

EXPERIENCES AND CHALLENGES RELATED TO RESIDENTIAL CARE AND THE EXPRESSION OF CULTURAL IDENTITY OF ADOLESCENT BOYS AT A CHILD AND YOUTH CARE CENTRE (CYCC) IN JOHANNESBURG

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Child and Youth Care Centres (CYCCs) play a significant role in accommodating children who are victims of abuse, neglect and abandonment in South Africa. However, professionals in these settings face a dilemma, as they often cannot accommodate every child's cultural needs. This study explored the cultural challenges experienced by adolescent boys living at a CYCC in Ekurhuleni. Findings indicate that CYCCs are doing an excellent job at ensuring a nurturing environment for the children. However, it also emerged that there are challenges related to preserving the culture of children as a result of constraints of resources and limited staff diversity.

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# **EXPERIENCES AND CHALLENGES RELATED TO RESIDENTIAL CARE AND THE EXPRESSION OF CULTURAL IDENTITY OF ADOLESCENT BOYS AT A CHILD AND YOUTH CARE CENTRE (CYCC) IN JOHANNESBURG**

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## **INTRODUCTION**

Before 1994 South Africa was one of the countries in the world that placed no value on safeguarding the rights and welfare of children, particularly the black children (Loffell, 2008; Patel, 2008). However, from 1994 to 2005 South Africa evolved in this regard, introducing a number of policies and legislative frameworks to protect children against abuse, for example, the Children's Act, No. 38 of 2005, as amended. Despite these efforts taken by the government, a significant number of children in South Africa continued to bear the burden of being exposed to circumstances that can be harmful and detrimental to their development and wellbeing (Department of Social Development, 2008; UNICEF, 2012). According to Statistics South Africa (2011), South Africa's population is estimated at 52 million people, of whom 18.6 million are children. The number of children continues to grow annually, qualifying South Africa to be considered as a youthful country. According to the Department of Social Development (2008), 14.1% of the total number of children in South Africa live in poor households, making them vulnerable to several problems, including HIV and AIDS and different types of abuse. Furthermore, between 2003 and 2011 South Africa experienced an increase in the rates of abused, neglected and exploited children, mainly in rural areas (Department of Social Development, 2008). As a result, many children were admitted to various CYCCs, where professionals were entrusted with fulfilling the responsibilities of families, which include raising these children and meeting their schooling needs.

According to Schmid (2006), CYCCs address diverse issues facing children as a result of the breakdown of the family system. It is through these CYCCs that such children are accommodated and cared for in a homelike environment (Schmid, 2006). However, it was noted with great concern that some of those children lose their cultural identity in the process. The reason is that some of these children enter the alternative care system at a very young age, and given the lack of culturally diverse staff members in CYCCs, cultural preservation and maintenance become challenging (Robinson, 2000; Schmid, 2006). Robinson (2001) observed that lack of understanding of cross-cultural and black perspectives limits social workers in addressing the needs of children in residential care settings. Similarly, a study carried out by Dube and Ross (2012) reveals that cultural identity is an important factor for adolescents in residential care, especially in boys, and that logistics must be put in place to support culture-related programmes. It is acknowledged that there is extensive literature on children in residential care in South Africa; however, there seems to be a paucity of research focusing on the experiences of adolescent boys living in CYCCs in terms of cultural identity. Therefore, the purpose of the study was to explore the challenges experienced by adolescent boys residing in a

child and youth care centre in Ekurhuleni regarding cultural identity. It was hoped that the study would contribute to existing knowledge and enhance the intervention strategies used by different social service professionals working with adolescent boys in residential care facilities. Also, the study has the potential to inform social policy development and programmatic interventions by non-governmental organisations (NGOs) involved in residential care work. In addition, it was also envisaged that the study would stimulate further research in this field of study.

## **BACKGROUND**

In South Africa children, women and older persons are categorised as being among vulnerable groups (Patel, 2005). According to South African Statistical Services (2011), the South African population consists of more than 18.6 million children, with more than 100 000 of them being cared for in residential care facilities throughout the country. The status of children in South Africa is understood in different ways; however, various scholars understand the vulnerability of children in line with the history of the country (Richter & Dawes, 2008; Schmid & Patel, 2016). During the apartheid period certain groups of people were denied education and skills that could improve their lives, and that is the reason why there are still some people who are regarded as unemployable after 1994; as a result, some are unable to provide for their children and this has led to their admission into alternative care (De Vos, 1997; Patel, 2005).

Decades after the abolition of apartheid South Africa is still confronted with the after-effects of the past system (Patel, 2005). Many people continue to move from the rural areas to urban areas in search of opportunities and, in the process, they leave their children in the care of the elderly (Patel, 2005). Some of these children end up living and working on the streets, while some work on farms and become exploited in the process (Department of Social Development, 2007). In response to this, the South African government realised the need to have residential care facilities that specifically cater for those children in need of care and safety (Department of Social Development, 2007). These residential care facilities were established with the aim of caring for such children; it is especially those who are in need of care and support who are accommodated in these institutions.

### **Child and youth care centres: an overview**

According to Smith, Fulcher and Doran (2013), CYCCs have a long history and are found in many countries worldwide. Children's homes were established in response to social problems that were brought on by the process of urbanisation and industrialisation, where children were seen to be particularly vulnerable to the effects brought about by those changes (Pinkerton & Muhangi, 2009; Smith *et al.*, 2013). It is further argued by Smith *et al.* (2013) that parents moved from one place to another in search of opportunities, for example, work and educational opportunities, and these movements had profound effects on children and young people since most of them were left behind when their parents and care-givers moved around in search of opportunities (Adams, 2012; Smith *et al.*, 2013).

After the abolition of the apartheid system in South Africa in 1994, many people moved from rural areas to the cities in search of economic opportunities, because they could not access those opportunities in the cities during the apartheid period (Patel, 2005; Richter & Dawes, 2008; Schmid, 2006). However, in the process many children were left behind, while some were neglected and abused by extended family members (Richter & Dawes, 2008; Schmid, 2006). To close that gap, there were philanthropists who cared for those children who were in need of care and protection by ensuring they had food and shelter, and that their other basic needs were being met while their parents were away (Smith *et al.*, 2013). They did that out of a humane concern for their welfare.

This therefore prompted a group of psychologists, social workers, community developers, pastors and counsellors to think of having all the neglected children in a family-like setting, where they would be cared for, monitored and groomed, and where they would have someone to look after them regularly (Smith *et al.*, 2013). This led to the development and founding of residential facilities for children and youths (Smith *et al.*, 2013). A significant number of children were placed in such settings as a result of the continued effects of urbanisation and modernisation (Richter & Dawes, 2008). But because of the high demand, the need to have more of residential care facilities soon arose (Smith *et al.*, 2013). These centres currently play a significant role in many countries all over the world, particularly in developing countries where issues such as abuse, exploitation and neglect of children are on the rise (Smith *et al.*, 2013; UNICEF, 2012). These centres assist in addressing issues of abuse and neglect of children and youths in different countries around the globe. However, lack of resources and adequate infrastructure poses serious challenge to most of these CYCCs, as they lack basic resources such as enough space to accommodate all the needy children, they lack enough relevant staff members and they lack vehicles to conduct their day-to-day interventions (Dutschke, 2006; Schmid, 2006).

### **Child and youth care centres and cultural diversity**

The word “diversity”, especially human diversity, refers to “the differences of people in terms of race, ethnic background, culture, religion, physical and intellectual abilities, gender and age” (Sheafor & Horejsi, 2010:255). In South Africa CYCCs are characterised by such diversity, meaning that they accommodate children from all walks of life, with some of these children even coming from other countries. The children appear at the centres with different belief systems, cultures, heritage and languages (Smith *et al.*, 2013). In practice, therefore, it is very important that CYCCs should be ready to accommodate every child irrespective of his or her cultural heritage (Johann, 1996). The approach used by children’s residential facilities should be an all-inclusive one, so that it could accommodate every child irrespective of language, cultural beliefs or any other differences that they might have (Adams, 2012; Johann, 1996;). While noting the good done by children’s homes, it is also important to discuss the challenges faced by those homes. Most of those homes strive to accommodate every child’s culture, beliefs system and heritage, but they often fail as a result of staff constraints and inadequate resources (Robinson, 2000). And this is worrying, because some of the children get placed in the centres without understanding even a single word or language,

especially since they enter the system at very young ages (Robinson, 2000). This means that they have to be taught from the scratch and this invariably leads to a loss of their own culture and belief systems.

It is often the case in South Africa that most professionals such as social workers, nurses and psychologists cannot speak any indigenous languages, which stems from the urban and rural divide in terms of cultural factors, which often include languages. This makes work with their clients or patients less effective (Robinson, 2000). The inability of some professionals to understand indigenous languages has negative effects on children and their cultural identity (Robinson, 2000). Children may be denied an opportunity to experience their own culture and heritage because of the prioritisation of other languages such as English (Robinson, 2000). South Africa has a number of languages which are spoken by the majority of the population, such as Sotho, Xhosa and Zulu, among others (Constitution of South Africa, 1996). However, English remains the preferred medium of communication in most residential care settings, and some children consequently lose out on learning and perfecting their own indigenous languages (Robinson, 2000). It is argued that when interacting with children, there is a need to use a language which they can understand better, preferably their home language (Robinson, 2000; Smith *et al.*, 2013). Moreover, children in child and youth care centres later encounter problems adjusting back into their communities, because programmes in residential care centres tend to preclude their culture and heritage by placing greater emphasis on the use and adherence to the English language and culture (Robinson, 2000).

### **Programmes and challenges in child and youth care centres**

Children in residential care centres in South Africa are offered recreational, developmental and therapeutic programmes (Children's Act, 2005). The programmes are meant to enhance the wellbeing of the children, so that when they go back to their communities, they become functional again (Children's Act, 2005). There are developmental programmes, which focuses on life skills, independent living, victim empowerment, family preservation, after-care and income generation (Children's Act, 2005). These activities are focused on developing the child so that by the time he/she leaves the centre, he/she is ready for life outside the centre (Children's Act, 2005). When the child is reunited with his or her family, he/she would have been empowered to be independent, resilient and ambitious irrespective of his/her current or past living circumstances (Children's Act, 2005).

Therapeutic programmes focuses on psycho-social support, individual counselling and play therapy (Children's Act, 2005). Some children come to residential homes with bad experiences, for example, experiences of being abused, neglected and exploited, which can result in slow cognitive functioning and emotional inadequacies (Department of Social Development, 2008). Therefore, CYCCs need to offer children in such a position some counselling and additional support such as psycho-social support (Children's Act, 2005). Such programmes are very important for children's psychological development and after-care life, because most of them go on to become fully functional human beings again (Children's Act, 2005). CYCCs should also ensure that they do not limit

counselling to children only; families should also be provided with counselling where necessary (Children's Act, 2005). For example, a parent or a care-giver who may be feeling some regret for abandoning or abusing a child may be in need of psychological debriefing and family counselling (Children's Act, 2005). The Children's Act (2005, as amended), sets all the standards and norms for children and youth care centres; however, some CYCCs fail to provide some of the mentioned social and psychological services mainly because of shortage of enough professionals such as social workers, counselling psychologists, social auxiliary workers and nurses (Richter & Dawes, 2008).

Furthermore, the roll out of these programmes is challenged by limited resources (Schmid, 2006). The consequences are contrary to the accepted standards of practice. It is ideal for CYCCs, including staff members, to always render services of an acceptable standard to children, and the interaction between staff members should be accommodating enough to deal with the needs of every child, irrespective of their culture or heritage (Rankopo & Osei-Hwedi, 2011; Schmid & Patel, 2016; Smith *et al.*, 2013). Furthermore, children should be provided with adequate nutrition and clothing, and every child should be given the same quality of treatment as other children in the home (Schmid & Patel, 2016; Schmid, 2006). However, this is not always the case because of resource constraints (Schmid, 2006). This claim is supported by studies which have been carried out both locally and internationally; most of the studies have shown that residential care facilities are struggling to provide the needed services to children owing to unkind staff members and to a lack of resources (Robinson, 2000; Robinson, 2001). As a result some children report good experiences, while others report only negative experiences. The care given to children and youths should be holistic in nature; it should respect, protect and promote cultural, linguistic and religious and heritage values; the child should be allowed the opportunity to live within his or her cultural ambit (Berridge, Biehal & Henry, 2012; Children's Act, 2005).

### **Legal instruments governing child and youth care centres**

South Africa has a number of laws and regulations developed to protect and promote the welfare of children (Richter & Dawes, 2008). The country is also a signatory to a number of regional and international conventions for the protection and preservation of children (Richter & Dawes, 2008). The Constitution of South Africa, Act No. 108 of 1996, the Children's Act, No. 38 of 2005, the Schools Act, No. 84 of 1996 and the Child Justice Act, No. 75 of 2008, as amended, are some of the legal instruments available in South Africa and for application in child and youth care centres (Richter & Dawes, 2008). Ratified and adopted regional and international conventions include the United Nations Convention on the Rights of the Child, which was ratified in 1995, and the African Charter on the Rights and Welfare of the Child, which was adopted in 2000 (Richter & Dawes, 2008). The Children's Act, Act No. 38 of 2005, as amended, will be discussed further for the purpose of this study.

In this Act, Chapter 14 (Child and Youth Care Centres) provides national norms and standards for child and youth care centres in South Africa. The norms and standard address the human rights, religion, culture, procedures, language policies and

registration of child and youth care centres in South Africa (Children's Act, 2005). In terms of the rights of children admitted into residential centres, the Act specifically stipulates that children have a right to be addressed in a language which they understand; the children are also allowed to have visitors, including parents, religious counsellors and social workers (Children's Act, 2005). Children are also entitled to basic nutrition, clothing and quality treatment. There is also a provision which covers the fact that the care and intervention children receive in child and youth care centres should respect and promote their cultural, religious and linguistic heritage, and that they should also have the right to learn about their heritage (Children's Act, 2005). Basically, this means that the children admitted in CYCCs should not be stripped of who they are; instead, the centres should take the initiative to ensure that these children continue to practise their own cultures (Robinson, 2001).

However, this has not been the case with many centres, as many non-government organisations (NGOs), which includes CYCCs, struggle with funding; as result they are not able to hire enough staff members to cater for the various language, religious, heritage and cultural needs of the children admitted to the centre (Dutschke, 2006; Loffell, 2003; Robinson, 2001). Dutschke (2006) argues that the provisions in the legislation, such as the Children's Act (2005), are important for children's homes and for the welfare of children; however, lack of funds for implementation may lead to deficiencies in many organisations (Dutschke, 2006). The Department of Social Development (DSD), as the major funder of NGOs in South Africa, does not make enough funds available to NGOs (Dutschke, 2006). As a result, there is a shortage of staff members in some organisations, especially those which cannot source alternative funds from the private sector (Dutschke, 2006). Ultimately, the needs of the children admitted cannot be met holistically (Schmid, 2006). Social workers are expected to embrace client diversity, but research findings indicate that social workers and co-workers are struggling to adhere to the principles and values of social work practices because of the inadequate funding from the state (Robinson, 2000; Sleaford & Horejsi, 2010).

## **THE STUDY**

The study employed a qualitative research design that was exploratory and descriptive in nature. A qualitative approach is used to gain an understanding of underlying reasons, opinions and motivations that provide an insights into the problem or help to develop ideas or hypotheses for potential quantitative research (Patton, 2005). All participants were adolescent boys, aged between 12 to 16 years, who were living at a CYCC in Ekurhuleni, South Africa. A purposive sampling technique was utilised to recruit ten participants from the centre in order to gather data for the study. Participants were adolescents drawn from different cultural background such as Sotho, Zulu, Xhosa and English descent. Participants were to have been residents of the CYCCs for a period of not less than three years. The research tool used was an interview schedule administered through in-depth face-to-face semi-structured individual interviews and responses were analysed using thematic content analysis. According to Leininger (1994), credibility, confirmability, dependability and transferability are some of the concepts which speak to

the trustworthiness of qualitative data. The researcher reviewed the literature and then audio recorded the interviews and transcribed them verbatim to ensure credibility of the study. In addition, in order to enhance the confirmability of the findings, the researcher did correspondence checks where the data themes of the study were checked by the researcher's supervisor in order to identify any possible omissions in the data. The process further helped to limit the possibility of data bias. To ensure the dependability of the data, all the interviews were administered by the researcher and the same steps were followed when analysing the data. Transferability is the demonstration that the results of the study can be applied to a wider population (Rowley, 2002). Pre-testing of the research instrument was done and used as a measure to test whether the study was transferable to a wider population or not.

Ethical considerations were paramount in the study and several steps were taken to ensure that the study met the required ethical standards. Before the study was done, an ethics clearance certificate was obtained from the University of the Witwatersrand's Non-Medical Ethics Committee, and the centre management also gave permission for the study to be carried out in its CYCC. However, the centre will remain anonymous as the researcher did not get permission to use its name. In addition, children were asked to sign formal assent forms for both participation and audio-recording of the interviews during data collection. Children form part of vulnerable groups and therefore researchers need to ensure that they are not taken advantage of during studies (Babbie, 2001; Strydom, 2002).

### **ADOLESCENT BOYS' REFLECTIONS ON LIVING AT A CHILD AND YOUTH CARE CENTRE**

The adolescent boys' accounts of living at a CYCC revolved around the love and care they receive from staff members, with references to the nurturing environment provided for them and the opportunity to live in a place where they could make friends, but some also indicated how boring the place can be sometimes. The findings revealed that eight of the participants liked living at this CYCC. However, each participant provided a different account of what makes him like being a resident at the centre. Three participants found living at this CYCC interesting because, according to them, the environment is good and nurturing. *"They keep children and they do not treat children bad, and they care for children who do not have a home."*

Furthermore, three participants found living at this CYCC worthwhile because of the love and care they experience from staff members. Post-1994 South Africa has continuously made strides to adopt a welfare system which is more comprehensive and accommodating of everyone; under the current system abused children are being taken into residential care facilities where they are cared for and nurtured by professional staff members (Loffell, 2008; Patel, 2005). It is paramount that these children recognise the second chance given to them. Some of the participants are grateful for being given a second chance in life. One participant shared his appreciation for what centres like this CYCC do for children who are destitute and without a home: *"It is a good place since it*



*takes care of kids; and provides them with love, and also children who do not have a home. Children also attend school.”*

The accounts of the participants are supported by the literature, and the Department of Social Development (2008) also states that residential care facilities are doing a great job in addressing issues of abuse and neglect. However, despite the strengths of these homes, there are also some challenges. Smith *et al.* (2013) argue that children adapt differently to residential care facilities; some find it easy to adapt, while others struggle to settle fully into residential facilities. Resource constraints make it challenging for some CYCCs to fulfil all the needs of the children (Smith *et al.*, 2013). One participant supported this view and expressed his disapproval of and dissatisfaction at living at this CYCC by saying *“I do not like this place; they do not treat us well. They want us inside the houses very early, sometimes around 6 pm,”* with another participant adding *“This place is boring big time, some aunties are cheeky and boring, the aunties who are seniors on call. When we ask them for something they do not respond to us well, and when we ask why, they tell us we mustn’t tell them how they should do their jobs.”*

Another participant indicated mixed feelings at being at the centre. He liked it there, while at the same time he does not: *“This CYCC is a good place for children, but sometimes it gets boring.”*

## **ADOLESCENT BOYS’ EXPERIENCES OF LIVING AT A CHILD AND YOUTH CARE CENTRE**

The participants living at the CYCC indicated that they have a range of different experiences, which were then classified as being either positive or negative.

### **Positive experiences**

A theme that emerged from the analysis of responses and mentioned by seven participants was the notion of positive experiences and the fact those adolescent boys liked being at the centre. The reason for their liking this centre was because of the love and care they received from staff members. Seven of the ten participants revealed that the centre takes good care of them and as a result they do not have any complains about the place. *“They keep children and they do not treat children bad; they care for children who do not have a home.”* Some children struggle with adjustment after being admitted into this setting. However, the findings provide evidence that some staff members, particularly child care workers, go beyond the call of duty to ensure that every child is accommodated and that reasonable steps are taken to assist the child in adjusting to the new home environment. *“Despite the challenges I faced earlier, the aunties treat us [children] well, they assist us with homework. The younger children are sometimes taken out on weekends. Every Tuesday children who have problems attends therapy.”*

Some of the participants further highlighted that the centre does enough to ensure that they are happy by offering them extramural activities. *“I enjoy going on outings; there are people who come and take us out on weekends. We go to Carnival City and play. They also buy us stuff, clothes and sweets and give us money for school.”* The Children’s Act (2005), emphasises that children should be allowed opportunities to be involved

with the general community. From the above response, it was indicative that the centre is doing something to enrich the experiences of the children in their care, as children are taken out on weekends to have fun. This will help ease the process of reunifying the children with their families and their respective communities (Children's Act, 2005).

### **Negative experiences**

There were three participants who indicated challenges they faced which had to do with favouritism, differential treatment and unequal treatment from staff members. One participant felt that the staff members liked some children at the cost of others. *"I like this place, but the only challenge I have is Molemo [fellow resident] who is treated special by the aunties, especially the seniors on call. Even when he is wrong, they do not put the blame on him. Last weekend he broke into the room of aunty Tshepiso and stole some things. They did nothing to him."* There was also one participant who shared his experiences of differential treatment from staff members: *"I have problems with Tshepiso [staff member] because, sometimes, she picks on me. Last weekend there was a broken window. I was shouted at while it was not me."*

A study in an urban community of California investigated adolescents' identity development in foster care; it was found that children in foster care setting are prone to unfair and unequal treatment, because of their inferior status in a foster care setting (Kools, 2000). These experiences appear to be more intense during the adolescent stage, when the desire for conformity and sameness is acute; unfortunately, the adolescent child has encounters with children and adults who hold stereotypical views about them (Kools, 2000). According to Kools (2000), the institutional structure of a foster care setting can lead to abuse and maltreatment of children. Zastrow (2010) also argues that it is important for residential care facilities to address the social stigma which is associated with living at such a facility. This finding indicates that children are vulnerable to differential treatment by virtue of being in residential care facilities.

## **PROGRAMMES OFFERED TO ADOLESCENT BOYS AT THE CHILD AND YOUTH CARE CENTRES**

### **Educational and non-educational programmes**

Most of the adolescents from the centre revealed that the centre offers some educational and non-educational programmes. Participants indicated that the centre offers them learning and study sessions in line with their study needs. *"There is study session every day after 3 pm, where they, Aunty Dimakatso [a staff member], assist us with homeworks and other school work activities."* It was clear that these adolescents appreciated the assistance that they received from the centre, which helps to improve their performance at school. However, some participants expressed their concern about lack of programmes or activities at the centre; the only formal programme in which they could participate was the study sessions. Some hinted that sport might be an issue; however, they felt it was not taken seriously because they lacked soccer balls. They have to share them with females, indicating the sports programme is not consistent because of a shortage of equipment. *"Together with my friends Thabo and Jacky we play soccer*

*every afternoon. But there is a shortage of balls. We share the available ball with young children. Sometimes it is frustrating because we would be looking to play, but to find there is no ball for us.*” The findings indicate the need to have proper policies guidelines in child and youth care centres that would help to ease any confusion about what programmes to offer the children. The Children’s Act (2005) provides guidelines on what sort of programmes CYCCs can offer to children, including adolescent boys.

### **Therapeutic programmes**

Three participants mentioned therapy as one dominant programme which is offered to children and adolescents at the centre. Children with behavioural and social problems are often referred to psychologists or to social workers, where they could get assistance. This theme was captured in this response: *“those who do not listen to the aunties are sent to therapy. They go there every Tuesday; when the behaviour changes you no longer go.”* Another participant added: *“Every Tuesday I see a therapist but not everyone sees a therapist, only children with problems see a therapist.”* It was indicated that the centre is doing a good job in placing children in relevant programmes that address the psychological and emotional wellbeing of the child in particular, as prescribed by the Children’s Act (2005). However, it is vital to note that the study was also interested in programmes which are aimed at enhancing the adolescent boys’ cultural identity. Argument(s) can be made that programmes offered to the children are of greater importance especially in addressing the psycho-social problems that come from being neglected, abused and exploited (Children’s Act, 2005); however, at this stage those programmes are not inclusive or sensitive to the children’s culture and heritage, because they are often provided in a different language.

According to Nsamenang (1995), children’s development in Africa is often understood in line with Western developmental psychology; that creates problems, as less emphasis is given to issues of culture, ethnicity and language. As a result, cultural development is often limited to the values of Western cultures, which often prescribe individualistic cultural practices (Nsamenang, 1995). Nsamenang discovered that as a result of over-reliance on Western approaches or practices, there is evidence of neglect of indigenous culture and heritage in favour of Western practices (Nsamenang, 1995). In Africa, this is further worsened by a lack of intervention instruments which are contextually relevant, while the over-use of Western intervention techniques poses a challenge (Nsamenang, 1995; Robinson, 2001). The study investigates the grounds for this argument.

## **ADOLESCENT BOYS’ USE OF HOME LANGUAGES AT THE CHILD AND YOUTH CARE CENTRES**

### **Never used mother-tongue**

Four participants revealed that they never use their home language when communicating with staff members, including social workers, psychologists, child care workers, therapists and educators. One of the participants said he always uses English or Afrikaans as a medium of communication with others. The participant wishes to communicate in other languages, but that remains a challenge: *“Sometimes, I wish to*

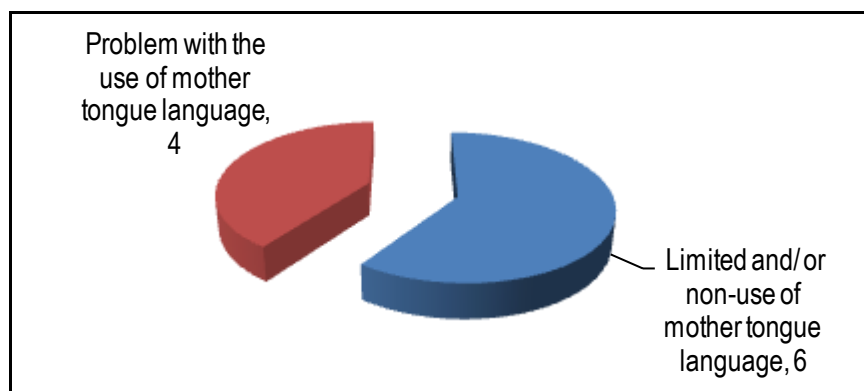
*communicate in other languages but I cannot, because I cannot, because we always use English or Afrikaans, because those are the languages which are well understood here.”* Another participant added: *“Not necessary, I do not speak my home language. I only speak English; the problem is that I cannot speak Sotho very well.”*

### **Use mother-tongue with some staff members**

Most participants acknowledged that it is a challenge for them to communicate in their local languages, because most of the staff members are unfamiliar with mother-tongue languages, except for some child care workers who are able to communicate in indigenous languages such as Zulu, Sotho, Xhosa and Sepedi: *“The aunties do not always speak with me in English; sometimes they use Sotho when speaking with me”* and *“Some of the aunties speak IsiZulu and Sotho so they talk to some children in Zulu but some [aunties] only use English.”* Considering how diverse the CYCCs are, one participant still felt left out because he does not speak or understand any of the indigenous languages: *“For me, no, for other kids yes, especially those who can speak Zulu and other languages. Because the child care workers like to use those languages [Zulu].”*

The accounts of the participants were supported by the literature and information on the employment of staff members at CYCCs. At the time of the study more psychologists were employed (counselling, clinical and educational psychologists), meaning children’s therapeutic interventions were done more by psychologists than social workers. This problem is not new, especially in relation to the presentation of psychologists in terms of race in South Africa. A report by Health Profession Council of South Africa (HPCSA) in 2002 indicated that 90% of the registered psychologists and therapists were whites, while 80% of registered intern psychologists were also whites (Foxcroft & Roodt, 2005; Mayekiso Strydom, Jithoo & Katz, 2004). The consequences of this over-representation of certain races in some careers include communication barriers and cultural insensitivity (Mayekiso *et al.*, 2004). This threatens the level of engagement and communication between professionals and the children they are supposed to serve (Mayekiso *et al.*, 2004; Robinson, 2001).

**FIGURE 1**  
**ADOLESCENT BOYS’ USE OF MOTHER-TONGUE WHEN INTERACTING WITH SOCIAL WORKERS, CHILD CARE WORKERS, EDUCATORS AND PSYCHOLOGISTS**



### **Limited and/or non-use of home language**

Of the 10 participants, four thought it was important to communicate with other people including social workers and psychologists in their mother-tongue. However, this is impossible, because not everyone in the centre can communicate in the mother-tongue languages. As a result, they believe English is ideal since it makes communication easier and almost everyone understands it. The reason given for the prioritisation of English was because everyone understands it: *“Not all of them understand other languages. I use English to speak with most people, but I sometimes use [my mother-tongue] when I speak with the aunties”* and *“Not necessary, I do not speak my home language, I only speak English.”* Almost all of the participants agreed they do not use mother-tongue languages such as Sotho, Zulu or Xhosa when speaking with staff members, except for child care workers, whom they refer to as “aunties”, with whom they were able to communicate in their respective languages. For other professionals they always use English and Afrikaans. In South Africa most child care workers are local people and in this CYCC 95% of them were black (National Child Care Workers, 2015).

However, that was not the case with the other professionals such as psychologists, because they were not black and were unable to communicate in the mother-tongue languages. A study in Birmingham investigated issues of race, cultural identity and development of self-esteem in black adolescents (Robinson, 2001). The findings indicated that children and adolescent children have to face cultural neglect and institutional racism and this disregarding of their culture tends to affect their self-esteem (Robinson, 2001). Contributing factors identified included social workers and psychologists who express little interest in making an effort to understand other people’s culture – this could be described as cultural racism (Robinson, 2001). Cultural racism is defined as “a new form of racism, which includes the individual and institutional expression of the superiority of one race, culture and heritage over the others” (Robinson, 2001:170).

### **Problem with the use of mother-tongue**

Most of the participants indicated that they would love to use their home languages; however, they have forgotten key words in their respective languages. One of the participants indicated that after three years at the centre he has forgotten his language and would struggle to express himself in his mother-tongue should the need arise. Participants alleged that the centre does not give them the opportunity to speak in their mother-tongue languages. *“Using Sotho will not be good, uncle; look, there is no one who would understand. I myself also have challenges in writing and understanding Sotho ... at school I am studying English and Afrikaans.”* And *“I do not use home language all; I use English because I understand it better than Zulu. At home, we speak Zulu but my mother uses English when communicating with me as I am not that good in Zulu.”* The accounts of the participants do not reflect what the Children’s Act (2005) sets out to achieve. The Act recognises diversity and urges every child and youth care centre to try and accommodate every child’s cultural needs (Children’s Act, 2005).

## RECOMMENDATION FOR PROGRAMMES OR ACTIVITIES THAT COULD ENHANCE ADOLESCENT BOYS' CULTURAL IDENTITY

### **Sport**

The responses of two participants revealed their love of sport and suggested how sporting activities could be used to integrate them into the general community. Participants were convinced that having various sporting activities in the communities would help to ensure that they do not forget their cultural identity. This theme was captured in the following response: *“I like it when we go out to play with other children in the community. In the past, we used to play at Methodists church various games. We used to go with the aunties to play in Carnival City; some of children have hosts who will take them out on weekends. That helps me because I learn a lot of things. My friends stay in Germiston, when I play with them I learn a lot of things.”*

This recommendation is in line with the provisions of the Children's Act (2005). According to this Act, children in residential care facilities should be offered recreational activities (Department of Social Development, 2007). Being in a residential care facility should not be equal to being isolated; children should be allowed to engage in activities which occur in their communities (Department of Social Development, 2007). This will ease the process of having to reunite the concerned child with his or her family later (Department of Social Development, 2007). However, because of limited resources many non-profit organisations fail to provide the needed programmes or activities for the children (Dutschke, 2006). Staff constraints are also one of the alarming concerns in those organisations, since they often depend on volunteers who are often not trained to intervene with children (Dutschke, 2006).

### **Increased contact with the community**

There was a common understanding that more contact with the community would enhance the child's understanding of his or her culture (Holland, 2009). This is because, when the children go outside and meet with new people, this might lead to an understanding of the mother tongue, as these languages might be used instead of English. Two of the participants recommended an increase in contact with communities, so that they can learn more about who they are, and also be exposed to other languages. This theme was highlighted when one participant said: *“The problem is that the aunties do not allow us to go out a lot, and when we go out it will be for a short time. Last time I went to Carnival City, and it was nice. I spoke with other children there and learnt a lot from them. We also got presents. I liked the machine games.”* Another participant elaborated by adding *“When outside I do not use English, I speak Sotho even though I am not good at it. At school all my friends are Sothos.”*

### **Diversification of staff members**

The responses of three participants indicated that there was a need to have more culturally relevant employees. The current mismatch between professionals and the client system is of concern to them. Participants thought it is important to have more employees who would be able to communicate in their indigenous languages and so

overcome the prioritisation of English as a medium of communication. As one of the participants said: *“I do not know, but I think it can be helpful if this CYCC can bring more people who are able to speak our languages. It will help me learn my home language, and also to learn other people’s languages.”* Another participant supported this idea by saying. *“The therapists do not understand any languages except English and Afrikaans. They only speak those languages. It will help if the CYCC can bring therapists who are able to speak in other languages.”*

This finding concurs with the literature; according to the UNICEF (2012) annual report, child and youth care centres globally are diverse and experience various challenges. Common challenges are resources constraints; lots of CYCCs are non-government organisations and therefore, funding is one of the limiting factors in their operations (Loffell, 2003; UNICEF, 2012). From this study the researchers discovered CYCCs are not immune to challenges that impact negatively on children.

### **Celebration of Heritage Day**

Two participants highlighted the importance of celebrating Heritage Day every year. The participants regard Heritage Day as one important day which should be appreciated. This is a day where everyone gets to celebrate their cultural orientation and also get to understand other people’s cultures and embrace them. This was articulated by one participant who said: *“I think it can be fun if we can also celebrate heritage day, wherein each one of us wear their cultural attires representing their own cultures and celebrate.”*

The Bill of Rights in the South African Constitution (1996) supports this finding and also states that every child in South Africa is entitled to a number of rights, including cultural, heritage and language rights (Richter & Dawes, 2008). South Africa reserved this day (Heritage Day) for the acknowledgment and celebration of the different cultural groups in the country (Constitution, 1996; Richter & Dawes, 2008). It is therefore important for CYCCs to allow their clients and staff members to form part of this day (Constitution, 1996).

### **Increased attendance at community activities and cultural events**

One participant believes that it is important from time to time to attend community activities and cultural events. He felt this CYCC was not active in community activities and as a result children are missing out on what is happening in the communities. This was illustrated by a participant who said: *“I think they can have cultural groups, do cultural dances, and have small groups where children showcase their cultures and talent. So we can learn more about our cultures and also get to know other children’s cultures.”* This finding is in line with the literature: Robinson (2000) also argued that children who are less active in community activities or processes are more likely to suffer from poor self-esteem and identity confusion. In this regard, one of the CYCC’s key programmes is the Independent Living Programme, which is all about teaching children independent living strategies, so that they could learn to do things on their own and to grow into responsible adults. Social workers are expected to build community strengths by encouraging the active participation of everyone, particularly orphans and

other vulnerable groups who are often victims of oppression and marginalisation (Robinson, 2000; Zastrow, 2010).

## **CONCLUSIONS**

The findings from the study indicate that adolescent boys are well catered for in the centre; this was supported by accounts of their own experiences of being at the centre. They are offered programmes which keep them busy; those who are struggling in school are assisted by qualified teachers after school hours. That makes their experiences more fulfilling and worthwhile. However, it was found that participants faced cultural challenges. There appeared to be a mismatch between staff members and children, which impacts negatively on children's language practices and the preservation of their culture. Children in residential care facilities are more likely to develop intellectually and have a stable self-esteem if the locality of the centre is closer to the places they originate from, for example, family and friends (Robinson, 2000). These findings provide evidence that most centres are isolated from communities. The centre studied here is located in a suburban area in Johannesburg's East Rand region. As a result, residents feel isolated and they longed to have contact with the outside community. The shortage of a diverse range of professionals in some key fields of practice jeopardises the welfare of these children, especially their cultural identity.

## **RECOMMENDATIONS**

### **Recommendations for policy development/amendment in child and youth care centres**

- It is important for the Department of Social Development (DSD), as a custodian of Child and Youth Care Centres in South Africa, to ensure that centres comply with the Children's Act (2005). Chapter 2 of the Act stresses the importance of maintaining children's social, cultural and religious values in CYCCs. Also, the government should be clear on how to implement this Act and other laws governing non-government organisations and, if possible, impose penalties for non-compliance.
- There is a need for improved funding for NGOs so that they will be able to employ and retain employees who are culturally relevant and who can help in the development of these children.
- Centres, with the assistance of the government, need to ensure a balanced representation of professionals in residential care facilities. The employment of social workers, psychologists and therapists should match the diversity of clients' needs.

### **Recommendations for future research**

- The setting of the centre proved to be a challenge for the study methodology, because of the closeness of participants to each other. Participants may have influenced each other and provided socially desirable answers. For future studies, it is advisable to make use of several methods of data collection, for example, focus groups and interviews. This will help ascertain the accuracy and validity of the data collected.



- It is important for similar studies to be carried out in other centres so as to further document issues affecting adolescent boys in CYCCs, and so as to develop and enhance intervention strategies.

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## REFERENCES

- ADAMS, R. 2012. **Working with children and families: knowledge and contexts for practice**. Palgrave: Macmillan Publishers.
- BABBIE, E. 2001. **The practice of social research**. Belmont, CA: Wadsworth/-Thomson Learning.
- CHILDREN'S ACT, ACT NO. 38 OF 2005. [Online] Available: [http://www.dsd.gov.za/index.php?option=com\\_docman&task=cat\\_view&gid=60&Itemid=39](http://www.dsd.gov.za/index.php?option=com_docman&task=cat_view&gid=60&Itemid=39) [Accessed: August 2015].
- CONSTITUTION OF SOUTH AFRICA, ACT NO. 108 OF 1996. [Online] Available: <http://www.constitutionalcourt.org.za/site/home.htm>, [Accessed: August 2015].
- DE VOS, M. 1997. The social orientation of a child in a children's home. **Social Work Practice**, 19(2):15-20.
- DEPARTMENT OF SOCIAL DEVELOPMENT, 2007. [Online] Available: <http://www.dsd.gov.za/dmdocuments/Childexploitation.pdf>, [Accessed: March 2015].
- DEPARTMENT OF SOCIAL DEVELOPMENT, 2008, [Online] Available: <http://www.dsd.gov.za/dmdocuments/CPR%20pamphlet.pdf> [Accessed: March 2015].
- DUBE, N. & ROSS, E. 2012. Sanctuary or double-edged sword? Challenges confronting adolescents living at Nkosi's Haven in Johannesburg, South Africa. **Journal of Social Aspects of HIV/AIDS**, 9(4):200-209.
- DUTSCHKE, M. 2006. Children's Right to social service. **Child and Youth Care Work**, 24(4):4-10.

- FOXCROFT, C. & ROODT, G. 2005. **An introduction to psychological assessment in the South African context**. Cape Town: Oxford University Press.
- HOLLAND, S. 2009. Looked after children and the ethic of care. **British Journal of Social Work**, 40(6):1664-1680.
- JOHANN, R. 1996. Street children in South Africa: findings from interviews on the background of street children in Pretoria, South Africa. **Adolescence**, 3(5):423-466.
- KOOLS, M. 2000. Adolescent identity development in foster care. **Journal of Family Relations**, 46(3):263-271.
- LEININGER, M. 1994. Evaluation criteria and critique of qualitative research studies. **Critical Issues in Qualitative Research Methods**, 95-115.
- LOFFELL, J. 2008. Developmental social welfare and the child protection challenge in South Africa. **Practice**, 20(2):83-91.
- LOFFELL, J. 2003. **Children in need of care**. Unpublished manuscript. The State of Children in Gauteng. A Report to the Premier, Gauteng Provincial Government. Pretoria: Child and Family Development, Human Sciences Research Council.
- MAYEKISO, T., STRYDOM, F., JITHOO, V. & KATZ, L. 2004. Creating new capacity through postgraduate selection. **South African Journal of Psychology**, 34(4):657-671.
- NATIONAL CHILD CARE WORKERS, 2015. Annual Report 2014/15. [Online] Available: <http://www.naccw.org.za/images/PDFs/Annual%20Reports/NACCW%20Annual%20Report%202014:15.pdf> [Accessed: July 2016].
- NSAMENANG, A. 1995. Theories of Developmental Psychology for a cultural perspective: a view from Africa. **Psychology of Developing Societies**, 7:1-19.
- PATEL, L. 2008. Getting it right and wrong: an overview of a decade of post-apartheid social welfare. **Practice**, 20(2):71-81.
- PATEL, L. 2005. **Social Welfare and social development in South Africa**. Cape Town: Oxford University Press.
- PATTON, M.Q. 2005. **Qualitative research**. New York: John Wiley & Sons, Ltd.
- PINKERTON, J. & MUHANGI, D. 2009. Linking Social Welfare Development with cash transfers and education to promote child wellbeing: what we know and what we need to know. **Journal of Vulnerable and Youth Studies**, 4(1):55-67.
- RANKOPO, M. & OSEI-HWEDI, K. 2011. Globalization and culturally relevant social work: African perspectives on indigenization. **Journal of International Social Work**, 54(1):137-147.
- RICHTER, L. & DAWES, R. 2008. Child abuse in South Africa: rights and wrongs. **Child Abuse Review**, 17(2):79-93.
- ROBINSON, L. 2000. Racial identity attitudes and self-esteem of Black adolescents in residential care: an exploratory study. **British Journal of Social Work**, 30:3-14.

- ROBINSON, L. 2001. A conceptual framework for Social Work practice with Black children and adolescents in the United Kingdom. **Journal of Social Work**, 1(2):166-185.
- ROWLEY, J. 2002. Using case studies in research. **Management Research News**, 25(1):16-27.
- SCHMID, J. 2006. Responding to the South African Child Welfare crisis. **Canadian Social Work Review**, 23(1):111-127.
- SCHMID, J. & PATEL, L. 2016. The interaction of local and international child welfare agendas: a South African case. **International Social Work**, 59(2):246-255.
- SHEAFOR, B. & HOREJSI, H. 2010. **Techniques and guidelines for Social Work practice**. United States of America: Cole Publishers.
- SMITH, M., FULCHER, L. & DORAN, P. 2013. **Residential child care in practice: making a difference**. United States of America: The Policy Press.
- STATISTICS SOUTH AFRICA. 2011. Mid-year population estimates 2011. [Online] Available: <http://www.statssa.gov.za/publications/P0302/P03022011.pdf> [Accessed: July 2016].
- STRYDOM, H. 2002. Ethical aspects of research in the social sciences and human services professions. In: DE VOS, A., STRYDOM, H., FOUCHÉ, C. & DELPORT, C. **Research at grass roots: for the social sciences and human services professions**. Pretoria: Van Schaik Publishers, 62-75.
- UNICEF ANNUAL REPORT. 2012, Child Protection in West and Central Africa. [Online] Available: <http://www.data.unicef.org/resources/a-statistical-snapshot-of-child-protection-in-west-and-central-africa.html>, [Accessed: August 2015].
- ZASTROW, C. 2010. **Introduction to Social Work and Social Welfare**. Australia: Brooks Publishers.

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