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Social workers' experiences of providing psychosocial support to learners in foster care in Merafong city, Gauteng during the covid-19 pandemic

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2024

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Balopedi, Karabo Mpho. (2024). Social workers' experiences of providing psychosocial support to learners in foster care in Merafong city, Gauteng during the covid-19 pandemic [Masters dissertation, University of the Witwatersrand, Johannesburg]. WIRedSpace.

<https://hdl.handle.net/10539/44771>

**SOCIAL WORKERS' EXPERIENCES OF PROVIDING PSYCHOSOCIAL
SUPPORT TO LEARNERS IN FOSTER CARE IN MERA FONG CITY, GAUTENG
DURING THE COVID-19 PANDEMIC.**

A report on a research study presented to

**The Department of Social Work
School of Human and Community Development
Faculty of Humanities**

University of the Witwatersrand

In partial fulfilment of the requirements

**for the degree Master of Arts in Social Work by Course work and Research report in
the field of School Social Work**

by

Karabo Mpho Balopedi

30 June 2024

DECLARATION

I, **Karabo Mpho Balopedi**, declare that the work which is submitted here is my own work and all the referenced material used in this study has been duly acknowledged. In addition, I declare that the work is being submitted for the first time at this university towards the Master of Arts in Social Work by Course work and Research report in the field of School Social Work in School of Human and Community Development



Signature

18-09-2024.

Date

ACKNOWLEDGEMENTS

My academic journey towards this master's degree began with anxiety and fear as it began during the period of COVID-19 which was filled with a lot of uncertainty. It began with so much self-doubt because I did not believe I was capable or an ideal candidate for Masters, I was the first to achieve a degree and live within my family. However, I had a couple of people who consistently reminded me that this journey is worth it and that I can achieve anything I set my mind to. Thus, I would like to thank everyone who contributed towards ensuring that I do not let go of the dream of becoming a master's degree graduate.

Prof Edmarie Pretorius my lecturer and research supervisor, you constantly reminded me not to give up. You guided me academically and I do not believe I would have been able to realise this dream without your academic guidance. I was not a cooperative student and for that I will continue to apologise and would like to thank you for everything.

Mr Tebogo Itumeleng my practicum supervisor, you were a mentor I did not know I needed until I wanted to quit. Your support and guidance ensured that I managed to overcome hurdles, which I deemed impossible. I want to just say *kea leboga ntate Itumeleng*.

To my late mother Mrs Gloria Gama, you might not be able to be part of the progress, however, you were part of the process. You were an inspiration and everything I am pursuing is because you showed me that it is possible. Thanks for supporting me emotionally and reminding me to relax and not allow everything to consume me.

I dedicate this degree to my late grandmother Mrs Mirriam "Bushy" Setshego Balopedi. I am who I am today because of you and your teachings. I cannot imagine graduation without you! You were my praise singer always ensured I had my five seconds of fame without fail. There is no achievement I attained without you being present, this will be the first milestone I would reach without you being there. I tried delaying the process and quitting, but I remembered your words "you can't be defeated by something that does not talk" and knowing you would be extremely disappointed by me letting go of a dream is the only reason I am here. You were present for every milestone since 1990 until 2023, I will try to hold on and work on the healing.

I am grateful to have been blessed with a grandmother who loved education for me and ensured I got to pursue every educational opportunity that she was never afforded. This one is for you mama. I am trying to make you proud and trying to ensure your teachings live on.

Ms Dikeledi Modipane my former social work supervisor, I would like to thank you for insisting that I pursue the degree and ensure that you assisted me in finding a balance between work and studying.

Ms Khodani Ravhandalala my former school social work supervisor, thanks for the assistance with schools and the support.

I would like to thank the Gauteng Department of Social Development and the West Rand Region for providing me with the opportunity to attain such an honour and privilege of studying towards a degree.

ABSTRACT

The South African government attempted to curb a second wave of COVID-19 by banning activities individuals used as their coping mechanisms during the peak of the pandemic. This created a period of heightened stress which resulted in the increase in need for psychosocial services. Social workers within the Department of Social Development, were part of the individuals tasked with rendering psychosocial services. The aim of the study was to explore social workers' experiences of providing psychosocial support to learners in foster care during the COVID-19 pandemic in Merafong City, Gauteng. It was a qualitative study, that was exploratory in nature following an instrumental case study design. The ecological perspective guided the study. The method of data collection was semi-structured interviews using a semi-structured interview guide as the research tool. Purposive sampling technique was used to select the 10 social workers who meet the inclusion criteria. The collected data was analysed using thematic analysis. The findings revealed that there was lack of resources and no preparation or training to deal with the pandemic. There was also a fear of the virus being spread by social workers amongst themselves and to clients. The study also revealed that social workers needed to find alternative ways to provide services by being flexible, creative and adaptable to the new normal. The findings contribute to the South African knowledge base about the psychosocial support needs of social workers who render psychosocial services within traumatic circumstances like a pandemic. The identified gaps provide research opportunities for government and academics.

Key words: COVID-19, Foster care, Gauteng, Geo-functional community, Merafong City, Psychosocial support, social workers

Table of Contents

DECLARATION.....	ii
ACKNOWLEDGEMENTS.....	iii
ABSTRACT.....	v
Table of Contents	vi
CHAPTER ONE	10
INTRODUCTION	10
Background to the study	10
Statement of the problem and rationale for the study	11
Research question	12
Aim and objectives	13
Definition of concepts.....	13
Foster care.....	13
Foster care placement	14
Geo-functional community	14
Psychosocial supportive interventions	15
Social worker	15
Brief overview of the research methods applied.....	15
Limitations and delimitations of the study.....	16
Table 1.1: Limitations and Delimitations of the study.....	16
Structure of the research report.....	16
CHAPTER TWO.....	18
LITERATURE REVIEW AND THEORETICAL FRAMEWORK	18
Introduction.....	18
COVID-19.....	18
Psychosocial Consequences of COVID-19	18
The role of Social Workers during the COVID-19 Pandemic globally	20
Challenges faced by social workers providing psychosocial services during the COVID-19 pandemic globally	21
The need of psychosocial support for workers globally	24
Social Work in Foster Care During COVID-19 Globally.....	24
Foster care during COVID-19 the globally and South Africa	24

Provision of Psychosocial Support and Identifying the Need for Psychosocial Support in Schools	26
The theoretical framework underpinning the study	27
Conclusion	29
CHAPTER THREE	31
RESEARCH METHODS	31
Research paradigm.....	31
Research approach and design	32
Population and sample	33
Sampling method	33
Recruitment.....	34
Marketing of the Study	35
The sample inclusion and exclusion criteria.....	35
Data collection method	36
Data collection instrument	36
Pilot of the research instrument	36
Method of data collection	37
Method of data analysis	37
Trustworthiness.....	40
Credibility	40
Dependability	40
Transferability.....	41
Confirmability.....	41
Ethical considerations	42
Obtaining permission	42
Maintaining relationships with research participants	42
Voluntary participation.....	43
Informed consent	43
Confidentiality and privacy.....	44
Anonymity	44
Beneficence.....	45
Summary	45
CHAPTER FOUR.....	46
PRESENTATION OF DATA AND FINDINGS	46

Demographic Information.....	46
In Table 4.1 the demographic profile of the participants is presented.	46
Themes and subthemes developed from the collected data	47
Table 4.2 Summary of Themes and subthemes.....	48
Discussion of the research themes and subthemes in relation to the objectives	49
Theme 1: Lack of Resources for social workers rendering psychosocial support to learners in foster care during COVID-19.	49
Theme 2: Social workers fear of the virus while rendering psychosocial support to learners in foster care.....	50
Subtheme 2.1: Clients' fear contracting the virus from social workers.	50
Subtheme 2.2: Social workers fear of contracting the virus at work and spreading the virus at home.....	50
Theme 3: Social Workers using alternative ways of providing psychosocial support to learners in foster care.	51
Subtheme 3.1: Flexibility, creativity, adaptability	51
Subtheme 3.2: Using technological tools to provide service.....	52
Theme 4: Social Workers using more empathy in rendering psychosocial support to learners in foster care during the pandemic.....	53
Theme 5: Unpreparedness of Social workers to renders psychosocial support during COVID-19.....	54
Subtheme 5.1: Could not have prepared	54
Subtheme 5.2: Lack of resources	54
Sub-Theme: 5.3 Training	55
Theme 6: Lack of psychosocial support for social workers.	56
Sub-theme 6.1: Partial Support.....	57
Sub-theme 6.2 : Needed Professional Help	57
Summary	58
CHAPTER FIVE.....	59
KEY FINDINGS, CONCLUSION AND RECOMMENDATION.....	59
Research question, aim and objectives	59
Summary of the Key Findings	60
Objective 1: Challenges faced by the social workers in providing psychosocial services to learners in foster care in Merafong during the COVID-19 pandemic.	60
Objective 2: Strategies social workers applied when rendering psychosocial services to learners in foster care in Merafong during COVID-19 pandemic	60

Objective 3: Social workers' preparedness to render psychosocial services to learners in foster care during the COVID-19 pandemic.	61
Objective 4: Social workers' view on the psychosocial support services they have received as members of the psychosocial support team during the COVID-19 pandemic.	61
Recommendations.....	61
REFERENCES	63
APPENDIX A: PERMISSION TO CONDUCT RESEARCH WITH SOCIAL WORKERS AT DSD MERA FONG CITY OFFICES.....	69
APPENDIX B: ETHICAL CLEARANCE.....	70
APPENDIX C: PARTICIPANT INFORMATION SHEET	71
APPENDIX D: CONSENT FORM	73
APPENDIX E: SEMI-STRUCTURED INTERVIEW GUIDE.....	74

CHAPTER ONE

INTRODUCTION

To live and survive in the world is to constantly adapt to sudden change and this change may come many ways. In December 2019, the first case of COVID-19 was reported in Wuhan, China. From that period going forward, there have been significant health, economic as well as societal disruptions as a result of the global outbreak (Yadav & Yadav, 2023). The coronavirus was no different. This study looks into the experiences of social workers rendering psychosocial services to learners in foster care in Merafong City during the COVID-19 pandemic. In this first chapter, the background of the study is highlighted, together with the problem statement and why the study is important. The chapter will also state the objective and research questions that the study seeks to answer. In order to give context, the main concepts are defined, and a brief overview of the research methodology applied is also added, including the limitations and delimitations that had an impact on the study.

Background to the study

The coronavirus "COVID-19" pandemic emerged into the world, forcing every state including South Africa to suddenly adapt to the new normal. In light of the new normal, families and children were faced with a new landscape of challenges caused by COVID-19 pandemic. Schools were forced to close, social interactions strongly limited, extracurricular and recreational activities were cancelled. Regulations and restrictions were introduced within the state of disaster to curb the spread such as enactment of lockdowns, the norm of wearing masks, banning the sale of alcohol and public gatherings (McCorkle, 2020). These set actions created unwanted and dramatic changes in the psychosocial environment of the people affected by the pandemic.

Although the development of the South African response to the pandemic outlines different mechanisms in eight stages, it was only in stage 4 when the well-being of individuals were considered. The government tried to coordinate the provision of health and psychosocial services to the seriously disadvantaged poor communities and vulnerable groups including learners in foster care (Karim, 2020). Thus, the question arose on how social workers who were tasked with providing care and psychosocial support were coping within such a period.

The study solemnly focused on social workers and their experiences of providing psychosocial support to learners who were in foster care in Merafong City during the COVID-19 pandemic, where access to resources were limited and only accessible to the privileged. The research also

explored the social workers' preparedness in light with providing psychosocial support as the foster care unit of the Department of Social Development. Thirdly, the experiences of the social workers regarding the psychosocial support they received, as the social workers were expected to provide psychosocial support during the pandemic. Finally, limitations of the study were clearly outlined as well as recommendations for future researchers.

Statement of the problem and rationale for the study

Social workers worldwide were heavily impacted by the COVID-19 pandemic and, although they often worked creatively, social distancing guidelines substantially limited their activities (Ferguson, et al.,2022). According to psychology, individuals experience natural disasters, loss, and pandemics differently as there are underlying factors involved (Schwartz et al., 2021). As such, documenting and reporting on the pandemic were clear that the longevity of the pandemic and the precautionary measures put in place had a mental and emotional effect on everybody, including social workers.

Therefore, the COVID-19 pandemic created long periods of continuous stress for parents and children, within an environment which did not permit individuals to indulge in activities that enhances their physical, psychological and social wellbeing. In the forefront of the service delivery within the pandemic was social workers, especially within the foster care unit who were expected to continue rendering psychosocial support within the respective environment. The South African government made it clear that frontline workers were expected to report on duty as much as possible as the virus was at its peak which meant that everybody needed extra physical, emotional, and mental support.

Social workers in the foster care unit within the Department of Social Development and intake sections, are constantly exposed to and overwhelmed by the stressors aligned with foster care and children in foster placements. In addition, research studies confirmed that rendering services to youth and children in foster care is emotionally demanding (Madden et al,2014). Social workers need to constantly ensure that the foster care placement is secure, and conducive to the child being placed in their care. It is the social workers' responsibility to ensure that there are no breakdowns within the placement between the parent and foster child. Furthermore, according to the Children's Act, 38 of 2005 should there be any breakdown of relationships, the social worker would need to transfer the child concerned to alternative care.

It is of utmost importance for a foster child to be in school as it is one of the requirements for foster care placements. As school were forced to close during the COVID-19 pandemic,

learners were faced with enormous change as face-to-face learning changed to online learning of which was a hurdle for foster care placements. Foster care placements (e.g., CYCCs, cluster foster care) play an essential role in South Africa in providing services for children according to the Children's Act, 38 of 2005. Rendering social work services in the respective environment is a compulsory legislative requirement for social workers. As such, it was compulsory for them to adapt and adjust to providing psychosocial services for the foster parents, immediate family and foster child during the pandemic.

Thus, the question is how social workers were able to provide psychosocial services within the predicament and what were their experiences of providing services within the COVID-19 pandemic setting. Exposure of these compelling experiences and/or issues provide beneficial feedback to improving therapeutic services and service outcomes for learners placed in foster care. This gap in knowledge led to the research study to explore the experiences of social workers who rendered therapeutic services to learners placed in foster care. As such, this study ought to unpack eye opening information on therapeutic services rendered in foster care placements during the pandemic.

Exploring the lived experiences of social workers providing psychosocial support to learners in foster care during the pandemic, contribute to the South African knowledge base about the psychosocial support needs of social workers during traumatic circumstances like a pandemic. Furthermore, the findings might be of positive influence in the amendment of policies for practice in the future. It is likely that new or adapted coping mechanisms social workers developed during the pandemic to render psychosocial services might be identified. It is hoped that the study highlighted creative problem-solving skills used by social workers in addressing the psychosocial needs of learners who are placed in foster care.

Research question

What were the experiences of social workers rendering psychosocial services to learners in foster care in Merafong City during the COVID-19 pandemic?

The following *sub-questions* helped answer this research question:

What challenges do social workers face in provision of therapeutic services in foster care during the pandemic?

What are the strategies applied by social workers when rendering psychosocial support to learners in foster care during the pandemic?

Were the social workers prepared to render psychosocial services to learners in foster care during the COVID-19 pandemic?

What are the social workers' view on the psychosocial support services they received as the psychosocial support team?

Aim and objectives

The aim of the study was to explore the experiences of social workers who rendered psychosocial support to learners in foster care in Merafong City, Gauteng during the COVID-19 pandemic.

The objectives of the study were:

Exploring the challenges faced by the social workers in providing psychosocial services to learners in foster care in Merafong during the COVID-19 pandemic.

Identifying the strategies social workers applied when rendering psychosocial services to learners in foster care in Merafong during COVID-19 pandemic.

Exploring the social workers' preparedness to render psychosocial services to learners in foster care during the COVID-19 pandemic.

Determining the social workers' view on the psychosocial support services they have received as members of the psychosocial support team during the COVID-19 pandemic.

Definition of concepts

Foster care

Proudlock and Jamieson (2009) define foster care as providing 24-hour care and supervision for a juvenile or child who has been taken from their parents or guardian(s) by a state agency. Foster care's primary goal is to offer safety, shelter, and care, to children who have been removed from their guardian(s). Foster care is also referred to as out of home care which may be necessary for children who is deemed in need of care and protection according to s. 150. 1 (a-i) of the Children's Act, 38 of 2005. Before any foster children arrive, the foster family and the adults in charge have received pre-approval from a government agency.

Furthermore, foster care is intended to safeguard and care for children by providing them with a stable home environment and making efforts to reunite them with their biological family. The goal is to foster enduring family bonds that are strong. These relationships may be with the

initial family or with another family in their community (Chipungu & Bent-Goodley, 2004). As such, a child can be placed in foster care through the issuing of an order by the court or the Department of Social Development. The order issued looks at the best interest of the child regardless of the circumstances.

Foster care placement

Foster care placements refer to children placed in related and unrelated foster care as well as cluster foster care as per court order. In addition, some children are placed in child and youth centres and not foster care. Children can be placed in temporary safe care pending finalisation of the Children's Court Inquiry. Subsequently, the commissioner may order that the child be placed in foster care. Chipungu and Bent-Goodley (2004) adds that foster care placement also includes group homes, residential care facilities, emergency shelters and/or treatment centre.

When a child is placed in foster care, there are a number of underlying concerns which may affect the wellbeing of the child. These include different cultural beliefs and religion compared to what the child might be accustomed to prior to being placed. As such, it is of utmost importance that the social worker conducts a thorough assessment before placing a child in the respective care as the set placement needs to be comfortable and encourage growth to the child in question. As a result, when the foster child is comfortable, then foster placement disruption is avoided as the child might show severity of behavioural and emotional issues during their stay which leads to moving from one placement to another (Leathers, 2006).

Geo-functional community

A Geo-functional community is a community in which people are together to meet a common goal, the interactions which take place in it are purposeful, e.g., a school, workplace, church, a fishing club, etc. (Jakes et al., 1998). A geo-functional community consists of functions that the community fulfils. These may include the provision of services, goods, socialisation, employment or participation and political organisation (Weyers & Geyer, 2011). The Department of Social Development is a geo-functional community in which their function is the provision of social services to community members. For purposes of the research study, geo-functional community refers to the offices of social development which community members use and where social workers render psychosocial services.

Psychosocial supportive interventions

According to Murray (2002), psychosocial supportive interventions that provide support for emotional difficulties, are informative and build capacity. Psychosocial supportive interventions are processes that facilitates recovery in individuals, families and communities and these interventions enable individuals, families and communities to recover from the impact of a crisis and helps them cope with such events in the future (International Federation Reference Centre for Psychosocial Support, 2009). By respecting the independence, dignity, and coping mechanisms of individuals and communities, psychosocial support promotes infrastructure improves health functioning and wellbeing.

Benedek and Fullerton (2007) state that there are five essential principles one must follow when providing psychosocial support, which are to promote a sense of safety, calming, self- and community efficacy, social connectedness, and hope. Furthermore, this research study made use of the explanation of psychosocial support interventions by Murray (2002), as it refers to support related to life skills, counselling and providing the learner(s) with skills to cope better within traumatic situations. It also relates to providing support to social workers and all other professionals who provide psychosocial support.

Social worker

In South Africa, a social worker is a person who holds a four-year bachelor's degree in social work and registered with the South African Council for Social Service Professions (SACSSP). A social worker interacts with people in their socio-political, economic and cultural environments, enabling them to achieve their duties, cope with stress and to accomplish their dreams (SACSSP, 2018). A social worker should acquire knowledge and understanding of how human behaviour in their systems, competence to motivate people to solve their problems, teamwork skills and demonstrate values and principles of the social work profession. In addition, a social worker can practice in a range of settings, and these include adoption work, clinical, forensic, management, supervision, occupational and probation work. (Barker, 1991; Barker & Branson, 2014).

Brief overview of the research methods applied

The purpose of the study was to explore the experiences of social workers who rendered psychosocial support to learners in foster care during the COVID-19 pandemic. The constructivist paradigm was considered suitable using the qualitative research approach as the lived experiences of the social workers were explored. The sample included 10 social workers

from the Department of Social Development in Merafong, Gauteng and they were interviewed individually using a semi-structured interview guide. Data was analysed thematically.

Limitations and delimitations of the study

Limitations refers to the challenges encountered during the study, they are a common occurrence and should be addressed by the researcher (Ross & Bibler Zaidi, 2019). This research study was not free from limitations, as seen in Table 1.1 below:

Table 1.1: Limitations and Delimitations of the study

Limitations	Delimitations
English was used as a medium of communication during interviews and this was not the native language of the participants and participants struggled to express themselves during interviews.	Probing was used in cases of misinterpretation and for clarification to address the limitation encountered.
The interviews were time consuming, and the study focused on frontline workers who were on duty at that time.	The researcher communicated with participants prior to data collected and ensured that the research interviews did not occur during work hours for some or when others were not busy.

Structure of the research report

This research study divides into the following six chapters.

Chapter 1- Introduction

Chapter one provided an introduction of the study, which included the orientation, background and rationale of the study. The problem statement, goal, objectives and significance of the study are part of this chapter. This chapter concluded with the clarification of the key terms used in this study.

Chapter 2- The literature review and theoretical framework

The review of literature related to this study, is the focus of this chapter. The literature on social workers and foster care is emphasised including the COVID-19 pandemic. In addition, the ecological systems theory used as the theoretical framework for this study, is explained.

Chapter 3 – Research Design and Methodology

The researcher outlines the research methodology of this study in this chapter. Exhaustive explanations of the research approach, research design, population, sampling methods, data collection tool, data analysis, ethical issues, and trustworthiness.

Chapter 4 –Presentation of the data and research findings

This chapter presents the discussions and descriptions of the research findings gathered through the in-depth interviews.

Chapter 5 – Summary, conclusions and recommendations

This chapter provides the key findings, conclusion and recommendations of the study.

CHAPTER TWO

LITERATURE REVIEW AND THEORETICAL FRAMEWORK

Introduction

COVID-19 created an opportunity for academics and the helping profession to study a new phenomenon which was of a global scale. Since the announcement of the virus there has been different aspects studied and from different perspectives. Within this chapter, literature is reviewed to see what other studies have said about the matter. The literature review looks at the psychological consequences of COVID-19, the role of social workers during the COVID-19 Pandemic, as well as the challenges faced by social workers providing psychosocial services during the COVID-19 pandemic. Literature on foster care and foster care social workers during COVID-19 will also be reviewed, together with what other researchers have said about the provision of psychosocial support and identifying the need for psychosocial support for learners in schools. The chapter concludes by discussing the theoretical framework underpinning the study, which is the ecological systems theory by Bronfenbrenner (Darling, 2007), and how it relates to this particular study.

COVID-19

Many people worldwide were mainly confined to their houses due to the widespread lockdowns and home-confinement measures put in place in the majority of the COVID-19-affected nations (Dubey et al., 2020). These lockdown measures were implemented following China in an effort to stop the spread of the disease (Dubey et al., 2020).

The physical and emotional health of majority of the population has been seriously threatened by the COVID-19 pandemic (Dymecka, 2021). Despite the perception that COVID-19 was a medical emergency that would eventually be resolved, its psychological impact was argued to last longer (Sun et al., 2020). In order to address pressing social demands in an unpredictable environment, the social work profession experienced one of its most difficult periods during the COVID-19 crisis (Redondo-Sama et al., 2020).

Psychosocial Consequences of COVID-19

It has been argued that fear, panic, grief, as well as trauma reactions are among the psychosocial impacts of COVID-19 (Sun et al., 2020). Dubey et al. (2020) concur by pointing out that COVID-19 was an erratic and fast spreading infectious disease that produced widespread awareness, anxiety, and distress - all of which, as stated by WHO (2024), are normal

psychological reactions to the unpredictable changes that come with it. Furthermore, due to rising numbers of cases, high death rates, as well as ineffective health systems globally, individuals feared infection, death, and related complications (Dymecka, 2021).

During the first half of 2020, the COVID-19 pandemic drastically changed many facets of people's lives and livelihoods within South Africa (Banks et al., 2020). In addition to health problems, the COVID-19 pandemic also brought about changes in many facets of social life, including the closing of businesses and schools, financial difficulties, family separation, as well as a reduction in social interactions (Dymecka, 2021). In the same light, Abrams and Szeffler (2020), cited in Ashcroft et al. (2022), pointed out that individuals globally suffered from job loss, financial consequences, and worsened mental health issues as a result of COVID-19 and the ensuing lockdown measures. The COVID-19 pandemic had an impact on the health of individuals, and government initiatives including stay-at-home directives and social distance contributed to slowing down the spread of the virus.

However, Ivbijaro et al. (2020) state that these measures resulted in people expressing feelings of loneliness, which was particularly bad for those who were already sensitive or prone to mental well-being issues. There was stress from prolonged confinement and quarantine (Dymecka, 2021). According to Ammar et al. (2020), cited in Clemente-Suárez et al. (2020), home confinement brought on by COVID-19 had a detrimental impact on the mental health and emotional state of individuals. The increase in psychosocial challenges were also linked to bad lifestyle choices (Clemente-Suárez et al., 2020) such as negative coping mechanism such as drink home brewed alcohol or buying and selling illicit material. It has been noted by Ammar et al. (2020) cited in Clemente-Suarez et al. (2020) that people who were unemployed, had poor quality sleep, had unhealthy eating habits, and those who were not physically or socially active experienced increased mental and emotional impacts due to COVID-19.

Moreover, the COVID-19 pandemic produced a new social feeling that has not been previously experienced by society. This feeling is described as having a certain level of distrust toward others regarding the spread of the disease as well as toward the government and healthcare services concerning their capability of containing the outbreak (Ho et al., 2020 cited in Clemente-Suárez et al., 2020). Gambetta and Morisi (2022) concur by stating that because the COVID-19 spreads through contact with others, it potentially increases suspicion and distrust of other people. Considering the statements of Gambetta and Morisi (2022) it can thus be argued that this has a negative impact on professions that depend on physical contact.

The role of Social Workers during the COVID-19 Pandemic globally

In order to address the range of psychosocial difficulties that resulted from the pandemic, social workers and other front-line workers were called to action (Ashcroft et al., 2022). During the COVID-19 lockdown, community social workers were deemed essential workers and were therefore released from the prohibition of working during the closure (Ministry of Social Affairs, 2020 cited in Itzhaki-Braun, 2021). In order to meet the evolving needs of the pandemic, social workers needed to harness a varying range of skills. These skills included crisis management, risk assessments, advanced care planning, therapy for both individuals and group settings, case management as well as systems navigation (Ashcroft et al., 2022). Other skills included the ability to solve problems, allocation of resources, community mobilisation, as well as the development of policies among others (Ashcroft et al., 2022).

Moreover, in addition to their involvement in fostering social support and community participation, social workers were also expected to take part in a more systematic role in political arenas where decisions about social policies and programmes are made, (Dauti et al., 2020 cited in Itzhaki-Braun, 2021). In agreement, it is pointed out that in addition to professional skills to support individuals, groups, and communities, social work practice brings expertise rooted in a person-in-environment perspective (Ashcroft et al., 2022). This is described as a systemic understanding of institutions and policies, as well as expertise in the social determinants of health (NASW, 2020 cited in Ashcroft et al., 2022).

Community social workers anticipated that during this time, their job descriptions would expand to include the following supporting communities' planning and response efforts and helping communities gain access to services that are necessary for every member of the community (Itzhaki-Braun, 2021). Other roles included aiding communities in maintaining social solidarity and physical distance from one another; as well as continuing to advocate for better health and social service delivery in order to promote health and lessen social inequalities (Santiago & Smith, 2020 cited in Itzhaki-Braun, 2021). Therefore, the recognition of key competencies of social work brought about calls for their increased involvement at policy-level decisions as this attended to broader systems and social determinants of health connected to COVID-19 (Ashcroft et al., 2022 citing various studies).

During the COVID-19 pandemic, social workers encountered an increase in complex client demands (Ashcroft et al., 2022). Social workers across all practice sectors witnessed the devastating impacts of COVID-19 at individual, interpersonal and societal levels (Banks et al.,

2020; Ashcroft et al., 2022). It is argued that conditions worsened for those with whom social workers usually work; that is, people already on the margins of society, and suffer from poverty, poor health, racism as well as other forms of inequality and oppression (Banks et al., 2020). The study conducted by Ross et al. (2021) was centred on the role of social workers in hospitals during the pandemic, how they handled stress, and how they helped children adjust psychologically to their hospital surroundings (Ross et al., 2021). In their study, Ross et al. (2021) found that the pandemic resulted in a disruption to practice, necessitating a redefinition of the roles for social workers within the health geo-functional community.

It became a struggle for social workers to continue to do their work, as they had to adapt and be innovative in order to meet new needs and adjust priorities of the most urgent and critical facets of their roles (Banks et al., 2020). Thus, due to the requirements for social distancing resulting from COVID-19, the practices of social work needed to change dramatically as a result of the rapid inclusion of virtual technology (Ashcroft et al., 2022). This is in line with findings from Ross et al. (2021), who explored the experiences of social workers within a medical geo-functional community. They found that there needed to be expansion on scope of social work practice during the pandemic. Social Workers needed to think of new ways to provide services within the scope of lockdown restrictions and procedures put in place to prevent the virus spreading (Ross et al., 2021).

Challenges faced by social workers providing psychosocial services during the COVID-19 pandemic globally

The aftermath of the COVID-19 pandemic has presented numerous challenges for the social services sector (Ben-Ezra & Hamama-Raz, 2021). Ensuring that social workers have the necessary resources to address the severe psycho-social needs of clients that surface during a pandemic is more important than ever (Ashcroft et al., 2022).

There has been an observation that frontline healthcare workers encounter fast and unforeseen circumstances that call for an increased need for materials and human resources (Yadav & Sahu, 2022). However, because of this predicament, there is a greater chance of experiencing various negative outcomes, such as burnout syndrome, to which these professionals are usually already susceptible (Yadav & Sahu, 2022).

In this particular context, social workers may encounter challenging job demands that require attention in addition to the urgent need to modify their practices and protocols in light of the COVID-19 pandemic (Ben-Ezra & Hamama-Raz, 2021). Nonetheless, there was a lack of

consistent guidance for social workers about workplace safety, home visit safety, and working equipment (Ben-Ezra & Hamama-Raz, 2021).

Yadav and Yadav (2022) conducted a study reviewing reports from all the social work associations which were developing literature and findings in relations to COVID-19 and social work responses during the pandemic. Understanding the pandemic from the perspective of social workers, how it affected their ability to provide support, as well as the vulnerabilities they encountered during COVID-19 were some of the findings that arose from their study (Yadav & Yadav, 2022). The need of providing support for social workers and vulnerable individuals aroused within the study (Yadav & Yadav, 2022). According to Yadav and Sahu (2022), it is recommended that health care facilities put methods into place to lower the frequency of mental health issues among healthcare professionals. Over time, this can be argued to increase the ability to offer patients with safe, high-quality care by service providers (Yadav & Sahu, 2022).

Moreover, Ross et al. (2021) also found that inequalities within different communities were apparent and contributed to the challenges social workers faced during the COVID-19 pandemic. Community awareness progress had to be improvised and this meant even within developed nations there were communities that had to choose the priorities according to their socioeconomic status (Ross et al., 2021). Thus, the focus either being ensuring your basic needs are met or focusing on the psychosocial needs within the community (Ross et al., 2021). In the same light, it is argued that with great vigour, COVID-19 showed that the root cause of global disease outbreaks and mortality rates is the structural inequality created by a patriarchal, capitalist, and colonial social structure (Martinez, 2020).

Ross et al. (2021) also pointed out that there were adjustment issues with regards to the transition from providing services in person to using technology, and this again further exposed the inequalities. For example, a client not having access to internet or data or technological tools, resulted in them having limited access to social work services or social workers exposing themselves to physical contact to ensure that clients are served (Ross et al., 2021). In addition, Schneider et al. (2022) conducted a study of social workers within the medical geo-functional community exploring them being designated essential workers within the pandemic. Their study revealed the continuous debate regarding social workers being essential in rendering psychosocial support continued with the question about how it could be rendered remotely and whether or not the intervention would be effective (Schneider et al., 2022).

Moreover, Ross et al. (2020) further highlighted that self-care strategies were eroded, and within the pandemic social worker roles continued to evolve and develop according to the needs that came up. Yet again there was no recognition nor psychosocial support provision to social workers nor were creative manner discussed in relations to addressing self-care within the pandemic era (Ross et al., 2020). On the other hand, there was a key aspect raised by Schneider et al. (2022), which touched on having social workers recognised and provided with support within times of crises and when the crisis is over. In this light, Khoshnami et al. (2022) focused on the provision of psychosocial support within health care during COVID-19.

Within the study it was acknowledged that there was a huge discrepancy between training of social workers and the crisis they are faced with (Khoshnami et al., 2022). The study identified a need for developing trainings in relations to the pandemics and crisis that might arise to ensure that social workers are equipped with the essential skills needed to address a crisis should it arise (Khoshnami et al., 2022). The contribution this study has raised is whether social workers are trained adequately and secondly whether it was relevant for the pandemic (Khoshnami et al., 2022). In the same light, it has been raised that social workers are largely undertrained in the ethical and practical integration of virtual technology into their work, despite having some experience with the use of virtual care in practice (Ashcroft et al., 2022).

Once again there was no discussion related to whether social workers were also provided psychosocial support, but they did raise awareness for the need of social workers being provided with psychosocial support as well. The study was able to promote social workers as psychosocial support practitioner and ensuring that their roles are clarified (Schneider et al., 2022).

Jones et al. (2023) studied the coping mechanisms and psychological distress of individuals who work with children in the care of social workers within United Kingdom. It explored whether they were provided support prior to the pandemic and during the pandemic. The findings stipulated that they felt they were more supported during the pandemic by their colleagues and management of their institutions. The notion of providing psychosocial support to social workers within the pandemic was reduced to consistent supervision and direct interaction between supervisor and social worker to mitigate the impact of the pandemic on the social worker. However, it was noted that social worker found creative way to address their own psychosocial support, as the focus was on ensuring that service delivery was not disrupted.

The need of psychosocial support for workers globally

In their article Tomlin et al. (2020) explore the need of psychosocial support for health workers in the United Kingdom. A pandemic like that puts a strain on healthcare professionals' short- and long-term mental health (Tomlin et al., 2020). The article relates to the study as it recognises that there was a need for psychosocial support for workers working with people in stressful settings (Tomlin et al., 2020). It acknowledges that a model for providing psychosocial support within the pandemic setting is needed which is an advantage. It further creates different responses which organisations can institute in relation to the pandemic regarding psychosocial support. It is not about social work nor foster care, but the notion that organisations need to develop wellness programmes or responses in times of pandemics relates to the purpose of my study (Tomlin et al., 2020).

Social Work in Foster Care During COVID-19 Globally

A study by Ferguson et al. (2022) made use of the qualitative longitudinal approach, with participants from different fields related to social work in foster care. It focused on the way social workers adapted to their service delivery during the pandemic in England (Ferguson et al., 2022). The study explored how the social workers adapted to institutionalised separation and isolation to provide services that required closeness. Following the COVID-19 outbreak, Ferguson et al. (2022) pointed out that social workers and child protection supervisors had to make morally challenging and practically challenging decisions about the support provided to families and children while preserving social distance. The study demonstrates how social workers creatively re-made key aspects of their practice by recognising inequalities and offering material assistance, through digital casework, movement and walking encounters, and by going into homes and taking risks by getting close to children and parents (Ferguson et al., 2022). After the pandemic, it is crucial to learn from and continue this kind of improvisation and remaking because it can revitalise social work practice and help service users live better lives (Ferguson et al., 2022). The findings in the study were able to provide creative ways to address service delivery during the pandemic and even for future pandemics (Ferguson et al., 2022). It exposed the inequalities that exist and the limited resources that social workers had at their disposal.

Foster care during COVID-19 the globally and South Africa

Haffejee and Levine (2020) conducted a qualitative study during the pandemic in South Africa making use the participatory approach to explore the experiences of children in residential care

facility focusing on isolation and their protection. The initial findings focused on the emotional needs of the children within residential care, their concerns, and things they deemed essential to their well-being. The results from the study indicated that children were initially concerned about having contact with their families and their normal visitation from families (Haffejee & Levine, 2020). They stressed about the health of their family members, and the related mortality factor related (Haffejee & Levine, 2020). That was followed by concerns about losing educational opportunities and making it out alive. Throughout, the process the children felt protected by being provided psychosocial support from the social workers and each other being support systems (Haffejee & Levine, 2020). The study highlighted the need to consolidate and collaborate in service rendering, as there was shortfall in psychosocial services and ensuring that education and social development are linked in rendering services to the children in residential care (Haffejee & Levine, 2020). Social workers within the residential facility addressed the psychosocial support of the children and later addressing awareness programmes to educate the children regarding the pandemic.

Verheyden et al. (2022) explored the psychosocial well-being of children in foster care within the European countries and the interventions that were provided. The advantage within the lockdown is that most foster children and their foster parents developed positive relationships with their foster children, the disadvantage was some the relationships deteriorated (Verheyden et al., 2022). There was a concern in relations to the number of foster children who could not have contact with their biological parents which later was addressed by the use of technological devices (Verheyden et al., 2022). The provision of psychosocial support was solely on the hands of the foster care parents (Verheyden et al., 2022).

Whitt-Woosley et al. (2021) explored how professionals and caregivers within foster care institutions in the United States of America were affected by the COVID-19 pandemic. The study made use of a mixed method study, the sample was foster parents and foster care professionals. It should be noted that social work visits were stopped and there being disruptions in relations to monitoring (Whitt-Woosley et al., 2021). Furthermore, it should be noted that those who could not access technology could not be serviced (Whitt-Woosley et al., 2021). There was state involvement in relations to funding the foster children, but less monitoring and investigation due to the fear of the virus (Whitt-Woosley et al., 2021). The routine of placement and after-care for the placement was changed which led to foster parents having to develop their own psychosocial support for the children placed within their care (Whitt-Woosley et al., 2021). The study showcased that there was no new development in

rendering psychosocial support to the learners as the social workers were not well equipped, that safety was primary and service delivery was secondary (Whitt-Woosley et al., 2021).

Provision of Psychosocial Support and Identifying the Need for Psychosocial Support in Schools

A study conducted in Free State focused on the experiences of the teachers during the eve of schools being reopened. It intended to highlight the need for psychosocial support for learners and the teachers. There were 10 participants, consisting of two teachers from five school who had two years teaching experience in the rural setting (Omodan, 2020). The study was qualitative in nature making use of semi-structured interviews. The findings of the study detailed the need for psychosocial support and sociological support for both learner and teacher within the rural communities. It further debated that support would have improved the performance of the learners and better prepared the teachers for the environment (Omodan, 2020). The study was able to highlight the need for psychosocial support but does not acknowledge the possibility of seeking assistance from professionals equipped with the needed skills to address the demand. The focus is on the educational development in correlation to the socio-economic background.

A study took place within the Western Cape that focused on the impact of the lockdown and school closures, it was a quantitative study, which studies data supplied by different organisations within the national and international spheres (Van der Berg et al., 2020). The social-economic background was key in determining individual more prone to experiencing mild or sever symptoms of stress. Furthermore, during the lockdown and reopening process of the South African country it created a need for psychosocial support, as some children were exhibiting symptoms commonly associated with Post-Traumatic Stress Disorder (PTSD). Some of the children's needs were only being met at school which meant that many children's needs went unmet during the periods of the lockdown, parents had to learn how to manage their children's academics and lack of resources and preparation led to some children not achieving their academic goals (Van der Berg et al., 2020). The study focused on the child holistically, acknowledging the roles and systems within the child's life. However, it did not explore the notion of psychosocial support to ensure that the child develops adequality. There is a need to explore the provision in depth and explore the experiences of the people that provided psychosocial support.

The literature dwells on the need of psychosocial support within the different settings. There was an intent to provide psychosocial support within the university setting, however there was never discussion on social workers providing the psychosocial support services and whether there was a need in providing psychosocial support to them. There is a need to explore the experiences of the professionals that were providing services to the most disadvantaged and understanding the challenges that were faced during the period of the pandemic. There is continues echo for the need to explore the experiences of social workers within the foster care system in relations to rendering psychosocial services to learners who are in foster care. One of the researchers focused on the need to understanding how they adapted from physical interaction towards online interaction to provide their services. Thus, the need to do the research that would not exclude their lived experiences and the possible implications it had on their service delivery.

The theoretical framework underpinning the study

The Ecological Systems Theory by Bronfenbrenner (1977) has been the chosen theoretical framework for the study. According to Bronfenbrenner (1977) the ecological systems theory states that "an individual's development is influenced by a series of interconnected environmental systems, ranging from the immediate surroundings (e.g., family) to broad societal structures (e.g., culture)". In addition, the ecological systems theory suggests that varied environments across the lifespan impact on behaviour. It focuses on real-life interactions within physical communities, emphasising reciprocal complementarity, resource exchange, and adaptive fit between individuals and their contexts (Darling, 2007). Thus, it is relevant as the study will be exploring the experiences of the social worker in rendering psychosocial support services to learners within Merafong who are in foster care. We will be exploring the social worker within the different systems and how the social worker and the systems influenced each other.

The social worker is the individual who is surrounded and part of the different spheres which are discussed in detailed namely, microsystem, mesosystem, exosystem, macrosystem and chronosystem. The immediate socialisation agents surrounding the individual form part of the microsystem. The theory states that we are not mere recipients of the experiences we have when socialising with these people in the micro system environment, but we are contributing to the construction of such an environment (Bronfenbrenner, 1977). The family, foster family, foster child, school, social clubs, court, mental health services, health services and colleagues, are the microsystems that a social worker may find themselves interacting with. As an example,

it can be argued that this system looks at how the social worker interacts with the foster family and child, and how their past experiences and biases affects these interactions.

The second system is the mesosystem which is the interaction and/or relationship between the microsystems in the social workers life (Bronfenbrenner, 1977). The nature of the interaction might promote or hinder functioning within the microsystem, as well as result in a healthy or unhealthy relationship between the microsystems (Piel et al., 2017). An example of an unhealthy interaction would be a neglected child in foster care who has a low chance of having a positive attitude at school. Meanwhile a healthy interaction would be between the foster child and the foster parent, where the foster parent would like to extend the foster care placement as they are developing a healthy relationship. Those interactions impact the social worker involved within the system in such a way where that they need to be assured and confident that the best interest of the child is significantly considered in both scenarios. Moreover, it can be argued that the ecological systems theory offers a structure for understanding, assisting, or forming partnerships with the family while also realising the existing intricacies and the relational work required.

The third system is the exosystem which consists of formal and informal social structures which do not involve the individual but influence the individual and the impact of the influence always trickle down to the individual in a healthy or unhealthy manner (Piel et al., 2017). In this instance, the lockdown regulations can be argued to form part of the exosystem which restricted the social worker from having regular sessions with the learner in foster care, and the protocols for court during COVID-19 in relations to foster care placements was extremely disturbed. Moreover, the limitations that came with the pandemic and subsequent lockdown meant that social workers may not have direct contact with their clients, as well as the restrictions with regard to movement and travel. As a result, it can be noted that such restrictions had a negative impact on home visits or other minor things like observing non-verbal behaviour of clients. Another argument directed to the social worker as an individual would be that the uncertainty about the future may have also had an indirect impact on their work and how they approach their work, which further impacts the child and their foster care placement. Thus, the relationship of the social worker with the microsystems were affected to some extent.

The fourth is the macrosystem which focuses on the cultural systems which influences the microsystems and the individual and differ according to; the socioeconomic status, ethnicity

within society, geographic location, and ideologies of the culture within the specific society that the individual is residing in (Darling, 2007). Within the social workers systems, it would be the political influences that affected social work services, the tug or war amongst politicians to assert political power within Merafong, understanding that the Merafong community is politically aligned. In the same light, it has been argued that democracies in nations such as those in the Southern African regions have limited resources directed towards complex crises like the COVID-19 pandemic (Kotzé, 2022). Therefore, this can be said to have had an impact on social workers and how they rendered services with children in foster care and their families.

The fifth is the chronosystems which relates to events and changes taking place during the lifespan of an individual, whether they are good or bad they tend to influence the individual within the systems (Darling, 2007). It would be the COVID-19 pandemic, the regulations which were used to govern the country and social events which took place within the social workers lives, such as death of a loved one, early retirement or the constant closure and opening of offices had an impact on the social worker as an individual in the society. Hence, the study explored the psychosocial support that social workers received during COVID-19.

Therefore, this theoretical framework was applicable for this study in that it helped understand the various intricacies that came with the pandemic. Given that the study sought to explore the experiences of social workers in rendering psychosocial support to learners in foster care, it was important that the different systems in which the social workers find themselves in and interact with are understood from the root. The ecological systems theory helped in understanding the social worker and how their role is affected by the different systems in their lives, not only as professionals, but as individuals experiencing the pandemic and needing psychosocial support as well.

Conclusion

The reviewed literature showed the different layers around the issue of social workers needing psychosocial services while also being on the other side of the coin, by providing the same services to other people. It can be noted that within the western countries they had an advantage due to their technological advancements. In most circumstances there was some form of psychosocial support provided to learners, and social workers within the developed countries. Meanwhile it was a different setting within South Africa, as assistance relied heavily on having resources. South Africa could be compared to the rural parts of the western world in relations to resources and access to psychosocial support for learners and social workers. The research

continued to prove the urgent need for further research within a South African context. The ecological systems theory also helped ground the study and break it down theoretically. The next chapter details the research methods adopted in this study.

CHAPTER THREE

RESEARCH METHODS

The third chapter is a discussion of the research strategy and methodology that guided the study. The research paradigm approach and design appropriate for this study are explained in this chapter. Also covered are the population, sample and sampling procedures. The methods of data collection and analysis are explained. This chapter also covers the trustworthiness of the study and the ethical standards that were followed.

Research paradigm

A research paradigm refers to a researcher's 'worldview' or how they understand the reality of the world and ultimately study it (Kivunja & Kuyini, 2017; Rehman & Alharthi, 2016). It is also stated that a paradigm refers to the basic belief system and theoretical framework with assumptions about the study's ontology, epistemology, methodology and methods (Rehman & Alharthi, 2016). Kivunja and Kuyini (2017) add that this basic belief system is comprehensive of the researcher's thinking, perspective or school of thought that influences how they make meaning of and interpret research data. There are different known paradigms, and these include positivism, interpretivism or constructivism, as well as critical research.

The constructivist paradigm was considered suitable for the present study's objectives. Advocates of this paradigm are of the belief that there is more than one reality or truth (Adom et al., 2016). Alharahsheh and Pius (2020) have pointed out that this paradigm is concerned about and focused on intricate variables and elements related to context. Alharahsheh and Pius (2020) further added that, as compared to positivism, human beings cannot be researched in the same way as physical phenomena, because they are able to create deeper meanings.

Given that the aim of the present study was to explore social workers' experiences of providing psychosocial support to learners in foster care, the interpretivist paradigm was appropriate. In order to fully explore and be able to understand the experiences of social workers, being aware that each social worker may have their own reality or truth about providing psychosocial support to learners was important. Interpretivism is more interested in the subjective meaning of individuals about social phenomena (Shah & Al-Bargi, 2013) and in this case, the subjective experiences of social workers.

Research approach and design

According to Creswell (2014), a research approach is a set of procedures and guidelines that researchers use to conduct studies, ranging from specific to broad hypotheses with regards to data collection techniques, the analysis as well as the interpretation of data. There are three primary approaches in research, and these are mixed approaches, qualitative approaches, and quantitative approaches (Mohajan, 2018). According to Creswell and Poth (2016), a number of factors influence the choice of research approach. These factors include the kind of study conducted, the knowledge gathered - whether objective or subjective – as well as the tools and strategies employed to gather this information, such as questionnaires or observations.

For the purpose of this study, a qualitative research approach was followed. According to Teherani et al. (2015), qualitative research is a methodical inquiry of social phenomena in their natural environments and focuses on the experiences of those involved in the events and the subjective outcomes of those events. It is also noted by Alharahsheh and Pius (2020) that the objective of qualitative research is to gain a comprehensive understanding of a particular case through in-depth exploratory research that makes it possible to discover quality responses all throughout the study.

The study intended to find the meaning and explores the experiences of social workers who rendered psychosocial services to learners in foster care in Merafong during the COVID-19 pandemic. It sought to explore their lived experiences during the pandemic and how they navigated providing services within the pandemic setting. It focused on the quality and richness of the data, and the meaning attached to the interpretations provided by the participants. The approach allowed for the researcher to evolve with the topic being researched (Carey, 2013). And be directed by the data and participant. Currently the social workers' experiences of providing psychosocial support to learners in foster care during the COVID-19 pandemic in Merafong City, Gauteng was unknown, therefore, it was appropriate for the study to be explorative.

The study made use of an instrumental case study design, while the purpose of the study was exploratory in nature. A case study is defined as an in-depth study of a unit on its own, and this can be one individual, a group, an organisation, or a programme (Kekeya, 2021). Making use of a case study assisted in understanding a phenomenon like COVID-19 and the implications it had on social workers who were rendering psychosocial support to learner in foster care. The case study design ensured that the experiences of social workers in rendering psychosocial

support to learners in Merafong City, were well documented and captured. A case study design was beneficial for this study as the ways in which individuals carried out their tasks in a specific context were unique, and a case study design was able to reveal intricate human interactions, experiences, as well as daily life practices (Kekeya, 2021).

Population and sample

A study population refers to the individuals living or working within a community - geographical or functional - from which a researcher selects a sample (Kumar, 2014). The focal point of the present study was exploring the experiences of social workers in rendering psychosocial support to learners in foster care in Merafong City. Thus, the population were the social workers employed by the Department of Social Development within the foster care unit in Merafong City, who rendered psychosocial services to foster care learners during the pandemic. The population of social workers in the Department of Social Development within the Merafong area who work within the foster care unit is between fifty and one hundred. This group of social workers as a population were selected because they are believed to have experience in the field and would provide in-depth information regarding the issue.

However, given that it may not always be practical to study the entire population, a sample needs to be chosen. Therefore, a sample in the context of research is a subset of people, things, or data that is chosen in order to provide knowledge (Etikan et al., 2016). It is further stated that a 'sample' is a subgroup of the population that is cautiously elected so that it is representative of the actual population (Acharya et al., 2013). For the present study, a total of 10 social workers were interviewed as a sample and the process is detailed in the sampling method below.

Sampling method

According to Pace (2021), sampling techniques are commonly divided into probability and non-probability sampling techniques. Non-probability sampling was considered appropriate for this present study as it is qualitative. The goal of this study was to explore the experiences of social workers in rendering psychosocial support to learners in foster care during the COVID-19 pandemic. Therefore, it was crucial to ensure that the chosen sampling technique would produce rich data. Non-probability sampling, as stated by Taherdoost (2016), is employed when there is a good reason to include some participants over others and when generalisation of findings is not the main aim of a study.

Purposive sampling, a deliberate technique for selecting study participants who are knowledgeable about the chosen issue, is typically used in qualitative research (Padgett, 2017). According to Bodnar et al. (2013), the sample is drawn from the population according to a set of criteria or rules that establish the inclusion and exclusion criteria. Therefore, a purposive sampling technique was employed in this study.

Purposive sampling is a non-random method whereby underlying theories or specific numbers of participants are not a pre-requisite (Etikan et al., 2016). Simply put, based on the study and its objectives, the researcher determines what information is required and then searches for individuals willing and able to supply it based on their expertise or experience (Etikan et al., 2016). For the present study, choosing the sample purposively was important in that the study sought to explore the experiences of social workers in rendering psychosocial support to learners in foster care in Merafong City. Considering the main aim of the study, it was important to ensure that individuals participating in the study are social workers who rendered psychosocial services to learners in foster care during the pandemic. For the purposes of this study, a total of 10 participants were chosen for data collection. The reasoning for ten was to ensure that there were sufficient participant and diverse responses that contributed to the data and knowledge collected. The sample included social workers in the Department of Social Development within the Merafong area who work within the foster care unit.

Recruitment

Recruitment within research entailed identifying potential participants, according to the inclusion and exclusion criteria of the research project to select participants who would be suitable for the research project. The participants are potential until they have agreed to participate within the research and understand the processes and procedure, they will be participating in (Kumar, 2017). A permission letter was requested and sent to the foster care unit in Merafong City which services Carletonville, Fochville, and Wedela detailing the intent and desire to conduct research with the employees of the department. The permission was approved which was Appendix A and an invitation to individuals which was Appendix C was sent to social workers within the Merafong City who work in the foster care unit. Those interested had to communicate interest with the researcher. Management within the Department of Social Development offices was engaged on the desire to conduct research on their premises. As they were the gatekeepers, they need to be informed about the presence of an official who would be conducted research, and they were provided with the permission letter.

Marketing of the Study

The study was published on the Gauteng Westrand Social Development Intranet, and participants were sourced from Merafong City through the different foster care unit forums which the majority are part of. Participation information sheets were handed out within the forums and social workers within the different forums interacted with the researcher regarding their desire to be part of the research. To prevent management being involved, the Intranet was used as it was accessible to everyone. The Intranet is the way officials communicate with each other and learn about activities taking place within Gauteng, it is a social platform for officials to engage and interact with each other. Individuals were free to contact the research student on their own accord. Forums had been established to ensure that social workers have a place to voice their opinions and the research student made use of them to pass the information around regarding the study.

The sample inclusion and exclusion criteria

In order to be considered for this study, participants needed to possess the following characteristics:

Inclusion criteria for potential participants were:

- Registration as a social worker with the South African Council of Social Service Professionals (SACSSP).
- Working for Department of Social Development within the foster care unit within Merafong City.
- Rendering psychosocial services to learners in foster care during the COVID-19 pandemic.
- Social workers who had a caseload and foster placements and foster care children prior to the lockdown.
- Have rendered foster care supervision services prior to and during the COVID-19 pandemic.

Exclusion criteria for potential participants were:

- Social workers who do not work for the foster care unit within Department of Social Development.

- Social workers who do not render services in Merafong City.
- Social workers who were not working during the COVID-19 pandemic.

Data collection method

In order to enhance the understanding of a particular subject matter being studied as well as the theoretical framework upon which the study was based, data collection is essential (Etikan et al., 2016). The research instrument, pre-testing of the research instrument, and the method of data collection are discussed in detail below.

Data collection instrument

In order to explore the experiences of social workers in rendering psychosocial support to learners in foster care in Merafong City, the research instrument that was used was an semi-structured interview guide developed by the researcher. The interview guide consisted of open-ended questions as pre-determined while also leaving room for probing questions to delve deeper into the research topic. Open-ended questions are used either exclusively or in conjunction with other interviewing strategies to delve deeper into subjects, understand processes, and identify probable reasons for observed correlations (Weller et al., 2018). The interview guide consisted of five questions seeking the demographic information of participants for statistical purposes only. The second part of the interview guide consisted of 16 questions that were open-ended and based on the study's objectives and all these questions were standard for all participants. A template of the interview guide used for this study is attached as Appendix E.

Pilot of the research instrument

Pilot takes place prior to the official data collection process, and it is the rehearsal of the planned interview within a similar setting as the official data collection process (McIntosh & Morse, 2015). It enables the interviewer to test whether the questions would be effective and align with their intended aim (McIntosh & Morse, 2015). It further enables changes to take place should the interviewer be unable to utilise the guide for its intended purposes (McIntosh & Morse, 2015).

For the purposes of this study, the pilot was done with two foster care unit social workers, who did not form part of the main study but met the set inclusion criteria. The reasoning behind the pre-testing was to ensure that the interview guide worked as intended. It was done to ensure that the questions were aligned with the aim of the study and intended to address the objectives

of the study. There were no changes made on to the interview guide. Participants were asked to say or suggest if there were changes needed, and they all expressed that the questions were easy to understand and respond to. The data collected during pre-testing has not been used for data analysis and is not included in the final findings of the study.

Method of data collection

A semi-structured interview was the data collection method that was used for the purposes of this study. According to Brinkmann (2014), research interviews may be unstructured, semi-structured or structured. Semi-structured interviews give the participant the opportunity to describe and share their points of view without being rigid (Brinkmann, 2014). It provides the participants with the opportunity to discuss the issues in detail without being limited to standardised questions and answers. Although the interviewer has a great deal of freedom in following up on the comments of the participants in a semi-structured interview, the interviewee is often given opening questions for each topic and given the platform to share freely without interruptions (Mueller & Segal, 2014). This allowed participants to share without limitations, while also being asked to elaborate further in accordance to the objectives of the study.

The data was collected through face-to-face semi-structured interviews. Face-to-face interviews are usually used to collect data that would be too sensitive to be gathered through traditional survey methods (Loosveldt, 2012). The main advantage of face-to-face interviews is that they foster trust between the interviewer and the participant (Loosveldt, 2012). The semi-structured face-to face interviews were conducted at the Merafong Department of Social Development offices. A recording device and a note pad was utilised throughout to gather the information. The duration of the semi-structured interviews ranged between forty-five to sixty minutes. The interviews were arranged and conducted at times when it was convenient for participants and when they were available.

Method of data analysis

When qualitative data is analysed, researchers work with meanings rather than just numbers (Graue, 2015). According to Graue (2015), data analysis in qualitative research is defined as the process of characterising, categorising, and connecting phenomena to the researcher's notions. As qualitative study, thematic analysis was used in the present study. Thematic analysis is an approach for finding, examining, and deciphering meaning in qualitative data (Clarke & Braun, 2017).. Braun and Clarke (2006), add that thematic analysis is a technique

that allows researchers to find, examine, and present patterns in data. For the present study, thematic analysis was used to characterise patterns that emerged and were developed from the interviews with the social workers.

Below is a detailed discussion of the thematic analysis steps that were adhered to, as described by Braun and Clarke (2006).

Phase 1: Familiarisation with the data

In this engaging stage, the researcher used the data gathered to gain a deeper understanding of the study's context. Fundamentally, coding needs to be established and refined during the course of the whole study (Braun & Clarke, 2006). Thematic analysis, by focusing on meaning across a data collection, allows the researcher to see and make sense of communal or shared meanings and experiences. According to Byrne (2022), to become completely comfortable with the data, familiarisation requires reading and re-reading the complete dataset. In this light, when the researcher manually transcribes it can be beneficial as it may considerably aid in a thorough understanding of the data (Byrne, 2022).

In this phase, by manually transcribing the audio recordings of the interviews, the researcher was able to be immersed in the data and become intimately familiar with the entire dataset. This allowed the researcher to be able to locate pertinent data that could relate to the study topic or questions. Transcribing and having everything in written form took place during this first phase.

Phase 2: Generating initial codes

After reading the data and being familiarised with data, Phase 2 begins through a process of making a preliminary list of ideas regarding what is contained in the data and what makes it interesting (Braun & Clarke, 2006). What is involved in this next step is the creation of preliminary codes using the data (Braun & Clarke, 2006). Codes are the essential components of what will eventually become themes (Byrne, 2022). The objective of the coding process is to provide labels that are brief and concise - descriptive or interpretive - for data points that may be relevant to one or more research questions (Byrne, 2022). In this second phase, initial ideas which also include the researcher's notes were listed. On each verbatim sentence, a comment was made on the side to "code 1, code 2, or code 3, etc".

Phase 3: Searching for themes

After all relevant data items have been coded, the third phase starts. The emphasis changes from interpreting each individual data item in the collection to interpreting the aggregated meaning and meaningfulness of the dataset (Byrne, 2022). What constitutes this phase is sorting the various codes into possible themes and putting together all the relevant coded data extracts within the themes that have been found (Braun & Clarke, 2006). The third phase for the present study involved grouping verbatim quotes with the same codes into categories. A table was used to group codes based on similarities and patterns and different colour highlights were also used to find patterns within codes.

Phase 4: Reviewing potential themes

The fourth phase involves the refinement of themes (Braun & Clarke, 2006). For the present study codes were read in relation to the study and what was said in the actual transcripts. Looking into the broader study and identified themes, some codes were refined and moved to different categories in the table. In this light, Byrne (2022) adds that it is not unusual to discover at this stage that certain identified themes may not be able to adequately interpret the data or may not offer information that answers the questions set out in the study. Therefore, it was important to go through the codes and relate them to the research questions.

Phase 5: Defining and naming themes

The fifth phase starts when there is a satisfactory thematic map of the data (Braun & Clarke, 2006). Themes were then given names according to what they meant for the study and how they answered the research question. The researcher then named each theme and documented it. There was a total of 9 themes, and these were: lack of resources; fear of the virus; using alternative ways to provide services; becoming more empathetic; social workers not prepared; training; did not receive any psychosocial support; partial support as well as needed counselling.

Phase 6: Producing the report

The sixth phase begins with a list of carefully considered themes that includes the last final review of the report. Whether the writing up is for a theme analysis for a thesis, research project, or publication, the objective is to persuade the reader of the study's significance and applicability by conveying the complex narrative of the data (Braun & Clarke, 2006). It is important that the narrative of the study - both within and between themes - be concise, detailed, logical, not repetitive, and insightful. Braun and Clarke (2006) mention that this includes the

writing up of the study and the data extracts. During this phase, a research report was produced by answering the research questions set prior through the use of the identified themes in the analysis.

Trustworthiness

Trustworthiness is defined as a matter of persuasion resulting from the researcher's perceived transparency and consequent auditability (Gunawan, 2015). A study is only considered trustworthy if and when the reader of the research report finds it to be so (Gunawan, 2015). Credibility, transferability, dependability, and confirmability are the four general characteristics that Lincoln and Guba (1985), referenced in Stahl and King (2020), listed in their approach to trustworthiness. The four factors are discussed below in relation to the present study:

Credibility

According to Stahl and King (2020), credibility is determined by how well the results match reality. This criterion of trustworthiness pertains to the veracity of the facts or the perspectives of the participants, as well as the researcher's interpretation and representation of them (Polit & Beck, 2012 cited in Cope, 2014). It is stated that enhancing a study's credibility involves the researcher describing their personal experiences as a researcher and verifying the findings with the participants (Cope, 2014). In order to do so in the present study, some of the social workers who took part in the study were contacted and asked to check the transcripts and verify if their words were not misinterpreted or taken out of context. Doing this ensured that there was congruency between the findings of the study and what participants actually said during interviews. Furthermore, according to Sandelowski (1986) as cited in Cope (2014), a qualitative study is deemed credible if the accounts of human experience are instantly recognisable by people who had similar experiences. To enhance this, participant responses are written in verbatim in the data analysis section.

Dependability

The consistency of the data under comparable circumstances is referred to as dependability (Cope, 2014). Anney (2014) states that dependability entails participants evaluating the findings of the study, offering their interpretations, and making recommendations to make sure that the data collected from them is used to support each one of the conclusions. It is said that an audit trail and a code-recode strategy are some of the ways in which a study's dependability can be established. An audit trail strategy involves examining the research process to

authenticate the data where the researcher is accountable for every decision and activity related to the research (Anney, 2014). In order to do so, the methodology chapter of this paper details all decisions made related to the study and the rationale for those decisions, how data was collected, the storage of raw data, and the data analysis method used.

A code-recode strategy, as stated by Anney (2014) is a process whereby the same data is coded twice by the researcher by allowing a development period of about two weeks minimum between each coding. During the transcribing phase, transcripts were coded briefly and put aside until after all 10 recordings were transcribed, so that they can be re-coded again. This was done to ensure that the codes and themes remained consistent and that there would be no bias as there was a waiting period of weeks before the same data could be re-coded.

Transferability

The interpretive equivalent of generalisability is transferability, which evaluates how well findings from qualitative research may be transferred to diverse contexts with different respondents (Anney, 2014). Shenton (2004) further states that transferability is the degree to which the findings of one study can be applied to a different context. Considering that the primary concern of a qualitative study is not to generalise findings, the use of purposive sampling helps in that for the present study, there was a specific description of the study sample, so that the reader may be aware of the boundaries of this study before transferring to a different context. In addition, the third chapter of the report (methodology) has a thick description of the research process to ensure that there is accountability. The limitations of the study have also been detailed in the report to ensure that the reader is aware before findings can be transferred.

Confirmability

The degree to which the findings of a study could be verified or supported by additional researchers is known as confirmability (Baxter & Eyles, 1997 cited in Anney, 2014). Confirmability is “concerned with establishing that data and interpretations of the findings are not figments of the inquirer’s imagination but are clearly derived from the data” (Tobin & Begley, 2004, p. 392 cited in Anney, 2014, p.15). It is mentioned that an audit trail also enhances a study’s confirmability, and this is stated in the dependability section. An audit trail and transparency also helped in ensuring that the analysed data is based on the actual data from interviews conducted, as well as to limit the researcher’s potential bias. The audio recordings of the interviews have been stored safely and the link to each interview is included in each

transcript so that the supervisor may be able to access and verify the participant responses with the verbatim inserts in the report.

Ethical considerations

Research ethics is relevant to the judgement of the appropriateness, morality, and suitability of the methods used throughout the whole research process (Miles & Huberman, 1994 and Tracy, 2010 cited in Gaus, 2017). The goal of interpretivism research is to explore and comprehend the social world of the phenomenon being studied, and this necessitates the development of close relationships and engagement with participants (Gaus, 2017). Therefore, given this reason, ethics then become important in safeguarding participants from harm that could potentially result from their interactions with researchers (Gaus, 2017; Kang & Hwang, 2021). Ethical principles adhered to in the present study include obtaining permission, maintaining relationships with research participants, voluntary participation, informed consent, confidentiality and privacy as well as beneficence, and these will be discussed in relation to the study below.

Obtaining permission

It is said that gaining entry or getting permission to conduct a study is fundamental and as gatekeepers who could prevent a researcher from entering their organisation may have a negative indirect impact on a study by making it difficult to reach potential respondents (Shenton, 2004). The first step in ensuring that the study adhered to the ethical standards within research was to request and obtain permission from the Gauteng Department of Social Development research unit. See Appendix A. An Ethics Clearance Certificate, protocol number SW23/08/01, was achieved from the Wits Human Research Ethics Committee (non-medical). See Appendix B.

Maintaining relationships with research participants

Maintaining or establishing mutual relationships is an ethical practice that is often considered as a prerequisite for building trust with research participants and assisting the researcher in obtaining responses from them that are real and contributes towards richer findings. To obtain richer and more comprehensive data, qualitative researchers should work to build relationships that are mutually advantageous to both parties (Kang & Hwang, 2021). This was achieved by building rapport with the participants, being clear from the onset about the intention and also the notion of termination once the data has been collected. Establishing clear and reasonable

boundaries from the beginning also assisted the researcher in developing and maintaining a professional relationship with the participants.

Voluntary participation

Voluntary participation means that research participants are informed prior to their participation in the study that they are not obligated to participate within the study (Lam et al. 2023). It is important for participants to be made aware that their participation in the study is a choice and that they are not coerced in any way, regardless of the perceived benefits of the study. Emphasising to participants that there are no negative consequences or ramifications for refusing to take part in the study or withdrawing from the study is important (Carlsson et al. 2017).

To ensure this, a participant information sheet (see Appendix C) was handed out during the marketing of the study, to potential participants. The information sheet detailed what the study was about, its objectives as well as what was expected from participants. Participants were also made aware that their participation was voluntary and there would not be any compensation for participation. Furthermore, participants were informed that they were free to decide whether they wanted to participate or not.

Informed consent

Giving the participants complete information about the study before it begins and explaining all it involves is essential to obtain their informed consent (Sin, 2005). For a decision to be deemed informed, participants must be made aware of the objectives of the study and the conditions of their consent (Ciuk & Latusek, 2018). To ensure that participants gave an informed consent, this principle related to voluntary participation whereby participants were given an information sheet that detailed everything about the study its aim and objectives, as well as the level of risk associated with the study. Doing this ensured that participants knew before they gave their consent.

Moreover, to show their consent, participants were required to sign the a consent form Appendix D before their interview. A clear statement informing the participants of their ability to see the details of the research and their right to withdraw from the study whenever they choose, should be included in the consent form and participant information sheet (Pietilä et al., 2020). Both documents (consent form and information sheet) were written in basic English and any jargon within the documents was clearly explained to potential participants during the

process. In addition, participants were provided with sufficient time to read and ask questions in relation to the study, documents and the entire research process.

Confidentiality and privacy

Maintaining confidentiality is not disclosing to anybody information that has been provided in private (Kaiser, 2012). However, it is important to know and understand that there are boundaries to confidentiality in all its manifestations. On the other hand, maintaining research confidentiality means that participants would not be identified from the research report or connecting them to the data or information they submitted (Sarantakos, 2013). This ethical principle is broken when participants' identities are not kept private during the research period and afterwards. The purpose of the ethical principle of confidentiality is to protect the participants from harm (such as unjust treatment in the community or workplace) if they choose to provide information. Kang and Hwang (2021) further state that when confidentiality is ensured participants are more inclined to provide in-depth rich data.

Within the participant information sheet (see Appendix C) participants were informed that they would be provided with pseudonyms or numbers during the data gathering phase of the research, and that their names would not be used within the research report. The only period in which the identifying information will be on the consent form to ensure that participants are real and consented to participate in the study. The consent forms would not be linked with the interview guides, nor the data gathered.

Anonymity

Anonymity entails keeping the participants anonymous during the reporting of the data and the period of gathering the data. It entails making it impossible for a reader to identify the participant that provided the data that is documented. Furthermore, it is about ensuring that consent forms which have identifying information of participants and the data gathering tools which makes use of pseudonyms or numbers cannot be linked with each other, keeping them apart to safeguard the identity of the participants involved (Sarantakos, 2013). However, Pietila et al. (2020) state it is impossible to guarantee anonymity fully, as there are incidents whereby a participant would ask to be withdrawn and the researcher would need to know which data to withdraw.

The consent forms will be kept safe within a lockable case, and they will not be in the same place as the interview guides during the process of data gathering and analysis. This is meant to ensure that the participants and their information or data they provide are not linked with

each other. Each participant will be provided with a pseudonym and a number so that should they want to withdraw their contribution to the study it is easy to do so. During the data gathering process the researcher will be using pseudonym and numbers to track the data collected. Within the research report only the numbers will be used when needed to report about the findings.

Beneficence

Determining and assessing the advantages and disadvantages of research involving humans constitutes applying beneficence in human research. For the reason that these factors go beyond the individual, researchers should investigate how their work affects people both personally and more broadly (Pieper & Thomson, 2016). In qualitative research, it is important for researchers to safeguard participants from harm, uphold their autonomy, and guarantee their well-being. Pieper and Thomson (2016) state that acts, or acts of compassion that go above and beyond the call of duty, are classified as ethical behaviour. By limiting harm and optimising any potential benefits, researchers can uphold this ethical principle of beneficence (Kang & Hwang, 2021).

In the present study, considering that different emotions could be evoked by the interview questions posed, participants were made aware of the services provided by the Gauteng Department of Social Development departmental wellness unit. Mr Hanekom was available as the head wellness practitioner to provide debriefing counselling to individuals who could suffer any difficulties which could have come up within the research interview. Their details were provided in the information sheet for the participants to keep. It is important to follow the ethical principle of doing no harm when doing research so that participants are aware of the researcher's intentions (Ciuk & Latusek, 2018).

Summary

This chapter included a detailed discussion of the methodology used in this study. There was discussion of the research paradigm, approach, and design. In-depth details about the population, sample, sampling strategy, and analysis of the data were also covered in this third chapter of the report. The chapter ended with a discussion of the study's trustworthiness and how each criterion was met while still adhering to the ethical guidelines that served as the study's foundation. A detailed analysis of the study's findings is presented in the following chapter.

CHAPTER FOUR

PRESENTATION OF DATA AND FINDINGS

The fourth chapter of this report presents the data and research findings of the study. It will explore the data from the participants and the different themes that aroused from the data gathered. Data was collected using a purposefully selected sample. The findings that developed during data collection with 10 social workers from the Gauteng Department of Social Development within the Merafong City area who work within the foster care unit are discussed thoroughly according to the identified themes. Direct quotes from social workers are used to illustrate the identified themes. Data was analysed using thematic data analysis and these themes have been used to answer the study's overall research question, which is: "What were the experiences of social workers rendering psychosocial services to learners in foster care in Merafong City during the COVID-19 pandemic?". The study was guided by the ecological systems theory by Bronfenbrenner (1977).

Demographic Information

In Table 4.1 the demographic profile of the participants is presented.

Table 4.1 Demographic Profile of Participants (N=10)

Pseudo	Age (in years)	Profession	Years of experience	Marital status	Gender	Race
Participant 1	29	Social worker	5	Living together	M	Black
Participant 2	57	Social Worker	10	Married	F	Black
Participant 3	32	Social worker	5	Married	F	Black
Participant 4	31	Social worker	8	Married	F	Black
Participant 5	35	Social worker	11	Single	F	Black
Participant 6	35	Social worker	12	Separated	F	Black
Participant 7	32	Social worker	11	Single	F	Black
Participant 8	36	Social worker	8	Married	F	Black
Participant 9	29	Social worker	6	Married	F	Black
Participant 10	25	Social worker	4	Married	M	Black

In Table 4.1 The average age of participants is 34, with only three participants aged below 30 and another aged 57 years. All participants were black, and this also represented the dominant race in Merafong City as they account for nearly 84 percent of the demographic population (Wazimap, 2016). Of the 10 participants, two participants were male and eight were female.

This also adds on the stereotype that social work is a female-dominated profession (Hicks, 2015). The years of experience in the profession varied. Of the ten participants, three had between 0 and 5 years of experience, three had between 6 and 8 years of experience, and four had between 10 and 12 years of experience. Although the number of years of experience were not part of the inclusion criteria, it was relevant to note that those with more experience were prone to working without being provided with resources better than those who had less years of experience. Given that the pandemic was new to everyone, rendering foster care services was well known to the social workers, however, the context in which the services had to be delivered was challenging. It can be argued that learning new skills and adapting to the new normal may have been more challenging for those who were older and had been in foster care service for longer, compared to those who were younger and fairly new and did not have systems that they had been basing their service on for a long time. It could be note “...we couldn't see people face to face. You had to make means of doing certain meetings telephonically you had to type reports, reports that you had...” – P8. Itzhaki-Braun (2021) expressed similar views in which the use of technology required upskills and age and interest of participants contributed to the success of using technology in relation to the provision of support.

Themes and subthemes developed from the collected data

The aim of the study was to explore the experiences of social workers who rendered psychosocial support to learners in foster care during the COVID-19 pandemic in Merafong City, Gauteng, South Africa. The following themes and sub-themes were developed from the collected data. In Table 4.2 the themes and subthemes are presented in relation to the objectives of the study.

Table 4.2 Summary of Themes and subthemes

Theme	Subtheme
1. Lack of Resources for social workers rendering psychosocial support to learners in foster care during Covid.	
2. Social workers fear of the virus while rendering psychosocial support to learners in foster care.	<p>2.1 Clients' fear contracting the virus from social workers.</p> <p>2.2 Social workers fear of contracting the virus at work and spreading the virus at home.</p>
3. Social Workers using alternative ways of providing psychosocial support to learners in foster care.	<p>3.1 Flexibility, creativity, adaptability</p> <p>3.2 Using technological tools to provide service</p>
4. Social Workers using more empathy in rendering psychosocial support to learners in foster care during the pandemic.	
5 Unpreparedness of Social workers to renders psychosocial support during COVID-19	<p>5.1 Could not have been prepared.</p> <p>5.2 Lack of resources</p> <p>5.3 Lack of training</p>
6 Lack of psychosocial support for social workers.	<p>6.1 Partial Support</p> <p>6.2 Needed counselling</p>

Discussion of the research themes and subthemes in relation to the objectives

This section contains the discussion of the themes and subthemes mentioned in Table 4.2 according to the objectives. To support or contradict the findings, direct quotations from the participants and relevant literature are also integrated in the discussion of the findings.

Theme 1: Lack of Resources for social workers rendering psychosocial support to learners in foster care during COVID-19.

The first theme was the lack of resources social workers came across in rendering psychosocial support to learners in foster care during the COVID-19 pandemic in Merafong City and it came up from four out of ten participants, as seen in the responses below:

“OK, like put it into the resources of the of the state because... everyone was on the streets trying to reach as many their communities as we can... So, when it comes to like, issue their cars like you, you find ways. Maybe most cars are in use...” – P1

“So, you will see that people need a lot of food parcels and we didn’t have enough food parcels to provide to the people and also shelter...” – P2

“...the resources you know. I lacked resources, I couldn’t fulfil, I couldn’t meet some of the deadlines we have...” – P9

“Resources themselves? Car GG vehicles were like limited. It was difficult. There was a point where we were told that you are not going to get a car because schools are closed. So, you why are you saying you? Requesting a car and we’re like, no, we can’t reach these people...” – P10

Based on the above responses, it can be said that the lack of state resources and responses had a negative impact on the service delivered to clients. GG vehicles are the state cars which government officials makes use of to access clients within their homesteads. This show how inequalities from between organisations and communities were exposed during the COVID-19 pandemic and this unfortunately affected those who needed the service the most. The findings of the study revealed that some of the challenges faced by social workers included a lack of resources, which came up from four out of ten participants. This was seen as a limitation in that social workers were not able to easily render their services to those who needed them the most. It is argued that the consequences of the COVID-19 pandemic have presented numerous challenges for the social services sector (Ben-Ezra & Hamama-Raz, 2021). In addition, ensuring that social workers have the necessary resources to address the severe psycho-social

needs of clients that surface during a pandemic is more important than ever (Ashcroft et al., 2022).

Theme 2: Social workers fear of the virus while rendering psychosocial support to learners in foster care.

A fear of contracting the virus came up from the interviews in different ways. One participant mentioned how touching or physical contact was affected: *"Yeah. So, during that time, touching was like hey. Difficult. You couldn't comfort them at times"*. There were two subthemes in relation to this theme they are discussed below with backing verbatim quotes of participant responses:

Subtheme 2.1: Clients' fear contracting the virus from social workers.

There were two participants from the study who mentioned that some clients feared that social workers would infect them, and this is seen in the quotes below:

"Maybe they catch the COVID and then they would blame you as the social worker... So, you were careful about how you in. Yeah, like how to approach and stuff and... You don't want to..." – P7

"Some families were still not very comfortable with home visits. Whilst there were some that were willing to have you come over and do supervision, some were pretty much sceptical. You're an outsider" – P8

Subtheme 2.2: Social workers fear of contracting the virus at work and spreading the virus at home.

On top of having a lack of resources to conduct home visits, there were participants who mentioned having a fear of infections between them as colleagues and this is observed in the responses below:

"I couldn't use it because it needed to be fumigated. The car needed to be fumigated, so that's a delay of services. towards my clients..." – P6

"My own health was a barrier. Because sometimes you would continue as per normal, then you get sick and now you must stop..." – P8

A fear of the virus was also expressed as a challenge that social workers experienced during the pandemic. Some participants mentioned that there were clients who feared that social workers would spread the virus during home visits. On the other hand, others expressed that

there was a fear among social workers spreading or contracting the virus between colleagues. Participant 6 even went as far as sharing that due to having a limited number of state cars for home visits, they needed to wait for over a week for the available car to be cleaned for fear of the virus spreading. This lack of recourse poses as a challenge and threat to the profession in that clients may be disadvantaged in crises situations, especially because community social workers anticipated that during the pandemic, their job descriptions would expand to include more roles than they are used to (Itzhaki-Braun, 2021). The fear of spreading or contracting the virus was valid and could be argued to highlight the internal fears individuals had. The rationale behind this is that the fear of death or seeing and hearing about death, could have an indirect impact on the emotional behaviour and reaction of individuals.

Being an essential worker and required to work when others were locked down, meant exposing oneself regardless of the fears within.

Theme 3: Social Workers using alternative ways of providing psychosocial support to learners in foster care.

The third theme related to the alternative ways of providing psychosocial support which social workers made use of to render services to learners in foster care. The pandemic had a subsequent lockdown, and this came with various restrictions for social workers. Given that COVID-19 not only had health complications, but also negatively affected the psychosocial wellbeing of individuals it was important for social workers to step in. However, stepping in also meant stepping up and being creative to ensure that at the end, the wellbeing of clients is prioritised. Two subthemes came up from this theme, and these are: *flexibility, creativity, adaptability* and *using technological tools to provide service*.

Subtheme 3.1: Flexibility, creativity, adaptability

As the subtheme states, social workers needed to be flexible, creative and be willing to adapt to the 'new normal'. Below are illustrative quotes from six out of ten participant responses showing how they adapted or had to be flexible and creative:

"I feel like with the challenges that I've already stated, they shaped me in a sense that. I was able to manage my work in advance like..." – P1

"...I learned new skills uhm..." – P4

"...Anything can happen at any time you. Know just maybe and try to teach yourself to be flexible. Don't. Settle in your comfort zone..." – P6

“...it made me to learn to think out of the box...” – P7

“...I am more resilient because working during that period with the limitations that where there. And still being able to get the work done... to tap into the resources within me, which I never...” – P8

“...they... help you adapt. You know you... realise what you need to work when you are working. You're not supposed to look at only one way of providing services...” – P10

Subtheme 3.2: Using technological tools to provide service

The use of technology was also introduced or relied upon by five out of ten social workers to ensure that they still provided services to their clients as seen in the below verbatim quotes:

“...we are given pool phones wabona (you understand) given resources to still provide services to our clients, maybe instead of doing de home visits then we can call them over the phone...” – P2

“...as a social worker I had to start learning new ways of rendering services so I had to instead of doing the home visits interacting with my clients then it meant I had to now start calling them and finding out if they are okay and then rendering psychosocial services over the telephone...” – P4

“...So, I think like calling and checking up on them...” – P5

“...we couldn't see people face to face. You had to make means of doing certain meetings telephonically you had to type reports, reports that you had...” – P8

“...But because we couldn't go there, I had to call. It was a challenge to get a hold of those people...” – P10

Given the above findings, it can thus be argued that the two subthemes related in that being creative and flexible adds to identifying tools (such as technology) to provide services to clients. Considering that social workers had to provide services to clients, especially during a time like the COVID-19 pandemic where some people experienced feelings of anxiety and loneliness, there had to be alternative means of providing services. This can be argued to not only ensure that records are kept, but that clients felt seen and supported even when times were difficult for them and their families. Social workers also had to develop or awaken skills like empathy, as seen in the next theme. There were various strategies that social workers needed to apply to ensure that they rendered the right psychosocial services to their clients during the

pandemic. Some of these strategies meant that social workers use alternative ways of providing services, while other participants mentioned that they became more empathetic during and after the pandemic. In this same light, it is stated that it became a struggle for social workers to continue to do their work, as they had to adapt and be innovative in order to meet new needs and adjust priorities of the most urgent and critical facets of their roles (Banks et al., 2020). These ranged from finding external tools such as the use of technology, to internal tools like the willingness to adapt and be flexible. These skills can be argued to be essential for the practice and for the individual as well, in that social workers also needed to deal with the pandemic and its psychosocial challenges. From the findings, participants mentioned that they had to be creative and flexible, and also include the use of technological tools to make the transition easier and smooth. It is further pointed out that the requirements that came with lockdown and social distancing meant that the practices of social work needed to change dramatically as a result of the rapid inclusion of virtual technology (Ashcroft et al., 2022). Moreover, it is added that social workers needed to think of new ways to provide services within the scope of lockdown restrictions and procedures put in place to prevent the virus spreading (Ross et al., 2021).

Theme 4: Social Workers using more empathy in rendering psychosocial support to learners in foster care during the pandemic.

Empathy is one of the skills that every social worker needs to possess, particularly because the practice deals with vulnerable groups of society. Merriam-Webster (n.d.) states that empathy is the process of perceiving, being conscious of, being sensitive to, and living through another person's emotions, thoughts, and experiences. This fourth theme came up from four out of ten responses and it was observed using words like “more involved”, “conscious”, “caring” and “patience”. Verbatim quotes from participant responses are illustrated below:

“...it made me to appreciate my work and it made me more involved... I become more involved when I am working with the foster children...” – P3

“...I was more conscious if I may put it like that. I was more conscious...” – P4

“...I will say maybe now I am more caring. I give more support like now I'm aware of...” – P5

“...I have learned to be more patient...” – P9

Social workers had to come up with different strategies that they needed to apply to ensure that they rendered psychosocial services to their clients during COVID-19. While finding new

strategies they also developed a new perspective and outlook towards their clients and life. They became more involved in the life of their clients as they saw them less as opposed to prior the pandemic. It can be argued that the instability and insecurity that came with the pandemic and its inevitable increasing death tolls may have contributed to the new outlook which increase empathy in social workers.

Theme 5: Unpreparedness of Social workers to renders psychosocial support during COVID-19

When participants were asked about their preparedness, some mentioned that they could not have been prepared for an unexpected occurrence while others were of the belief that training would have made a difference. This is shown in the two subthemes below:

Subtheme 5.1: Could not have prepared

Considering that the COVID-19 was unexpected, five out of ten social workers mentioned that not only were they not prepared, but they would not have known how to prepare. Their responses are shown by the following quotes:

“...no one was ready for this situation and no one, the whole world was not prepared for it...”
– P1

“...I think they are 50% ready. Even they were to say the next disaster was to strike, because COVID really opened our eyes. OK. So, we are prepared in a 50% prepared not only prepared but 50% prepared...” – P6

“...I know, I don't think anything could have prepared me...” – P8

“...I was not prepared... I don't think there was anything that could have prepare me you know because it was a shock to the world, not just me or my region where I work...” – P9

“...I don't think there would have been anything to prepare me. I don't think there would have been anything to prepare me...” – P10

Other social workers mentioned a lack of resources as the inability for the state to prepare for the pandemic, as seen in the subtheme below:

Subtheme 5.2: Lack of resources

There were two responses out of ten of social workers who mentioned that they were not prepared, but further elaborated that the inability to prepare was also related to resources to

make the service rendering easier for them and for clients as well. This is seen in the two responses below:

“...so, I think that is what we always need to have enough resources at work so that even if COVID comes or any other situations then we will be able to work from home...” – P2

“...To come back in the right place. I think maybe if we were given enough equipment prior, maybe given classes on how we should protect ourselves from our clients...” – P5

In addition to the lack of preparedness or lack of adequate resources, other participants mentioned that training was necessary, as shown in the next theme.

Sub-Theme: 5.3 Training

Training was shown to be a necessary tool for an easy adjustment into providing psychosocial services to foster children. There were four out of ten participants who mentioned training when asked about their preparedness. The next few quotes come from participant responses interviewed in the study:

“... And we also need workshops and also trainings that will prepare us for working during disaster...” – P2

“...if we were also taught certain skills on how do we then move on or how do we start working as there is COVID...” – P4

“...Prepared for us and no workshops were done to let us know...” – P7

“...maybe I should say maybe training there was not a formal training to prepare us for this kind of journey...” – P10

Findings on social workers' preparedness to render psychosocial services to learners in foster care during the COVID-19 pandemic showed that not only was there not enough resources, but social workers also felt that training would have made things easier in terms of adjusting to the pandemic and its challenges. To those who were of the belief that they were ill prepared, half of the participants claimed that they still would not have prepared before the pandemic. Participant 1 mentioned that *“...no one was ready for this situation and no one, the whole world was not prepared for it”*. It should be mentioned that lack of resources also had a negative impact on the level of preparedness of social workers. In addition, the provision of training in order to ensure that social workers are able to handle could have positive outcomes. This finding was in line with the findings is Khoshnami et al. (2022). It was noted that developing

trainings in relations to the pandemics and crisis that might arise to ensure that social workers are equipped with the essential skills needed to address a crisis should it arise (Khoshnami et al., 2022). This, therefore, could have positive results not on social workers but on their services rendered as well, with ultimately contributes to the overall wellbeing of clients. It is also important to note that foster care on its own has its dynamics and challenges, and the pandemic exposed that and the inability of the state to prioritise this group of children. It can be argued that the training mentioned by participants or added resources could have had a positive impact on the services rendered to foster children. Moreover, it can further be argued that regardless of the preparation that may or may have not taken place to help social workers with their job, ensuring that they too are well, would be beneficial.

Theme 6: Lack of psychosocial support for social workers.

There was half of the participants who mentioned that they did not receive any psychosocial support during the COVID-19 pandemic. This is despite psychosocial help being a need for everyone, including essential workers. Below are quotes from participants who shared that they did not receive any support in this regard:

"...Like there were no services that you looked into us and understand maybe like having psychologists also in place for us when we were going through that experience it was a tough experience for everyone..." – P1

"...No one provided me with psychosocial support (nervous laugh). Huh. Cause it was all about. Hello ...we have a removal, go work, so it was all about that..." – P3

"...I didn't have any support, there was nothing, there were no support services that were offered to us..." – P4

'...I don't think we're given enough psychosocial support in their case. Because I feel like it was a thing if we also don't know what to do from the management..." – P5

"...No I didn't receive any psychosocial support from anyone. I just had to swim through the high waves and as am saying even in the work place we really needed those debriefing sessions, you know mental wellness leave, if there is such a leave..." – P9

Sub-theme 6.1: Partial Support

Although some participants stated that they did not receive any support during the pandemic, there were others who mentioned that they did get some form of support and this is shown in the two direct quotes below:

"...We were given a landline to call in case you feel distress about the situation but I did not call the landline..." – P2

"...Myself, personally, myself, personally, I didn't get it. I was just provided with. PPE, I don't remember. Any suggestions of support that I received? But we received the. Messages of encouragement from our managers and supervisors to say stay strong..." – P6

Sub-theme 6.2 : Needed Professional Help

When further probing was done, four out of ten participants expressed that they needed professional help, as seen in the responses below:

"...Maybe the department could have given us more support. I don't know how. Maybe in dealing with my clients and stuff. Because the focus was on making sure you wear your mask..."
– P3

"...Yes, I think, for myself I needed counselling... Had enough resources it would have been better if we had counselling prior to us coming back to work" – P4

"...maybe if we had like online therapists, someone we can speak to free..." – P5

"...Lastly, encourage debriefing from time to time. Because you can have all of these things in order, but if people don't deep breathe, if people don't take care of themselves, they are emotional state, especially with work and other factors around their lives..." – P8

It can be argued that providing support to social worker is critical and particularly during stressful times like the COVID-19 and the lockdown measures that came as a result. Therefore, providing support to social workers should have been treated as a matter of urgency. There has been an observation that frontline healthcare workers encounter fast and unforeseen circumstances that call for an increased need for materials and human resources (Yadav & Sahu, 2022). However, the present study showed that social workers did not get adequate support during this period. There were five social workers who expressed that they did not receive any support, with two stating that they got partial support. This can be argued to show limitations within the state and ensuring that service providers are well supported for continued

to vulnerable groups within society. This could be argued to have a negative impact on the long-term wellbeing of social workers, who are argued to have a greater chance of experiencing various negative outcomes, such as burnout syndrome, to which they are usually already susceptible (Yadav & Sahu, 2022). This was seen in that participants mentioned that getting professional help would have been helpful to them as individuals and as professional.

Summary

In this chapter, the findings of the study were presented in detail with the use of direct quotes from what participants said during interviews. The following chapter will be focusing on the research findings, summarizing and trying to conclude the research.

CHAPTER FIVE

KEY FINDINGS, CONCLUSION AND RECOMMENDATION

This fifth chapter in the report provides as summary of the key findings in accordance with the objectives of the study, makes conclusions based on the findings and puts forward recommendations for future research and the social work profession. In this chapter the study used a qualitative research methodology and was situated within an interpretivist paradigm. The aim of the study was to explore the experiences of social workers who rendered psychosocial support to learners in foster care during the COVID-19 pandemic in Merafong City, Gauteng, South Africa. In order to address the problem statement using the stated aim, it was appropriate for the study design to be explorative. For the present study, a total 10 social workers were purposefully selected and interviewed. This non-probability sampling technique was chosen to ensure that the chosen sample would produce rich data and be able to answer the posed research questions. A semi-structured interview guide with open-ended questions, was used to provide the researcher with an opportunity to probe and gather rich data from participants. In order to analyse the findings, thematic data analysis was used.

Research question, aim and objectives

The overarching research question was: what were the experiences of social workers rendering psychosocial services to learners in foster care in Merafong City during the COVID-19 pandemic? The aim of the study was to explore the experiences of social workers who rendered psychosocial support to learners in foster care.

The objectives of the study were:

- Exploring the challenges faced by the social workers in providing psychosocial services to learners in foster care in Merafong during the COVID-19 pandemic.
- Identifying the strategies social workers applied when rendering psychosocial services to learners in foster care in Merafong during COVID-19 pandemic.
- Exploring the social workers' preparedness to render psychosocial services to learners in foster care during the COVID-19 pandemic.
- Determining the social workers' view on the psychosocial support services they have received as members of the psychosocial support team during the COVID-19 pandemic.

Summary of the Key Findings

Objective 1: Challenges faced by the social workers in providing psychosocial services to learners in foster care in Merafong during the COVID-19 pandemic.

The study found that four out of ten participants experienced a lack of resources as a challenge, and this was said to have a negative impact on service delivery. The study also revealed that there was a fear of contracting the virus; two participants out of ten stated that there were clients who feared that social workers would infect them. On the other hand, two other participants raised that there was a fear of social workers spreading and contracting the virus at work. These findings were supported by Sun et al. (2020) who argued that fear and panic, were some of the psychosocial impacts of COVID-19. In the same light, Dymecka (2021) added that the pandemic came with a fear of infection, death, and related complications. Thus, the study concluded that this lack of resources poses as a challenge and threat to the profession in that clients may be disadvantaged in crises situations. It was also noted that this fear of spreading or contracting the virus was valid and could be argued to highlight the internal fears individuals had, as mentioned by Dymecka (2021).

Objective 2: Strategies social workers applied when rendering psychosocial services to learners in foster care in Merafong during COVID-19 pandemic

The study revealed that six out of ten social workers in Merafong were of the view that social workers needed to be flexible, creative and be willing to adapt to the 'new normal'. The study also found a total of five social workers who believed that to ensure that they still provided services to their clients, they needed to introduce and make use of technological tools. To further highlight on this, a study by Banks et al. (2020) was quoted, as they stated that it became a struggle for social workers to continue to do their work, because they had to adapt and be innovative in order to meet new needs and adjust priorities of the most urgent and critical facets of their roles. This study thus may conclude that given that social workers had to provide services to clients, particularly during the pandemic were some people experienced feelings of anxiety and loneliness, there had to be alternative means of providing services. In addition, there were four participants who mentioned that the pandemic made them more empathetic. It was therefore argued that the instability and insecurity that came with the pandemic and its inevitable increasing death tolls had an impact on this reaction.

Objective 3: Social workers' preparedness to render psychosocial services to learners in foster care during the COVID-19 pandemic.

The findings of the study in accordance to the third objective revealed that social workers felt that they were not prepared to deal with the pandemic as professionals. There was a total of five out of ten social workers who mentioned they were not prepared and that they did not know how they would have prepared for a pandemic. A further two participants stated that the lack of resources contributed to their lack of preparation. In this light, four out of ten of the interviewed social workers stated that training was necessary. These findings were supported by Khoshnami et al. (2022), who noted that developing trainings in relations to the pandemics and crisis that might arise to ensure that social workers are equipped with the essential skills needed to address a crisis should it arise. Therefore, it was concluded that providing such trainings to social workers would yield positive results not only on social workers, but on their services as well, which ultimately contributes to the overall wellbeing of clients.

Objective 4: Social workers' view on the psychosocial support services they have received as members of the psychosocial support team during the COVID-19 pandemic.

In accordance to the fourth theme, the study revealed that five out of the ten interviewed social workers in Merafong did not receive any psychosocial support during the COVID-19 pandemic. However, there were two social workers who stated that they did at some point get some form of support, while four out of ten said that they needed professional help. These findings were backed by Yadav and Sahu (2022), who pointed out that frontline healthcare workers encounter fast and unforeseen circumstances that call for an increased need for materials and human resources. The present study thus concluded that there are limitations within the state and ensuring that service providers are well supported for continued help to vulnerable groups within society.

Recommendations

Based on the findings of the study as well as the literature reviewed and related to the research aim, the following recommendations have been put forward:

- Based on the findings, it is also recommended that DSD provide regular debriefing sessions and awareness session focused on mental wellness after traumatic situations.
- It is recommended that it become a norm to provide trainings or awareness programmes for staff prior to deploying them to disaster sites. For example, during instances of disaster management, providing an awareness campaign on how to better deal with the

situation while also getting help for social workers can be beneficial. The role of an educator for social workers needs to be practiced more regularly.

- It is also recommended for policymakers that technology be gradually introduced in the social work profession and its effectiveness be assessed regarding the ethics and sensitive facets that come with social work and human subjects.
- It is also recommended that a similar study be conducted using social workers from different organisations to build up on these findings and to include a broader sample. This will help in literature building, particularly in the scope of psychosocial services provided to social workers during a pandemic.
- With regards to schools, it is recommended that more social workers be hired, to ensure that they are able to relieve each other even during crisis situations. This will help in ensuring that professionals are not burnt out or strained and that they too are able to attend to their personal needs and wellbeing.

Conclusion

In conclusion, the study aimed to explore the experiences of social workers who rendered psychosocial support to learners in foster care during the COVID-19 pandemic in Merafong City, Gauteng. The study's objectives were addressed using a qualitative approach and interpretive paradigm. In addressing the objectives set out in the beginning, the collected data was analysed thematically. This helped in discussing the findings and relating them to literature and recommendations were thus made in this regard.

REFERENCES

- Acharya, A. S., Prakash, A., Saxena, P., & Nigam, A. (2013). Sampling: Why and how of it. *Indian Journal of Medical Specialties*, 4(2), 330-333.
- Alharahsheh, H. H., & Pius, A. (2020). A review of key paradigms: Positivism VS interpretivism. *Global Academic Journal of Humanities and Social Sciences*, 2(3), 39-43.
- Anney, V. N. (2014). Ensuring the quality of the findings of qualitative research: Looking at trustworthiness criteria. *Journal of Emerging Trends in Educational Research and Policy Studies* 5(2): 272-281.
- Ashcroft, R., Sur, D., Greenblatt, A., & Donahue, P. (2022). The impact of the COVID-19 pandemic on social workers at the frontline: A survey of Canadian social workers. *The British Journal of Social Work*, 52(3), 1724-1746.
- Banks, S., Cai, T., De Jonge, E., Shears, J., Shum, M., Sobočan, A. M., Strom, K., Truell, R., Úriz, M. J. & Weinberg, M. (2020). Ethical challenges for social workers during Covid-19: A global perspective.
- Barker, R. L. (1991). Should training for private practice be a central component of social work education? Yes!. *Journal of Social Work Education*, 27(2), 108-111.
- Barker, R. L., & Branson, D. M. (2014). *Forensic social work: Legal aspects of professional practice*. UK: Routledge.
- Benedek, D. M., & Fullerton, C. S. (2007). Translating five essential elements into programs and practice. *Psychiatry*, 70(4), 345-349.
- Ben-Ezra, M., & Hamama-Raz, Y. (2021). Social workers during COVID-19: Do coping strategies differentially mediate the relationship between job demand and psychological distress?. *The British Journal of Social Work*, 51(5), 1551-1567.
- Bodnar, M., Namieśnik, J., & Konieczka, P. (2013). Validation of a sampling procedure. *TrAC Trends in Analytical Chemistry*, 51, 117-126.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, 3(2), 77-101.
- Brinkmann, S. (2014). Unstructured and semi-structured interviewing. *The Oxford handbook of qualitative research*, 2, 277-299.
- Bronfenbrenner, U. (1977). Toward an experimental ecology of human development. *American psychologist*, 32(7), 513.
- Byrne, D. (2022). A worked example of Braun and Clarke's approach to reflexive thematic analysis. *Quality & quantity*, 56(3), 1391-1412.
- Carey, M. (2013). *The social work dissertation: Using small-scale qualitative methodology: Using small-scale qualitative methodology*. UK: McGraw-Hill Education.
- Carlsson, I. M., Blomqvist, M., & Jormfeldt, H. (2017). Ethical and methodological issues in qualitative studies involving people with severe and persistent mental illness such as

schizophrenia and other psychotic conditions: a critical review. *International Journal of Qualitative Studies on Health and Well-being*, 12(2), 1368323.

Children's Act 38 of 2005. Published in the Government Gazette (28944). Pretoria: Government Printer.

Chipungu, S. S., & Bent-Goodley, T. B. (2004). Meeting the challenges of contemporary foster care. *The future of children*, 75-93.

Ciuk, S., & Latusek, D. (2018). *Ethics in qualitative research*. In *Qualitative Methodologies in Organization Studies* (pp 195–213). USA: Springer International Publishing.

Clarke, V., & Braun, V. (2017). Thematic analysis. *The journal of positive psychology*, 12(3), 297-298.

Clemente-Suárez, V. J., Dalamitros, A. A., Beltran-Velasco, A. I., Mielgo-Ayuso, J., & Tornero-Aguilera, J. F. (2020). Social and psychophysiological consequences of the COVID-19 pandemic: An extensive literature review. *Frontiers in psychology*, 11, 580225.

Cope, D. G. (2014). Methods and meanings: credibility and trustworthiness of qualitative research. *Oncology nursing forum*, 41(1), 89-91.

Creswell, J. W. (2014). *A concise introduction to mixed methods research*. Los Angeles: SAGE publications.

Creswell, J. W., & Poth, C. N. (2016). *Qualitative inquiry and research design: Choosing among five approaches* (4th Ed.). Los Angeles: Sage publications.

Darling, N. (2007). Ecological systems theory: The person in the center of the circles. *Research in human development*, 4(3-4), 203-217.

Dubey, S., Biswas, P., Ghosh, R., Chatterjee, S., Dubey, M. J., Chatterjee, S., Lahiri, D. & Lavie, C. J. (2020). Psychosocial impact of COVID-19. *Diabetes & Metabolic Syndrome: clinical research & reviews*, 14(5), 779-788.

Dymecka, J. (2021). Psychosocial effects of the COVID-19 pandemic. *Neuropsychiatra i Neuropsychologia/Neuropsychiatry and Neuropsychology*, 16(1), 1-10.

Etikan, I., Musa, S. A., & Alkassim, R. S. (2016). Comparison of convenience sampling and purposive sampling. *American journal of theoretical and applied statistics*, 5(1), 1-4.

Ferguson, H., Pink, S., & Kelly, L. (2022). The unheld child: social work, social distancing and the possibilities and limits to child protection during the COVID-19 pandemic. *The British Journal of Social Work*, 52(4), 2403-2421.

Gambetta, D., & Morisi, D. (2022). COVID-19 infection induces higher trust in strangers. *Proceedings of the National Academy of Sciences*, 119(32), e2116818119.

Gaus, N. (2017). Selecting research approaches and research designs: A reflective essay. *Qualitative Research Journal*, 17(2), 99-112.

Graue, C. (2015). Qualitative data analysis. *International Journal of Sales, Retailing & Marketing*, 4(9), 5-14.

- Gunawan, J. (2015). Ensuring trustworthiness in qualitative research. *Belitung Nursing Journal*, 1(1), 10-11.
- Haffejee, S., & Levine, D. T. (2020). 'When will I be free': Lessons from COVID-19 for child protection in South Africa. *Child abuse & neglect*, 110, 104715.
- Hicks, S. (2015). Social work and gender: An argument for practical accounts. *Qualitative Social Work*, 14(4), 471-487.
- International Federation Reference Centre for Psychosocial Support. (2009). *Together for Mental Health*. <https://pscentre.org/>.
- Itzhaki-Braun, Y. (2021). Community social workers' perspectives on the challenges and opportunities presented by the COVID-19 pandemic. *American Journal of Orthopsychiatry*, 91(6), 714.
- Ivbijaro, G., Brooks, C., Kolkiewicz, L., Sunkel, C., & Long, A. (2020). Psychological impact and psychosocial consequences of the COVID 19 pandemic Resilience, mental well-being, and the coronavirus pandemic. *Indian journal of psychiatry*, 62(Suppl 3), S395-S403.
- Jakes, P., Fish, T., Carr, D., & Blahna, D. (1998). Functional communities: a tool for national forest planning. *Journal of Forestry*, 96(3), 33-36.
- Joffe, A. R. (2021). COVID-19: rethinking the lockdown groupthink. *Frontiers in public health*, 9, 625778.
- Jones, R. K., Wilkins, D., Bezeczkzy, Z., & Thompson, S. (2023). How Did Levels of Psychological Distress and Perceptions of Workplace Support amongst Children's Social Work Staff Change during the Covid-19 Pandemic?. *The British Journal of Social Work*, 53(1), 405-424.
- Kaiser, K. (2012). Protecting confidentiality. *The SAGE handbook of interview research: The complexity of the craft*, 2, 457-464.
- Kang, E., & Hwang, H. J. (2021). Ethical conducts in qualitative research methodology: Participant observation and interview process. *Journal of Research and Publication Ethics*, 2(2), 5-10.
- Karia, R., Gupta, I., Khandait, H., Yadav, A., & Yadav, A. (2020). COVID-19 and its modes of transmission. *SN comprehensive clinical medicine*, 2(10), 1798-1801.
- Karim, S. (2020). *Power and the historic abuse of children in care*. <https://stax.strath.ac.uk/concern/theses/d504rk38j>.
- Kekeya, J. (2021). Qualitative case study research design: The commonalities and differences between collective, intrinsic and instrumental case studies. *Contemporary PNG Studies*, 36, 28-37.
- Khoshnami, S. M., Javadi, M. H., Noruzi, S., Azari Arghun, T., Sayar, S., & Arian, M. (2022). Planning and implementing the protocol for psychosocial interventions by social workers in Iranian healthcare centers against COVID-19. *Social Work in Public Health*, 37(3), 224-232.

- Kivunja, C., & Kuyini, A. B. (2017). Understanding and applying research paradigms in educational contexts. *International Journal of higher education*, 6(5), 26-41.
- Kotzé, D. (2022). Public health and democratic governance: COVID-19's impact on South Africa's democracy. *Zeitschrift für Vergleichende Politikwissenschaft*, 16(4), 733-752.
- Kumar, R. (2014). *Research methodology: a step-by-step guide for beginners*. 4th ed. Sage Publications Ltd.
- Lam, M. M., Grasse, N. J., & McDougle, L. M. (2023). Individual-and community-level factors associated with voluntary participation. *Nonprofit and Voluntary Sector Quarterly*, 52(6), 1515-1538.
- Leathers, S. J. (2006). Placement disruption and negative placement outcomes among adolescents in long-term foster care: The role of behaviour problems. *Child abuse & neglect*, 30(3), 307-324.
- Loosveldt, G. (2012). Face-to-face interviews. In *International handbook of survey methodology* (pp. 201-220). UK: Routledge.
- Madden, E. E., Scannapieco, M., & Painter, K. (2014). An examination of retention and length of employment among public child welfare workers. *Children and Youth Services Review*, 41, 37-44.
- Martinez, S. (2020). COVID-19 and social inequalities: A political view from social work. In *Social work and the COVID-19 pandemic* (pp. 31-36). England: Policy Press.
- McCorkle, W. (2020). Problematizing Immigration Restrictions during COVID-19 in the Social Studies Classroom. *Research in Social Sciences and Technology*, 5(3), 1-24.
- McIntosh, M. J., & Morse, J. M. (2015). Situating and constructing diversity in semi-structured interviews. *Global qualitative nursing research*, 2, 2333393615597674.
- Merriam-Webster. (n.d.). Empathy. In *Merriam-Webster.com dictionary*. Retrieved September, 14, 2024, from <https://www.merriam-webster.com/dictionary/empathy>.
- Mueller, A. E., & Segal, D. L. (2014). Structured versus semistructured versus unstructured interviews. *The encyclopedia of clinical psychology*, 1-7.
- Murray, J. S. (2002). A qualitative exploration of psychosocial support for siblings of children with cancer. *Journal of pediatric nursing*, 17(5), 327-337.
- Omodan, B. I. (2020). Managing the psycho-social vacuum of COVID-19 among rural learners through Ubuntu. *Journal of Educational and Social Research*, 10(6), 266-278.
- Pace, D. S. (2021). Probability and non-probability sampling-an entry point for undergraduate researchers. *International Journal of Quantitative and Qualitative Research Methods*, 9(2), 1-15.
- Padgett, D K. (2017). *Qualitative methods in social work research*. Sage Publications, Inc

- Padgett, D. K. (2013). Qualitative research. In *Encyclopedia of social work*. USA: Oxford University Press.
- Piel, M. H., Geiger, J. M., Julien-Chinn, F. J., & Lietz, C. A. (2017). An ecological systems approach to understanding social support in foster family resilience. *Child & Family Social Work*, 22(2), 1034-1043.
- Pieper, I., & Thomson, C. J. (2016). Beneficence as a principle in human research. *Monash bioethics review*, 34, 117-135.
- Pietilä, A. M., Nurmi, S. M., Halkoaho, A., & Kyngäs, H. (2020). Qualitative research: Ethical considerations. *The application of content analysis in nursing science research*, 49-69.
- Proudlock, P., & Jamieson, L. (2009). *The Children's Act: Providing a strong legislative foundation for a developmental approach to child care and protection*.
<https://open.uct.ac.za/server/api/core/bitstreams/c8cd4c7f-2ba8-4f77-bf76-fba34821c446/content>
- Redondo-Sama, G., Matulic, V., Munté-Pascual, A., & de Vicente, I. (2020). Social work during the COVID-19 crisis: Responding to urgent social needs. *Sustainability*, 12(20), 8595.
- Rehman, A. A., & Alharthi, K. (2016). An introduction to research paradigms. *International Journal of Educational Investigations*, 3(8), 51-59.
- Ross, A. M., Schneider, S., Muneton-Castano, Y. F., Caldas, A. A., & Boskey, E. R. (2021). "You never stop being a social worker:" Experiences of pediatric hospital social workers during the acute phase of the COVID-19 pandemic. *Social Work in Health Care*, 60(1), 8-29.
- Ross, P. T., & Bibler Zaidi, N. L. (2019). Limited by our limitations. *Perspectives on medical education*, 8, 261-264.
- SACSSP. (2018). *Social Work*. <https://www.sacssp.co.za/for-the-profession-social-work/>.
- Sarantakos, S. (2017). *Social research (4th Ed.)*. London: Bloomsbury Publishing.
- Schwartz, K. D., Exner-Cortens, D., McMorris, C. A., Makarenko, E., Arnold, P., Van Bavel, M., ... & Canfield, R. (2021). COVID-19 and student well-being: Stress and mental health during return-to-school. *Canadian Journal of School Psychology*, 36 (2), 166-185.
- Shah, S. R., & Al-Bargi, A. (2013). Research Paradigms: Researchers' Worldviews, Theoretical Frameworks and Study Designs. *Arab World English Journal*, 4(4).
- Shenton, A. K. (2004). Strategies for ensuring trustworthiness in qualitative research projects. *Education for information*, 22(2), 63-75.
- Sin, C. H. (2005). Seeking informed consent: Reflections on research practice. *Sociology*, 39(2), 277-294.

- Stahl, N. A., & King, J. R. (2020). Expanding approaches for research: Understanding and using trustworthiness in qualitative research. *Journal of Developmental Education*, 44(1), 26-28.
- Sun, S., Lin, D., & Operario, D. (2020). Need for a population health approach to understand and address psychosocial consequences of COVID-19. *Psychological Trauma: Theory, Research, Practice, and Policy*, 12(S1), S25.
- Taherdoost, H. (2016). Sampling methods in research methodology; how to choose a sampling technique for research. *International journal of academic research in management (IJARM)*, 5.
- Teherani, A., Martimianakis, T., Stenfors-Hayes, T., Wadhwa, A., & Varpio, L. (2015). Choosing a qualitative research approach. *Journal of graduate medical education*, 7(4), 669-670.
- Tomlin, J., Dalglish-Warburton, B., & Lamph, G. (2020). Psychosocial support for healthcare workers during the COVID-19 pandemic. *Frontiers in psychology*, 11, 554967.
- Van der Berg, S., Zuze, L., & Bridgman, G. (2020). The impact of the Coronavirus and lockdown on children's welfare in South Africa. *Stellenbosch University*.
- Verheyden, C., Van Holen, F., West, D., & Vanderfaeillie, J. (2022). Psychosocial well-being of Flemish foster children residing in their foster homes during the COVID-19 lockdown. *Children and Youth Services Review*, 139, 106535.
- Wazimap, (2016). Merafong City demographics. <https://wazimap.co.za/profiles/municipality-GT484-merafong-city/#demographics>.
- Weller, S. C., Vickers, B., Bernard, H. R., Blackburn, A. M., Borgatti, S., Gravlee, C. C., & Johnson, J. C. (2018). Open-ended interview questions and saturation. *PloS one*, 13(6), e0198606.
- Weyers, M. L., & Geyer, L. S. (2011). *The theory and practice of community work: a South African perspective*. South Africa: Keurkopie.
- Whitt-Woosley, A., Sprang, G., & Eslinger, J. (2022). Foster care during the COVID-19 pandemic: A qualitative analysis of caregiver and professional experiences. *Child Abuse & Neglect*, 124, 105444.
- World Health Organization (WHO). (2024). *Coronavirus disease (COVID-19)*. https://www.who.int/health-topics/coronavirus#tab=tab_1.
- Yadav, P., & Sahu, S. (2022). Perceived stress, burnout and compassion fatigue among frontline health workers during COVID-19 pandemic. *Indian Journal of Psychiatric Social Work*, 32-38.
- Yadav, R., & Yadav, A. (2023). The 6 A's model of social worker associations and COVID-19: A preliminary insight. *Qualitative Social Work*, 22(2), 357-380.

APPENDICES

APPENDIX A: PERMISSION TO CONDUCT RESEARCH WITH SOCIAL WORKERS AT DSD MERAUFONG CITY OFFICES



Enquiries: Dr. Sello Mokoena
Tel: 082 331 0786
File no.: 27/11/2023

Dear KM Belopedi

**RE: APPLICATION TO CONDUCT RESEARCH IN THE GAUTENG DEPARTMENT OF SOCIAL
DEVELOPMENT**

Thank you for your application to conduct research within the Gauteng Department of Social Development.

Your application on the research on *"Social workers experiences of providing psychosocial support to learners in foster care during the Covid-19 pandemic in Merafong City, Gauteng"* as approved by University of Witwatersrand been considered and approved for support by the Department as it was found to be beneficial to the Department's vision and mission. The approval is subject to the Department's terms and conditions as endorsed on the 13th November 2019.

You have permission to interview departmental officials and beneficiaries, conduct observations and access relevant documents where necessary.

May I take this opportunity to wish you well on the journey you are about to embark on.

We look forward to a value adding research and a fruitful co-operation.

With thanks


Dr Sello Mokoena
Director: Research and Policy Coordination
Date: 27/11/2023

APPENDIX B: ETHICAL CLEARANCE

UNIVERSITY OF THE
WITWATERSRAND
JOHANNESBURG



SCHOOL OF HUMAN AND COMMUNITY DEVELOPMENT ETHICS COMMITTEE
CONSTITUTED UNDER THE UNIVERSITY HUMAN RESEARCH ETHICS COMMITTEE (NON-MEDICAL)

CLEARANCE CERTIFICATE

PROTOCOL NUMBER: SW23/08/01

PROJECT TITLE

Social workers' experiences of providing psychosocial support to learners in foster care during the COVID-19 pandemic in Merafong city, Gauteng.

INVESTIGATOR

KM BALOPEDI

SCHOOL/DEPARTMENT OF INVESTIGATOR

SOCIAL WORK

DATE CONSIDERED

20 OCTOBER 2023

DECISION OF THE COMMITTEE

Approved unconditionally

RISK LEVEL

LOW RISK

EXPIRY DATE

29 NOVEMBER 2026

ISSUE DATE OF CERTIFICATE

29 NOVEMBER 2023

CHAIRPERSON

(DR L PETERSEN)

cc: Supervisor: PROF E PRETORIUS

DECLARATION OF INVESTIGATOR

To be completed in duplicate and **ONE COPY** returned to the Chairperson of the School/Department ethics committee.

I fully understand the conditions under which I am authorized to carry out the abovementioned research and I 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.

01 / 01 / 2024

APPENDIX C: PARTICIPANT INFORMATION SHEET

UNIVERSITY OF THE
WITWATERSRAND,
JOHANNESBURG



Dear Sir / Madam

My name is Karabo Balopedi. I am a master's student in the School of Human and Community Development at the University of the Witwatersrand, Johannesburg. My supervisors are Profs Pretorius and Watermeyer. I am conducting a research study on what are the experiences of social workers providing psycho-social support to learners in foster care during Covid-19 who reside in Merafong city. The study title is Social Workers' Experiences of Providing Psycho-Social Support to Learners in Foster Care During the Covid-19 Pandemic in Merafong City, Gauteng.

I am inviting you to take part in an interview. If you decide to take part, your participation in this research study will last about an hour. The interview will take place at the Department of Social Development offices at a time and date convenient for you. With your permission, I would like to audio record the interview. This data will be stored in offsite external hard drive for five years and deleted after 5 years. Only the researcher and the supervisor will have access to the data.

During the research study, I will need to ask for some personal information about you, including your experiences of rendering psychosocial support services to learners in foster care within the Merafong City. The interview will be confidential. When I share the results of the research study, I will not include your name or anything else that could identify you. With your permission, other researchers may use the data collected from this research study, but your name and any personal information will not be used or passed on.

If you decide to take part in the research study, it should be because you want to volunteer. You do not have to take part. You can stop being in the study at any time. You do not have to answer any questions if you do not want to. You will not get any direct benefits if you choose to join the research study. You will not lose any services, benefits, or rights you would normally have if you decided not to join. Taking part in the research study will not cost you

anything. You will not be paid for being in this research study. There is a low risk associated to you when discussing your experience as a social worker in rendering psychosocial services during the pandemic to learners in foster care who live in Merafong City. However, some of the questions asked may make you feel sad or upset. If this happens, I will stop the interview and continue another time. Should it trigger any trauma as an official of government you can access the EHWP Unit for free. Employees can also contact the EHWP Unit directly via email or telephone should they require further assistance (if/when necessary). The EHWP Unit's contact details are:

Lood.Hanekom@gauteng.gov.za, (011) 355-7868 (or cell no: 082-469-3119), or
Tsegoana.sello2@gauteng.gov.za, (011) 355-7915

This research study will be written up as a research report. The report will be available on the university library website. If you would like to receive a summary of this report, I will be happy to send it to you.

If you have any questions during or afterwards about this research study, feel free to contact me or my supervisor on the details listed below. If you have any concerns or complaints about the ethical procedures of this research study, you are welcome to contact the University Human Research Ethics Committee (Non-Medical), telephone +27(0) 11 717 1408, email hrecnon-medical@wits.ac.za.

Yours sincerely,

Researcher: Karabo Mpho Balopedi

Phone number: 066 290 7306.

Email address: 845236@students.wits.ac.za / Karabo.balopedi@gauteng.gov.za

Supervisors:

Prof. Edmarie Pretorius: Edmarie.Pretorius@wits.ac.za

Prof. Jennifer Watermeyer jennifer.watermeyer@wits.ac.za

APPENDIX D: CONSENT FORM

UNIVERSITY OF THE
WITWATERSRAND,
JOHANNESBURG



Title of research project:

Social workers' experiences of providing psychosocial support to learners in foster care during the covid-19 pandemic in Merafong city, Gauteng.

Name of researcher: Karabo Mpho Balopedi

I,, agree to participate in this research project.

I agree to the following:

(Please circle the relevant options below)

The research study was explained to me. I understand what this study is about.	YES	NO
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I understand that I can volunteer to take part in the study	YES	NO
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I agree that direct quotations from my interview may be used by the researcher in their research report.	YES	NO
--	-----	----

I agree that my participation will remain anonymous (my name will not be used by the researcher in the research report)	YES	NO
---	-----	----

I agree that other researchers may use the information I provide in my interview (depending on their own ethics clearance being obtained) but my name and any personal information will not be used or passed on.	YES	NO
---	-----	----

YES	NO
-----	----

..... (signature)

.....(signature)

..... (name of participant)
researcher)

..... (name of

..... (date)

..... (date)

APPENDIX E: SEMI-STRUCTURED INTERVIEW GUIDE

Interview details:

Pseudonym name _____

Age _____ Profession _____ Years of Experience _____

Marital Status				
Single	Married	Divorced/ Separated	Widowed	Living together

Gender			Medical Aid	
Male	Female	Nonconforming	Yes	NO

Race				
Black	Coloured	Asian	Indian	White

Time and date of the interview: _____

Location of interview: _____

INTERVIEW QUESTIONS

- To establish what social workers' experiences were, when rendering psychosocial services to learners in foster care during the covid-19 pandemic in Merafong.
1. How would you describe the experience of returning to work during the Covid-19 period?
Let us explore the experience and everything associated with coming back at the high of the pandemic.
 2. How was the reception from the learners when you were engaging with them, and what could you gather from their experiences?
 - To explore the challenges experienced by the social workers in providing psychosocial services to learners in foster care in Merafong during the covid-19 pandemic.
 1. How would you describe some of the barriers you came across in rendering the service?
 2. Looking back at the situation, are there other challenges you can identify?
 3. How would you say the challenges shaped you during the period?
 - To examine the strategies social workers applied when rendering psychosocial services to learners in foster care in Merafong during Covid-19 pandemic.
 1. What were the most requested type of psychosocial support to the learners?

2. Due to the nature of the restrictions, how did you render the psychosocial support?
3. Where did you learn of the methods you used, and would you recommend them to the other areas?
 - To explore social workers' perspectives on their preparedness to render psychosocial services to learners in foster care during the covid-19 pandemic.
1. Looking back, what do you believe would have prepared you better for the period of Covid-19?
2. How did Covid-19 shape your outlook and service rendering?
3. Are there elements of self-care you would prescribe and why?
4. What are some of the capacity building trainings you would recommend, when you look back at the period?
 - To elicit suggestions from social workers on what additional psychosocial services are required in Merafong City, Gauteng.
1. How would you describe the gaps in terms of services you identify especially during Covid-19 which might be needed? And how would they benefit society and the department?
2. What are some of the suggestions would you propose, in relations to services rendered?
 - To determine social workers perspectives on the support services they as members of the psychosocial support team received during the COVID-19 pandemic.
1. What are you views on the psychosocial support that was provided to you?
2. How would you describe the psychosocial support that you required, and how did you go about getting it?