techniques such as prolonged engagement with the data and member checking. Stahl and King (2020:26) stated that researchers can check credibility by understanding how the reported findings and ideas share some relationship. This is also known as identifying patterns. Credibility was achieved in this study by maintaining detailed records of the research process. This included field notes and audio recordings which allow for transparency and accountability.

3.9.2 Transferability

Nowell *et al.* (2017:1609) defined transferability as the degree to which the results can be applied or transferred to different settings or groups. Providing thorough descriptions of research methods, participants, and context can improve transferability by enabling readers to evaluate the relevance of the findings to their circumstances. Stahl and King (2020:26) argued that while researchers cannot predict the specific locations seeking to apply their findings, they are accountable for furnishing comprehensive explanations so that those wishing to implement the findings in different settings can assess their relevance. Transferability was applied by choosing participants who provided detailed and rich data. The input and examples of participants are also quoted in the study, and this is done to provide the perspectives and experiences of participants which helps ensure that this study is relevant.

3.9.3 Dependability

Stahl and King (2020:26) described dependability as the reliability and stability of research results over time and in various conditions. The techniques such as keeping a paper trail which includes documenting decisions and processes. Discussing interpretations with other researchers can also enhance dependability. Nowell *et al.* (2017:1609) stated that dependability allows readers to examine the research process and also enables them to judge the dependability of the research. Dependability in this study was applied by documenting all the research processes

such as having a signed consent form from participants and a detailed explanation of how data was collected and the procedures followed.

3.9.4 Confirmability

Stahl and King (2020:26) stated that confirmability ensures that the researcher's interpretations and findings are derived from the data. Lastly, Nowell *et al.* (2017:1609) define confirmability as the quality of research findings being objective and neutral, ensuring that they are not affected by the researcher's biases or preferences. Techniques such as reflecting on the researcher's assumptions and conducting member checks can help ensure confirmability. Confirmability was applied in this study through peer debriefing, the researcher engaged in discussions with the supervisor and peers to reflect on the research findings and process. Feedback was given and the researcher used this to maintain neutrality in the data analysis process.

3.10 LIMITATIONS OF THE STUDY

According to Theofanidis and Foutouki (2018:155), a study's limitations are factors or elements that could affect the accuracy and consistency of the research results. Typical constraints may include sample size, resource limitations, and subjectivity among others. In this case, the study was restricted to twenty child and youth care workers from one community, with data derived solely from participants' personal experiences which might be biased.

3.11 ELIMINATION OF BIAS

This process refers to reducing or removing any systematic errors or prejudices that may influence the results or interpretation of a study or analysis. Eliminating bias often involves implementing methods and techniques to minimise the influence of subjective opinions, preferences or external factors on the research process. This then ensures that the findings of the study are reliable and accurate (Trnka and Smelik 2020:100753). This study used ethical considerations to ensure that the study was not biased and all the necessary steps were followed to ensure that the study was thorough.

According to Fox *et al.* (2021), data analysis also plays a crucial role in eliminating bias as it provides a systematic and objective approach to interpreting and drawing conclusions from data. It also allows for the use of standard procedures which means that the study will maintain consistency throughout. It also allows for transparency through the reporting of data analysis methods followed.

3.12 ETHICAL CONSIDERATIONS

According to Pietila *et al.* (2020:49), the terms ethics and morals are often used interchangeably and they refer to the aspect of philosophy which addresses questions about morality. Alderson and Morrow (2020) defined ethics in research as the principles and guidelines that ensure the protection of participants' rights, well-being and confidentiality. Kaewkungwal and Adams (2019:176) stated that ethical considerations, provide researchers with some criteria which they can consider when working with participants. These considerations help them differentiate between what is right and what is wrong when presented with an ethical dilemma. Ethical approval for this study was obtained from the Institutional Research Ethics Committee at Durban University of Technology (Ethical clearance number IREC 166/23). Below are the ethical principles adhered to, in the study.

3.12.1 Confidentiality

According to Bender *et al.* (2020:313), confidentiality means that the researcher knows and is aware of who the participants in the study are however, the researcher will remove all identifying information from the report. Bender *et al.* (220:313) further stated that all participants have a right to privacy. Arifin (2018:30) described confidentiality as a crucial aspect of ethical considerations in research as it aims to protect the privacy and personal information of the participants. The study ensured confidentiality, as stated in the information letter (Appendix B). During the interviews, no mention of the participant's personal information was made or will be made public.

3.12.2 Anonymity

Arifin (2018:30) stated that anonymity involves ensuring that participants cannot be identified from the data collected. Anonymity provides an additional layer of protection for participants' privacy and encourages honest responses without fear of

repercussions. Anonymity was maintained by using pseudonyms for participants to protect their real identities. The recording was saved on a USB drive, and the transcriptions were locked in a cupboard in the supervisor's office. All data will be permanently deleted and shredded after five years.

Hoft (2021:223) defined anonymity in research as the protection of participants' identities, ensuring that their personal information cannot be traced back to their responses. In this study, anonymity was maintained by erasing any identifying details from the dataset, including names, addresses, and other identifiable participant characteristics.

3.12.3 Request for Permission

According to Hancock *et al* (2021), the request for permission involves seeking approval to conduct a research project from a research supervisor and also an organization or research committee. This is often done in the form of a letter or a research plan, which contains the full details of how the research will be conducted.

This aspect typically involves obtaining approval from relevant authorities or institutional review boards before conducting a study. This process ensures that the research meets ethical guidelines and regulatory requirements, particularly concerning the protection of human participants. To ensure that the request for permission criteria was fulfilled, the researcher had to seek approval from the Institutional Research Ethics Committee and was granted an ethics number. A gatekeeper letter was also sent to the ward councillor. After permission was granted by the ward councillor, the gatekeeper letters were sent to the two managers in charge of each community-based child and youth care centre in Inanda, Durban (Appendix A). This letter informed the manager that the researcher wished to obtain permission to conduct a study in the centre with interested child and youth care workers. Once permission was granted the researcher then organized a meeting with the interested participants and went over the letter of information (Appendix B) and the purpose of the study.

3.12.4 Informed Consent

Informed consent helps to ensure that all participants in the study are fully informed about the procedures that will take place to gather data. This process includes informing participants what the study is about, the duration of the study, the benefits and risks and also the researcher has to provide the supervisor's contact information and the institution's approval number (Millum and Bromwich 2021:46).

According to Fleming and Zegwaard (2018:205), informed consent is the process where participants are provided with detailed information about the study before agreeing to participate. This information may include details about the purpose of research, procedures involved, potential risks and the benefits if any. In this study, participants were told that their participation was completely voluntary and they could choose to withdraw at any point. Once participants understood and agreed, they were requested to sign a consent form (Appendix C). Once this was done the interview date and times were set via telephone and email with the participants.

3.12.5 Respect for Participants

According to Kraft *et al.* (2021:8), respect for participants is valuing each participant and treating them with dignity and consideration. The researcher must also be empathetic and respectful of participants' experiences and input. Respect for participants also involves taking special care to ensure that no pressure is put on them.

Respect for participants requires researchers to recognise and safeguard the rights of participants and to make informed decisions about their involvement in research (McGregor 2023:4). In this study to achieve respect for participants, the participants were briefed about the research study. The researcher also selected a safe and appropriate venue that was easily accessible to all participants and respected their requests such as confidentiality. Lastly, the date and time of the interviews were negotiated with each of them.

3.12.6 Beneficence

According to Avant and Swetz (2020:75), beneficence is the participants' right to freedom, their right to be protected from discomfort and harm. When participants participate in a study, they also have a right not to be exploited. The researcher must

always consider all possible sources of harm to participants before conducting a study, and find ways to prevent it. These can be psychological, social physical or even legal.

Beneficence in research refers to the ethical principles of maximising the benefits and minimising the potential harms of research activities. It often involves promoting the well-being of research participants and society (McGregor 2023:4).

In this study, the researcher achieved beneficence by first assuring the participants that the research would not cause any harm to them and ensured that the study took place in a safe enclosed environment. She also informed the participants that confidentiality would be maintained and if they felt uncomfortable or unsafe at any point, they were welcome to withdraw from the study.

3.13 CONCLUSION

This chapter looked at the qualitative methods used to conduct this study as well as the ethical considerations it adhered to ensure that all the necessary principles and guidelines were followed. The next chapter will present the findings and discussions of this study.

CHAPTER 4: RESULTS AND DISCUSSION

4.1 INTRODUCTION

This chapter will examine the objectives linked to the data collection tools, outline the data analysis process and discuss the study findings. Additionally, it will provide a detailed examination of the interview data and explain the procedures used for data analysis. To supplement the interviews, digital recordings were made and the researcher took notes. Lastly, a thorough review of the data was conducted, using thematic analysis to identify common responses. Through the use of thematic analysis, the researcher was able to categorise the information into themes and sub-themes. The results from the interviews will be presented by the research objectives, which are:

- To understand the importance of resilience building in community-based child and youth care.
- To identify which specific interventions child and youth care workers use to build children's resilience in a community-based setting.
- To inquire about the challenges child and youth care workers experience when building resilience in a community-based setting.
- To make recommendations on how resilience building can be enhanced in community-based care.

4.2. DEMOGRAPHIC PROFILE OF PARTICIPANTS

Being cognizant of the demographic profile of the study participants is crucial, as it underscores the representativeness of the findings concerning the selected sample. Table 4.1 presents the demographic information for the participants interviewed in this study. It reveals that twenty participants were interviewed, all of whom were female.

Table 4.1 Demographic Profile of Participants

Pseudonym	Gender	Age	Work experience in CYC	Qualifications
Participant 1	Female	48 years	12 years	FET Certificate CYC
Participant 2	Female	38 years	8 years	FET Certificate CYC
Participant 3	Female	35 years	8 years	Diploma CYC
Participant 4	Female	40 years	10 years	FET Certificate CYC
Participant 5	Female	38 years	7 years	FET Certificate CYC
Participant 6	Female	28 years	4 years	Bachelor's degree CYC
Participant 7	Female	29 years	4 years	Bachelor's degree CYC
Participant 8	Female	45 years	9 years	Diploma CYC
Participant 9	Female	51 years	12 years	FET Certificate CYC
Participant 10	Female	33 years	7 years	Diploma CYC
Participant 11	Female	48 years	10 years	CYC FET certificate
Participant 12	Female	26 years	2 years	Bachelor's degree CYC

Participant 13	Female	28 years	3 years	Bachelor degree CYC
Participant 14	Female	30 years	6 years	Diploma CYC
Participant 15	Female	27 years	4 years	Bachelor's degree CYC
Participant 16	Female	36 years	8 years	CYC FET certificate
Participant 17	Female	27 years	3 years	Bachelor's degree CYC
Participant 18	Female	29 years	4 years	CYC FET certificate
Participant 19	Female	28 years	4 years	Bachelor's degree CYC
Participant 20	Female	29 years	4 years	Bachelors' degree CYC

The child and youth care profession is dominated by females which explains why this study consisted of only females. The highest qualification participants had, was either a diploma or a degree. The majority of the participants had four years of experience. Four participants had over ten years of experience.

The participants in this study were all full-time child and youth workers and were all registered with the South African Council of Social Service Professions. This study also adhered to the research ethics' principles of confidentiality and anonymity as numbers were used in Table 4.1 to safeguard the identity of the participants and to ensure privacy.

4.3 THE PROCESS OF DATA ANALYSIS

Clarke and Braun (2017:297) defined thematic analysis as a technique for recognising, examining, and understanding patterns of significance or themes within qualitative data. This study used thematic analysis to systematically code and categorise qualitative data from the interviews. The researcher recorded and wrote down key points during the course of the interviews. At a later stage, she listened to the recordings and transcribed the data.

4.4 DATA ANALYSIS AND FINDINGS

This section presents and discusses the key themes and findings that emerged from the study. The data has been organised into five primary themes and twenty sub-themes, which were derived from the participants' responses. These themes and sub-themes are outlined in Table 4.2.

Table 4.2: Themes and Sub-themes Derived from the Data

Theme	Sub-themes
Child and youth care workers' understanding of the term resilience building	1. Encouraging and building children up
The importance of resilience building in child and youth care	1. Facilitating behavioural change 2. Better preparedness for the future 3. Promotes positive coping skills 4. Ensuring academic success
Challenges faced by child and youth care workers when building resilience in community-based care	1. Difficulty building rapport 2. Lack of participation and negative peer influence 3. Lack of services 4. Lack of parental and community support
Effective resilience-building strategies	1. Affirmations and teaching self-care 2. Communication with young people -Individual sessions -Open circle -Role plays and skits -Peer support groups 3. Participation in sports and recreational activities

	4. Using the strength-based approach 5. Spirituality
Suggestions for improved resilience-building strategies	1. Continuous professional development training and workshops 2. Access to basic resources 3. Access to mental health for young people 4. Reunification with families 5. Programmes involving the community and family 6. Mentorship programmes

4.4.1 THEME 1: CHILD AND YOUTH CARE WORKERS UNDERSTANDING OF THE TERM RESILIENCE BUILDING

Theme 1 involves understanding what the term resilience building means to child and youth care workers who work with children in community-based child and youth care settings.

4.4.1.1 Sub-theme 1: Encouraging and building children up

Resilience building lies at the centre of working with young people at risk. This is because many of the children found in community-based settings have experienced some type of trauma or adversity in life. They are often discouraged and demotivated by their circumstances. However, words of encouragement and continuous support can aid in instilling resilience in them. The majority of participants in the study referred to resilience building as “ukwakha ukuqina / ukumqinisa umuntu” which is the direct translation of resilience building in IsiZulu. These are some of the participant’s definitions of resilience building:

P1: *Resilience building to me is the act of ukumqinisa umuntu, teaching the person to persevere through life’s challenges no matter what they are facing.*

P2: *Resilience building means building children up and preparing them for the future so that they may feel confident to face life's challenges head-on even when we are no longer there to watch over them.*

P3: *Resilience building means teaching someone how to persevere and I often say it goes hand in hand with being courageous because sometimes life can be unfair however you need to have faith in yourself that you will succeed.*

P15: *Resilience building to me means courage. It is about having the courage to soldier on despite what you have gone through. This courage goes hand in hand with perseverance as sometimes in life you may need to persevere to overcome certain things.*

P19: *Resilience building means ukunika ithemba which means to instil hope for the future.*

The above-mentioned excerpts reflect that resilience building is the act of encouraging a person to persevere through life's challenges, no matter what they are facing. Participants shared that it means building children up and preparing them for the future, so that they may feel confident to face life's challenges head-on, even when they are no longer there to watch over them. Furthermore, participants shared that resilience building goes beyond teaching young people how to persevere, but it also teaches them how to be courageous. The above excerpts further reflected that developing resilience is crucial for helping children develop inner strength and coping skills. Ultimately resilience building fosters self-belief, problem-solving abilities and an adaptable mindset that will serve children and young people well throughout their lives.

The participant's definition of resilience building concurs with Maurovic *et al* (2020:337) definition of resilience building which states that resilience building in child and youth care is an important factor as it allows children and youth, to have access to supportive environments. They further highlighted that resilience-building equipped children and young people with the necessary tools to overcome adversity, trauma and stress. Walker (2020) described resilience as the ability to bounce back and adapt in the face of adversity. It involves being able to cope with stress, trauma or significant life changes positively and effectively. Resilient people are often described as strong, flexible and who can learn and grow from their experiences.

Being resilient is an important psychological trait that can help people navigate effectively through life's ups and downs. Robinson and Smith (2023) further reiterated this by stating that resilience allows one to cope with loss, change and trauma as we live in a world where we constantly face trials and tribulations.

THEME 2: THE IMPORTANCE OF RESILIENCE BUILDING IN CHILD AND YOUTH CARE

Theme 2 involves understanding why resilience building is important in community-based child and youth care. The sub-themes that emerged include facilitating behavioural change, better preparedness for the future, promoting positive coping skills and ensuring academic success.

4.4.1.2 Sub-theme 1: Facilitating behavioural change

Resilience building facilitates behaviour change in children and young people. When young people are resilient their behaviour is often positive, they tend to listen to instructions given, are responsible and have a positive way of thinking. They are not easily influenced into behaving badly and often can walk away from situations that can get them into trouble. Many participants mentioned how they look out for changed behaviour when building resilience. This is often an indicator that their interventions are working or not. Often when children are badly behaved, they are harder to get through to and it often takes consistency and understanding to understand why they are behaving the way they are to get them to change. That is why child and youth care workers need to remain consistent when working with at-risk children and young people as others may take longer to change their behaviour. In light of this, participants stated that:

***P7:** Building resilience in the young people that we work with can be difficult and tricky, this is because many of the children we work with can be very disrespectful and rude to us when they first arrive. However, as time goes on and I engage with them more I often see a behaviour change and that is how I know that the talks and programmes I do with them are working.*

***P9:** When children have a caring adult who shows them love, care, and support and encourages them they tend to listen to that person making it easier to instil resilience in them. I often watch out for their behaviour to know if the conversations and activities I do with them are working. For example, we have a duty roster here and*

children are expected to perform certain tasks a day. So, you will find that in the beginning when they first arrive, they may refuse to do what is expected and they may be rude and backchat. However, after a few days and sometimes weeks of being patient with them and talking to them regularly they may begin to do these tasks. Sometimes they may even do them without you even having to ask them.

P11: *Often after conducting what we call an open circle, where we just talk about life, their behaviour and some of the challenges they are facing as young people, I will monitor their actions and how they behave and carry themselves to see if the intervention worked or not or if I need to try a different approach.*

In the above excerpts, participants highlighted that resilience building facilitates behaviour change in at-risk children and young people. They also mentioned that building resilience is not achieved overnight but is a process that requires consistency from child and youth care workers. Building rapport with the child may take time but when resilience building is performed correctly, one will begin to see changes in young people's behaviour. For many of the child and youth care workers, changed behaviour in a child or young person is an indicator that the intervention strategy is successful. If the behaviour does not change, they may need to rethink their approach and try something else.

The above excerpts are supported by Lee *et al.* (2021:100721) who stated that resilience building can aid in changing bad behaviour, reducing risks and acting as a protective factor in young people. This is because if the youth are equipped with resilience-building skills, they will not turn to unhealthy coping mechanisms in times of adversity. Stainton *et al.* (2019:725) asserted that addressing risk factors such as unhealthy behaviours or environmental hazards can also lead to improved healthy lifestyle choices and contribute to physical and mental well-being. Individuals can also be empowered to address risks to be better equipped with knowledge, skills and resources to navigate challenges. According to Forbes and Fikretoglu (2018), resilience building can positively influence the social skills of young people by improving their emotional regulation which means they can better manage their emotions. This can reduce impulsive reactions during conflict or stressful situations.

4.4.1.3 Sub-theme 2: Better preparedness for the future

Building resilience in children and young people is crucial as it ensures that children and young people are equipped with the necessary skills to ensure that they can adapt to changes and unexpected challenges in the ever-changing world they live in. When children and young people are resilient, they are also able to manage stress effectively by staying calm and focused when under pressure. Resilient individuals often experience better physical and mental health meaning they are unlikely to experience health conditions such as anxiety and depression. They are also more capable of handling future stressors. In light of this, participant's responses indicated the following:

P4: *Resilience building helps the child face the outside world. If the child is not resilient it becomes harder for them to face difficult life situations. We do not want our children to be weak but instead, we want them to be empowered and know that they can achieve anything that they set their minds to regardless of what life has thrown at them. We want them to know that even amid adversity there is hope, you can overcome anything if you are resilient.*

P14: *When children are not taught or encouraged to be resilient, they will always feel lost and alone, which could cause mental health problems and lead to them suffering from anxiety and depression later on in life. Building resilience in children and young people can help them feel loved, supported and like they belong.*

In the above excerpts, participants highlighted that resilience building is crucial in helping children face the world and overcome life's difficulties. By instilling resilience, children are empowered to believe in themselves and their ability to achieve their goals, no matter the obstacles they face. Resilience provides a coping mechanism that allows children to navigate adversity with hope, knowing they can overcome any challenge. Resilience building also plays a vital role in equipping children with the tools they will need not only for their well-being but to pass on to their future children as well. When children lack resilience, they can feel lost, alone, and susceptible to mental health issues like anxiety and depression. However, by fostering resilience, children feel loved, and supported, and a sense of belonging, setting them up for success throughout their lives.

The findings concur with Mohammadinia *et al.* (2018:1479584), who found that resilient children experience quick mental recovery and also demonstrate high levels of self-care, positive self-esteem, kindness, empathy and sensitivity towards others' well-being. Resilient children and youth see solutions rather than problems. Lockhart (2020) also stated that resilient children and youth also possess strong emotional regulation skills, allowing them to manage and express their emotions in healthy and constructive ways. Cahill *et al.* (2014:2020) agreed with Lockhart and stated that resilience-building in children and youth is important as it promotes social and emotional competency. Resilient children and youth can effectively regulate their emotions, lowering the likelihood of experiencing mental health problems like depression and anxiety. When children and youth are emotionally and socially competent, they can give their best.

4.4.1.4 Sub-theme 3: Promotes positive coping skills

When young people develop resilience-building skills they can navigate the challenges and stressors they encounter in their lives. Being resilient also enables them to maintain a sense of well-being and they can succeed in various other aspects of their lives such as academically, socially and emotionally. They are also equipped with positive coping skills such as emotional regulation as resilient individuals are better at regulating their emotions which helps them to stay calm and focused during stressful situations. Being resilient can also boost self-confidence and self-efficacy. This ability can help a young person take active steps to cope with challenges rather than feeling helpless. Positive coping skills are evidenced in the excerpts below:

P5: *Resilience building plays an important role in equipping children with a coping mechanism that helps them face difficult life challenges. It also helps them become independent and it's a tool they will need to instil in their children one day.*

P3: *Many of the children have turned to sport as a coping mechanism and I must say they are quite good at it. They use sports to de-stress and cope with life challenges.*

P20: *One thing I have learnt about young people is that they need constant support and the ones we live with here are no different. When they first get here, we are strangers to them and then relationships are formed. These relationships are*

therapeutic and allow young people to approach us if they have problems. This prevents self-isolation and boosts their confidence.

The above-mentioned excerpts highlight the crucial role of resilience building in equipping children with essential coping mechanisms to navigate life's challenges. Resilience enables children to develop independence and the capacity to instil these valuable skills in their children later on. The data reveals that many young people have turned to sports as an effective coping strategy, allowing them to de-stress and manage the difficulties they face. This emphasises the importance of providing young people with constructive outlets to channel their energy and emotions healthily.

Furthermore, the participants highlighted the significance of offering constant support and developing therapeutic relationships for young people. Participants shared that when the children first arrive at the centre, they are strangers to them, but over time, these relationships become vital in providing a safe space for the young people to approach and confide in when facing problems. Participants highlighted that this helps prevent self-isolation and boosts their confidence, which are crucial factors in promoting their overall well-being and personal development.

Ultimately, these excerpts highlight the multifaceted approach required to support young people, encompassing the development of resilience, the incorporation of sports and other constructive coping strategies, as well as the provision of constant support and therapeutic relationships. These elements work in tandem to empower young people, enable them to navigate life's obstacles, and cultivate the skills and confidence necessary for their long-term well-being and success.

According to Bemis (2020), there are several coping skills that can promote resilience in children and youth such as healthy thinking, wellness and finding a sense of meaning and purpose. Healthy thinking has more to do with acknowledging and accepting one's thoughts and emotions during times of adversity. Often when faced with adversity a million things go through one's head, but it is always better to divert negative thoughts to more positive and healthier ones that can help one cope. This can be done by identifying areas of hope or people that make one feel grateful. By doing this, negative thoughts are replaced with more positive ones that change

the focus of one's thinking. Also accepting things which you cannot change, helps you not feel helpless (Bemis 2020).

Martinez (2024) stated that therapeutic relationships such as supportive family or healthy interpersonal relationships are assets to be fostered as they instil resilience. According to Frydenberg (2018), resilience is a dynamic process influenced by various protective factors, including education, emotional competence, optimism and social support.

4.4.1.5 Sub-theme 4: Ensuring academic success

Building resilience can help ensure academic success in children and young people for several reasons. The first reason is that it helps children and young people overcome challenges, as resilient children are better equipped to handle the setbacks and challenges that are part of academic life. Academic environments can also be stressful due to examinations, assignments and social dynamics. When children or young people are resilient, they can manage stress effectively and maintain their mental and emotional well-being. Resilience fosters a sense of determination and perseverance. When young people are resilient, they are more likely to stick with their studies even when things are tough. In addition, when young people are resilient, they tend to have a more positive outlook in life and this positive attitude can enhance motivation and engagement with academic tasks which contributes to better academic performance. A few participants agreed with this as evidenced in the responses below:

P16: *We have children here who were very weak academically and also had no hope for their future. They would often say that they had nothing to live for, one in particular often said he didn't care if we accepted him or not because his mother did not love him enough to want to keep him. You would be surprised to see that boy today. I have had the privilege to attend two of his award ceremonies at his school. He is doing so well and if it was not for our continuous encouragement and instilling resilience in him maybe he would not have such a promising future today.*

P7: *I have noticed that when we instil resilience in the young people, we work with they tend to thrive in various aspects of their lives. I have witnessed a few thrive academically and change their lives. When I motivate the children, I work with now, I like to refer to a child I worked with a few years ago who is now a nurse. She was*

resilient and persevered and fulfilled her dreams. Hearing this kind of story can be encouraging for young people and it encourages them to thrive academically and make something of themselves.

P11: *I always tell the children that their future is in their hands, I can be there for them and provide support but I cannot study or write their test for them so it is up to them to push themselves so they can achieve good grades and become something in life. I also tell them that education is the key that can open many doors for them and it is something no one can take away from them. They just need to persevere and stay focused this is how I encourage them to strive for more.*

P18: *I always encourage the children to focus on their schoolwork. This is why homework time is important. However, there are challenges as there are children who don't enjoy school and sometimes, they bunk classes. We have to work closely with them and try to get them to a place where they see the value in attending school.*

The above excerpts emphasise the participants' thoughtful and empowering approaches to helping children take personal responsibility for their success. Participants encourage the children to push themselves, stay focused, and recognise the immense value and life-changing potential of education as a pathway to a brighter, more prosperous future. However, the participants also acknowledge the significant challenges they face in motivating children who do not inherently enjoy the academic environment and the critical importance of working closely with these individuals to help them understand and internalise the crucial importance of attending school and engaging with their studies.

Overall, the data highlights the truly transformative and life-altering impact that instilling resilience can have on children's academic performance, personal development, and prospects. The data further highlighted the crucial role that dedicated child and youth care workers can play in supporting and empowering young people to overcome even the most daunting obstacles and unlock their full potential for success

Fullerton *et al* (2021: 2) stated that academic success can provide children with valuable skills and resources to navigate challenges and setbacks. This can be achieved by fostering a sense of competence and mastery. Children who perform

well in school are more likely to develop confidence in their abilities which is beneficial for their self-image. They also acquire good critical thinking and problem-solving skills that can be applied in various life situations. Academic environments also expose children to diverse experiences and learning opportunities teaching them how to adapt. Adaptable individuals can adjust to changing circumstances and setbacks more effectively. Furthermore, Anakwe and Dikko (2018:95) suggested that social and emotional learning can assist young people develop skills and behaviours needed for a healthy lifestyle. They further stated that schools can also foster resilience through the use of peer mentoring which can improve academic performance among children and young people.

4.4.2 THEME 3: CHALLENGES FACED BY CHILD AND YOUTH CARE WORKERS WHEN BUILDING RESILIENCE IN COMMUNITY-BASED CARE

Theme 3 involves understanding some of the challenges faced by participants when building children's resilience who are in community-based care. The sub-themes that emerged include difficulty building rapport, lack of participation, negative peer influence, and a lack of services parental and community support.

4.4.3.1 Sub-theme 1: Difficulty building rapport

Building rapport with children and young people can be difficult. Very often children find it difficult to talk about what they are feeling or going through even with their parents or guardians. Common challenges include a lack of trust and finding the right people to talk to. Caregivers and parents need to be approachable and empathetic. It is also important for the child and youth care worker to use the self as a tool and also share personal experiences to relate with children and young people. Many of the participants expressed that they had difficulty building rapport with the young people they worked with. They stated:

P12: *It can be difficult to build a relationship with the young people we work with and this is because they often feel misunderstood. I have been using myself as a tool to build a relationship with them. I relate with the children a lot because I am also coming from a very difficult background and I have faced a lot of adversities. I often talk to them about some of the challenges I have faced and how I have overcome them. This has helped us build trust in one another and the children open up to me*

and start sharing things that they are going through but this does not come easy and often the children do not want to open up to us.

P13: *Often when trying to build resilience and a relationship with the children we work with they tend to fight us. They resist our help and it takes time for them to open up to us. The relationship often requires a lot of nurturing from our side.*

P18: *Some children are harder to get through too and they are often very dismissive to us making building a connection with them hard. I vividly remember one telling me to stop forcing things I am not his mother. I remember feeling so hurt and broken but I quickly had to let that go and remember that when people are hurting, they tend to say hurtful things.*

The participants described the children as often feeling misunderstood, resistant, and dismissive, making it difficult to connect with them. However, the participants also shared strategies they have used, such as relating their own experiences of adversity and nurturing the relationship over time. Despite the difficulties, they expressed the importance of persevering and not taking the children's hurtful words personally, as they understand that people who are hurting, tend to lash out. Overall, the excerpts highlight the delicate and rewarding nature of the work in supporting vulnerable youth to build resilience.

These findings concur with Engle, Castle and Menon (2016: 621), who stated that children who grow up in poverty and instability are still able to succeed provided that they have a healthy relationship with at least one adult particularly a parent or a caregiver. When the caregiver provides unrestricted positive attention then the child is often motivated and encouraged to overcome challenges. It is also possible for children and youth to seek encouragement from friends, teachers, child and youth care workers, social workers and the community due to the lack of support they receive from parents. Children and youth overcome adversities and excel in life through positive reinforcement and support from parents and guardians. According to Hawang *et al.* (2023: 237) resilience is closely linked to the growth of social and emotional skills in young people, enabling them to effectively combine thoughts, emotions, and actions for positive personal and interpersonal interactions. These capabilities serve as protective and supportive elements that lower risk factors and promote well-being, ultimately strengthening resilience.

4.4.3.2 Sub-theme 2: Lack of participation and negative peer influence

Negative peer influence and lack of participation in interventions and activities from young people can be a significant disadvantage as this is a missed opportunity to learn something that can be beneficial to them. It can also reduce the impact and effectiveness of the activity or intervention. In addition, when young people do not participate fully in an activity it can affect their morale and decrease the motivation of others and the child and youth care worker conducting the activity. Some of the participants expressed that lack of participation from the children and young people affects how they can build resilience effectively as evidenced below:

P6: *I have had one or two children negatively influence the effectiveness of my activities by trying to disrupt the others who are participating. I then have to call them to the side and ask them to stop or to sit it out.*

P8: *Some children do not want to participate in the activities we plan. They may disrupt the session by opening the television while I am speaking to them or even start their conversations in the midst of the activity. I often have to reprimand or discipline them sometimes it works, and sometimes it does not.*

P10: *Sometimes building resilience and conducting activities can be hard because when the children do not want to participate, they can be very disrespectful. Sometimes I am forced to cut my intervention or programme short and sometimes I have to remove myself from the situation and walk away. They have said some hurtful things to me in the past and walking away helps me to recuperate. I often tell them I need a time out and we will continue when we have all calmed down.*

In the above excerpts, participants mentioned how some children can negatively influence group activities by being disruptive, refusing to participate, and disrupting the session. The participants then have to intervene, reprimand or discipline the children, which is not always effective. Participants further highlighted the challenges of building resilience when children are uncooperative and disrespectful. This can force participants to cut short their intervention or remove themselves from the situation temporarily, to regain composure. Despite these difficulties, the participants emphasised the importance of maintaining composure and continuing the activities when everyone has calmed down.

Often when children feel ignored or lack a sense of belonging and trusting relationships, they tend to misbehave or end up feeling depressed. Children and youth need to have people they can trust, open up to and depend on otherwise they turn to negative behaviours or may be influenced negatively by peers. They need reassurance and support in order to fully thrive in various aspects of their lives (Grummitt *et al.* 2022).

However, Watson (2019:6) disagreed with the above statement and stated that peers can provide emotional, social, or informational assistance to individuals who share similar experiences or backgrounds. This type of support is often offered by peers who can offer empathy, understanding, and practical advice based on their own experiences. There are several benefits of peer support especially for youth at risk who feel alone and hopeless. Peer support allows children who are facing similar experiences to come together and share insights and understanding. There is a sense of connection and reliability that is also fostered. Thus, the power of peer positive support needs to be harnessed.

4.4.3.3 Sub-theme 3: Lack of services

The absence of essential and basic services in impoverished communities continues to affect and have a significant negative impact on how children and young people thrive. Lack of access to clean water, proper sanitation, quality healthcare, and educational opportunities severely impacts children's physical, cognitive, social and emotional development. There is an urgent need for collaborative action by the government, communities and organisations to enhance infrastructure and ensure that all children have access to important resources, which will help improve their resilience. When children have access to their basic needs, they may feel empowered and encouraged to overcome adversities, but if they do not, they may feel demotivated and discouraged by their circumstances. Participants had the following to say about the lack of services:

P15: *We have no running water in our centre, we have one Jojo tank which we share with the old age home. Sometimes we run out of water and have to depend on the Water-kan, which may take days and children have to miss out on school. Often when there is no water, I am unable to do the laundry, particularly their uniforms*

which I have to hand wash and I take care of about fifteen boys aged between five years old and thirteen years old.

P17: *It would be nice if our children had access to computers and an internet connection here at the centre. They often use our cell phones and data because many of them do not have cell phones to do research for their school work. Sometimes they are not all able to gather the information they need as there are not enough cell phones and sometimes, we don't have enough data for them to use the internet. This is often very discouraging to them and it even affects their marks. Some do not even want to go to school when they have not completed a task. They say what is the point of going when they have nothing to present, they know they have already failed anyway.*

P19: *We lack resources such as computers and printers. We live in a technological world where children are now expected to do some school work at home. So, because the children here do not have access to computers, printers and Wi-Fi they are demotivated and not very hopeful about their future. Having access to these resources can also help them in school because we do have very capable children here with great potential.*

The above excerpts highlight the challenges faced by participants in providing basic resources for the children in their care. The lack of running water and access to technology, such as computers and the internet, creates significant barriers to the children's education and overall well-being. Without reliable access to water, the participants struggle to maintain basic hygiene and laundry needs. Additionally, the absence of technology hampers the children's ability to complete their schoolwork and research. This lack of resources leads to feelings of discouragement, demotivation, and hopelessness among the children, ultimately impacting their academic performance and prospects. The excerpts also emphasise the importance of addressing these resource gaps to support the children's development and help them realise their true potential.

Tshishonga (2019:167) asserted that poverty and poor economic conditions have been prevalent in South Africa since the beginning of the apartheid era as the policies that were set in place disadvantaged non-white populations. However, despite progress being made since the end of apartheid in 1994, many South

Africans still struggle with unemployment, poverty and inequality. According to Schotte and Zizzamia (2023:1), education disparities have led to unequal access to quality education. Disadvantaged communities lack proper educational infrastructure and resources.

4.4.3.4. Sub-theme 4: Lack of parental and community support

Parental and community support are critical in building resilience in children and young people. This is because parents and community members provide emotional stability, security, and a sense of belonging which is essential for children to feel safe and secure. This support helps children develop good self-esteem and confidence. Overall parental and community support help create an environment that fosters resilience by providing stability, a nurturing environment, and opportunities for positive development even in the face of adversity. Participants stated the following:

P8: *We have children coming from different backgrounds in this centre, some of them are unfortunately orphaned, and others still have parents or even family members but once they are here, they do not hear from them. We do allow visitation but very few come to see the children. It is very sad and I know it takes a toll on them and affects them negatively.*

P11: *When it comes to support, we do not get a lot of support from the community. We live in the heart of Inanda yet many of our donations and volunteers come from outside our community. Our centre is located in the centre of Inanda township but we do not engage in any community activities. This does negatively impact the children because they lack a sense of belonging to the broader community. It would be nice if we got to do more activities with the community.*

P19: *Very few of the children get visits from family members. The family set-up they get is here in the centre. The only community members the children see are the ones who attend a local church inside the premises.*

In the above excerpts, participants mentioned that the children come from diverse backgrounds, with some being orphaned and others still having parents or family members, but often lack consistent contact and visitation from their loved ones. This lack of connection and support takes a toll on the children and affects them negatively, hindering resilience building. Furthermore, a participant mentioned that they do not receive much support from the local community, despite being located in

the heart of Inanda township. The majority of the centre's donations and volunteers come from outside the community, and the centre does not actively engage with the community. This lack of community involvement negatively impacts the children, as they lack a sense of belonging within the broader community. Participants shared that it would be beneficial if there could be an increase in community engagement and activities to foster a stronger sense of belonging for the children which would also facilitate resilience building.

Children and youth have fewer opportunities to share experiences and receive advice from others, which can impact resilience. Masten and Motti-Stefanidi (2020) emphasised that children and young people rely not only on the strength of families and schools but also on the resilience of their communities. Communities play a vital role in contributing to the social and economic well-being of children and families. Furthermore, Osterling and Hines (2006:242) highlighted that communities provide support to religious organisations and events, in addition to coordinating community celebrations. Various strategies and practices, such as mentorship programmes, youth centres, safe spaces, community involvement, crisis response and support and education, and life skills workshops, can be implemented to foster resilience.

In addition, according to Steiner and Meador (2023:127), the livelihood of communities around the world is currently under transformation. These transformations amplify cultural, social, environmental, and economic vulnerabilities. Communities with well-established networks are often more successful in achieving their goals than communities that lack a network and a sense of togetherness. Many communities are currently negatively affected by incomplete projects by the government this has negatively impacted the communities' perception of resilience and has left them feeling hopeless (Steiner and Meador 2023:127).

4.4.4 THEME 4: EFFECTIVE RESILIENCE BUILDING STRATEGIES

Theme 4 looks at some of the most effective resilience-building strategies used by the participants in community-based care. The sub-themes that emerged include affirmations and teaching self-care, communication with young people, participation in sports and recreation activities and using the strength-based approach.

4.4.4.1. Sub-Theme 1: Affirmations and teaching self-care

Roy (2024) noted that affirmations are positive and empowering statements used to counter negative or self-limiting thoughts. They aim to build self-assurance, alleviate stress, and boost motivation by replacing doubts and fears with constructive, uplifting language. The premise is that regularly repeating these affirmations can shape one's subconscious mind, cultivating a more optimistic and empowered perspective over time. On the other hand, self-care is the practice of deliberately caring for your physical, emotional, mental, and spiritual well-being. It involves activities that can help recharge, reduce stress, and maintain balance in your life, enabling you to function at your best (Bronee 2022).

Affirmations and self-care practices contribute to resilience by fostering a positive mindset and enhancing the overall well-being of an individual. Affirmations help cultivate a positive outlook on life by reinforcing constructive thoughts and beliefs. This shift in mindset can improve one's ability to cope with adversity. Regularly repeating affirmations can also strengthen one's self-esteem and self-confidence making facing challenges easier. Lastly, affirmations provide focus and clarity, particularly on goals and values which help a child or young person have a sense of direction and purpose. In addition, teaching self-care such as meditation, journaling, and exercise just to name a few, can help decrease stress and improve emotional regulation. Taking care of one's emotional, physical, social, and spiritual well-being is important, especially for children and young people who are still developing and getting to know and understand themselves. It also helps them to be self-aware and they can recognise and address their needs and feelings appropriately. The participants stated the following about affirmations and teaching self-care:

P16: *I have an activity I do with the children I take care of and it involves having them stick affirmations on their cupboards that they can look at and read as they get ready for school every morning. I want them to leave the centre feeling empowered, supported and loved. I usually have them write the affirmations out when they first arrive on my floor and I think it helps them have a more positive outlook on life. I also encourage them to be kinder towards themselves and to be self-motivated because they are capable.*

P18: *One of the strategies I use to get the children to release what they may be feeling inside is journaling. I encourage them to journal how their days go as this can help release stress. Often, they have a difficult time opening up to us so if we get them to at least write it down and assure them that we will be here when they are ready to talk about it has helped. I believe journaling also helps them be more self-aware of their triggers and things they like and appreciate.*

P6: *I encourage the children to set time aside each day to relax and reflect. This time is often helpful for them because it allows them to be calm and listen to their thoughts and feelings. By taking a brief break from their usual activities, the children can recharge and refocus their energy.*

The above-mentioned excerpts underline the crucial role of diverse strategies in nurturing children's emotional well-being and fostering self-care practices. The activities described include having children write and display personalised affirmations, which can instil a sense of empowerment, positivity, and a strengthened self-concept. Encouraging journaling is a valuable tool for self-expression, helping children to release stress, process their emotions, and enhance their self-awareness by reflecting on their experiences and feelings. Additionally, participants noted that providing dedicated time for relaxation and introspection allows children to recharge, refocus their energy, and cultivate a deeper understanding of their inner selves and personal needs. By skilfully integrating these complementary approaches, the child and youth care workers demonstrate a holistic, multifaceted approach to supporting the children's social-emotional development, resilience, and overall well-being. This comprehensive strategy empowers the children to develop self-regulatory skills, foster self-acceptance, and cultivate a positive, proactive mindset to navigate life's challenges.

The above excerpts are supported by Kardell (2024) who stated that affirmations can help boost self-confidence in young people. Regularly repeating positive affirmations can empower young individuals to replace self-doubt with self-belief, leading them to have greater confidence in their abilities. The act of purposefully acknowledging and affirming one's positive attributes, capabilities, and inherent worth can profoundly shape an individual's self-perception, fostering a more favourable and empowered outlook that translates into enhanced self-esteem and a deeper, more grounded

sense of self-worth. Noble (2023) reiterated this by stating that self-care can help improve one's confidence and self-belief as one begins to thrive. Self-confidence and living life with more meaning prevent one from planting seeds of self-doubt and enable one to bounce back and recover quickly from challenges and setbacks. Developing resilience through self-care practices can help maintain a positive outlook and assist one to continue moving forward, even in the face of difficulties.

4.4.4.2. Sub-Theme 2: Communication with young people

Communication is crucial when building resilience in children and young people. It provides a safe space for young people to express their feelings and concerns and this helps them feel understood and supported. Communication plays a vital role in discussing challenges and brainstorming solutions together, which allows for critical thinking and problem-solving skills. It also helps build trust and rapport, enabling young people to seek help from their caregivers when needed. Through communication, constructive feedback can be offered, which can enhance a young person's self-esteem and motivation. Furthermore, conversations about managing stress and overcoming adversity can introduce young people to effective coping strategies and techniques for building resilience. The participants mentioned several communication strategies they use that effectively promote resilience in the children and young people they work with. These strategies are discussed below.

Individual sessions

P3: *Sometimes a strategy that works best is speaking to the child one-on-one, which means removing them from the others and just getting to know them and finding out what they are going through. Because we take care of so many children it is easy to have some children just lost in the numbers and some children are super shy and may avoid group activities. So, what I do with my group is I try to have one-on-ones just to find out how they are doing every few months. However, because we work on a shift schedule, I do have an open-door policy when I am on duty, so they are allowed to come to see me if they want to chat. When I am off, I tell them that they are allowed to slide a note under my door requesting to speak to me and I usually attend to them the following day when I am on duty.*

P7: *I build resilience by engaging in one-on-one conversations with the girls I take care of. Because I live with them sometimes it is easy to see when they are going*

through something because often their behaviour changes. Once I see this, I then call them in just to find out what is happening. Sometimes it is something minor like not doing well in a test, sometimes it is something in their past that has triggered them. I often use these opportunities to instil resilience.

The above excerpts emphasise the significance of one-on-one conversations with children in care to better understand their needs and support their resilience. Participants noted the importance of setting aside time for individual check-ins every few months and maintaining an open-door policy that allows children to request meetings whenever they feel it is necessary. Additionally, participants mentioned that living with the children enables them to observe when a child is experiencing difficulties. In such situations, they bring they bring the child in for a one-on-one conversation. Participants stated that these opportunities are valuable for providing personalised support and helping to build the child's resilience, whether the issue is something minor, like a poor test score, or more significant, related to the child's past. These excerpts emphasise the importance that child and youth care workers place on establishing meaningful individual connections with the children in their care.

Li *et al.* (2021:1) defined social support as the assistance available to a person through connections with others, including individuals, groups, and the wider community. Having someone who is trustworthy and one can easily talk to about their feelings can help ease the feeling of anxiousness. Children often do not know how to express their feelings but having someone there who constantly checks up on them and is consistent can help them open up and share their feelings about things that bother them (Howard and Hughes 2012).

Open circles

P13: *Here at the centre, we have something called open circles, where we meet every week, we group the children in age-appropriate groups and we discuss topics that are relevant to them or let them come up with topics to discuss. This helps us see how they view the world but also, they become teachable moments where we share our own experiences and advice. This usually goes well and the children share their thoughts and ideas.*

P15: *We do open circles and we talk about relevant topics. Sometimes we have the social worker present, which is also nice because often in these meetings the children come up with solutions to problems they are experiencing or suggestions for some of the challenges they are facing and how they would like us to assist them.*

The above excerpts show that participants use "open circles" to build resilience. In open circles, children are grouped by age and engage in discussions on relevant topics, either proposed by the staff or initiated by the children themselves. This approach allows the child and youth care workers to gain insight into the children's perspectives and create teachable moments where they can share their own experiences and advice. The open circle discussions typically go well, with the children actively sharing their thoughts and ideas. Open circles are seen as a tool to empower children, build resilience, and create spaces for them to voice their experiences and perspectives. Additionally, the social worker will sometimes participate in these meetings, which provides an opportunity for the children to suggest solutions to the challenges they are facing and request assistance from the rest of the staff and management.

Lustick *et al.* (2020:89) highlighted the use of open circle discussions as an approach to support children in navigating complex experiences. In these age-appropriate group settings, child and youth care workers gain valuable insights into the children's viewpoints and can offer guidance and advice. Furthermore, the group discussion format empowers children to process their emotions and develop coping strategies, even if immediate behavioural changes are not readily apparent. In addition, Jarvenoja *et al* (2020: 101090) suggested that open circle discussions can encourage emotional expression in young people especially if they find it to be a safe space to express their feelings and experiences.

Role plays and Skits

P2: *I have a group I formed when I got here and I do skits and Zulu dance with those children. I usually have the children act out current and relevant scenarios, which they enjoy. Through these skits, we have been able to build some strong bonds and also it helps keep them busy and out of trouble. I have noticed how some of their behaviours have changed from when they first started and this to me shows that what I do does help build them up.*

P14: *We do role plays with the children where we draw different scenarios out of a box and have the children act it out and come up with solutions to the problems in the scenarios. This opportunity allows them to share ideas and also equips them with problem-solving skills which they can apply to real-life situations they may face.*

In the above excerpts, participants expressed they use engaging educational activities that allow children to explore relevant scenarios and develop important skills. One participant described leading a group that performs Zulu dances and skits, which have helped build strong bonds and keep the children occupied in positive ways. Another participant outlined doing role-play activities where children act out scenarios and propose solutions, giving them opportunities to share ideas and develop problem-solving abilities. Both excerpts highlight how these interactive, hands-on approaches have fostered positive changes in the children's behaviours and equipped them with valuable life skills.

According to Abuku (2021) one of the primary benefits of using role plays and skits with children is the opportunity they provide for children and young people to practice and develop important behavioural and social skills. Through the act of assuming different characters and perspectives, young people can learn to empathize with others. Role-playing is a suitable method to develop young people's communication skills. When children or young people engage in role-playing, it helps to develop their problem-solving skills and also teaches them to regulate their emotions. Singh *et al.* (2020: 113429) stated that when young people are allowed to role-play skits or plays, they not only learn to understand the mentality and perspectives of the characters but also develop skills and the ability to make critical judgments. Thus, role-playing allows young people to practice their interpersonal and decision-making abilities in a safe, simulated environment, which can translate to improved real-world communication and social skills.

Peer support groups

P1: *Peer support groups have been effective in our centre especially when it comes to the older children helping the younger ones. They often love taking up that role and responsibility to help the younger ones who are new settle. They often offer advice and share their experiences with them.*

P19: *We have floor representatives that the children can go to if they have problems. The children on each floor also meet regularly to just talk about issues that they face, as the adults are not present because we know that sometimes they don't open up easily when we are around but we do encourage the young people to come to us if they need help solving a problem. However, this opportunity allows them to support each other and help one another come up with solutions to some of the challenges they face.*

The above excerpts state that peer support groups have been effective in one centre, with older children helping younger ones and the new ones settling in. The children offer advice and share their experiences. Additionally, a participant mentioned that the centre has floor representatives that the children can approach with problems. The children on each floor also meet regularly to discuss issues they face, without the presence of adults, as the children may not open up easily when adults are around. However, the children are encouraged to come to the adults if they need help solving problems. This peer-to-peer support allows the children to support each other and collaborate on solutions to challenges they all face.

According to Farkas and Boevink (2018:222), peer support groups are now widely recognised as a central component of the behavioural healthcare system in countries such as the United States and Canada. There is an internationally growing trend to adopt and integrate peer support groups within mental health service delivery as well. Peer support groups are effective in facilitating personal recovery from mental illness, as they are based on principles of mutuality, empowerment, hope, and advocacy (Jenkins *et al.* 2020:1085). Peer support can be provided throughout the treatment and recovery process to help individuals develop long-term resilience and sustain their mental health gains.

According to Shalaby and Agyapong (2020:15572), peers can also provide a level of empathy and understanding that comes from first-hand experience, this can create a safe and non-judgemental space for children and youth where they can express themselves freely. It also promotes role modelling as children and youth are able to speak to peers who have successfully navigated through difficult challenges and overcome them. Their experiences can inspire hope and confidence in others facing similar challenges. Many children and youth tend to isolate themselves during

challenging times, however, peer support reduces the risk of isolation as it creates a sense of belonging.

4.4.4.3. Sub-Theme 3: Participation in sports and recreational activities

Participating in sports and recreational activities offers many benefits that contribute to the physical, mental and social well-being of young people. The benefits are achieved through regular participation in sports and recreational activities which helps young people make friends and teaches them important social skills. Being part of a team also contributes to a sense of belonging and the children or young people can form strong support systems. Participating in these activities also decreases stress and improves their mood which means feelings of anxiety and depression. The participants stated the following:

P17: *We use games like netball with the girls and soccer with the boys which they love. Sometimes when we play these games, they help us understand what is happening with the child. The games allow us to bond as sometimes the children may act out while on the field. Once we see this then we can intervene and try to find out what is going on.*

P8: *Our children here love to play sports so we use that to also instil resilience in them. We play Indigenous games like donkey, shumpu, and also netball and soccer. I think that for them it's also a stress reliever and it helps them just be children and get their mind off of some of the challenges they are going through.*

P20: *I take care of the younger age group and we often like to sing and dance together. I also often take them outside and sit on the lawn and tell them folktales which they enjoy and it also allows me to teach them important life lessons.*

The participants reported using sports, folktales, and games, both indigenous and popular, as a way to build resilience in the children in their care. These activities allow the caregivers to bond with the children and gain insight into their emotional states, as the children may act out during the games. The caregivers can intervene to address any underlying issues that the children are facing.

.Additionally, participants noted that engaging in sports, dancing, and games can offer children a stress-relieving outlet, allowing them to momentarily escape their challenges and simply enjoy being children. According to King et al. (2021:42),

participation in sports or cultural activities provides young people the opportunity to explore their interests and passions. Engaging in these activities helps children and youth develop skills that enhance their sense of competence and capability. Furthermore, it promotes teamwork and social skills as children learn to build positive relationships and interact with others. These supportive structures offer encouragement, guidance, and a sense of belonging, all of which contribute to resilience in the children and youth.

Furthermore, Winstone *et al.* (2022:81) highlighted that children and youth participation in extracurricular activities can positively impact their development as well as create a sense of community. However individual characteristics such as sociability can also play a role in children and youth choosing to participate in these activities or not. Not all children and youth benefit equally from participating in extracurricular activities, so centres must provide a variety of opportunities that are accessible to a wide range of children. This can help promote equity in the participation of extracurricular activities.

4.4.4.4. Sub-Theme 4: Using the strength-based approach

A strength-based approach focuses on identifying an individual's strengths rather than concentrating on their weaknesses. The strength-based approach fosters resilience by recognising and valuing young people's strengths which can boost their self-esteem and empower them to take control of their circumstances. When one focuses on their existing strengths, they can utilise those skills and address problems. Recognising strength helps set realistic and attainable goals which enhance the likelihood of success and building resilience. This is evidenced by the participant's responses below:

P4: *I like to observe what the children are good at and I like to focus and build on that. I have girls who are good at netball and the others are good at academics. I find that when I encourage them or go watch their games, they are very appreciative. This also helps boost their confidence and feel empowered to continue to excel.*

P9: *Building rapport with the children helps me identify their strengths. Often when the children first arrive, they are reluctant to open up. However, the more time we spend with them, we get to know them and what they like and are good at.*

P15: *One of the resilience-building strategies I use is the strengths-based approach, I focus on what the children are good at and not what they lack. The children here are different and are gifted differently we just need to help them find what they are good at and just nurture that. They like to feel supported and recognized like all children.*

P20: *Sometimes the best way to boost a child's confidence it is by praising and clapping for them when they are doing well. Some children like sports and others are good at academics. There is one child who loves modelling and when we have our end-of-year talent show I always encourage her to participate and showcase her talent.*

The above excerpts provide a detailed exploration of the importance of a strength-based approach when working with children. The participants emphasised the value of observing and focusing on the children's strengths, rather than their weaknesses. They highlighted that building rapport and getting to know the children helps identify their unique talents, which may lie in areas such as sports, academics, or other domains.

The participants shared specific strategies they employ, such as praising and encouraging children. They noted that this approach boosts the children's confidence and empowers them to continue excelling in their areas of strength. The excerpts underlined the holistic benefits of a strength-based perspective, which supports and nurtures the overall development of the children. Overall, the data offered a comprehensive understanding of how a strength-based approach can be effectively implemented in child and youth care settings. The participant's insights demonstrate the transformative potential of this approach in fostering children's growth and enabling them to thrive.

According to Caiels *et al* (2021: 401), community workers have successfully utilised the strength-based approach to empower young people by focusing on their strengths, motivating them to identify areas of talent such as sports that they can pursue, as potential careers. By focusing on what children and youth are good at, positive self-perception is fostered, this means young people have a positive self-image allowing them to face challenges with confidence. Their problem-solving skills are also enhanced which means that they can apply different solutions to different

situations. Building on strengths also contributes to the emotional well-being of children and youth as they can regulate their emotions and manage stress. Lastly, strength-based approaches often involve collaboration and teamwork. This contributes to a supportive network as it allows children and youth to know their strengths and appreciate those of others thereby enhancing interpersonal relationships (Caiels *et al* 2021: 401).

According to Van Hook (2019), positive psychology has significantly influenced the way people thrive. This branch of psychology emphasises not fixing what is wrong with individuals, but rather nurturing and enhancing what is right within them. In the context of resilience, the strength-based approach recognises that individuals possess inherent strengths that can be utilised to overcome adversity. When child and youth care workers emphasise and build on these strengths that children and youth already possess, young people will then have better coping skills, they will feel empowered, supportive relationships will form and children and youth will become more resilient.

4.4.4.5. Sub-Theme 5: Spirituality

Spirituality can be a significant factor in building resilience for several reasons. It gives the person a sense of purpose and meaning and motivates them during times of difficulty. Spiritual people have associated their comebacks in life with a higher power. Spiritual beliefs and practices can also offer emotional comfort and solace which can help manage stress and anxiety and in turn, build resilience. Through spirituality, young people may gain community and social support, which also offers a sense of belonging. Lastly, resilience is an internal feeling and spirituality fosters this as it cultivates inner strength, peace, hope and optimism which all go hand in hand with resilience. In light of this, participants stated the following:

P20: *I usually teach and encourage the children to pray especially when they feel overwhelmed. We usually start by singing gospel songs and then prayer follows after. I know that this works because when I am running late for our sessions, they come to remind me that we have not sung or prayed. It is always good to see them take initiative.*

P1: *We are fortunate that our centre is a community on its own and this is because we have the old age home here but also a Shembe church within the centre. This*

was done so the elderly would not have to travel far to attend services. So, the children also attend every Saturday and this is an opportunity for them to grow spiritually. We sometimes have members from surrounding churches that come as well and they teach them how to pray and about forgiveness, loving your neighbour and doing the right thing. This also builds resilience and gives them hope.

P13: *I teach the children I work with about spirituality and how my belief in a higher power has helped me overcome challenges in my life. I teach them how to pray and because they are young, I teach them the Lord's prayer which they say every night before bed and then I ask them to thank God for one thing that they are thankful for. This is how I build resilience because I want them to know that when life gets tough sometimes, they just need to kneel and pray.*

P18: *We attend a local church with the children every Sunday. We were fortunate to have the church provide transport which helps us transport the children to and fro, on Sundays.*

The above excerpts show how the participants working in community-based care integrate spiritual resources, such as an on-site Shembe church and attending surrounding churches, to help build resilience among the children. Participants also described teaching the children about prayer and gratitude, which are seen as crucial tools for overcoming life's challenges. The opportunity for spiritual growth and community support within the centre is valuable in fostering resilience and hope.

According to Aggarwal *et al.* (2023:729) religious and spiritual beliefs can provide a sense of purpose, hope, and community-oriented values in the lives of young people. Additionally, such beliefs may promote positive mental health through mechanisms like moral guidance, coping strategies, and social belonging stemming from shared beliefs. Spirituality has also been identified as a potential health resource, functioning as a 'developmental engine' that promotes the search for connectedness, meaning, and purpose. Research suggests that young people with a strong sense of purpose tend to engage in more positive health behaviours and experience better physical and mental health outcomes (Brooks *et al.* 2018:387).

4.4.5 THEME 5: SUGGESTIONS FOR IMPROVED RESILIENCE BUILDING STRATEGIES

Theme 5 looks at some of the suggestions made by the participants to improve resilience-building strategies in community-based care. The sub-themes that emerged include continuous professional development training and workshops, access to basic resources, access to mental health care for young people, reunification with families, programmes involving the communities and family and mentorship programmes.

4.4.5.1. Sub-Theme 1: Continuous professional development training and workshops for child and youth care workers

There is a need for more professional training and workshops for child and youth care workers. The field of child and youth care field is constantly evolving, and ongoing training is essential for practitioners to stay up-to-date with the latest research and effective practices related to children. New challenges and trends regularly emerge in child and youth care such as cyberbullying, mental health issues, and trauma. So continuous training equips child and youth care workers to handle such issues, effectively.

Training and workshops will also provide opportunities to learn new skills and techniques that can be applied to the work done by child and youth care workers. This can include therapeutic interventions, crisis management and resilience-building strategies. Ongoing professional development can also help child and youth care workers refine their competencies and improve their effectiveness. Lastly, training can help prevent burnout among employees as the nature of child and youth care can be emotionally demanding and stressful. Workshops and trainings can provide self-care strategies and stress management techniques. The participants stated the following:

P3: *I have been a child and youth care worker for many years and I have been working in this centre for many years. The only child and youth care workers I engage with are the ones I work with. It would be nice to meet other child and youth care centres and share ideas that can build us up and help us do our jobs better.*

P10: *We need more training as child and youth care workers. This job is demanding and times are changing so are the children. We need to be up-to-date with some of the things that can help us help the children.*

P18: *I would say we need more workshops and debriefing meetings so I can feel empowered and motivated to do my job more efficiently.*

In the excerpts above, the participants expressed a strong desire to connect with other child and youth care workers beyond their centre. They highlighted the importance of training and professional development opportunities to remain current with the evolving demands of their work and the changing needs of the children they serve. Additionally, the participants highlighted the importance of workshops and debriefing meetings to feel empowered and motivated to perform their roles more efficiently.

According to Collins *et al.* (2020:104569), continuous professional development and training offer numerous benefits such as skills enhancements, as they help child and youth care workers acquire new skills while updating existing ones. Another benefit is increased job satisfaction, which many people struggle with. Learning new things and improving existing skills can lead to greater job satisfaction. Lastly staying updated with the best practices and new methodologies can enhance productivity and performance in child and youth care workers. Grossman and Smalley (2018:234) stated that providing ongoing opportunities for professional growth and skill enhancement can lead to a range of benefits for individuals, teams, organisations, and society as a whole. One key benefit of continuous training is its ability to help child and youth care workers better address the practical challenges they face in the child and youth care centre.

4.4.5.2. Sub-Theme 2: Access to basic resources for children and youth

Access to basic resources can significantly enhance the quality of life for children, young people, families and the community as a whole. When individuals have access to essential resources they can live with dignity, pursue their goals and contribute positively to society. Access to clean water and nutritious food is crucial for preventing diseases and malnutrition, which remain alarmingly high in South African townships. Additionally, Children living in community-based care need access to educational materials and technology, such as internet connection and

computers. This access enables them to receive a quality education and complete their assignments at home. Participants have reported on the importance of access to these basic resources:

P5: *We lack resources that the children need to complete school tasks such as internet connectivity, a computer and a printer. This is very discouraging for the children as they are unable to complete their schoolwork sometimes. It would be great if the government or the Department of Social Development could try to provide these to children's homes as well because we do feel a bit forgotten.*

P4: *I have been working in this centre for over seven years and for as long as I have been here, we have never had running tap water. We depend on a Jojo tank. Because it's one tank used by our children and the old age home we often run out of water. It would be helpful if we had running tap water.*

P2: *Our children need resources that can assist them with school work such as computers, printers and data. We often have to sacrifice our data so that they are able to research stuff on the internet that they need for school. This can be discouraging for them and make them feel demotivated.*

The above excerpts revealed the lack of essential resources which children in these centres need to complete their schoolwork, such as internet connectivity, computers, and printers. The participants expressed their frustration at not having these basic tools, which they feel discourages the children and makes them feel forgotten and neglected by the Department of Social Development. Additionally, the lack of reliable running water is a significant issue, with the centres relying on a single Jojo tank that frequently runs dry, causing further hardship and disruption to the children's daily lives.

The participants expressed that they often have to compromise their own limited data plans to ensure that children can access the internet for their schoolwork. This sacrifice can be demotivating for the children and hinders their ability to fully engage with their education. Overall, the data highlights the urgent need for increased and sustained support and resources from the government or social development department to provide these children's homes with the necessities required for their educational success and to help them reach their full potential. According to Akhir *et al.* (2021:969), individual resilience is closely linked to the resilience of the

community in which they live. The more resources and support that are available within a community, the better young people can cope with the stress of traumatic events.

4.4.5.3. Sub-Theme 3: Access to mental healthcare for young people

Access to mental health care is crucial, as it enables early identification and intervention for mental health issues. Providing support can help prevent the development of more severe problems later in life. Furthermore, mental health significantly affects how children and young people learn and perform academically. When mental health issues are addressed early, it can lead to improved concentration and behaviour, resulting in better academic performance. Additionally, mental healthcare offers children a safe space to express their feelings and concerns, which fosters a sense of stability and security. In light of this participants expressed:

P6: *I think our children and young people need more easily available access to mental health care facilities. Sometimes the children we have here have severe mental health issues and we do not have enough resources and skills to deal with them. Sometimes we have pressing issues and it takes time for the department to get back to us with possible resolutions to the problems.*

P13: *Unfortunately, children in care have limited resources and access to mental health care. We have had children and have one currently who is mentally ill. There is no plan in place for them. They do get their medication and a grant but it ends there. They are not in school either.*

The above excerpts highlighted the limited access to mental health care and resources for children in care. Participants mentioned that the children they work with often have severe mental health issues, but that they lack the resources and skills to support them. Additionally, there are also delays in getting help from the department. Participants further emphasised the lack of comprehensive support, stating that while children get medication and financial assistance, there is no broader plan in place to address their mental health.

Overall, these excerpts point to the pressing need for more accessible and holistic mental health care and support services for vulnerable children in the care system.

Without adequate resources and a comprehensive approach, these children are at risk of falling through the cracks and not receiving the crucial support they require to address their complex mental health needs. Addressing this gap in services is essential to ensuring the well-being and positive development of children in the care system.

Policymakers and service providers must prioritise expanding access to high-quality, multifaceted mental health interventions tailored to the unique challenges faced by this population. This could include increasing funding for mental health professionals, implementing early screening and intervention programmes, and integrating mental health support into broader care plans. By taking a more holistic, proactive approach, the care system can better empower and support children struggling with mental health issues (Osofsky and Osofsky 2018:115).

Javed *et al.* (2021:102) stated that inadequate mental health services and stigma can have negative effects on children as children may go untreated for mental health conditions such as anxiety, depression and ADHD. Children facing stigma may also internalise negative beliefs about themselves and this may lead to feelings of shame and worthlessness which can affect the resilience-building process.

According to Osofsky and Osofsky (2018:115), limited availability and accessibility of mental health services can be a significant obstacle to resilience building, especially in areas with insufficient mental health infrastructure. Many children and youth in townships and rural areas do not have access to mental health services. The stigmatisation of mental health issues can also create barriers to seeking and receiving the necessary mental health support. This can further impact the resilience-building process in children and youth.

4.4.5.4. Sub-Theme 4: Reunification with families

According to Skivenes and Sovig (2019), the United Nations Convention on the Rights of the Child recognises the family as a fundamental group of society and the natural environment which is necessary for all children to grow. Reunification with families is important for children living in children's homes because children thrive in stable and loving relationships. When children are reunited with their families it can provide a sense of belonging and emotional security. However, not all children in the system can be reunited with their families due to reasons such as being orphaned

and abused. Kwong and Yu (2017:2426) stated that reuniting with the immediate or extended family can also reduce feelings of abandonment, loneliness and anxiety. Lastly, prolonged stays in institutional care can have negative effects on children and young people including attachment disorders, developmental delays, and emotional and behavioural issues. Reunification helps mitigate these risks by providing a more nurturing and supportive environment. Reunification does not happen adequately as evidenced in the excerpts below from the participants:

P1: *Unfortunately, we do not have programmes that involve the parents and families of the children or young people we work with. For some of them, they have no living relatives but for others, they have parents and even other family members and it would be beneficial for the children if we had more programmes with their families or if they would visit them more often.*

P5: *We do not have any programmes that involve the families or the community. But it would be nice if we did because maybe it would be helpful to the children. After all, we are all they know.*

P19: *The reunification of children with family is dependent on the circumstances surrounding their admission into the centre. Some children are in the system until they are eighteen and thereafter, they can reunite with families or begin to live their own lives outside the centre.*

The excerpts highlight the lack of programmes that involve the families and communities of children and young people in the care system. While some children have no living relatives, others do have parents and family members. It would be beneficial to have more programmes that engage these families. The participants expressed a strong desire for initiatives that include both families and the community, as many of these children often have no one else to turn to. The possibility of reunifying children with their families depends on the circumstances surrounding their admission to the care centre. Some children remain in the system until they are 18, at which point they may either be with their families or begin independent lives. Overall, the participants suggested a need for more family and community-oriented programmes to support children and young people in the care system as this would also foster resilience building.

According to Bethell *et al* (2019: 279), family resilience and connection, promote positive development, even amid adversity. The study determined that when children have caring adults in their lives and strong family bonds, they tend to prosper regardless of the adversities they face. The research also discovered a significant link between the parent-child bonding aspect of family resilience and scientific evidence emphasising the importance of secure, consistent, and nurturing relationships for optimal child growth. Furthermore, Cacioppo *et al.* (2021:101429) highlighted that a lack of support can significantly affect children in various aspects of their lives., This can lead to emotional distress, as they may often feel lonely. Additionally, these children may develop behavioural issues, including aggression and defiance.

4.4.5.5. Sub-Theme 5: Programmes involving the community and family

Community programmes offer numerous benefits for children living in community-based care such as offering social integration. Through social integration, children can connect with peers and adults outside the home which promotes social inclusion and reduces feelings of isolation. These programmes also provide opportunities for children to develop various skills such as communication, leadership, financial literacy, basic household management and problem-solving which are essential for their personal growth and future success.

Programmes can also offer access to educational resources, recreational activities and health services that might not be available in the home. Lastly, programmes can provide a platform for community members to engage and allow children to interact with positive role models who will provide guidance, mentorship and support. The participants stated:

P9: *We do not do any programmes with the community or with the parents of the young children we have in this centre. I do think that if the children did engage with their families and participated in programmes that allowed them to get closure and attention from their immediate families they would be better behaved.*

P11: *We used to allow the children to do litter clean-ups around the neighbourhood because we understood the importance of involving them in community work. However, we had to stop as the children would misbehave on those outings. They*

would wander off and it would be hard to manage. It would be nice to go back to that as it created a sense of belonging.

P14: *Unfortunately, we do not do any programmes with the community that we are part of. Maybe doing activities would keep the children busy especially over the weekend and school holidays.*

The above excerpts highlighted the importance of engaging children with their families and the local community, but the centre has faced challenges in implementing such programmes. Participants suggested that involving children in family-focused programmes could improve their behaviour, as such programmes could provide the children with much-needed attention and support from their immediate families. Participants also mentioned that the centre previously organised community clean-up activities, which fostered a sense of belonging among the children, but had to discontinue them due to management issues, such as the children wandering off and being difficult to supervise. The participants further expressed regret that the centre does not currently offer any community programmes and suggested that such activities could keep the children occupied and engaged during weekends and school holidays, which are often when they may lack structured activities and positive social interactions.

Overall, the excerpts emphasise the potential benefits of community and family engagement for the children, as these types of programmes could help meet their social, emotional, and developmental needs. However, the centre has also encountered practical difficulties in sustaining these types of programmes, such as managing the children's behaviour and ensuring their safety. A balanced approach that addresses both the needs of the children and the practical constraints faced by the centre, perhaps through increased staffing, better planning, and greater collaboration with families and the community, could help address these challenges and unlock the full potential of community-based programmes for the children in the centre's care.

According to Ayala (2019), communities may offer workshops on life skills, such as providing education on stress management which equips individuals with practical skills to cope with challenges. Life skills workshops also focus on problem-solving techniques, which children and the youth need, as they foster resilience. The

workshops may also teach time management, so individuals learn to balance various responsibilities which will result in maintaining stability. Children and youth can also learn teamwork and effective communication, this contributes to both the personal and professional development of the young person. Participating in workshops exposes them to practical and technical skills which can leave them hopeful about their future. This can positively contribute to the resilience of children and the youth (Ayala 2019).

4.4.5.6. Sub-Theme 6: Mentorship programmes for children and youth

Mentorship programmes for young people offer a range of benefits as they help foster resilience and can impact their lives in positive ways. Mentorship programmes allow for children and young people to have positive role models who can demonstrate constructive behaviours, attitudes and values. Mentors can also offer emotional support which is crucial for young people who are facing challenging circumstances and also assist in reducing engagement in risky behaviours. Positive influences and guidance from mentors, help steer young people towards healthier lifestyle choices. Participants in this study expressed interest in having more mentors coming into community-based settings to help keep children and young people motivated and resilient. They stated the following:

P20: *It would be nice to have mentorship programmes for the children we take care of, especially those mentors who have faced similar circumstances as them. This can help show them that there is hope for them and they can also succeed in life.*

P3: *Our children need other people to look up to, not just us, but unfortunately, they are not exposed to many successful people.*

P15: *I wish the children could get outside encouragement and motivation. They often feel demotivated and as if circumstances won't change. It would be nice if they had access to people that could influence them positively and keep them motivated.*

The participants emphasised the importance of mentorship programmes and exposure to successful role models for the children in their care. They expressed a desire for the children to have access to people who have faced similar circumstances, as this could provide hope and inspiration that success is attainable. The participants also highlighted the need for the children to receive encouragement

and motivation from sources outside their immediate caregivers, as they often feel demotivated and pessimistic about their ability to overcome their circumstances. The participants believed that having positive influences who could motivate the children and help them see the potential for change would be tremendously beneficial.

According to Coyne-Foresi *et al.* (2019:531), establishing mentorship programmes that connect youth with caring adults in the community can foster resilience building in children and youth. These mentors serve as role models and they demonstrate resilience in their own lives. Children who witness resilience are more likely to adopt similar attitudes and behaviours. Mentorship programmes also provide emotional support, as it is important for young people to have a caring adult who listens and encourages the child through challenges. Lastly, they provide guidance in decision-making and problem-solving which will equip children and youth with critical thinking skills and enable them to make informed choices (Coyne-Foresi *et al.* 2019:531).

4.5 CONCLUSION

This chapter presented data that was gathered from participants during the interview process. It looked at how child and youth care workers define resilience, their perspectives on the importance of resilience building, and some challenges they encounter in fostering resilience in the children they support. Additionally, it highlighted effective resilience-building strategies identified by the child and youth care workers, along with suggestions for enhancing resilience-building in community-based child and youth care. The next chapter will conclude the study by summarising the findings, conclusions, limitations and areas for future research.

CHAPTER FIVE: SUMMARY OF FINDINGS AND RECOMMENDATIONS

5.1. INTRODUCTION

The purpose of this study was to explore the significance of fostering resilience in community-based care, identify the specific interventions employed by child and youth care professionals to build children's resilience, investigate the challenges they face when cultivating resilience in a community-based setting, and provide recommendations on enhancing resilience building in community-based care.

Twenty participants took part in this research from two community-based settings in Inanda, Durban. All the participants qualify for child and youth care work and have more than two years of experience working in community-based care.

5.2 SUMMARY OF MAJOR FINDINGS

Table 5.1 Themes and Sub-themes

Theme	Sub-themes
Child and youth care workers' understanding of the term resilience building	2. Encouraging and building children up
The importance of resilience building in child and youth care	5. Facilitating behavioural change 6. Better preparedness for the future 7. Promotes positive coping skills 8. Ensuring academic success
Effective resilience-building strategies	6. Affirmations and teaching self-care 7. Communication with young people -Individual sessions Open circle -Role plays and skits -Peer support groups

	8. Participation in sports and recreational activities 9. Using the strengths-based approach 10. Spirituality
Challenges faced by child and youth care workers when building resilience in community-based care	1. Difficulty building rapport 2. Lack of participation and negative peer influence 3. Lack of services 4. Lack of parental and community support
Suggestions for improved resilience-building strategies	7. Continuous professional development training and workshops 8. Access to essential resources 9. Access to mental health for young people 10. Reunification with families 11. Programmes involving the community and family 12. Mentorship programmes

The following is a discussion of the key findings from the study.

5.2.1 Child and Youth Care Workers' Understanding of the Term Resilience Building

Resilience building can be defined using different terms. Participants in this study expressed different views on what resilience building means to them and the children they work with. Participants described resilience building as the process of building children and preparing them for the future so that they may feel confident to face life's challenges head-on even when they are no longer there to watch over them. What was common in participant responses is that resilience building is a process that

requires consistency. When the children arrive in community-based care they are described as at risk, and wounded. Many of them need caring adults who will support them and encourage persistence. Cafer *et al.* (2019) stated that resilience building is essential for addressing challenges faced by individuals and communities and that the process involves equipping people and communities with the necessary skills to withstand, adapt, and recover from difficulties. The definitions of resilience building from participants may be different however their actions and outcomes they wish to achieve when building resilience are the same. They aim to equip children and young people with the necessary tools and skills to navigate through life. With this being said we can conclude that resilience building lies at the centre of working with at-risk young people, as they often feel discouraged and demotivated by their circumstances. This finding is consistent with Lyons *et al.* (2015:363) who stated that resilience is not a rigid or permanent quality, but rather a flexible and adaptive capacity. It can be seen as encompassing both proactive and reactive elements, involving not only the ability to endure and recover from adversity but also the potential for personal growth and enhancement.

5.2.2 The Importance of Resilience Building in Child and Youth Care

The first objective of the study was to examine the importance of resilience building in child and youth care. The findings revealed that building resilience can help facilitate behaviour change, promote better preparedness for the future, promote positive coping skills, and contribute to academic success.

In the context of child and youth care, resilience building is particularly important as young people often face various stressors and adversities throughout their development. Given the critical role resilience-building plays in supporting the healthy development and successful navigation of adolescence, researchers have emphasized the need to identify effective strategies for promoting and enhancing resilience in young people. Developing resilience is crucial for helping young individuals overcome obstacles, manage stress, and achieve positive outcomes during a crucial period of their lives (Masten & Barnes 2018:98).

The majority of the participants expressed that working with young people can be difficult and the children they work with can be very disrespectful and rude towards them. The participants mentioned that being a child and youth care worker is a job that

requires one to be very patient and consistent. Resilience building also requires the same patience and consistency. Participants also expressed that behaviour change in children may take time and that children tend to listen to an adult who shows them care and love. Once this relationship that consists of trust and respect is established children will begin to listen to the child and youth care worker making the resilience-building process easier. This finding is consistent with Lee *et al.* (2021:100721) who stated that resilience building can aid in changing bad behaviour, reducing risks and acting as a protective factor for young people. This is because if the youth are equipped with resilience-building skills, they will not turn to unhealthy coping mechanisms in times of adversity

Moreover, participants also mentioned that building resilience in young people can better prepare them for the future ensuring academic success and positive coping skills. When a child or young person is resilient, they can face challenges head-on and feel empowered and motivated to chase their dreams. Participants also alluded that by instilling resilience in young people they are equipping them with the necessary tools to cope with life's challenges. The participants associated this academic achievement with their approach in the centre which involves continuously encouraging and motivating the children to push themselves so they can reach their full potential. When children feel heard and supported, they begin to learn positive coping skills such as healthy thinking which involves acknowledging and accepting one's thoughts during times of difficulty. Resilience buildings also foster a sense of competence and mastery in young people who do well academically. This helps them develop self-confidence, critical thinking skills and problem-solving abilities that can be applied in various life situations. The research findings concur with those of Lyons *et al.* (2015:365) who explained that resilience involves not only the ability to endure and recover from adversity but also the growth potential that may come from navigating challenges. Resilience is a process that is reinforced and developed over time.

5.2.3 Effective Resilience-Building Strategies

The second objective of the study was to identify which specific interventions child and youth care workers use to build children's resilience in a community-based setting. There are several effective resilience-building strategies that participants mentioned.

These include daily affirmations and teaching self-care, communication with young people either in individual or group settings, participation in sports and recreational activities adopting the strengths-based approach and teaching spirituality.

Participants stated that they use daily affirmations and teach self-care as a way of building resilience. They do this by encouraging children to stick and paste affirmations in visible areas so they can recite them in the mornings, they also encourage daily journaling as journaling can help release stress and help one become more self-aware of their triggers. Another participant mentioned that they encourage the children to set time aside each day to relax, reflect and pray especially when they are feeling overwhelmed. This time is often helpful for them because it allows them to be calm and listen to their thoughts and feelings this dedicated time for relaxation and introspection enables children to recharge, refocus their energy, and cultivate a deeper understanding of their inner selves and personal needs. Such activities help children and young people recognise and address their needs and feelings appropriately, meaning there are fewer chances of children reacting and misbehaving when they are going through a hard time. Noble (2023) stated that self-care can help improve one's confidence and self-belief as one begins to thrive. Self-confidence and living life with more meaning prevent one from planting seeds of self-doubt

Furthermore, participants also stated that they make use of communication which can be done in individual or group sessions through open circles, role plays, skits and peer support groups. Participants mentioned that an open-door policy and individual sessions work well as children talk about life in general or any challenges they may be facing. It also allows the child and youth care workers to build a strong bond with the young person and makes it easy for children to approach them. Many participants also mentioned that they make an effort to engage in one-on-one conversations with the young people, it is in these conversations that they instil resilience. Coholic *et al.* (2012:345) agreed with the above and stated that individual sessions with children in care are beneficial as they help child and youth care workers better understand the children's needs and support their resilience. They also facilitate the process of building rapport.

Other participants mentioned using group sessions and activities such as skits and role plays. For participants, these skits enable them to build strong bonds and help

keep the children and young people busy and out of trouble. This opportunity allows them to share ideas and equips them with problem-solving skills which they can apply to real-life situations they may encounter. This is supported by Bonilla-Sánchez *et al.* (2022:1010512) who stated that role-play provides numerous benefits for children. These include enhancing children's self-esteem, fostering creativity, improving communication skills, supporting physical development, and bolstering problem-solving abilities.

In these sessions, participants mentioned that they often get to talk about challenges that the children may be facing at school or in the centre and they encourage the children to come up with possible solutions. Participants expressed that these activities help them see how the children view things and those they would like to change, which makes understanding them a bit easier. Yalom and Leszcz (2020) highlighted that group sessions are more flexible and promote a greater diversity of perspectives and discussions, compared to individual therapy sessions. Group settings can provide a supportive and collaborative environment for collective healing and recovery. One key aspect of group sessions is the opportunity for observational learning, where participants can observe and model the coping strategies of others, as well as engage in role-playing exercises. These experiences can be essential in promoting the development of critical coping skills that can be applied in real-world situations.

Participants also mentioned that utilising peer support groups is an effective resilience-building strategy. They explained that peer support groups have been effective especially as older children take on the role of helping the younger ones which they love doing. Participants also make use of floor representatives that the children can go to if they encounter any problems. The children on each floor regularly meet to talk about issues that they are facing. This approach improves social skills and allows the children to explore various methods to solve problems. According to Shalaby and Agyapong (2020:15572), peers also provide a level of empathy and understanding that comes from first-hand experiences, creating a safe and non-judgemental space for children and youth where they can express themselves freely.

Participation in sports and recreational activities was also mentioned as an effective resilience-building strategy. Playing these games with the children can help build

rapport, and improve their mental and physical well-being. The findings revealed that going outside and being active can be a stress reliever for children. These findings concur with those of Denovan and Macaskill (2017:446) who stated that sports and recreational activities, such as team sports, outdoor adventures, and hobbies, are valuable assets that can help people manage stress and foster resilience. These activities provide opportunities for physical exercise, social connection, and emotional regulation, all of which are important for building and maintaining resilience in the face of life's challenges.

Participants make use of games such as netball and soccer which are popular among children and young people. Participants pointed out that playing these games can help them understand what is happening with the child, as children may act out while on the field, which implies they are not in the right space emotionally. Once child and youth care workers pick this up, they may approach the child and intervene. Winstone *et al.* (2022:81) highlighted that children and youth participation in extracurricular activities positively impacts their development and creates a sense of community. Participating in sports, games and recreational activities with the children can also help strengthen the bond between the child and youth care worker and the young person, as the activities encourage them to spend time in each other's company and they get to share thoughts and experiences.

The strengths-based approach was also identified as an effective resilience-building strategy. Participants stated that when young people feel supported and recognised, they are bound to thrive. According to Caiels *et al* (2021: 401), community workers have successfully utilised the strengths-based approach to empower young people by focusing on their strengths, motivating them to identify areas of talent that they can pursue as potential careers. When children find an adult they know cares about them and can trust, they begin to open up about things they like to do and things they are good at. Focusing on what children and youth are good at, allows for positive self-perception to be fostered, this means young people have a positive self-image allowing them to face challenges with confidence.

Lastly, spirituality was identified as an effective resilience-building strategy by the participants. Religious and spiritual beliefs can provide a sense of purpose, hope, and community-oriented values in the lives of young people. Spiritual beliefs may promote

positive mental health through mechanisms such as moral guidance, coping strategies, and social belonging stemming from shared beliefs. Young people with a strong sense of purpose tend to engage in more positive behaviours and experience better physical and mental health outcomes

Participants expressed their belief in a higher power and how this belief has helped them through their challenges. Manning *et al.* (2018:168) reiterated that spirituality can be a powerful resource in building resilience among children and young people. It can provide a sense of meaning, purpose, and direction. Spirituality can also equip young people with an internal source of strength and stability that helps them navigate and overcome life's inevitable challenges and adversities. Through spiritual beliefs, practices, and connections, young individuals can cultivate a deeper understanding of themselves and the world around them, fostering the capacity to adapt, cope, and even thrive in the face of life's difficulties.

5.2.4 Challenges Faced by Child and Youth Care Workers When Building Resilience in Community-Based Care

The third objective of the study was to inquire about the challenges child and youth care workers experience when building resilience in a community-based setting.

Participants expressed that they face various challenges when trying to build resilience in the children they work with. The challenges include difficulty building rapport, lack of participation in the activities and negative peer influence. They also face challenges due to limited access to basic services and insufficient community and parental support.

When children first come into community-based care, they need to adjust to living in an unfamiliar environment. Building relationships with the children has proven to be difficult for child and youth care workers. Participants mentioned the process of building rapport may be long and difficult, as children may be reserved and reluctant to open up and accept help especially if they have been hurt by an adult they once trusted. Many participants went on to say that they have had to use themselves as tools to build relationships. This requires them to be vulnerable; they share their own relatable experiences, which helps in building trust and rapport with the children. Participants also expressed that the children can be quite rude and disrespectful towards them. This often requires the child and youth care worker to be patient as

some relationships require a lot of nurturing. The above findings concur with those of Engle, Castle and Menon (2016: 621), who stated that children who grow up in poverty and instability, are able to succeed provided that they have a healthy relationship with at least one adult particularly a parent or a caregiver.

Participants further stated that children can disrupt an activity or session by negatively influencing peers to refrain from participating. Participants mentioned that some children may avoid participating in the activity completely, and may even say hurtful things. This forces the child and youth care worker to end the activity prematurely, which results in the activity being ineffective.

The above findings concur with those of Doll and Song (2023:525) which state that children may be reluctant to participate in resilience-building activities due to various reasons, such as negative peer pressure or concerns about being perceived as different from their peers. They may worry about being teased or ostracised by their peers for engaging in activities that are not seen as “cool”. This resistance to resilience-building efforts can be a significant barrier to helping children develop the skills and resources they need to cope with adversity and bounce back from challenges.

The lack of essential services and lack of community and parental support have also affected how child and youth care workers build resilience in children and young people. Both community-based care settings are based in Inanda Township, Kwa-Zulu-Natal and like most townships in South Africa they lack basic resources such as water and sanitation. According to Mabizela and Matsiliza (2020:9), townships were created as residential areas for Black employees working in mines and factories, without their economic rationale and with limited access to social services. To this day, many townships in South Africa continue to face challenges in accessing basic services, such as reliable water, electricity, and healthcare.

Participants also alluded to not having access to resources such as internet connectivity, computers and printers which also affects resilience building. Not having access to these essential resources often leaves children discouraged and hopeless, they have far less to look forward to and this feeling can be crippling for them. Schotte and Zizzamia (2023:1) stated that education disparities have led to unequal access to

quality education as many disadvantaged communities lack proper educational infrastructure and resources.

For participants, the lack of parental and community support has also affected resilience building in community-based care. When there is no parental and community support children lack a sense of belonging and security. Participants mentioned that the children have extended family members but very few family members visit the children. This often takes a toll on the children leaving them feeling abandoned and alone. Participants further mentioned that they do not get a lot of support from the community. The centre is in the heart of Inanda yet many of the donations and volunteers come from outside the community. The centre also does not engage in any community activities. This does negatively impact the children because they lack a sense of belonging with the broader community as well. The above findings concur with Osofsky and Osofsky (2018:115) who stated that the absence of supportive relationships with caring adults can impede the development of resilience in children and youth. It can be hard to be resilient when one has to bear the emotional burden of challenges alone. Lack of support can also lead to children isolating themselves which increases vulnerability

5.2.5 Suggestions for Improved Resilience-Building Strategies

The fourth objective of the study was to make recommendations on how resilience building can be enhanced in community-based care. Participants shared their suggestions that would help improve resilience-building strategies. These included continuous professional development training and workshops, access to basic resources, access to mental health for child and youth care workers and young people, reunification with families, programmes involving the community and family as well as mentorship programmes.

Participants expressed a need for continuous professional development training and workshops. These workshops and trainings can help child and youth care workers feel empowered and motivated to do their jobs more efficiently. These findings are also emphasised by Bartlett *et al.* (2019: 10) who stated that ensuring continuous professional development in the workplace is crucial, as it can help keep staff motivated, informed, and up-to-date on the latest practices and trends, particularly for those working with children.

Ongoing training and education can enhance caregivers' skills, knowledge, and ability to effectively support and engage with the children in their care.

However, access to basic resources has hindered resilience-building in community-based care. Participants reported lacking essential resources such as water, internet connectivity, and equipment like Wi-Fi and computers. Increased and sustained support, along with improved resources from the Department of Social Development, is necessary. The participants further mentioned that reunification with families could improve resilience building in community-based care. They stated that they do not have programmes that involve the parents and families of the children they work with. Participants believe it would be largely beneficial for the children if they had more programmes with their families or if they would visit them more often. According to Bethell *et al* (2019: 279), family resilience and connection promote positive development, even amid adversity. The study determined that when children have caring adults in their lives and strong family bonds, they tend to prosper regardless of the adversities they face.

Participants also expressed that programmes involving the community could also improve resilience building in community-based care. Participants also expressed that participating in such programmes and activities would help keep the children busy especially over the weekend and school holidays when they often have nothing to do. Lalas *et al.* (2019:41) stated that participation in community programmes can help build resilience in children by providing them with a sense of belonging, opportunities for personal growth, and a supportive social network. These activities can offer children and youth a space to develop coping strategies, build self-confidence, and cultivate meaningful relationships with peers and mentors. This holistic approach to resilience building can have a lasting positive impact on children's overall well-being and ability to navigate life's challenges.

Participants also expressed that children and young people need easy access to mental health care facilities. Sometimes the children have severe mental health issues and there are not enough resources and skills to deal with them. Participants further emphasised the lack of comprehensive support, stating that while children get medication and financial assistance, there is no broader plan in place to address their mental health. The above findings concur with those of Osofsky and Osofsky

(2018:115) who stated that limited availability and accessibility of mental health services can be a significant obstacle to resilience building, especially in areas with insufficient mental health infrastructure. Many children and youth in townships and rural areas do not have access to mental health services.

Lastly, participants mentioned that mentorship programmes could also help improve resilience building in community-based care. They also expressed a desire to have mentorship programmes for the children especially mentors who have faced similar circumstances as the children. Participants stated that this can help show the children that there is hope for them and they too, can also succeed in life. They further stated that the children do not have exposure to successful people. This exposure could inspire and motivate children and young people, as they often feel demotivated, believing their circumstances won't change. The above findings concur with DuBois and Keller (2017:1480) who stated that mentorship programmes could also help improve resilience in community-based care. When children are exposed to people who have faced and overcome adversity, they can learn from their experiences and develop the skills necessary to become more resilient. Connecting at-risk youth with caring adult mentors who have demonstrated resilience in the face of challenges can provide powerful role models and support systems that foster the development of protective factors and coping strategies.

5.3 RECOMMENDATIONS

Child and youth care workers expressed that they often find it challenging to discipline the children and young people they work with. It is recommended that they participate in behaviour management workshops to help them address this issue effectively. Additionally, children need to attend one-on-one sessions where they are encouraged and taught positive coping mechanisms, especially when under stress so they do not express their anger towards others.

Participants also revealed that lack of resources and access to basic services further affected them. It is recommended that the ward councillor engage with the local municipality to ensure a consistent supply of water. The community centres also do not have access to computers, printers and Wi-Fi. This has affected how children and young people complete their schoolwork. The recommendation is for the Department of Social Development or sponsors to be approached and asked to help provide

children living in a community care setting with communal computers, printers and Wi-Fi so they can complete homework.

Lack of parental and community support has also affected resilience building in community-based care. Participants from both centres revealed that they do not have any programmes that involve parents or extended family members of the children and young people in their care. Additionally, they also revealed that the children do not participate in any community programmes. Lack of community involvement has taken a toll on the children as they lack a sense of belonging to the community. A recommendation is to encourage the centres to participate in community programmes and to develop their own. Another recommendation is to host sports games and activities within the centre, where they can compete against the local teams in the community host a talent show, and invite the community to watch their skits. This will promote community resilience and instil a sense of belonging in the children and young people.

Participants also revealed a need for more mentorship programmes which will help instil resilience in the children and young people they work with. The children are not exposed to enough people as role models. A recommendation is for the centres to approach successful local community members to serve as role models, who can provide a platform to motivate and encourage young people and share with them how they overcame challenges they faced in life.

It is further recommended that the management panel look into providing more training and workshops for child and youth care workers and access to mental health services for the children. This access includes access to professionals such as psychologists and other professionals.

5.4 AREAS FOR FURTHER STUDY

This study examined resilience-building approaches for children and young people in community-based child and youth care settings. Future research could explore resilience-building strategies for the child and youth care workers themselves, investigating how these professionals maintain resilience in their community-based roles.

Another area of study that could be examined is resilience-building strategies from the perspective of children and young people in community-based care, focusing on what they believe they need to build and instil resilience.

5.5 LIMITATIONS OF THE STUDY

According to Busse and August (2021:909), limitations of a study refer to potential constraints or shortcomings inherent to the research design that may impact the outcomes and interpretations of the findings. This study was limited to two community-based child and youth care centres in Inanda township. Lastly, the self-reported data collected during the interviews could result in bias and exaggeration of previous experiences. The limitations could be addressed by including additional centres in the study from other areas. The number of participants could also be increased to decrease bias.

5.6 CONCLUSION

This research study aimed to explore resilience-building strategies in community-based care settings. The study aimed to identify resilience-building strategies used by child and youth care workers to instil resilience in children and young people in community-based care settings. It also looked at some of the challenges they face when building resilience.

Data collection assisted the researcher in gathering information about what resilience building meant to the participants and why it was important. Participants also shared the challenges they face when building resilience in community-based care. The study also identified specific strategies that work best as they also contribute to a sustainable support system for vulnerable populations. The findings suggest that resilience-building strategies such as affirmations, communications with young people role plays and participation in sports and recreational activities, strengths-based approach and spirituality work best when building resilience in community-based care.

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APPENDIX A (1)



04 April 2024

Abalindi Children's home

4310

Request for permission to conduct research

Dear Sir/Madam

My name is Sinolizwi Ntlokwana a Master's student at the Durban University of Technology. The research I wish to conduct for my master's dissertation thesis involves exploring the strategies used by community based child and youth workers in Inanda in building resilience in children and youth.

I am hereby seeking your consent to use Abalindi children's home to conduct interviews for my research. The interviews will occur preferably two times a week and each interview will last about an hour. I have provided you with a copy of my proposal which includes copies of the data collection tools and consent forms to be used in the research process, as well as a copy of the approval letter which I received from the Institutional Research Ethics Committee (IREC).

If you require any further information, please do not hesitate to contact me on 0613397981 or sinolizwintlokwana@gmail.com.

Thank you for your time and consideration in this matter.

Yours sincerely

Sinolizwi Ntlokwana

APPENDIX A (2)



04 July 2024

Ikhayaletu Children's Centre

4310

Request for permission to conduct research

Dear Sir/Madam

My name is Sinolizwi Ntlokwana a Master's student at the Durban University of Technology. The research I wish to conduct for my master's dissertation thesis involves exploring the strategies used by community based child and youth workers in Inanda in building resilience in children and youth. I am hereby seeking your consent to use Ikhayaletu Children's Centre to conduct interviews for my research. The interviews will occur preferably two times a week and each interview will last about an hour. I have provided you with a copy of my proposal which includes copies of the data collection tools and consent forms to be used in the research process, as well as a copy of the approval letter which I received from the Institutional Research Ethics Committee (IREC).

If you require any further information, please do not hesitate to contact me on 0613397981 or sinolizwintlokwana@gmail.com.

Thank you for your time and consideration in this matter.

Yours sincerely

Sinolizwi Ntlokwana

Appendix A (3)

To: Sinolizwi Ntlokwana
Durban University of Technology
Department of Community Health Studies

DATE: 12/12/2023

Dear Sinolizwi Ntlokwana

I am pleased to grant you permission to conduct interviews with child and youth care workers in Abalindi Childrens Home in Inanda for your study titled "An exploratory study of resilience building strategies in community based child and youth care". You also have my full support in recruiting participants for this study on the basis that they provide their full consent.

For any further assistance and support for your study, please do not hesitate to contact me, I will provide my contact details.


Abalindi Children's Home
Amatikwe, Inanda
4310

ABALINDI WELFARE SOCIETY
NPO : 002 48751601
P.O. BOX 43119, INANDA, 4310

2023 -12- 12

TEL : 0315101544 031 5101538
FAX : 0315103045
EMAIL: abalindi@outlook.com

Appendix A (4)

To: Sinolizwi Ntlokwana
Durban University of Technology
Department of Community Health Studies

DATE: 12/12/2023

Dear Sinolizwi Ntlokwana

I am pleased to grant you permission to conduct interviews with child and youth care workers at Ikhaya lethu Children's Centre in Inanda for your study titled "An exploratory study of resilience building strategies in community based child and youth care". You also have my full support in recruiting participants for this study on the basis that they provide their full consent.

For further assistance and support for your study, please do not hesitate to contact me. I will provide my contact details.



Ikhaya lethu Children's centre
Mzobw Crescent Inanda
4310

APPENDIX B



LETTER OF INFORMATION (FOR INDIVIDUAL INTERVIEWS)

Title of the Research Study: An exploratory study on resilience building strategies in community based child and youth care in Inanda.

Principal Investigator/s/researcher: Sinolizwi Ntlokwana

Co-Investigator/s/supervisor/s: Dr Dewan(PhD).

Brief Introduction and Purpose of the Study: This study will use a qualitative research methodology, to explore the strategies used by community based child and youth care workers in building resilience in vulnerable communities. The researcher aims to interview 20 participants who are qualified child and youth care workers working in community based care in Inanda. The interviews will allow the researcher to find out which strategies child and youth care workers use to build resilience in at risk young people. The purpose of this study is to identify resilience building strategies and to make them accessible to other child and youth care workers so they can use them to build resilience in at risk young people they work with.

Outline of the Procedures: This study aims to find out which resilience strategies child and youth care workers use in community based care to build resilience in the children of Inanda.

Research Objectives

- 1) To understand the importance of resilience building in community based child and youth care.
- 2) To identify which specific interventions child and youth care workers use to build children's resilience in a community based setting
- 3) To inquire about the challenges child and youth care workers experience when building resilience in a community based setting

4) To make recommendations on how resilience building can be enhanced in community based care.

Interviews will be conducted in Inanda Community Centre, where willing participants will take part in an interview with the researcher which will take approximately 30 minutes.

Inclusion criteria

- Male and female child and youth care workers
- Those that reside in Inanda
- Qualified child and youth care workers with at least minimum experience of two years
- Child and Youth care workers who work in community based setting.

Exclusion criteria

- Any person who is not a qualified child and youth care worker
- Any child and youth care worker who has no experience working in community based settings
- Those that do not reside in Inanda
- Those with less than two years' experience

Risks or Discomforts to the Participant: There will be no risks/discomfort experienced by you.

Reasons why the participant may be withdrawn from the Study: You may withdraw from the study at any time should you wish to. There will be no resulting consequence/action taken should you opt to withdraw from the study.

Benefits: No benefits will be provided to you. The researcher may however use this data obtained and share it with other child and youth care workers in Inanda or surrounding areas,
5

Remuneration: No remuneration will be received for this research. You will be asked to voluntarily consent to participate in the study.

Costs of the Study: You will not be required to cover any costs during your participation in the research.

Confidentiality: Confidentiality of all the information provided in this study will be assured and maintained at all times. Names and/or confidential information will NOT be required nor

attached in the questionnaires. Only the researcher(s) will have access to this data that you will provide.

Results: The results will be out on a journal article so that participants get to see the findings.

Research-related Injury: This study does not have the potential to cause any injury or harm.

Storage of all electronic and hard copies including tape recordings:

The tape recordings will be kept on the USB and protected by a password. Both the hard copies and tape recordings will be kept safe on a file, which will be safely locked in a cabinet. There will only be one key, the researcher and supervisor are the only people who will have access. The data will be retained for 5 years, after it will be disposed of by deleting the recordings and hard copies will be destroyed example burnt or shredded

Persons to contact in the Event of Any Problems or Queries: (Supervisor and details)

Please contact the researcher (cell no 0613397981), my supervisor (tel no 031 3732807) or the Institutional Research Ethics Administrator on 031 373 2375. Complaints can be reported to the Acting Director: Research and Postgraduate Support on 031 373 2577 or researchdirector@dut.ac.za.

APPENDIX C



CONSENT

Statement of Agreement to Participate in the Research Study:

- I hereby confirm that I have been informed by the researcher, Sinolizwi Ntlokwana, 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.
- 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

I, _____ 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

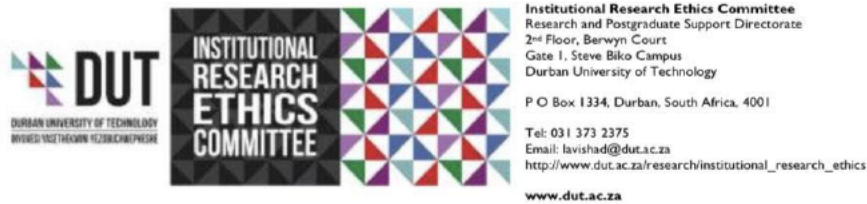
Appendix D



Interview Guide

1. What do you understand by the word resilience?
2. Do you have another term you use for the word resilience?
3. Why do you think resilience building is important?
4. Are there any specific strategies you use to build resilience?
5. Which strategy would you say works best?
6. How do you monitor your resilience building strategies?
7. How do you identify if the resilience building strategies are working?
8. What are some of the challenges/difficulties you face when building resilience?
9. Are there any specific resilience building programs that you do that include parents, guardians or the community at large? If yes, what are they?
10. Do you get any assistance or resources from the Department of Social Development or government which can aid you in building resilience in the young people i.e. social grant, food parcels, access to learning material etc.?
11. Is there a way in which you monitor community development for the community you work with to see if these programs bring about change?
12. What further skills development do you need to enhance your work in building resilience in children?
13. What are some of the recommendations that can be made to enhance resilience in a community based setting?

Appendix E: Ethical Clearance



21 December 2023

Ms S P Ntlokwana
Department of Community Health Studies
Faculty of Health Sciences
Durban University of Technology

Dear Ms Ntlokwana

An exploratory study on resilience building strategies in community based child and youth care in Inanda, KwaZulu-Natal
Ethical Clearance number IREC 166/23

The DUT-Institutional Research Ethics Committee acknowledges receipt of your gatekeeper permission letter.

Please note that FULL APPROVAL is granted to your research proposal. You may proceed with data collection.

Any adverse events [serious or minor] which occur in connection with this study and/or which may alter its ethical consideration must be reported to the DUT-IREC according to the DUT-IREC Standard Operating Procedures (SOP's).

Please note that any deviations from the approved proposal require the approval of the DUT-IREC as outlined in the DUT-IREC SOP's.

It is compulsory for a student or researcher to apply for recertification on an annual basis. The failure to do so will result in withdrawal of ethics clearance. It is the responsibility of the researcher and the supervisor to apply for recertification.

Please note that you are required to submit a Notification of Completion of Study form together with an abstract to the DUT-IREC office on completion of your study.

Yours Sincerely

Prof J K Adam
Chairperson: DUT-IREC

Appendix F : Turnitin Report

 S Ntlokwana Final dissertation 



Match Overview 

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Matches

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6	Mizeck Chimange, Sue ... Publication	<1%	>

Appendix G: Editors Report

MS PREM COOPOO



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EDITING AND PROOFREADING SERVICES

BA Social Work, BA Honours (Psychology), M.MedSc Social Work (UKZN, South Africa);
Certificate in Strategic Quality Planning (Kangan Batman TAFE, Australia).

2 April 2025

TO WHOM IT MAY CONCERN

This confirms that I edited chapters 1-5 of the Master's Degree Dissertation of Ms Sinolizwi Ntlokwana. She is a registered student at the Durban University of Technology, KwaZulu-Natal.

I provided her with two edited versions – one with tracked changes, and a clean copy.

Sincerely,

Prem Coopoo