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PERCEPTIONS OF CAREGIVERS ON THE INFLUENCE OF CHILD SUPPORT GRANT ON CHILDREN'S WELL-BEING: A CASE STUDY OF MPOPHOMENI AREA IN UMGUNGUDLOVU, (PIETERMARITZBURG), KWAZULU NATAL

A Research Report Presented to

Department of Social Work,

School of Human and Community Development,

Faculty of Humanities,

The University of the Witwatersrand

In partial fulfilment of the requirements
for the degree of Master of Arts in the field of Social Development

By

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September 2018

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DECLARATION OF PLAGIARISM

I solemnly declare that this work is my own and I did not commit any plagiarism whatsoever. I correctly referenced and acknowledged every source and its authors as I used it in this report.

Signature: **Date: 3 t h S e p t e m b e r** 2018

DEDICATION

I dedicate this study to my late mother, Alice Mazhara who has been the source of my motivation and strength

ACKNOWLEDGEMENTS

Firstly, I would like to thank my family and friends whose names I may not be able to mention here due to space constraints. This study would not have been possible without the assistance and support from you.

Secondly, I would like to express my gratitude to my eminent supervisor Mrs Nkala-Dlamini for her encouragement, patience and support throughout the study.

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I want to thank the women participants from Mpophomeni community who sacrificed their valuable time, and experiences for the purpose of this study.

I also want to thank my eminent editor Dr Felix Okoye [PhD]. Thank you for the job well done.

Finally, my special thanks goes to God Almighty for giving me the strength, knowledge, as well as the opportunity to complete this study successfully.

ABSTRACT

There have been vast studies on child poverty in South Africa as a result of the numerous programmes that aim to help families maintain the well-being of children. Amongst these programmes is the child support grant (CSG) which was implemented since 1998. The CSG grant is being given to vulnerable (primary) caregivers for the provision of the child's basic needs. In some families, CSG happens to be their sole income and this constitutes the dark spot this study intends to explore. Hence, I employed qualitative methodology and through explorative research design to investigate the actual influence of the CSG on the recipients' children. Purposive sampling and snowball sampling were applied to select a sample of 20 caregivers benefiting from CSG, between the age of 21 and 60. In South Africa, KwaZulu-Natal province has been known with high prevalence of HIV and AIDs, as well as poverty amongst blacks, so I chose Mpophomeni in UMgungundlovu district with respect to accessibility and it is a black community. Semi-structured interviews were used to collect data whilst thematic analysis was applied for data analysis.

This study reveals that CSG truly constitutes the only source of income for so many families who benefit or are the recipients of the grant. Most caregivers interviewed accepted that they actually invest on CSG as a last resort. As such CSG is used by most caregivers to cover their own needs as they easily get away with it. Also, CSG is used for many other primary caregivers as self-development fund which often are spent on adult education. This study reveals that many caregivers use CSG on expensive hairdressing and alcohol consumption. Participants were asked to comment on this wayward since the government seemed to remain tacit about the worrying situation. It appears as if the government has run out of options or would not want to act. The recipients suggested adoption of vouchers instead of cash which can only be used in certain set of shops. But would this solve the problem where the children beneficiaries are neglected by their caregivers? What other possible options would the government adopt to ensure that the money is spent accordingly? This study is more of thought-provoking, as it opens up a dialogue, as well as calling subsequent researchers to engage this topic further for clearer policy insights. However, this study concluded that CSG though contributes to the wellbeing of the recipient children and provides income to access their basic needs, yet a lot of violation happens without check. The study recommends that the Department of Social Development and local governments may partner to engage further in monitoring and evaluating with an aim to eradicate poverty. The social workers and SASSA officials need to work together in monitoring and reviewing CSG utilisation. Hence, the findings of this study contribute to the intervention measures leading to the use of CSG to maintain the child's well-being in South Africa.

ABBREVIATIONS

AIDS:	Acquired Immune Deficiency Syndrome
B.C:	Before Christ
BFP:	Bolsa Família Program
BTR:	British Tyre and Rubber
CGP:	Zambia Child Grant Programme
CSG:	Child Support Grant
CSSC:	Community Social Support Committees
DSD:	Department of Social Development
ECD:	Early Childhood Development
FAMSA:	Families South Africa
FAO:	Food and Agriculture Organization
HIV:	Human Immunodeficiency Virus
HREC:	Human Research Ethics Committee
IDP:	Integrated Development Plan
ILO:	International Labour Organisation
KZN:	KwaZulu-Natal
LEAP:	Ghana Livelihood Empowerment against Poverty
MAWU:	Metal and Allied Workers' Union
NHIS:	National Health Insurance Scheme
NIDS:	National Income Dynamics Study
OVC:	Orphans and Vulnerable Children

PWD:	Person with Extreme Disability
SADC:	Southern Africa Development Community
SASSA:	South African Social Security Agency
SCTP:	Malawi Social Cash Transfer Programme
SMG:	State Maintenance Grant
UK:	United Kingdom
UN:	United Nations
UNESCO:	United Nations Educational, Scientific and Cultural Organization
UNICEF:	United Nations Children's Fund

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CHAPTER 1:

INTRODUCTION TO THE STUDY

1.1. INTRODUCTION

This chapter serves as an introductory section of the study. It highlights the statement of the problem and rationale of the study, aim and objectives of the study, study setting, the theoretical framework, and a summary of the study methodology. This chapter also provides the structural overview of the study.

There is a direct relationship between the children's well-being and the families' ability to provide the essential physical, emotional and social needs (Schor, 1995). In order to meet a range of needed services, households need income, meaning that lack of income risk children's rights to nutrition, education, and healthcare services (Hall & Chennels, 2011). Brooks-Gunn and Duncan (1997) state that income poverty is the condition of not having enough income to afford essentials such as food, clothing and shelter. According to most researchers and professionals without early intervention, poverty may have negative effects such as affecting the timing of a child's entry into school, educational attainment and economic productivity, which in turn result in intergenerational poverty effects **(**Case, Hosegood & Lund, 2005; Grinspun, 2016; Lund 2011; Mduduzi, 2011; Fernald, Gertler & Neufeld, 2008).

The national and international commitment by Governments as illustrated in the Convention on the Rights of the Child (United Nations, 1990) and the African Charter on the Rights and Welfare of the Child (Organisation of African Unity, 1999) and 1996 South African Constitution together with the Children's Act (2005) set up monitoring, and protection clauses that specifically promote the well-being of the children through the legislature and government policies. According to the Convention on the Rights of the Child, every government in the world pledge to protect, respect and fulfil the children's rights. As such most governments in developing countries introduced the cash transfer programmes as a way to improve the well-being of the children. This includes countries in Latin America such as Mexico's Oportunidades, Bolsa Alimentação in Brazil, Red de Protección Social in Nicaragua, Programa de Asignación Familiar in Honduras, Familias en Acción in Columbia,

Subsidio Unico Familiar in Chile, and Program of Advancement through Health and Education in Jamaica (Rawlings & Rubio, 2005). In South Africa CSG was introduced.

In South Africa, a population of 18.5 million (37% of the total population) people are children under the age of 18 years (Stats SA, 2014). The country is regarded as a middle-income country because over seventy per cent (70%) of children live in the most impoverished households. In South Africa, a population that is classified as poor live with less than R604 per month, while those who are extremely poor, live with less than R322 per month (Meintjies & Hall, 2013, p. 86; 90). South Africa has achieved universal school education but nearly half of the children who started school never make it to grade 12 (Save the Children South Africa, 2013). The analysis has shown that since 2003 social security, programmes such as CSG led to a reduction of child poverty. According to the South African Social Security (SASSA) (2016), CSG has covered more than 11,931,494 million children in the country. The Department of Social Development (DSD), South African Social Security Agency (SASSA) and United Nations Children's Fund (UNICEF) (2012) acknowledged that the CSG is one of the best-targeted programmes in the world. This acknowledgement and commendation was based on the how many recipients CSG reached in across the country but how the grant benefit the child or children per se is still not clear.

In 1998, CSG had already a cash transfer of R100 per month per child directed to primary caregivers with children up to seven years of age (Government of South Africa, 2009). By 2010, the age limit of the eligible children was adjusted to 18 years. The amount has also increased gradually since April 1998. In 2018, the beneficiaries received R380 per month for each child although tough economic times and natural disasters such as drought and floods push the cost of living high in the country. This raises the question of whether this particular grant will ever be enough to break the cycle of poverty and influence the well-being of the concerned children (van Driel, 2009).

1.2. STATEMENT OF THE PROBLEM AND RATIONALE FOR THE STUDY

CSG is a cash transfer programme meant to cover costs of basic needs for the children and families in poverty (van Driel, 2009). The identification of the beneficiaries of the CSG is still a serious concern as there are lots of ghost beneficiaries. Also the criteria for identifying the qualifying persons who would benefit still need a lot of strengthening and consolidation. These mentioned issues are beyond the scope of this study. The CSG in South Africa is still regarded as unconditional (Aguero, Carter & Woodlard, 2006; Holmes & Bhuvanendra, 2013; Zembe-Mkabile, Ramokolo,

Sanders, Jackson, & Doherty, 2016). The word 'unconditional' means that there is no legal binding on how caregivers spend the grant. It is assumed that the grant is spent on the child or children whose caregivers collect the money. But this is what one can describe as mere imagination given the ongoing situations of joblessness and unemployment. The South Africa's CSG is the largest in the African continent yet when it comes down to actualizing its objectives, nobody cares to seriously talk about it.

Although CSG covers up to11, 931,494 million children in South Africa (SASSA, 2016) and still being considered as poverty reduction strategy, there is an increasing need to evaluate the sole aim for which it was implemented (Khosi, 2013; Patel, 2005; UNICEF, 2010). The children are the future generation and a nation that fails to protect its younger ones is heading to destruction (Schor, 1995). In order to improve implementation process and ensure that the grant fulfils its objectives continuous monitoring and evaluation is a sine qua non.

According to Schor (1995), a child's health and well-being are directly related to the family's ability to provide physical, emotional and social needs. A family's success in meeting a child's well-being depends on social support and their status in the economic and social hierarchies in which they live although Schor (1995) seems to undermine the fact that most children from poor background tends to break out of their poor background in many occasions and in many other circumstances. This situation in South Africa is unique. During my initial reading around the topic while drafting the proposal for this study I noted that many local researchers such as Khosa, (2013); Patel, Knijn, and Van Wel, (2015); Makiwane, and Udjo, (2006) Mduduzi, (2011); and Triegaardt, (2005), and international researchers such as Lindert, Linder, Hobbs, and De la Brière, (2007); Pozarny, 2015; Owusu-Addo, (2014) and Van Stolk & Patil, (2015) have done a lot on the effects of this particular grant on the children. In most of these studies done on this issue, many researchers seemed to take for granted the fact that caregivers within families are faced with challenges that may affect their role to children under their care. This aspect remains what I may describe as a dark spot.

This study is engendered by this discovery because the tacit approach given to this gray area of grant policy monitoring would continue to detract from effort to promote good child development outcomes in South Africa. Apparently the caregivers face challenges such as material deprivation, low levels of education, lack of access to jobs and services, social isolation, mental and physical ill health, and domestic violence (Tomlinson, 2013).

There are reports claiming that South Africa has enough food for everyone, who live in it (Du Toit, 2011). The truth is that the accessibility and affordability have been a problem among poor households due to unemployment and prevalence of HIV and AIDS (Devereux & Waidler, 2017; Du Toit, 2011). This gives the credence to the introduction of the food and nutritional programme in schools by the government. The shortages of food and nutrition amongst the South African children was found to be detrimental to actualizing education for all as such the government introduced the nutritional programme at schools to provide healthy food in most rural schools (Department of Basic Education Annual Report, 2009/10). This programme has said to be very helpful though not all schools offer the programme. The point hence is that nutritional programme at the schools appear to be more useful to the children than the CSG. According to the report the social grants contribute the highest share of 42% to poor households, but any misuse of any of the grants can contribute to food insecurity instead of alleviating it (Department of Basic Education Annual Report, 2009/10).

Meanwhile, as one may think that the grant is misused, the people (especially the caregivers) complain that the money is too little to cover all the requirements of the children (van Driel, 2009). There is a possibility that most of these people consider part of their own problems as part and parcel of the child's problem which the CSG must surmount. In some families, CSG remains the sole income meaning it is difficult to assist recipients in breaking the cycle of poverty with the amount of the CSG (van Driel, 2009).

1.3. AIMS AND OBJECTIVES

Aim

The study aimed to elicit caregivers' perceptions on the influence of Child Support Grant on children's well-being in Mpophomeni area which is located in UMgungundlovu District (Pietermaritzburg) KwaZulu-Natal.

Objectives

- To determine caregivers' perceptions on CSG.
- To explore the role(s) played by CSG on the well-being of the children.
- To elicit the views of caregivers on how CSG can be improved to meet the needs of children in South Africa.

1.4. KEY RESEARCH QUESTION

What are the caregivers' perceptions on the influence of the CSG on children's well-being?

1.5. STUDY SITE

Mpophomeni is a township that is located in UMgungundlovu District Municipality in the KwaZulu-Natal (KZN) province of South Africa. In 2011, the township had a population of 25732 composed of 54.03% males and 45.97% females (Stats SA, 2011). Mpophomeni is known of its historical developments during apartheid in 1985 when workers at British Tyre and Rubber (BTR) who were resident in the township went on strike in support of demands for the recognition of the Metal and Allied Workers' Union (MAWU). This led to the dismissal of the workers and social instability in the township which later returned to peace by the democratic government (Denis & Dlamini, 2015). Mpophomeni has thirteen schools, seven crèches that are accessible to the local community and one clinic though with an adequate medical supplies and staff. The main hospitals are situated about 35 kilometres away from the township (uMngeni Local Municipality Integrated Development Plan (IDP), 2012). The infrastructure in the township is characterised by narrow roads and old buildings. Also the township has high prevalence of poverty, unemployment, crime, drug abuse and highest rate of HIV and AIDS infection in the KZN province (Baiyegunhi, & Makwangudze, 2013; Thorstensen, 2009).

1.6. THEORETICAL FRAMEWORK

1.6.1. Ecological perspective

The study adopted the ecological perspective as the theoretical framework. The ecological perspective is based on the biological science of ecology, which scrutinizes the interaction of people with their physical, social, and cultural environments and how each influence and shape one another (Gitterman, 2009). This includes a very thorough examination of the nexus between the physical environments and the constructed world of the participants. The theory refers to the social environment as the socialisation of friends and family, social and community networks while cultural aspect of the environment comprises of values, norms, beliefs, and language that shape the individual's views, perspectives, and expectations (Gitterman, 2009). This shows that ecological perspective treat persons as active agents who shape, and are shaped by their environment (Lounsbury & Mitchell, 2009).

Furthermore, the ecological perspective holds the ideology that the person(s) and the environment's relationship can be described as being direct and positive (Gitterman cited in Teater, 2014). This implies that the individuals, families, groups, and/or communities strive to maintain a positive and healthy fitness between themselves as they harmonize their habitation to maintain the situations presented by the environment, as well as a healthy environment. The positive and healthy fit between the persons and their environment is referred as adaptedness. The adaptedness is the capability of the environment to provide the essentials and useful resources to meet the people's needs, individual strengths, and the capability to grow (Gitterman, 2009). The inability of the environment to provide the necessary resources, due to being unavailable, inaccessible, or non-existent, can lead to individuals feel negatively towards their environment. Also the level of persons' understanding of the environment determines how they react to it. The negative level of adaptive fitness lead to feeling of stress which is often the point at which individual seek help or involved with social services (Teater, 2014). This also represents the point at which one expect the government to be adequately responsive.

The ecological perspective focus on interventions which can actually improve the level of person or persons' fitness towards the environment, by improving the quality of interaction between the individual and her or his environment (Gitterman, 2009). The intervention from the state through social policies and legislations is directed to promote continual growth, development and potentialities of human beings in their respective environment. In other words, the intervention increases opportunities and engagements between the individuals and environment in terms of meeting their specific needs. In pointing the way towards, Lounsbury and Mitchell (2009) suggest that what is and is not within the capacity of individuals, families, or communities to control are likely to be the most appropriate and effective forms of intervention (Tomlinson, 2013).

The above theory is utilized in this study to investigate how the calamity of poverty, low levels of education, lack of access to jobs and services, social isolation, mental and physical ill health, and domestic violence are mostly associated with the negative environment fitness of this study's participants. The theory also helps to examine the main concern and the interventions of the state to alleviate these problems. The provision of social security is one of the countries key approaches of fighting poverty (Tomlinson, 2013). The state intervention such as the provision of the CSG is one example of purposeful intervention by the state targeting vulnerable groups in society. The theory also lays the foundation upon which the study argues though that the CSG aims to facilitate the

recipients basic needs and improve the quality of life yet the procedures remains incoherent with the beneficiaries effort to adapt and be integrates to their environment.

1.7. OVERVIEW OF THE RESEARCH METHODOLOGY

For this study, I employed qualitative research methods using exploratory research design. I drew the sample of this study from a population of 25 732 people living at Mpophomeni township. I used purposive and snowball sampling techniques for selecting my participants. In total, I chose 25 caregivers aged between 21 and 60 who were beneficiaries of the CSG, to participate in the study, but 20 were available during the time of the study. The participants were selected from caregivers who care for their own children, adopted their late relatives' children and grandmothers who cater for their grandchildren as parents. I used a semi-structured interview guide and face-to-face interviews with the individual to collect data. After collecting the data, I used the thematic content analysis for analysis.

1.8 ORGANISATION OF REPORT

This research report consists of five chapters. Chapter 1 comprises of, an introduction to the study, the statement of the problem and rationale for the study, aim, objectives, research questions, theoretical framework, a brief description of the research methodology and study site. Chapter 2 reviews relevant literature on social security focusing on its conceptualisation, relevance and importance. In the chapter, I pay closer attention to social security in South Africa as that has to do with food security of the people. The literature review thus explored CSG in terms of its impact and challenges vis-a-vis the relationship between income and child well-being.

Chapter 3 explores the methodology used for this study whilst Chapter 4 presents and discusses the study findings. In Chapter 5 I concluded the study by providing a summary of the results, conclusion as well as recommendations.

1.9. CONCLUSION

The Chapter 1 introduced the study while Chapter 2 focuses on exploring relevant local and necessarily international literature relating to social grant. The literature focuses on social security policies with emphasis on CSG vis-à-vis South African socio-economic context.

CHAPTER 2
LITERATURE REVIEW

2.1 INTRODUCTION

This chapter presents the relevant literature on South Africa's CSG programme and a description of how other countries handle their social security systems with regards to children. For instance, countries such as Mexico, Brazil, Ghana, Malawi and Zambia were sited. The chapter begins with a clarification of social security systems, it discusses the nature of social security in South African context including its impacts and challenges.

2.2. CLARIFICATION OF TERMS

2.2.1. Social Security

According to Beveridge Report (1942), Social security has its roots dated back to United States' 1935 Social Security Act and the social security programme implemented in the UK (Cichon & Hagemejer, 2007). Since then different states considered social security as a universal necessity especially to states that are members of the United Nations (UN) and International Labour Organisation (ILO) (Cichon & Hagemejer, 2007; Ginneken, 2003). Although it is a universal obligation, there is no consensus as to definition and pattern of social security, each country provides different services as social security depending on its context (Midgley, 1984; Mpedi, 2008; Patel, 2005).

The Taylor Committee of Inquiry into a Comprehensive Social Security System suggest the following definition:

> Comprehensive social protection for South Africa seeks to provide the basic means for all people living in the country to effectively participate and advance in social and economic life and in turn to contribute to social and economic development (Taylor Committee of Inquiry, 2002 p.417).

Social security provides people of South Africa with healthcare and other benefits especially for families with children. The challenge with the above conceptualisation of social security

is that it failed to acknowledge the existence of traditional and informal social security. According to Kaseke (2002), people also rely on traditional social security such as extended family system and informal social security such as stokvels to deliver needs persons cannot provide on their own. This implies that the assistance each derives from the other in most cases can be mutual. For instance, the mother who adopted two children of her late sister can buy food for herself, her child and the two children would eat together since she cannot been able to work due to time spent caring for them all. Hence it is important to mention that the conceptualization of most social security grants end to give tacit concession to this reality.

The widely used definition of social security is by ILO (2000), which defines social security as protection which the society provides for its members through a series of public measures, to offset the absence or substantial reduction of income from work resulting from various contingencies. The contingencies include sickness, maternity, employment injury, unemployment, invalidity, old age and death of the breadwinner.

2.2.2. Means test

Means test is a way of determining whether a person qualifies to receive a grant. Conducting means test requires that the government through the Department of Social Development gives grants only to those who have insufficient means to support themselves (SASSA, 2017). The measures for means test in South Africa evaluates the caregivers' income, where applicable, that of the joint income of husband and wife if married, as well as the type of area in which they are living (Budlender, Rosa, & Hall, 2005). Since April 2017, the means test threshold was set at R3 700 per month for a single person and R7 600 per month for married couples (SASSA, 2017). The South African past history accounts for very high unemployment among unqualified labour which today increases government expenditure and can account for low grants amount in the country.

2.2.3. Caregivers

A child's caregiver is a woman or man who has primary responsibility for the child on a daily basis of looking after the child (Case et al., 2005). Tomlinson (2013) states that a caregiver is a person to whom the children depend on for survival and well-being. A caregiver will need adequate food, warmth, shelter and a clean, healthy environment and care that is sensitive to children's developmental needs. In this study, the caregivers were the recipients of the child support grant. This is dealt in details in the methodology chapter.

2.2.4. Child well-being

The definition of child well-being varies according to various people (Pollard & Lee, 2003). Yarcheski, Scoloveno and (1994) describe well-being as multidimensional that is divided into distinct domains such as social, physical, psychological, cognitive and economic wellbeing. The term 'social' includes the family, peer relationships, the availability of emotional and practical support, personal resources, socially desirable behaviours, and interpersonal, and communication skills Mahon (Mahon, 1994). In cognitive domain focuses primarily on academic achievement and intelligence tests that assess the child's creativity, memory, classroom behaviour and perceived competence in academic ability. Whilst the economic encompasses family resources, adequacy of parental income, and financial hardship. The physical domain has to do with physical health and variables of risk behaviour such as smoking and drug use.

According to Fottore, Mason, Watson (2016), well-being is also associated with happiness. The concept of happiness as used here is centred on two perspectives namely hedonic well-being and eudemonic well-being. Hedonism wellbeing first explained by Aristippus stresses that the goal of life is to maximise pleasure and happiness according to the individual (Raghavan & Alexandrova, 2014). In contrast, Aristotle considered hedonic happiness to be a crudely indecent idea because happiness cannot be based on what individual considered pleasurable, that would be chaos. Aristotle was the father of Eudaimonia who believes that we find true happiness in the expression of virtue and doing what we feel worth doing. He argued that not all desires are worth pursuing, even though some of them may yield pleasure because they will not produce wellness (Raghavan & Alexandrova, 2014; Ryan & Deci, 2001). This implies that feeling good is not good enough to provide well-being.

2.2.5. Income poverty

According to Rojas (2008), people are in income poverty when they are beneath a pre-determined income line. Income poverty is evident when it is measured based on the income perspective. This implies that a person is considered poor only if his income level is below the defined poverty line (Pochun, 2002). United Nations Educational, Scientific and Cultural Organization (UNESCO) indicated that the income line varies from country to country. In South Africa the poverty line based on the income required to purchase a dietary and adequate food supply, as well as and other essential requirements needs to achieve the basic minimum standard of living, has also varied over years (Statistics South Africa & National Treasury, 2007). In 2015, the income

line was R992 per person per month (Statistics South Africa, 2017 p. 14) and anyone who lived below that was considered to be in poverty. Prior to 2015 the income line was below R992 meanwhile that was equivalent to the UN one US dollar ($1) poverty line.

2.2.6. Food security.

UN in its State of Food Insecurity report (2001) adopted food security definition as a situation that exists when all people, at all times, have physical, social and economic access to sufficient, safe and nutritious food. The food had to meet their dietary needs and preferences for an active and healthy life (Food and Agriculture Organization (FAO), 2005). According to Du Toit (2011), food security involves food availability, access, affordability and use. The food availability refers to having sufficient quantities of food available on a consistent basis and ability to acquire the food. The food access is the ability to acquire sufficient food on a sustainable basis. The food use refers to appropriate use based on knowledge of basic nutrition and care, as well as adequate water and sanitation.

2.3. NATURE OF SOUTH AFRICAN SOCIAL SECURITY

Since 1924 South African formal social security was mainly for White South Africans while Black South Africans were excluded (Triegaadt, 2005). This racial discrimination on social security led to the South African Constitution of 1996 which made provisions for non-discriminatory assistance to people without means. Section 27 (1c) of the constitution protects the rights of previously disadvantaged in terms of the access to social security and appropriate social assistance. This include extending the state support to the less privileged (i.e., people who cannot support themselves) and their dependents.

In the context of South Africa, social security is a vehicle for the abolition and prevention of poverty, as well as reducing inequality and the impact of Apartheid (Ginneken, 2003; Midgley, 1984; Mpedi, 2008; Patel, 2005; Townsend, 2007). According to Townsend (2007); Kaseke (2010); Ginneken (2003) formal social security has two components namely social insurance and social assistance. South Africa's formal social security system revolves around social insurance and social assistance.

2.3.1. Social insurance

Social insurance is a form of social security which is designed to protect income earners and their families against a reduction or loss of income because of exposure to risks. Those who earn

finance the social insurance through contributions and it is awarded as protection when risk occurs. Social insurance benefits the members and their families or their dependents (Ginneken, 2003; Kaseke, 2008; Midgely, 1984). According to Triegaardt and Patel (2005), social insurance are benefits organised by the state through specified contributions by employers and employees. It is also referred to as a contributory scheme to cover specific risks. The members and their families who contribute regularly are covered against some risks which interrupt, reduce or terminate income or places a burden on income (Midgely, 1984). The social insurance is limited to those with regular wage employment. In Sub-Saharan Africa, a large number of population in the informal sector is excluded (Townsend, 2007).

2.3.2. Social assistance

Social assistance is a form of social security that provides aid in the form of cash or in kind to persons who are in needy and lack means to support themselves as well as their dependents (Ginneken, 2003). It is available to people who are below a defined minimum level of income. The beneficiaries of social assistance are recognised through means test whereby the applicants are investigated and their income assessed (Ginneken, 2003; ILO, 2006; Kaseke, 2008; Midgely, 1984; SADC Social Security Code, 2007). The eligibility criteria may use measures such as old age, widowhood or desertion. Social assistance is non-contributory, they are financed from public revenues. There are various numbers of schemes under social assistance in South Africa. The statutory rules such as disability grant, child support grant and state old age govern these various schemes in the country. South Africans do not benefit from formal social security alone but also on traditional and informal social security systems, discussed in the next section.

2.3.3. Traditional and Informal Social Security Systems

In South Africa, people also rely on traditional social security such as extended family systems that care for the children, the aged, the sick and those who are disabled (Kalusopa, Dicks & Osei-Boateng, 2012; Kaseke & Olivier, 2010). These responsibilities are heavily loaded on women especially the increasing number of orphaned children due to HIV/AIDS (Triegaadt, 2005). As such the home-based care has increased as well as the burden that goes with it thereby increasing the work women traditionally do at their homes (Triegaadt, 2005). The rationale for this is associated with the notion that men are primary breadwinners for the household, while women are the primary carers (Patel & Hochfeld, 2011). According to Kaseke (2013), traditional system centres on the principle of solidarity and reciprocity. This means that risks are shared among members and support is given within the assumption that it will be returned directly or indirectly in the future which develops a

sense of unity within the extended family system. This implies that in most cultures in South Africa, the grant goes to solve many problems distinct from the particular problem it is meant to solve.

Informal social security revolves around self-organised mutual aid arrangements such as stokvels as well as burial society (Kaseke, 2002; Matutu & Kaseke, 2014). Stokvels are informal savings schemes organised in black communities in South Africa (Mashigo & Schoeman, 2010) which protect millions of South Africans, by providing financial security and social well-being (Response, 2012). According to Mashigo and Schoeman (2010), stokvels facilitate access to cash or credit for day-to-day consumption since formal financial sector such as banks exclude the poor in most occasions. Membership in these stokvels is voluntary, and all members work together in formulating stokvel structures and constitution (Mashigo, 2008).

Traditional and informal social security are a vital source of social protection of poor people but has been weakened by the ravaging HIV/AIDS leading to orphans, and vulnerable children (OVC) and child-headed households, teenage pregnancy as well as high unemployment rates. The teenage pregnancy often leads to teenagers not realising their full potential in terms of educational and occupational potential. These factors have disintegrated the coping strategies for survival of poor households. HIV/AIDS contributes to a rise in poverty and loss of many jobs whilst the loss of a breadwinner which has led to the decline in household income (Tshoose, 2010).

2.4. SOUTH AFRICA'S CHILD SUPPORT GRANT (CSG)

2.4.1. Background of the CSG

CSG is a public sponsored unconditional cash transfer to the caregivers who are identified. It was implemented after the recommendations from the Lund Committee of 1996 which state that government of the new South Africa must explore alternative policy options that target children and families in poverty. Before 1994, the apartheid government had State Maintenance Grant (SMG) which was a policy that failed to reach the most impoverished communities and it excluded Africans as beneficiaries (Kruger, 1998; Triegaardt, 2005). The policy was discriminatory in its application and was replaced by the CSG in 1998 which targets the most deprived children and families irrespective of their race or family structure as recommended by the Lund Committee in 1996 (Coetzee, 2013; Triegaardt, 2005).

The Lund committee was a task team set up by the national Department of Welfare now

named Department of Social Development. The committee's terms of reference were to:

(i) Assess the existing system of support to children and families across all government departments;
(ii) Investigate ways of increasing parental financial support through private maintenance system (payments by separated parents to the parent living with the child);
(iii) Explore alternative options for social security and
(iv) Develop approaches for effective targeting of programmes for children and families (Budlender, Proudlock, & Jamieson, 2008 p.10). The committee proposed that the restructuring of SMG to the new CSG.

The CSG came in as a poverty alleviation strategy rather than a prevention strategy (Triegaardt, 2005). It seeks to support income of the poor household to enable them to provide for the children's basic needs. (Guthrie, 2002). Lloyd (cited in Triegaardt, 2005) clearly indicated the objectives of CSG as to:

(i) Ensure greater access for poor children to an integrated and sustainable security system in the country;
(ii) Provide a child grant on an equitable basis to those in need regardless of family structure, or tradition or race;
(iii) Prevent children from unnecessarily entering or remaining in statutory substitute care; and
(iv) Keep children off the streets and out of juvenile detention centres.

In 1998, CSG involved a cash transfer of R100 per month per each child to the primary caregivers of all eligible children under the age of seven. The age limit has been increased to eighteen years and the CSG is terminated when the child turns 19 years old, admitted to a state institution or has not claimed for three consecutive months. The grant is also be suspended if the child does not live with the caregiver anymore. The caregivers are eligible for the CSG only if they are South African by nationality. Since April 2017 the amount of CSG has been raised to R380 per month per child. The CSG is evaluated as the most successful unconditional social security programme.

2.4.2. Conditional and unconditional of South Africa child support grants

The unconditional CSG implies that there is no legal binding or condition on how caregivers

will spend the grant. Unconditional child support grants works mainly in countries where the social welfare system is weaker and the infrastructure such as health and education are not well-organised or well-functioning (Holmes & Bhuvanendra, 2013). On the other hand, the conditional CSG formally requires some behavioural compliance on the part of recipients to receive cash transfer. The most common condition is enrolling children into a school and takes care of the child's well-being. In some countries such as those in Latin America taking care of the child includes ensuring that post-natal healthcare appointments are fulfilled, as well as ensuring that pre-school children receive vaccinations, growth monitoring and regular check-ups (Adato & Hoddinott, 2010).

The CSG in South Africa is administered as unconditional cash transfer programme rather than conditional cash transfer. The South African government in 2010 introduced a regulation that requires caregivers of CSG recipients of school-going age to show evidence that these children are attending school. It is expected that the school attendance certificate is produced for children between the age 7 and 18 years. This is the first attempt within the South African social assistance system to impose conditionality although the same regulation states that failure to produce a certificate or proof for school attendance will not discriminate the caregiver from getting the grant (SASSA, 2016). As mentioned earlier, different countries such as Brazil, Mexico, Ghana, Malawi and Zambia have different ways of processing or handling its social assistance or grants.

2.4.3. Bolsa Família Program (BFP) in Brazil

Bolsa Família Program (BFP) is a program that addresses issues of social security in Brazil which was introduced in October 2003 in the form of conditional cash transfer (Lindert, Linder, Hobbs, & De la Brière, 2007). It is directed to mothers in poor households with children up to 15 years old. BFP aims at breaking a vicious cycle of poverty transmitted across generations (De Janvry, Finan & Sadoulet, 2006; Kassouf, 2014). In order to qualify as a recipient of BFP, families must comply with some conditions that include sending children to school, taking up vaccinations and regular health check-ups for the children as well as the mothers where applicable (Van Stolk & Patil, 2015). The programme was decentralised and implemented at municipal level which makes the quality of BFP vary from one place to another depending on how each municipality organises relevant structures. According to Glewwe and Kassouf (2012), BFP increased students' enrolment, decreased child labour, improved nutritional and health status of young children and decreased income inequality among families.

2.4.4. Progresa (Oportunidades) in Mexico

Mexico in 2001 also implemented a programme named *Progresa.* The programme was later renamed *Oportunidades* which was an anti-poverty and human resource investment programme (Behrman & Parker, 2011). Mexico through *Oportunidades* benefited relevant needy women who must comply with certain conditions such as making sure that older children attend school, mothers attend sessions on nutritional and health practices, and that younger children visit clinics for regular medical check-ups (Agüero et al., 2006; Behrman & Parker, 2011). The program has been widely reported to have improved school enrolment, health clinic attendance and nutrition of children (Schultz, 2000). The program focuses on schooling as grants are provided to primary up to high school pupils. The grant also aims to facilitate and ensure the girls remain in school because Mexico has recorded a higher dropout rate among girls (Schultz, 2000).

2.4.5. Ghana Livelihood Empowerment Against Poverty (LEAP) Programme

The (LEAP) programme was initiated in 2008 as a transfer cash to impoverished households who have a household member with extreme disability (PWD) unable to work, one living in a motherless baby homes, elderly and extremely poor persons (OVCs) (Owusu-Addo, 2014). In 2015, De Groot et al. highlighted that the programme also provides free health insurance under the National Health Insurance Scheme (NHIS). The transfers for the elderly poor and PWD who are unable to work are unconditional, but transfers to households with OVCs are conditional upon enrolment. The households must first comply by certain conditions that include retaining all school going age children in the public schools. The beneficiaries must be card-bearing members of the NHIS whilst that the new-born babies between 1 to 18 months must have Birth Registry and complete the Expanded Programme on Immunisation. The households to benefit from the grant need to ensure that no child in the household is trafficked or engaged in any activities constituting the worst forms of child labour (De Groot et al., 2015). In practice these conditions are not verified with active scrutiny as such one may as well consider the transfer to households with OVC as unconditional (De Groot et al., 2015).

2.4.6. Malawi Social Cash Transfer Programme (SCTP)

The programme implemented by District Social Welfare Offices and Community Social Support Committees (CSSCs) in Malawi. This programme thus aims to reduce poverty and hunger, increase school enrolment and attendance, as well as improve the health, nutrition and well-being of vulnerable children (Pozarny, 2015). It is an unconditional programme that transfers cash targeting

the ultra-poor as well as labour-constrained households (Pozarny, 2015). Handa et al. (2015) indicated that the Ministry of Gender and Children administer the programme as part for the community development in conjunction with the UNICEF Malawi which provides technical support and guidance. The ultra-poor and labour-constrained families receive a bi-monthly allowance and maximum payments such that as each child is enrolled in primary school and secondary school the basic allowance increases by an additional bi-monthly bonus (Handa et al., 2015).

2.4.7. The Zambia Child Grant Programme (CGP)

The Child Grant Programme (CGP**)** targets ultra-poor households with children less than 5 years of age in three districts of Zambia namely Shangombo, Kalabo and Kaputa. Daidone et al. (2014) highlighted that CGP is an unconditional programme which aims to supplement household income, increase education and health outcomes and improve the overall nutrition of the household members especially children under the age of five (Daidone et al., 2014). The CGP has been associated with improvement in household consumption, food consumption, diet and food security in households that receive the cash transfer (Seidenfeld et al., 2014). The above international review regarding child support grant in other countries seems to suggest that most social grants in the African continent and developing nations are often unconditional. That may be interpreted to say that our institutions are still very weak as such limiting proper monitoring and strict screening processes.

2.5. IMPACT OF CHILD SUPPORT GRANTS IN SOUTH AFRICA

In South Africa CSG is a poverty alleviation measure (Coetzee 2013; Kaseke, 2010; Triegaardt, 2005). There is convincing evidence that the CSG has been successful in reducing poverty (Hall, 2016). At a provincial level the figure shows that Eastern Cape, Limpopo and KwaZulu-Natal Provinces had amongst the highest child poverty rates before the CSG was implemented (Coetzee 2013). After the introduction of the CSG in the aforementioned provinces the average child poverty rate was reduced to 11% (Mduduzi, 2011). Recent studies suggest that social grants do reduce poverty in South Africa especially in disadvantaged communities (Patel 2005; Patel & Hochfeld, 2011; Triegaardt, 2005; Zembe-Mkabile et al., 2016). The CSG is unconditional in South Africa but there are conditions expected the caregiver beneficiaries to fulfil such as ensuring a birth registration, child health, child nutrition, education and Early Child Development (ECD), to mention but few. The institutions such as schools, clinics, Home Affairs are also charged with responsibilities that help to ensure that the child and caregivers subsequently attend to the developmental needs of the child.

2.5.1. Child nutrition

Evidence has shown that the CSG recipients can afford a greater quantity of food in household expenditure than in those households who do not receive the grant (Coetzee, 2013; DSD, SASSA & UNICEF, 2016; Grinspun, 2016). CSG has helped to close the nutrition gaps between the poorest and wealthiest children in South Africa since the introduction of the CSG in 1998 (Agüero et al., 2006; Patel 2005; Tiberti et al., 2013). It is also reported that a large number of South African children still suffer from inadequate food intake. This is because the value of the CSG remains too low to enable families to afford more than just the basics coupled with the global economic meltdown. It is impossible for the grant money to be used up to the next pay date especially when it is the sole source of income to the family (Agüero et al., 2006; Zembe-Mkabile, Surender, Sanders, Jackson & Doherty, 2015).

2.5.2. Child health

According to DSD et al. (2010), the CSG improved access to health care for children and even the ill members of beneficiary households and mostly those who are living far from health facilities use the grant money for transport. Hence the CSG has helped to improve enrolment in the country's child health. It is also has been noted that receiving the grant in the first two years increases the chances of child's health such that children receiving the CSG before turning two were 12% more likely to have been weighed and immunised (Grinspun, 2016).

2.5.3. Early childhood development (ECD)

The CSG beneficiaries are likely to access ECD easily compared to those that do not receive the CSG (Grinspun, 2016). Although a high rate of children being absent from school in rural and informal urban areas has been reported yet children receiving CSG were one and a half times as likely to be attending an ECD facility or Grade R compared to those who do not get the grant. Grinspun (2016) further state that due to CSG the utilisation of crèches and nursery schools at an earlier age has increased leading and children score better on tests of literacy, vocabulary and mathematics, through primary school up to adolescence.

2.5.4. The impact of Child Support Grant on schoolchildren.

The cash from CSG assists in paying the cost of education and improve children access to school-related supplies such as food, school fees, transport and uniforms (Hall, 2016). According to Mduduzi (2011), there is substantial evidence that caregivers spend CSG money on school-related

costs, compared to households that do not receive the grant despite qualifying for it. Hence as a result of CSG there has been a substantial increase in school enrolment as well as school attendance (Case et al., 2005; DSD et al., 2012; DSD et al., 2016). The chances of a school-age child not attending school have decreases by more than half among the disadvantaged people who receive the grant (Grinspun, 2016). Mduduzi (2011) further states that in the school teaching environment children who receive the grant during their first-year score higher marks such as on tests of mathematical ability and reading than those enrolled just before starting school.

2.5.5. The impact of CSG on adolescents

Studies have also proven that grants contribute to lower teen fertility (Grinspun, 2016; Makiwane, 2010; Mduduzi, 2011; Udjo, 2014). This means that with grant income teenage girls are reported to have greater control over sexual and reproductive decision-making, and that facilitate the use of contraceptive. In one study, the girls who started receiving the grant below the age of five were 40% *less* likely to get pregnant compared to those who receive later in rural area of Mpumalanga (Grinspun, 2016). This implies that the CSG has resulted in longer spacing between pregnancies among teenage girls (Grinspun, 2016). The CSG has also reduced sexual activity, having of fewer sexual partners, alcohol and drug use during adolescence stage (DSD et al., 2012; Grinspun, 2016). The latest evidence shows that cash grants when combined with other interventions can shield adolescents from infection risks. A study of adolescents from Mpumalanga and the Western Cape receiving the CSG shows that girls are half-likely to exchange sex for food, shelter, money or school fees, and one-third less likely to have had under-aged sex (Grinspun, 2016). The reduction in the economic pressure due to grant income gives the girls the upper hand to negotiate sex (DSD et al., 2012).

2.5.6. Challenges associated with the child support grant

The problems of the CSG stretch from its administration infrastructure to its utilisation by the recipients (Grinspun, 2016). Although there are successes in the CSG programme it has not been without many challenges too. Khosi (2013) and Matuku (2015) argue that corruption, inefficient and uncooperative social welfare officials act as a severe barrier to accessing the grants. For instance, some officials are committing fraud by recruiting community members to apply for the grant using fake identity cards to get the money. According to SASSA Annual Report (2015/16) over 1,122 fraud cases were received but only 90 cases were finalised 837 were closed and 195 were still under investigations. The monetary value of the finalised cases only amount to R2, 429,519 of which

R179,392 had been recovered.

In addition, many eligible children are not receiving grants due to lack of information and misunderstanding of the means test, bureaucratic requirements and not having proper documents (South African Human Rights Commission & UNICEF, 2011). The child-headed families are facing hurdles to access birth certificate which is a requirement for the grant (Mturi, Sekudu & Kweka, 2012). Income-eligible caregivers do not apply for the CSG as they believed their income is too high and some caregivers have given up due to bureaucratic requirements such as the need for confirmation of school attendance report of children (Lund, 201; (Jehoma & Guarnieri, 2016)).

Furthermore, there is a perception that the grant makes people lazy as they tend to depend on the grant (Grinspun, 2016). In other words, social grants might act as a disincentive to the unemployed in seeking and obtaining work which continues to create a 'culture of dependency and entitlement' (Surender, Noble, Wright, & Ntshongwana, 2010). According to Grinspun (2016), the critics accused social welfare grants of facilitating dependency on government handouts and consequently discourages labour market participation. This argument in as much as may be true in some cases one might also need to consider the reported high rate of unskilled labour in South Africa as the legacy of the political past. These people who are said to be withdrawn from work are in first place unqualified illiterate citizens. The fear that after receiving the grant money, family members will withdraw from the labour market will always be there. From a professional viewpoint I have recently encountered several evidences where the CSG promoted or would I say encouraged beneficiaries' engagement into labour markets.

However, there is also the idea that child grants increases teenage pregnancy. It is important to mention that most relevant studies have showen no link between teenage pregnancy and Child support grant in South Africa (Makiwane (2010); Makiwane & Udjo, 2006). The CSG recipients are also reported to be misusing the grant money for their own benefit which results into children poverty (Khosa, 2013; Makhubu & Ndenze, 2013; Nyati 2016; Williams, 2012). This allegation or sentiment need to be thoroughly investigated and this study aims to do justice to that effect by investigating the perceptions of the caregivers. Khosa (2013) also affirms that some recipients uses the grant money for their own benefit which, of course, not in the child's best interest. Most recipients tend to spend the grant money on personal items such as luxury foods (such as KFC), cell phones, and clothes for caregivers, hairdressing, spending on boyfriends, gambling, and alcohol

consumption (DSD et al., 2010; Khosa, 2013).

2.6. CONCLUSION

This chapter reviewed of relevant literature by discussing a concept of social security and its impacts on poverty alleviation in both children and families in developing countries which South Africa is not an exception. Amongst others the literature revealed that CSG one of the most successful social security programme in the world given its effects on child health, child nutrition and education in South Africa.

CHAPTER 3

RESEARCH STRATEGY AND METHODOLOGY

3.1. INTRODUCTION

This chapter describes the research approach, research design, study population, sampling procedures, research instruments, data collection methods, data analysis and the ethical considerations. The chapter concludes with the limitations and the method of data verification.

3.2. RESEARCH APPROACH

Qualitative research approach was used in this study. The approach aims at studying the way in which people make sense of their ideas and experiences (Baden & Major, 2013). According to Braun and Clarke (2013), qualitative approach deals with meaning, capturing social world aspects, recording the messiness of real life, organising them and then interpreting them in a certain way. In this study, qualitative research approach was the most appropriate to explore and understand data on the perceptions of people as it afforded the participants an opportunity to express their viewpoints on the influence of CSG on children's well-being. It also allowed the researcher to obtain and interpret the meanings of participants' personal data.

3.3. RESEARCH DESIGN

This study adopted exploratory research design to satisfy the desire for better understanding of the issue under study. Babbie (2011) states that exploratory research is social research conducted to explore a topic or to examine a new interest in a phenomenon. According to Bless, Smith and Sithole (2013), the purpose of exploratory research design is to gain a broad understanding of a situation, phenomenon or community. Exploratory research design was the most relevant in eliciting caregivers' perceptions in understanding the influence of CSG on children's well-being. It assisted the researcher to familiarise with new ideas and facts.

3.4. POPULATION, SAMPLE AND SAMPLING PROCEDURE

3.4.1. Population

The population of this study consisted of all caregivers who are recipients of the CSG in the Mpophomeni area in UMgungundlovu, district municipality of KwaZulu-Natal Province in South Africa. From the census of 2011, Mpophomeni had a population of 25732, and of the total population of Mpophomeni, 99.55% were black Africans, with 54.03% males and 45, 97% females (Stats SA, 2011).

3.4.2. Sampling

This study used a combination of purposive and snowball sampling to select a sample of participants. The study selected 25 sample of caregivers of which only 20 caregivers between 21 and 60 years old were available for an interview. These interviewed 20 caregivers were recipients of the CSG and were all residents in Mpophomeni. According to Maree (2007), purposive sampling means that participants are selected because of some defining characteristic that makes them the holders of the data needed for the study. Whilst the snowball-sampling technique is a process of accumulation of participants through reference from the participants themselves (Babbie, 2011). In combining these two sampling techniques I was able to select the most appropriate participants who can provide information to achieve the objectives of the study. Employing snowball-sampling technique allowed me to use a fellow church colleague who lives in Mpophomeni to introduce me to the first few potential participants who had the characteristics of the participants that I required. Thus the snowball technique also helped me to request that existing participants refer me to other potential participants who may like to participate.

3.5. RESEARCH INSTRUMENTS

I used a semi-structured interview guide (see Appendix B). The interview guide provided me with a structure of what I covered. On the interview guide, I also had the main questions that I asked during the interviews. The interview guide contains predetermined open-ended questions with room for flexibility when the exciting topic arises, giving me the freedom to probe in-depth information and clarifications (Braun & Clarke, 2013). The interview guide also allowed me to clarify, adjust and modify questions during and after the research depending on the context and the response participant gave. According to Silverman (2010), the interview guide is a set of questions used by the interviewer as a guide and it is a point of departure allowing the interviewee to set the pace and help

the research to refocus the interview especially when the discussion is going off the rail. Interview guide gave me room for flexibility to carry out the interview.

I made used of tape recorder with the permission of the participants (Appendix E). Tape recording ensured accuracy in the summary of the interview than only taking notes (Opdenakker, 2006). Tape recording gave me a chance to rewind and repeatedly listen to the responses of the participants for clarity during transcribing. Although taking brief notes during interview keep track of things to follow up, the audio recording of the interview gave more room for rapport as I would not have lost focus on taking notes (Braun & Clarke, 2013). Tape recording gave me an opportunity to use direct quotations for emphasis during data presentation and interpretation.

3.6. PRE-TESTING OF THE RESEARCH TOOLS

Pre-testing is a practice whereby you test something that develops before its actual use to ascertain the likely problems with it (Khan, 2011 p.06). In this study, I pre-tested the semi-structured interview guide on three participants who had similar interests as those that participated in the implemented study. According to Kvale (2007), pre-testing helps in determining if there are flaws, limitations, or other weaknesses within the designed instruments. Pre-testing also allowed me to make necessary revisions and adjustments before the implementation of the study's fieldwork or data collection. Hence, pre-testing is useful in validating the interview guide. In this study an English interview guide that was also translated to isiZulu was efficiently used during pre-test. I speak isiZulu fluently such that language was not a problem. I also gave attention to the amount of time that I needed to complete each interview. I noticed that it took about 20 to 25 minutes to complete each interview. This led me to adjust the time up to 25 to 30 minutes to cater for the extra minutes that I would use to conclude an interview. Pre-testing also helped me to familiarise myself with the interview guide as well as recording instruments to prepare for the actual study.

3.7. DATA COLLECTION

Data collection is a process of gathering information using modes such as observations, interviews as well as written documents (Leedy & Ormrod, 2015). In this study I conducted face-to-face semi-structured interviews in Mpophomeni area with participants who consented to partake in the study. According to Walliman (2015), semi-structured interview is a mix of pre-prepared structured and unstructured sections with standardised and open-format questions. Semi-structured interview gave participants an opportunity to share a detailed picture of their perceptions or accounts of the topic under study (De Voss, Strydom, Foucheu, & Delport, 2005). The church colleague

staying in the area referred the first few participants that I recruited for interviews. Then I requested those that I interviewed to refer me to other potential participants (i.e., snowball sampling technique). I applied my judgement (i.e., purposive sampling technique) to choose those with the information and experience useful to the study. An interview took approximately 25 minutes at the venue each participant and I agreed upon. The interviews were audiotaped after the participant had given his or her consent. The semi-structured interview was an appropriate data collection method as it allowed some flexibility. I was able to create questions during the interview to get a detailed picture of participants' experiences.

3.8. METHOD OF DATA ANALYSIS

I used thematic analysis as the analytic approach for this study. Data analysis is whereby the available data is cleaned, examined, described and explained (Gibbs, 2008). I analysed the field notes and transcripts of the recordings of participants' interviews using thematic method. I transferred the data from the field notes and transcripts to the computer, cleaned and synthesized in order to categorise the data down to underlying themes; a process known as thematic analysis. Thematic analysis which is a gradual, systematic process, was aimed at identifying themes within the data (Braun & Clarke, 2013). I presented the data in the report using quotations from the interviews to highlight the source of interpretations and evidence. Thematic analysis was facilitated by eight steps of qualitative data analysis proposed by Tesch (Creswell, 2009). The Tesch steps provided clear, detailed guidelines on organising unstructured qualitative data and I followed the eight steps that are discussed in the paragraph below.

Firstly, I read the transcribed interviews carefully, this helped me to familiarise myself with the data without making assumptions. During the second step the ideas were noted as they come to my mind and I took note of all underlying meanings and frequenting topics. After I completed this task for several participants I listed all the topics and grouped all the topics that were similar as major topics, unique topics and leftovers—that was the third step. The fourth step I assigned fitting abbreviations and codes for each of the identified topics and then found the most descriptive wording for each of the topics or categories. In the fifth step I made the final decision on the abbreviation for each theme or category and alphabetised them according to the codes. On the sixth step I used the cut and paste method to assemble the data belonging to each theme or category in one place. The seventh step was the time I conducted a preliminary analysis for each theme which led to the final eighth step where I interpreted and started reporting the research findings.

3.9. Trustworthiness

It is an expectation that researchers uphold and consider standards of quality in qualitative research such as credibility, transferability, dependability and conformability to ensure trustworthiness of the study. The quality of the study is judged by its credibility, transferability, dependability and conformability. Below is explained how each of these was actualized in this study.

3.9.1. Credibility

Credibility is the criterion to measure internal validity of the research to ensure whether it tests and record what it intended (Shenton, 2004). To ensure validity of the study I maximised the opportunity of pre-testing the tools to be used during the study and adjusted where necessary. Since I used unstructured face-to-face interviews in the participant's home setting, it was in the best interest of internal validity to ensure contextual sensitivity. I had an intensively reviewed literature to attain an understanding of the issue under study. I also allowed peers to check and critique the review the methods I used for data collection and analysis.

3.9.2. Transferability

Transferability is concerned with whether the study is applicable to other situations in terms of whether the study findings can be generalised from the sample to the vast population (Braun & Clarke, 2013; Lietz & Zayas 2010). It is also known as the external validity of the study. To ensure the possibilities of transferability I described the context understudy in detail by clarifying on the participants involved in the study, data collection method employed and the period over which the data was collected as illustrated by Shenton (2004). These will provide readers with the room to find applicability in other settings with similar contexts.

3.9.3. Dependability

The assumption is that if the study is to be repeated in the same context, using the same methodologies, there is a possibility for obtaining similar findings (Shenton, 2004). In this study, I ensured the possibilities for dependability through recording and describing the study in detail so that in future someone wants to conduct a similar study he or she may come up with the findings similar to those presented in this study.

3.9.4. Conformability

Conformability refers to when someone else had to conduct a similar study, we should expect similar findings to confirm that the current findings are genuine or reliable. Conformability requires

other researchers to obtain similar findings by following same research process in a similar context (Bless et al., 2013). Shenton (2004, p. 72) asserts that:

> …the steps must be taken to help ensure as far as possible that the research findings are the result of the experiences and ideas of the informants, rather than the characteristics and preferences of the researcher (Shenton, 2004, p. 72)

In this study I ensured value free throughout the study avoid possibility of imposing meaning on the responses of the participants.

3.9.5. Reflexivity

Reflexivity has been defined as a critical self-reflection on how the researcher's background, assumptions, positioning, and behaviour impact on the research process (Finlay & Gough, 2008, p.ix). Hesse-Biber and Piatelli (2012 p.560) illustrate reflexivity as a holistic process that has to be upheld along all stages of the research process – from the formulation of the research problem, to data analysis and recommendation. Reflexivity made me perform critical self-reflection or interrogation of the self on the ways in which personal history, assumptions, attitudes, behaviours and social background affect the research process (Speziale & Carpenter, 2007; Holloway & Biley, 2011). I set my judgements aside about what I have observed, heard and recorded. In other words, I take the data as they were revealed by participants. Reflexivity helped me to prepare the right interview guide, which gave me the room to probed and encouraged participants to share their views of their experiences without fear of being misinterpreted (Jootun, McGhee, & Marland, 2009). Also in order to insure accurate version of participants' experiences I informed the participants the nature of the study and assure them that they anonymity is assured. I maintained their anonymity in this study by not mentioning their real names rather I used pseudonyms in reporting the findings. The participants were informed that the data will be reported with pseudonyms. This assurance thus helped me to obtain first-hand experience providing valuable and meaningful data which made the data more honest and valid (Denzin & Lincoln, 2011).

3.10. ETHICAL CONSIDERATIONS

Ethics refer to guidelines and principles relating to good professional practice (Silverman, 2013). For this study I avoided harming participants throughout the study process and afterwards. As such I adhered to the following ethical considerations:

3.10.1. Ethical clearance

Before any study begins the researcher must submit the proposal for the study for ethical clearance (Bless et al., 2013). Every study done under the University of the Witwatersrand requires ethical clearance (Appendix A) from the HREC (non-medical) if it involves human participants. Ethical clearance is administered by the University's ethics committee, this is to ensure the protection of rights and interests of the participants. The committee also ensures that the appropriate procedure in conducting the study is followed (Babbie, 2013). The University of the Witwatersrand Ethics Committee took appropriate measures to clear this study. The ethics clearance number is SW1/17/04/04.

3.10.2. Informed consent

According to Terre-Blanche, Durrheim and Painter (2006, p. 560), the informed consent remains:

> the process of seeking the explicit and unconcerned agreement from a subject to participate in a research project, based on their full understanding of procedures involved and their likely effects (Terre-Blanche, Durrheim & Painter, 2006, p. 560).

The participants agreed to participate voluntarily in the study without threat or undue inducement. I gave each participant information sheet (Appendix C) and consent letter to sign to show that they decided to participate in the research (Appendix D). the information sheet provides details of the research project, purpose, methods, risks and benefits of the study to participants to enable each of them make an informed decision on whether to participate or not.

3.10.3. Confidentiality

Confidentiality is the state of keeping the identity of the participants private and only accessible to the researcher and his or her staff (Johnson & Christensen, 2008). In this study I reported data in such a way that it was not associated with a particular individual. I also assured the participants of confidentiality throughout the study. I managed confidential information through securing notes, recording and transcripts in a password-protected computer, the field note and transcripts were locked out in the supervisor's lockers. Only my supervisor had access to the collected data after the study.

3.10.4. Anonymity

Anonymity is the assurance that the identity of research participants remains unknown (Bless et al. 2013). It is done by removing any information from the data which can link the participants to

the data or findings (Punch, 2013). In this study, I maintained anonymity by not using the real names of the participants. According to Bless et al. (2013), anonymity is the assurance that the identity of research participants remains unknown.

3.10.5. Appropriate Referral

In this study the participants' emotional, psychological, physical and social well-being could be compromised but I anticipated and prepared for this possibility (Bless et al., 2013). I arranged the referral to a social worker working in Families South Africa (FAMSA) to manage any adverse outcome of the study towards the participants' well-being. I also mentioned that this was not meant to indict anybody both to improve the policy at stake.

3.11. LIMITATIONS AND DELIMITATION

Table 1: Limitations and delimitations

Limitation	**Delimitation**
Some participants have provided social desirable answers and made an attempt to withdraw the real experience.	To counter this limitation, at the beginning of every interview, I explained to participants that there is no right and wrong answer. Participants were also informed of Confidentiality in study.
One participant did not agree to be audio-recorded.	I wrote comprehensive field notes.
Language barrier – the majority of the participants were found to be more conversant and fluent in isiZulu. Although I speak fluent isiZulu yet some of them have problem of fully understanding my isiZulu.	To counter this limitation I designed the study tool in both isiZulu and English. This approach ensured that all participants (including isiZulu speakers) understood the study questions. I also referred to Zulu dictionary for very deep IsiZulu words or phrases which I could not understand.

3.12. CONCLUSION

This chapter has provided the research methodology used by this study. The focus is on data

collections methods used in the study, the study population and sampling procedures, the research instrument, data collection method, data analysis method and ethics considered during the study. The limitations of the study and the method of data verification were also discussed in this chapter. Thereto, in chapter four, I presented and discussed the findings of this study.

CHAPTER 4

PRESENTATION AND DISCUSSION OF FINDINGS

4.1. INTRODUCTION

In this chapter I present findings together with the discussion beginning with the present biographical information of the participants on age, marital status, level of education, and employment status. I move to the presentation and discussion of themes. The themes I present and discuss are utilisation of the child support grant, perceptions towards the CSG and views on how can the child support grant be used to benefit the child. I divided the first theme into different sub-themes that I also provide and discuss extensively in this chapter. I conclude the chapter with a synthesis of all the findings. Of which I have also ensured that I validate the findings of this study by using extracts from the data and extensive literature which helps to support or dispel some of the claims provided by the participants.

4.2. DEMOGRAPHIC DATA OF THE PARTICIPANTS

For this study purpose I interviewed 20 participants who were all from Mpophomeni Township in Umngugudlovu. All the participants were females, primary caregivers as well as recipients of the child support grant. Out of 20 participants, 17 (85%) were children's biological mothers, and 3 (15%) were grandmothers.

In Table 2 below I present the participants' age and used Figure 1, 2 and 3 to depict the participants' marital status, educational level and employment status.

Table 2: Participants' age

Age	**Frequency No = 20**	**Percentage %**
21-30	14	70
31-40	3	15
41-50	1	5
51 and above	2	10
Total	20	100

Table 2 shows that majority of the participants who are recipients of child support grant were between the ages 21 and 30. The youngest was aged 21, and the oldest aged 60. The participant's marital status is also varies. Very few participants are married while others are single or widow mothers according to Figure 1 below:

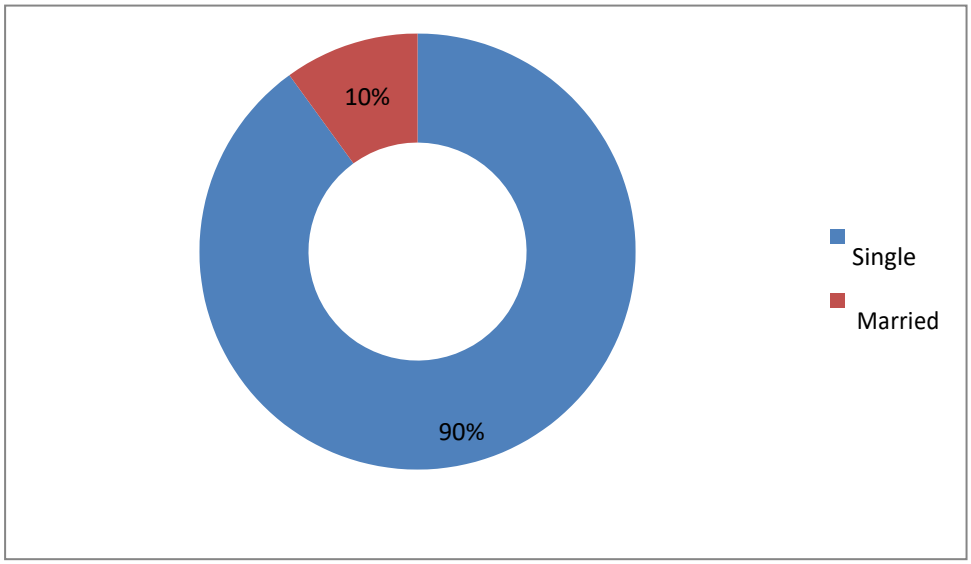


Figure 1: Participants' marital status

Figure 1 shows that the majority of mothers were single parents, and only 10% constitute those who are married. The participants also had different levels of educational qualifications as demonstrated in Figure 2 below:

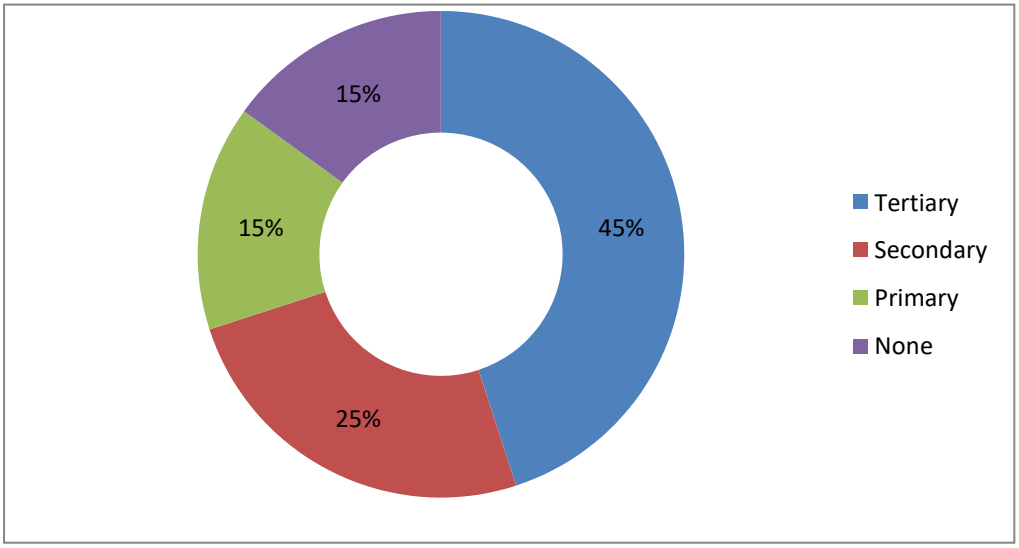


Figure 2: Participants' level of education

Figure 2 shows the levels of education of this study's participants. Out of all the participants, 45% had enrolled for tertiary education, 25% with secondary education, 15% with primary as well as 15% with no education.

In Figure 3 below present the employment status of the participants:

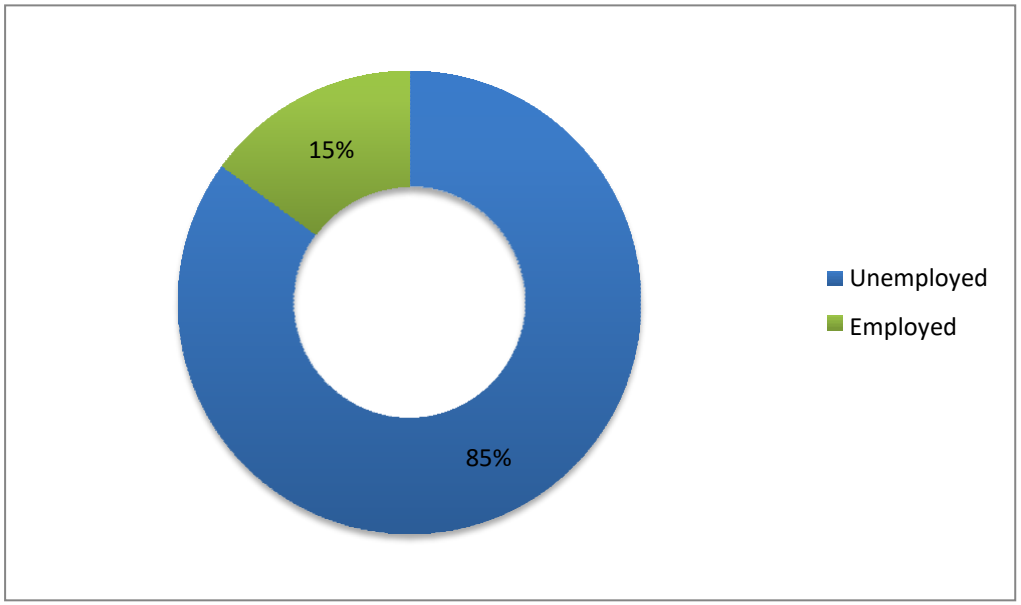


Figure 3: Participants' employment status

The above figure 3 chart indicates that 85% of the participants were unemployed and 15% employed.

The above demographic data reinforce the notion that most caregivers are women because women are responsible for children's care in most cultures (Patel & Hochfeld, 2011). This is congruent to Wright, Noble, Ntshongwana and Neves's (2014) findings which show that majority of caregivers are children's biological mothers. Similarly, according to the National Income Dynamics Study (NIDS) data, the majority of child grants are received by children's parents (82%) while followed by grandparents (12%) and lastly by an aunt or uncle (3%) (McEwen & Woolard, 2012, p.144).

Figure 1 shows that the majority of mothers are unmarried. The Statistics of South Africa (2011) also confirmed this finding as recorded in KwaZulu-Natal province. The province has the highest number of mothers who never married followed by Gauteng province of which people often allude to the issues relating to exorbitant *lobola* the culture tax potential husbands (i.e., bride prize). As such most potential husbands prefer to be unmarried life-time partners or rather remain

irresponsible by having children all over. Apparently the cultural custodians of the province, over the years, have decided to give a tacit response to this gender and feminine related *lobola* issue. This cannot be discussed here as it is beyond the scope of this study. Most of the unmarried mothers reported receiving the grant as some reports noted. On the contrary, other reports from other provinces shows that children of unmarried mothers are less likely to receive a grant than children of married women (Case et al., 2005, p.476). This may however suggest that single women in some provinces are motivated to empower themselves unlike in KwaZulu-Natal province single women who are not empowered seemed not to be worried about their condition. One may also would interpret that these women are the ones who prefer to depend on the meagre social grant for survival and sustainability.

Furthermore, the mothers who are the recipients of the CSG in KwaZulu-Natal province seem to be less-educated mothers (Case et al., 2005). The high percentage of well-educated mothers receiving child support grant might be due to a high rate of unemployment. On the other hand, the findings show that it is a few of the employed who receive the grant. On the other hand, the few employed women earn meagre income hence the significance of CGS. The low income may mean these women are not educated or qualified for high paid labour. These findings is corroborated in Case et al. (2005, p.475) where children whose mothers are not employed are almost 40% more likely to report for a grant than those whose mothers are reported to be working earn very little salary. This also means that these mothers are reliant on the CSG for sustainability. The section below describes various themes as they emerged from the data I collected and analysed.

4.3. PARTICIPANTS' VIEWS ON THE CHILD SUPPORT GRANT

In this section I present the themes and sub-themes as they emerged from the data analysis.

Table 3: Themes and sub-themes

Themes	Sub-themes	Sub-sub-themes
Participants' perceptions on the utilisation of child support grant	The expenses direct to child's needs	• The expenses for immediate gratification • The expenses to secure child's future.
	• Constructive costs directed towards families and adults • Usage of child support grant that excludes the child.	

Participants' perceptions towards child support grant	
Participants' perceptions on how the child support grant can be used to benefit the child	

Now I will go on and provide an in-depth discussion of the themes that I present in Table 3 following the same order for which they are presented above.

4.3.2. The expense towards direct child's needs.

I divided this theme into two sub-themes. The sub-themes are 'the expenses for immediate gratification' and 'the expenses to secure child's future.'

4.3.2.1. The expenses for immediate gratification

Participants revealed that they used the CSG money to pay for children's school- related expenses such as school fees, school uniforms, and transport to school, school trips, pocket money and lunch box. These expenses towards education costs have encouraged school or crèche enrolment and attendance. (Participant 5, 24 years old) illustrated this in the following quotation:

> *It assists us when the children need school shoes, it plays its part, and there are many other uses that it has. like this one goes to pre-school and its far from here so he needs to be taken by transport, how would they go if it wasn't for the grant with the child support grant they are getting, they can get pocket money and also school needs, everything is going well.*

Similar to the above quotation, (Participant 3, 23years old) mentioned:

> *...the child participates in school tours; it is the child grant that has to pay .*

The participants also reported that the child support grant enhances equality among children at school. The provision of the schools required materials such as uniforms, shoes and stationery has bridged the gap between children from low-income families and the rich. This is illustrated in the following quote:

> *It helps in elevating school-related pressure as we know that any expenses related to school will be covered by the grant. The children can be like other children and not be made fun of at school.* (Participant 13, 53 years old).

Findings also revealed purchasing of food using the grant money as the most outstanding necessity according to the receivers of the child support grant. This indicates that although participants suggested expenditure towards direct child needs, such as clothes and nappies, child support grant is significantly spent on food. The participants, however, felt that the amount is insufficient to cover all the needs. Indicating this is the following response from the participant

> *I use it for food, but it's not a lot because 380 is very, very small, as a child grows up more responsibilities.* (Participant 7, 21 years old)

Participants noted that due to grant money they could generate a healthy diet for every meal for example fruits and vegetables. The participants believe that eating healthy diet reduces the children's health problems. These revealed that several receivers of the child support grant are not only interested in providing food based on quantity but most importantly its quality (nutrition). One of the participants stated that:

> *I think, with this ... money I can buy food which is extra health for the child ... the child has to eat healthy food almost every day so I have to buy fruits, fruits mostly because he enjoys fruits, vegetables and anything healthy, for him to develop well.* (Participant 7, 21years old)

Furthermore, the grant may enable the caregivers to buy the children's favourite food for the fulfilment of their pleasure and happiness. Several participants specify that they purchase food such as chips, sweets, yoghurt as well as fruits to maximise their children's pleasure and joy. The participant confirms:

> *...want the child to be happy, for instance when buying yoghurt. I understand it's not an important thing it is not something that is necessarily needed for survival, but then for me giving him a yoghurt it makes him happy he just sit there, and he is going to eat.* (Participant 15, 23 years old)

In discussing the use of the grant for health care services the participants indicated that they use the child support grant to pay transport to go to the clinic while others pay for actual services. This is illustrated in the following quote:

> *It did a lot of work because I had to take her to the clinic twice a week and not this one here the one on Boom Street. The reason that I didn't take him to this one here is that there*

is special medication that needs to be applied or else the infection would spread. (Participant 19, 25 years old).

The Participant 3 (23 years old) also reported that she can access the preventative health measures such as immunisation:

I used to go to a clinic from home; I used it for my bus fare to go to the clinic for immunisation...

The grant money also assisted the buying of medicines when the child is sick. Participant 17 (26 years old) reported this in the following quotation:

I buy maybe gripe water if she's sick because sometimes she had flu then I need Panadol when her body temperature is high.

According to Woolard and Leibbrandt (2013) cash transfer programs such as CSG provides a predictable and reliable source of income for necessities which can have significant effects upon the capacity of households to invest in human development. In this study it is illustrated in the above quotations that the use of the child support grant included covering children school-related expenses have significant influence on the family resources or capital. The other participants in this study confirmed this fact.

The study findings also demonstrated that the grant recipients prioritise children's needs towards education. These findings confirm those of Delany, Ismail, Graham and Ramkissoon (2008) who reports that child's school expenses are prioritized when using the child support grant. The findings indeed suggest that the CSG has positive relationships with improvements in educational outcomes such as school enrolment and attendance (Case et al., 2005). In other words, there is a significant relationship between grant receipt and school enrolment.

The study findings also show that high expenditure of grant money is mainly on food associated with nutrition. This finding is in line with Delany et al. (2008) who found that the most massive expenditure of child support grant is towards food security. Similarly, Guthrie (2002) reported that the majority of poor household spend their income on food. The findings show that spending the grant on food may be associated with better nutritional outcome for the children. Agüero et al. (2007) in their study using children's height-for-age ratios as indicators of dietary inputs found children benefitting from the CSG significantly in the first three years of their lives.

Zembe-Mkabile, Ramokolo, Sanders, Jackson and Doherty (2015)'s findings suggested that the effects of the CSG on nutritional status are negatively affected by food price inflation as the money ends up insufficient.

Furthermore, study findings indicate that the child support grant made transportation to clinics and medicine for children affordable. Similarly, the study conducted by DSD et al. (2011) revealed that the child support grant facilitates access to health care services since children are prone to childhood illnesses and injuries. In this section I presented the use of the CSG towards direct child's needs. The next theme highlights how the CSG is being utilised directly to secure the child's future.

4.3.2.2. The expenses to secure child's future

In addition to the school-related expenses is the child's educational needs participants reported that they use the CSG to pay for their children's educational and life policy. One of the participants however indicated that she has other sources of income such as employment and child maintenance such that she considers the child support grant as extra income. She uses the child support grant to pay for these policies as mentioned below:

> *I use it to pay stuff like educational plan and funeral policy that because I had the income to take care of the rest.* (Participant 20, 30 years old).

The above quotation indicated that the participant does not depend on the grant alone but she uses it to pay for the child's educational plan and life policy. On the contrary, some other participants who rely on the grant only desire to save the money for the future of the child but the amount is perceived as low such that in reality they are unable to pay for the child's future development needs.

> Participant 13, (53 years old) said: *The main reason for the grant is to help the children in any way possible if it were a lot of money I would say save some of it, so it helps the child as he goes through school* .

These findings on the use of CSG for the future development need of the child show that the money is not used for the immediate gratification or for satisfying basic needs only but there is also planning for the future of the child. According to Neves, Samson, van Niekerk, Hlatshwayo and du Toit (2009), those receiving grants has a higher increased tendency to take part in savings

such as ownership of insurance, an investments which can allow long term economic stability to maintain a positive and healthy fit for the child's future. In the next theme I present the participants' constructive expenses that are not directed towards the child's need.

4.3.3. Constructive expenses not directed towards the child's need,

Many participants agreed that they are using the CSG money for their own personal needs. These needs are both immediate needs such as education and general care and long-term needs such as formal and informal investments. On one hand, the participants who uses the grant for some personal needs seems to believe that when they secure their future that child's future is also secured. As such they believe this money has been well spent. On the other hand, some other participants use the money to meet their own needs which are not directly supporting the child. One could argue that some of these people use the grant constructively while others do not. The participants revealed that they use the CSG to meet the family needs especially when it is the sole source of household income as illustrated by the following quotation:

> *I'm unemployed no one is employed in the family, so there is no other extra income, so there is only the grant.* (Participant 18, 21 years old).

> *...I use the grant for my own personal use, like buying airtime, doing my hair, buying whatever I need or wants.* (Participant 3, 21 years old)

It is noted that while the money may not have been used for direct child expenses, there were also other constructive usage of the child support grant which are indirectly connected to the child's upbringing or interest. The participants reported that they spend the grant money on their own educational costs such as transport, toiletries and stationery. Indicating these are following quotations:

> *I bought like my toiletries and my stationeries I am writing my exams right now (*Participant 3, 23 years old).

> Similarly, (Participant 8 24) said: *I wanted to pay for my books, and I did not have the money, and I used that money to buy books because exams were by the corner.*
> (Participant 7, 21 years old) *I used it for transportation if I have to go to school.*

> However, *(*Participant 20, 30 years old) argued that it is scarce to see the child's needs met,

when the family uses the child support grant for the whole family as reported below:

> *... in the household may be one person is collecting the grant so instead the money focusing on the child they will use the money to buy home necessities such as food and stuff and things like that, so they tend to neglect the child needs on what she supposed to get.*

In this study families and caregivers have used the grant money for their own benefits. The quotations above show that the CSG does not benefit the children only but the recipient and in most cases the entire family. Participants also used it to meet the household's and caregivers' needs and wants. This is similar to the findings of the study on the recipients of the CSG conducted by Khosa (2013) in Limpopo Province of South Africa. The study revealed that some of the recipients of the child support grant utilised it for their own benefits. DSD (2008) confirms this fact that the CSG is the money paid to a primary caregiver to provide for the child's needs but there are evidences that CSG benefited the adults at the detriment of the child.

This study also demonstrated that the caregivers not only use the money for immediate needs and wants but they also have plans for long-term benefits from the grant. This findings of this study showed that participants use the CSG for informal strategies of saving money such as stokvel. (Participant 3, 23 years old) indicated this when she referenced how others in the community used the money:

> *What I know she plays stokvels and then she got two children that are in high school she does that all herself it does help some people. It helped me (smiling).*

The stokvel savings are significant as it supplement large payments such as high school fees. This is in congruency with Ramangosh (2016) description of stokvels that they are social clubs held with the aim of saving small amount of income and help one another to cope financially. According to Matuku, and Kaseke, (2014) in their study conducted in Orange Farm community in Johannesburg, South Africa, stokvels improve income security of some vulnerable people consequently it alleviate poverty. Anyway, that is the discussion for another day.

Another strategy for long-term benefits use of the grant money is to run an informal business such as informal trading. This was illustrated by one of the participants below:

I sell cigarettes, fruits and sweets and I try sneaking in some beer, but the police do not

*want me to sell beer. Sometimes when I'm selling, and some stock runs out, then I can use it to buy more (*Participant 11, 34 years old).

The grant money is also used for securing funds especially from family members to start up a small or micro business. One of the participants revealed this when she reported that she borrows money as capital for a small business and the grant assists her on paying back the instalments

Participant (11, 34 years old) said:

I sometimes borrow money for small businesses then when I get the grant money I use it to pay slowly. It is sometimes not the full amount when you pay slowly…

This brings us to the ecological approach of the theoretical framework whereby the individuals, or families, strive to maintain a positive and healthy fitness between themselves and their environment. The quotations above demonstrate that availability of child support grant has assisted the recipients in generating income by participating in informal business. This has highlighted the intentions of the grant receivers to have income security. In other words, majority of the recipients do not necessarily rely on the grant even though they are unemployed. Would it be an understatement to say that the grant is doing what it was meant to do? Neves, et al. (2009) confirmed that the child support grant facilitates the recipients' engagement in informal economic activities and display an increased tendency to borrow from informal, relationship-based sources such as family and local shops. Let us not jump into conclusion, it would be good to see the other side of the argument. Hence, the next section will discuss the utilisation of child support grant that excludes the child's benefits.

4.3.4. Utilisation of the child support grant that excludes the child's benefits.

In this study I found that there are cases where the CSG is being misused by the recipients. This means that the grant money is sometimes misdirected and not used in the best interest of the child. Some of the participants used the money for their personal gain. This included paying for expenses such as hairdressing, doing nails and alcohol consumption as reported in following quotations:

Eish! For women they do their hair and nails the children end up not benefiting. (Participant 1, 33 years old).

Yeah, its everyday thing, people are drinking (alcohol) using the money to buy drinks and stuffs like weed. Listen I see that on an everyday basis…you see somebody misusing the CSG what can you do? (Participant 20, 30 years old)

From the above quotations the caregivers spoke about misusing of the CSG. During the discussions the participants seem to suggest that they do not misuse the money when they use it to pay for their benefits. They seem to mean that the children owe them for taking care of them and using the grant money for them is symbiotic. The quotations from the participants attest to this:

I will end up using it for something important to me but I always hope to replace it with my money but that never happen because I don't have money... (Participant 6, 24 years)

Similarly, (Participant 13, 53 years) said:

Yes, it happens when the grant comes in before mine, but as soon as I receive mine I replace the money I used.

I observed that several participants do not want to be associated with the socially unacceptable behaviours, hence, when they talk about negatives they speak in a third person. But deep down you can see they were speaking of themselves or their relatives next door.

Furthermore, the data also illustrated that the child sometimes does not benefit from the grant due to fraud. The fraudulent cases included those where a person who is not entitled to receive it is receiving the grant money. At times the receiver does not stay with the child. This point was mentioned by (Participant 3, 23years old):

You see that is what some of us do as youth, we have got people that, I won't mention names, but there is this girl she is the same age as I am she has three children each getting the CSG. What she does she give birth to a child she dumps the child to the mother; she gives birth to another one she damps again to the grandmother? She goes and register for CSG, she does not give the grandmother the money, she goes with it somewhere and misusing it, but the children need to be feed, they need clothing; they need to go to school, and they don't even go for immunisation because the grandmother is too old she doesn't know about all those things. Some buy drugs from the money; it's wrong I am not defending in any way, it is wrong."

This particular finding showed that due to selfish reasons some people are misusing the

grant, as well as defrauding the government by getting the child support grant when they are ineligible. Whilst others are those who are eligible but not staying with the child. These findings are similar to those from the study by Khosa (2013) in which caregivers in Ba-Phalaborwa sub-district in Limpopo Province utilise the child support grant without even having seen the child for over 2 years. Khosa reported that some recipients are not employing the grant in the best interest of children as they misuse the grant through gambling and purchasing alcohol. This I believe need redress from the government.

4.3.5. Perceptions towards the Child Support Grant

While the participants of this study saw the good that comes out of having the CSG they seem to express both the positive sentiments and otherwise towards it. The recipients unanimously praised the child support grant for its enabling effect in assisting the caregivers and the children. In other words, since the money is given for free, the participants express gratefulness on the generosity shown by the government. Several participants such as (Participant 11, 34 years old), expressed this:

> *All three of them receive the grant, it's enough because I don't work for it, it's just gifted to me so I can't complain. I could only complain if it were money that I worked for; it works perfectly well for me, its fine.*

I think the participants' gratitude comes from their admiration of the CSG for its reliability and regular. From the findings it is the money they are sure they are going to receive end of the month. In other words one can budget or organise one's life base on it.

> *Obviously, we know you got money that is coming month end, you can buy food and then anything else even though it not enough but at least you know you rely on that.* (Participant 8, 24 years old).

There was also an unanimous agreement among the participants in the study that the child support grant is the monetary assistance given to the poor household as highlighted by (Participant 7, 21 years old):

> *My view is that it helps a lot, to the underprivileged people who do not have income on the daily bases…*

A view reiterated by many saying that*:*

*It helps those who are in need… (*Participant 6, 24 years old).

The fact that the money is regular makes it possible for recipients to plan for it since it comes every month. This can also be an indication that the participants perceive the CSG as a free programme by the government. Although they see the money as a low amount they felt self-inclined to thank the government for financially supporting them. This point to the need to generate extra income to cover other expenses. According to Guthrei (2002), although the CSG is essential to protect the poorest of the poor, it is insufficient to eradicate poverty unless they are accompanied by employment creation strategies and income-generating projects. In the review of the CSG by Delany et al. (2008) the reason cash transfers are accompanied by initiatives such as access to primary health care for children under six years, school nutritional programmes, access to school fee exemption and increasing of no fee schools is to inform the caregiver that the money is not even enough to satisfy the needs of the child let alone the caregivers' own problems.

Another negative view is that the children's fathers are taking advantage of the CSG to be irresponsible. It is because of this that the fathers become financially absent from their children this participant highlighted:

> *He just said now that you are receiving grant I'm not going to help you sometimes and some months I'm going to help you, but then I didn't understand so I just said its better if you go with your money* (Participant 18, 21years old).

This same view was shared by many others that the fathers are not meeting their responsibilities because they are or the mother of the child is receiving the CSG. For instance this participant said:

> *Yes! Of course, because they (the fathers) know the government is there to support and take responsibility for our children they themselves become very irresponsible in the lives of their children.* (Participants12, 24 years old).

These quotations from the participants highlighted that the moment the mothers receive the CSG, the fathers disengage from the upbringing of the child. These findings presume that the grant money discourages fathers from financially contributing towards the upbringing of their children. Most fathers sees CSG as a substitute for their support. This study confirms findings that were reported by Patel and Hochfeld (2011) that further payment of the child maintenance to

women by fathers who no longer live in the household seems to be discouraged by the CSG.

4.4. VIEWS ON HOW THE CHILD SUPPORT GRANT CAN BE USED TO BENEFIT THE CHILD

It would appear that the participants are not just happy to receive grant money but they are thinking of better ways that the government can distribute the money to best facilitate proper usefulness by the recipients. The participants gave their views on the best ways to use CSG to ensure that it benefits the children.

One view was that the government through South African Social Security Agency (SASSA) must review their system once per year. They must do this by also interviewing the children if the caregiver is taking care of them who they are staying with as there is a notion that when a child is asked they do not lie. This is illustrated below:

> *I feel that with SASSA they need to upgrade the system, the review is done once per year, you go there you say I am still staying with the child, but there is no proof that you are staying with the child. I feel like if they will do visit to just double check if you are really staying with your child. Like when I went to do my review, they said there is no need to come with the child. I feel that if you go there with the child if they ask the child where your mother is staying... The children don't lie; the child will say mother is staying somewhere else I am staying with granny. I think they need to like, upgrade I understand they are so many people collecting grand but when they do the review that's where they should upgrade the system you bring your child, you put your fingerprints, and they need to question your children in terms of who is you're staying with? Is your mother taking care of you? Children don't lie they will say it all.* (Participant 20, 30 years old).

The participants suggested involving children in SASSA recipient grant review to deal with the misuse of the grant money by the recipients and fraud of those who are receiving the grant while they are not staying with the children. This finding indicates the desire to involve the children in making sure the grant benefit them may help to redeem that problem but may gravely inconvenient most children especially those from rural areas.

The other view raised by participants was giving vouchers to the recipients of the CSG instead of money to ensure the grant is benefiting the children as illustrated below:

> *Corruption I once watched a documentary, overseas I think America and they are given vouchers other than money. If your kid is like from 0 to 2 years, you are given a voucher*

for food and cloth, and then you go to the shop and then your buy specifically those things. I think the government of South Africa is doing a bad thing as of money; it's better if they give vouchers. If your child is more than 3 years to 4 – 5 years you go and change and given the vouchers. Because people misuse the money (Participant 7, 21years old).

From the quotations above the participants view use of vouchers as the way that can ensure the use of the grant in the best interest of the child. The findings indicate that having cash transfers increase chances of the money used in other things not benefiting the child. The study by Aker (2012) found that vouchers are not easy to implement as compared to cash transfers. Aker further state that although cash transfers increase households' savings as compared to the voucher cash transfers had lower levels of food insecurity as compared to the households receiving a voucher.

4.5. CONCLUSION

The findings highlighted that majority of the beneficiaries of the child support grant are female single parents. A large percentage of these women are unemployed, which reflect the prevalence of income poverty in relation to CSG significant. The CSG facilitates the beneficiaries having access to necessities that have a direct influence on a child's present and future well-being. The household where the grant is sole income was found to be using the grant constructively to buy food for the whole family and cover education expenses such as transport to school, stationery of caregiver and the child's schooling needs. The study also revealed that there are specific challenges such as fathers' effectiveness and irresponsible towards their child's upbringing. Consequently the mothers end up the sole caregivers. Again CSG can ultimately be misused by the recipients who might not be the caregiver. Fraud hinders the usefulness of the grant. To ensure that the grant benefits the child the participants suggest an active involvement of children especially in yearly review of the grant recipients and the use vouchers instead of cash transfers.

CHAPTER 5
SUMMARY, CONCLUSION AND RECOMMENDATIONS

5.1. INTRODUCTION

This study is aimed to elicit caregivers' perception on the influence of the CSG on children's well-being. In this chapter, I provide a summary of the findings according to the objectives of the study before concluding the study and after the conclusion followed by the recommendations that emanated from the study's findings.

5.2. SUMMARY OF THE FINDINGS

Below I summarise the main findings in accordance with the study's objectives.

5.2.1. To determine caregivers perceptions on the child support grant

The grant is perceived as assistance to the economically vulnerable households. The caregivers referred to the grant as the most trusted source of income paid by the government at every end of the month. In families where everyone is unemployed it is regarded as the only source of income which provides for the needs of the whole family. Some caregivers believe that when the money is used to support the entire family, the needs of the child may not be met.

The adverse perception of CSG was raised that the money is insufficient. In this regard the primary caregivers indicated their awareness to have an extra source of income to augment the CSG hence other caregivers' involvement in stokvel and others indulge in informal trading. The recipients of the child support grant also viewed it as facilitative of the disengagements of the child's father from financial provision. The caregivers believe that fathers take advantage of their children benefiting from the grant.

5.2.2. To explore the role played by CSG on the well-being of children

The CSG has been used by recipients to influence the well-being of the child directly. The grant is used to fulfil both the short and long-term needs of the child. The short-term is to cover school-related costs, health care and basic necessities such as food. The long-term is when the grant is used by the care-givers especially mothers to pay for the child's education and life policy.

The child support grant is not benefiting the child alone but it is also used by caregivers for self-care and self-development expenses. The child support grant is also used for informal

investments such as stokvels and informal trading. Here are instances, the CSG utilisation does not benefit the child at all such that the CSG is misused. There are also acts of fraud committed in relation to the child support grant. The devotion of the CSG for other purposes that do not benefit the child compromised its role in ensuring their well-being.

5.2.3. To elicit the views of caregivers on how child support grant can be improved to meet the needs of children in South Africa.

There was a suggestion that the South African Social Security Agency should involve children in yearly recipients review to monitor the children's beneficiation from the grant. The study also showed that recipients favour vouchers instead of cash transfers because vouchers are very hard to use anti-socially.

5.3. CONCLUSION

The implementation of South Africa's CSG as a form of social assistance is the primary source of household income assisting needy and vulnerable families to meet children's basic needs. The utilisation of the grant money by caregivers provide evidence that it is used to promote the child's well-being such as their happiness, education and health. The CSG money also contributes to the well-being of the whole families such that some families rely entirely on the grant. The caregivers use the grant in the child's best interest while others do not and they get away with it.

5.4. RECOMMENDATIONS

Majority of the caregivers are economically active population there is an urgent need to create conducive environment for caregivers to be financially self-reliant. The South African government departments through the Department of Social Development and local governments must play a supportive role in poor people's enterprises and create better economic infrastructure to boost caregivers' financial access.

There is a need for awareness campaigns on universal access on the importance of that basic social services provision. The people must be informed of free government services available to low-income people such as free education and healthcare so that they do not have to pay for these services. The government and social welfare professionals at the local level should lead the awareness campaigns to ensure that low-income people and other vulnerable groups have access to free essential services.

Child support grant should not be viewed as a substitute for fathers' financial provision for child maintenance. The exorbitant *lobola* need to be reviewed because men in their nature require to be tied to their responsibilities to make them focus. The study thus recommends that the social workers working with local communities should work together with the government to educate the parents on the responsibility of the father vis-à-vis the Child Maintenance Act.

On the misuse of child support grant, there is an increasing need for social workers to collaborate with SASSA officials and monitor the grant to ensure that it is used in the best interest of the child through interventions such as schools and home visits taskforce or inspectors.

Most of the participants suggested using the vouchers instead of cash transfer. The study recommends this as a punishment for caregivers who misuse CSG. If they are found abusing the CSG, they will get vouchers instead.

There is an increasing need for subsequent studies to be conducted on the viability of vouchers as compared to cash transfers for the child support grant in South African context.

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APPENDIX A: ETHICS CLEARANCE CERTIFICATE

SOCIAL WORK
THE SCHOOL OF HUMAN AND COMMUNITY DEVELOPMENT (SHCD)

DEPARTMENTAL HUMAN RESEARCH ETHICS COMMITTEE (SOCIAL WORK) CLEARANCE CERTIFICATE

PROTOCOL NUMBER: SW1/17/04/04

PROJECT TITLE: Perceptions of Caregivers on the influence of child support grants on children's well-being: A case-study of Mpophomani area in Umgungundlovu (Pietermaritzburg), Kwa-Zulu Natal.

RESEARCHER/S: Mazeza, Kudakwashe (1454013)

SCHOOL/DEPARTMENT: SHCD Social Work

DATE CONSIDERED: 15th May 2017

DECISION OF THE COMMITTEE: Approved

EXPIRY DATE: 10 August 2019

DATE: 09 August 2017

CHAIRPERSON: Dr. F. Masson

Cc: Supervisor: Mrs B. Nkala-Dlamini

DECLARATION OF RESEARCHER(S)

To be completed in **DUPLICATE** and **ONE COPY** returned to the Administrative Assistant, Room 8, Department of Social Work, Umthombo Building Basement.

I/We fully understand the conditions under which I am/we are authorised to carry out the abovementioned research and I/we guarantee to ensure compliance with these conditions. Should any departure to be contemplated from the research procedure as approved I/we undertake to resubmit the protocol to the committee. **For Masters and PhD an annual progress report is required.**

SIGNATURE

22/11/2017
DATE

PLEASE QUOTE THE PROTOCOL NUMBER ON ALL ENQUIRIES

APPENDIX B: INTERVIEW GUIDE

SEMI-STRUCTURED INTERVIEW

Section A: Demographic/ Biographical Data

1. Age
2. Marital status
3. Number of children
4. Employment status

Section B: Information on CSG

1. When did you start receiving CSG?
2. What are your reasons to register for CSG?
3. How much are you receiving from Grant every month?
4. What are your other sources of income apart from CSG?
5. How do you utilise the grant and name kind of things you usually buy?
6. What is your understanding of child's well being?
7. Describe the well-being of your child/children before and after receiving the CSG?
8. Is the CSG making any difference in your child/children's well-being?
9. What are your views about the use of CSG?
10. What are your views about the abuse of CSG?
11. How can the grant be used in order to benefit children?
12. How can the government improve the policy of CSG to have a positive influence on child well-being?

APPENDIX C: PARTICIPANT INFORMATION SHEET

Research Title: Perceptions of caregivers on the influence of child support grants on children's well-being: a case study of Mpophomeni area in Umgungundlovu, (Pietermaritzburg), KwaZulu-Natal.

Good day

My name is Kudakwashe Mazeza, and I am a postgraduate student registered for the degree Masters in Social Development at the University of Witwatersrand. As part of the requirements for the degree, I am conducting a research investigating the effectiveness of the child-support grant on children's well-being: perceptions from beneficiaries. The study hopes to obtain more evidence on the grant's effectiveness as this might influence social welfare policy-makers to review the benefit level. It is hoped that the study will also enable policy-makers to address some of the challenges faced by beneficiaries in accessing the grant and contribute to social service professional such as social workers in understanding the challenges faced by the caregivers in utilising the CSG, helping in designing intervention measures to use CSG in the best interest of the child.

I, therefore, wish to invite you to participate in my study. Your participation is entirely voluntary and your refusal to participate will not be held against you in any way. If you agree to take part, I shall arrange to interview you at a time and place that is suitable for you. The interview will last for approximately 30 minutes. You may withdraw from the study at any time and you may refuse to answer any questions that you feel uncomfortable with answering.

With your permission, the interview will be tape-recorded. No one other than my supervisor will have access to the tapes. The tapes and interview schedules will be kept in a locked cabinet for two years following any publications or for six years if no publications emanate from the study. Please be assured that your name and personal details will be kept confidential and no identifying information will be included in the final research report.

As the interview will include sensitivity issues, there is the possibility that you may experience some feelings of emotional distress. Should you, therefore, feel the need for supporting counselling following the interview, I have arranged for services to be provided free of charge by the FAMSA to make an appointment they may be contacted own (033) 342-4945/ +27799721260

I may be contacted on 0730496030 or my supervisor B. Nkala-Dlamini on 011 717 4483. Should you wish to receive a summary of the results of the study; an abstract will be made available on request.

Thank you for taking the time to consider participating in this study.

Yours sincerely

Kudakwashe Mazeza

APPENDIX D: CONSENT FORM FOR PARTICIPATION IN THE STUDY

I hereby consent to participate in the research project. The purpose and procedures of the study have been explained to me. I understand that my participation is voluntary and that I may refuse to answer any particular items or withdraw from the study at any time without any negative consequences. I understand that my responses will be kept confidential.

Name of Participant:

Date:

Signature:

APPENDIX E: CONSENT FORM FOR AUDIO-TAPE RECORDING

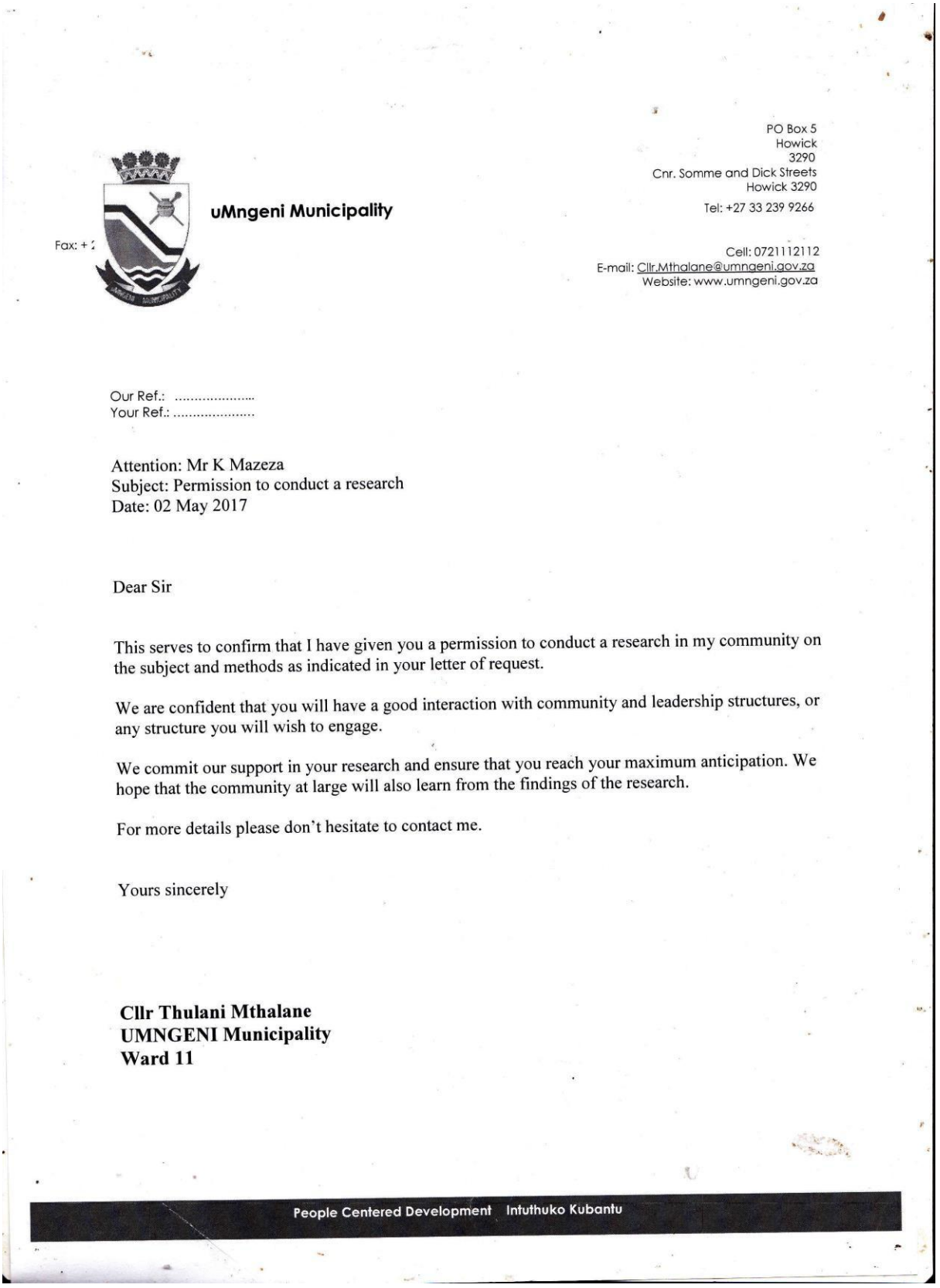
I hereby consent to tape-recording of the interview. I understand that my confidentiality will be maintained at all times and that the tapes will be destroyed two years after any publication arising from the study or six years after completion of the study if there are no publications.

Name of Participant:

Date:

Signature:

APPENDIX F: PERMISSION LETTER TO CONDUCT RESEARCH



uMngeni Municipality

PO Box 5
Howick
3290
Cnr. Somme and Dick Streets
Howick 3290
Tel: +27 33 239 9266

Fax: +2

Cell: 0721112112
E-mail: Cllr.Mthalane@umngeni.gov.za
Website: www.umngeni.gov.za

Our Ref.: .....
Your Ref.: .....

Attention: Mr K Mazeza
Subject: Permission to conduct a research
Date: 02 May 2017

Dear Sir

This serves to confirm that I have given you a permission to conduct a research in my community on the subject and methods as indicated in your letter of request.

We are confident that you will have a good interaction with community and leadership structures, or any structure you will wish to engage.

We commit our support in your research and ensure that you reach your maximum anticipation. We hope that the community at large will also learn from the findings of the research.

For more details please don't hesitate to contact me.

Yours sincerely

Cllr Thulani Mthalane
UMNGENI Municipality
Ward 11

People Centered Development Intuthuko Kubantu