

Application of a Developmental Assessment Tool by Social Workers Practicing Foster Care in the Far East Rand, Ekurhuleni.

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DECLARATION

I hereby declare that this dissertation is my own unaided work and that I have given full acknowledgement to the sources which I have used.

Sibongile Khoza

____/____/____
Date

DEDICATION

I dedicate this dissertation to the memory of my brother, Mr. Sipho Khoza, my parents, Mrs. Saraphina Vongo Khoza and Mr. Moses Butana Khoza for the strength that you cultivated in me. I miss you. I wish to express my gratitude to my family, Tebogo and friends for your encouragement, love and support. I love you.

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ABSTRACT

The South African welfare system has evolved over time from a residual approach influenced by apartheid to a developmental approach reflecting the objectives of a democratic and a developmental state. The research study aimed to gain an understanding of assessment as one of social work interventions by investigating the experiences of social workers providing foster care services using the developmental assessment tool. Some of the objectives of the study were to explore social workers' views about the factors contributing to the tool not being used and to identify the challenges that social workers face in using the tool. This qualitative study used phenomenology as a research design. Ten individual semi-structured interviews were conducted using an interview schedule. Themes were used to classify and analyze data. The findings indicated that there were benefits in using the developmental assessment tool. It was also found that some respondents were not using the assessment tool regularly and the factors inhibiting the use of the developmental assessment tool were identified. Lastly, the participants' perceptions of the assessment tool were shared with the researcher and possible amendments to the developmental assessment framework were identified by them. Some of the conclusions that were drawn out of the research study were the following: There is evidence that using the developmental assessment tool may have had a beneficial influence on the provision of services using a developmental approach to social welfare, thus contributing towards social development. There is a need to synchronize services at the macro and micro levels that will create an enabling environment for providing assessment services where the professional roles are undertaken effectively and the services are provided within the parameters of a developmental social welfare system.

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CHAPTER 1

INTRODUCTION

1.1. INTRODUCTION

This chapter aims to provide an overview of the research report containing the research findings of a study conducted on the use of a developmental assessment tool by social workers rendering foster care. It will highlight the reason for conducting the research and briefly provide the research design and methodology mapping out the process that was undertaken to complete the research study. It will also make reference to the major limitations encountered whilst conducting the study. The last part of this chapter will present an overview of the chapters contained in this report.

1.2. MOTIVATION FOR THE STUDY

South Africa's foster care system is currently under pressure resulting from an increasing demand for foster care services because there are more children who are being orphaned. The database for the South African Social Security Agency indicated that 365 000 foster children received foster child grants in October 2009. SA Statistics (2006) recorded that there were 668 000 double orphans in South Africa during 2006. Orphanhood can render them vulnerable and in need of care and protection. There is an indication that the available social workers are unable to cope with the demand for implementing the Children's Act as Barberton (2006) indicated that for the government to deal with the demand to implement the Children's Act, it is projected that there is a need for a minimum of additional 16 000 social workers required to cope with the demand for services. These circumstances indicate that there is a demand for foster care services yet there are limited human resources to respond to the demand. Literature indicates that foster children experience psycho-social challenges that require social work intervention as one of the social welfare strategies. One of the social work interventions requires the assessment of the clients' circumstances which is the focus of this research. Through previous observations, the

researcher observed that the developmental assessment tool was not used in a standardized manner by social workers rendering foster care services which may be influenced by the current context that includes the increasing demand for foster care placements they are faced with. An exploratory research design will assist to establish nature of the experiences of social workers when using the developmental assessment tool and reasons that may contribute to the use or nonuse of the assessment tool.

The developmental assessment tool was developed by the Inter Ministerial Commission to assess the circumstances of children, youth and families who became involved in statutory services and to manage youth who were at risk particularly those placed in child and youth care centres (which included children's homes, schools of industries and reformatory schools). The tool focuses on four elements for developmental assessment which include belonging, mastery, independence and generosity. When a child is involved in the statutory services, an individual development plan (IDP) must be developed by a social worker with the involvement of the child and significant people in the child's life to assess the child's developmental needs. Following the development of an IDP, a social worker must formulate a care plan that will guide the intervention process which must be reviewed at least after every six months with all the people involved in a child's life.

The developmental assessment tool had a limitation in that it did not incorporate the assessment of all children placed in foster care as a result, there may have not been a standardized use of the developmental assessment tool in foster care cases. The developmental assessment tool's limitation may have presented a problem in practice which forms part of this research study's inquiry aiming to explore the social workers' experiences using the developmental assessment tool when rendering foster care services.

The circumstances referred to at the beginning of this section raise the following question. Is the developmental assessment tool contributing towards providing responsive services to the foster children to address the experienced challenges? Since the social welfare system in South Africa is based on a developmental approach, the researcher would like to explore the contribution of a developmental assessment tool towards social development. Given the current challenges

experienced by the foster care programme, the researcher wanted to gain more insight on the social workers' experiences using the developmental assessment tool for determining the needs of foster children in relation to its contribution towards social development.

1.3. AIM OF THE STUDY

The main aim of study was to gain an understanding of social workers' experiences surrounding the use of a developmental assessment tool for determining the needs of foster children.

1.4. OBJECTIVES

The objectives of the study were: To determine social workers' knowledge and understanding of the developmental assessment tool by social workers; To identify reasons that inhibit the use of the developmental assessment tool; To explore social workers' views about the factors contributing to the tool not being used; To identify the challenges that social workers face in using the tool.

1.5. DEFINITION OF KEY TERMS

The central terms used in the research are defined below:

Developmental assessment: assessment is defined as "a process occurring between a practitioner and a client, in which information is gathered, analyzed and synthesized to provide a concise picture of the client and his or her needs and strengths" (Compton, Galaway and Cournoyer 2005, p. 194). Developmental assessment can be seen as an assessment focusing on strengths and uses a developmental approach.

Social development is "a process of planned social change to promote the social wellbeing in conjunction with a dynamic process of economic development" (Midgely, 1995, p. 25).

Foster care is described by the Children's Act as an alternative care placement of a child in foster care by order of a Children's Court. (Children's Act 38 of 2005).

1.6. RESEARCH DESIGN AND METHODOLOGY

The research study is qualitative as it provides an opportunity for participants to express their experiences regarding the use of the developmental assessment tool. The strategy used is defined by Fouche (2002, p. 273) as phenomenology, which “aims to understand and interpret the meaning that subjects give their everyday lives” and an exploratory approach was used. The sampling procedure used was purposive sampling which is a type of a non-probability sampling strategy. The sample size of ten respondents was drawn from the social workers providing foster care services in the Far East Rand at Ekurhuleni. The sample size was sufficient for the purpose of the study as the nature of this study required the saturation of data with meanings of the participants’ experiences. Semi-structured interviews were used to collect data as the most effective method for data collection in this research study. Face to face interviews were conducted using an interview schedule. The method of data collection allowed the participants to relate their experiences and thoughts without limitations found within a structured interview. Each interview took approximately an hour. The research tool was piloted with two respondents to test the suitability of the interview schedule and its effectiveness to yield the required data. This process provided an opportunity for the researcher to identify and rectify gaps that existed in the data collection tool by refining the wording used to facilitate the clarity of the questions asked. The researcher consulted with the supervisor and the inputs were incorporated. The outcomes of the pilot study indicated that the research instrument is efficient, reliable and that it yielded the anticipated results.

The data collection process took place using the revised data collection tool. Data were transcribed by the researcher to allow an opportunity to engage with and be immersed in the data. de Vos (2002) indicates that this process provides an opportunity for heightened awareness of the data and for openness to subtle messages that are central to identifying and organizing data into themes, categories and patterns. de Vos (2002, p. 340-344) identifies interactive steps that were used by the researcher in data analysis. These include planning for recording data, data collection and preliminary analyses, managing data, reading and writing memos, generating categories, themes and patterns, coding data, testing emergent understanding, searching for alternative explanations and writing a report.

During the process of data analysis the researcher evaluated whether the obtained data provided an answer to the research question. de Vos (2005, p.339) suggests that one must “search for alternative explanations and linkages to identify and describe these linkages and demonstrate why the explanation offered is most plausible”. This means that the researcher must justify the explanation provided as the one that makes the most sense in answering the research question. This researcher interpreted the data and presented the information using quotations from the data. Tables and diagrams were also used for data presentation.

1.7. LIMITATIONS OF THE STUDY

The major limitations of the study included non-generalization of the research findings due to the nature of the study. Time and resource constraints also limited the scope of the research study as the research could have been extended to incorporate “triangulation of measures” by reviewing the archive files for social workers and interviews with social work managers to be able to produce a more robust study (de Vos, 2002, p. 341). Although, there was some South African literature available on assessment in foster care within the psychology and psychiatry field, there was limited South African literature on the same subject from the social work profession.

1.8. CONTENTS OF THE CHAPTERS

CHAPTER 1: INTRODUCTION

This chapter provides a brief introduction to the research study reflecting on the reason for conducting the study and its aim and objectives. This chapter also provides an overview of the research design and methodology and highlights the limitations of the study. It also provides an overview of the chapters in the research report.

CHAPTER 2: LITERATURE REVIEW

This chapter presents the body of knowledge reviewed on the subject focusing on the historical background and current formation of social welfare in South Africa in relation to the political and global influences, the theoretical framework informing social welfare, social development and assessment, the legislative framework and the assessment of children in foster care.

CHAPTER 3: RESEARCH DESIGN AND METHODOLOGY

Chapter 3 provides details on the research design and methods used to conduct the study. It also incorporates discussion of the limitations that were experienced during the course of conducting this research.

CHAPTER 4: PRESENTATION OF THE FINDINGS

This chapter presents the actual findings and the researcher's synthesis of data collected along with the literature reviewed on the subject. The research findings will be illuminated by the literature reviewed.

CHAPTER 5: SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

The last chapter depicts the researcher's conclusions about the data presented in the preceding chapters. It also presents recommendations to be considered by interested people or institutions within the welfare system in South Africa who are concerned to improve the quality of the foster care programme with particular reference to assessment.

1.9. CONCLUSION

This chapter presented a brief summary of the research study highlighting the contents of the research report that include the reason for conducting the study, and the aim and objectives of the research. It also briefly discussed the literature review, research methodology, data presentation and analysis, the conclusion and the research recommendations. Lastly it presented the contents of each of the chapters in the research report.

CHAPTER 2

LITERATURE REVIEW

2.1. INTRODUCTION

This chapter will review the body of knowledge on social welfare, social work and the assessment of children in foster care. The literature review will provide the historical background of social welfare in South Africa demonstrating the influences that shaped it pre and post the democratic state in South Africa. The historical background will also focus on the development of the welfare system to its current state, reflecting on the approach that informs the structure of social welfare and on how social services should be provided in the country. This chapter will engage in a discussion on the following issues: globalisation and poverty and their effects as contributory factors leading to a need for social welfare. The review will also focus on the theoretical framework and the legislative framework for social welfare in South Africa with particular reference to the assessment process for placement in foster care.

2.2. SOCIAL WELFARE IN SOUTH AFRICA

2.2.1. HISTORICAL BACKGROUND

Lombard (1996, p. 162) indicates that social welfare is based on four approaches which are social philanthropy, social work, social administration and social development. The first three approaches were used in social welfare under the apartheid regime whose intervention was diagnostic. The three former approaches encouraged development of people outside of their context. As a result, the social welfare system at the time did not present the values of social work that include acknowledging self-determination and the empowerment of people. Colonialism and apartheid were the major influences which structured social welfare in South Africa before 1994. Social welfare furthered the interests of the apartheid system which entrenched social inequality, social injustice, marginalization and racial division amongst the different racial groups in the country and the Africans were the most marginalized (Patel, 2005).

“Apartheid did not just mean political exclusion, it was also an economic system of extreme economic exploitation” which led to increased poverty in South Africa which in turn compounded the need for social welfare (Magubane, 1994, p. 16).

A residual approach used by the welfare system at that time perpetuated the ideals of apartheid by “focusing on the individual as the main cause of the problem rather than structural causes” (Homan 1999, p. 48). The racial dispensation further inhibited access to services as this meant that the marginalized racial group was restricted from accessing any social services from the government as “race was the primary factor in the access to services and benefits and in the allocation of welfare resources”, which reinforced racial divisions and marginalization (Patel 2005, p. 70). McKendrick (1987, p. 21) notes that this population group “received fragmented social welfare services with limited resources that only served their basic needs instead of providing holistic interventions”. These services did not allow people to achieve a state of wellbeing and resulted in limited opportunities to realize their potential. Its effects may have largely contributed to the excluded population’s feeling of being worthless and powerless. This clearly indicates the far reaching results of the nature of politics at that time.

The apartheid system isolated the country from the rest of the world as it was sanctioned from participating in global activities. It was only after the insurgence against the government of the day, which led to the end of the apartheid system in 1994 and its replacement by a democratic and a developmental state, that the marginalized racial group was liberated and had opportunities to realize their full potential as human beings. The change in the political climate in the country as described by Patel (2005) was facilitated by the drafting of a South African Constitution in 1993 that enshrined basic human rights. The government also implemented its Reconstruction and Development Programme (RDP) in 1994 which “advocated the idea of a developmental social welfare” (Patel 2005, p. 92). The implementation of RDP was short lived as it was discontinued in 1996 and replaced by the government’s macro-economic policy. As the government’s focus shifted more towards economic development through the adoption of a “macro-economic-Growth Employment and Redistribution (GEAR) policy”, it implied a “shift of responsibility for social welfare from government to individuals, families and private sector” as the government had to channel its resources towards economic growth (Patel 2005, p. 94). The

shift may have created a conflict of interests on the government's mandate to "develop human resources" and yet the implications of macro-economic policy moved away from the initial mandate as most of the marginalized Africans experienced poverty which would have not been eradicated within two years of the implementation of RDP (Patel 2005, p. 92).

The Ministry for Social Welfare and Population Development had to focus on defining its niche within the new democratic and developmental state. A National Strategic Management Committee was established to achieve a national consensus on social welfare. There were six technical committees that were established that undertook research projects and produced technical reports. These reports contributed towards the development of a Discussion Paper on social welfare which was discussed at the Bloemfontein conference in June 1995. A developmental model for social welfare, which was informed by a developmental approach, was proposed at this conference which was adopted by Parliament in 1997 (Patel 2005, p. 94-96). This changed the face of social welfare in South Africa completely to encompass the provision of immediate needs along with the promotion of self sufficiency of people to enable them to participate actively in the economy. The developmental social welfare system in South Africa is based on the following themes: a rights-based approach, social and economic development, democracy and participation, social welfare partnerships and reconciliation of the micro and macro divide in developmental society (Patel 2005, p. 988-110). As the literature indicates, the current welfare system is influenced by the effects of the previous welfare system and is reflective of the current nature of politics in the country along with the social circumstances that are largely influenced by globalisation and its implications.

2.2.2. GLOBALISATION

In the wake of a democratic state in South Africa post 1994, the country was reincorporated into the global arena and became a participant in global activities that included economic participation, access to technology and increased mobility of people around the globe. It has both positive and negative aspects that have a major impact on the daily lives of people. The country has experienced the benefits of increased access to opportunities to connect and interact with

other people globally, the sharing of skills and knowledge, a wider arena in which to participate in trade and maximize economic participation which has had a direct impact on the country's economy. On the other hand, it had a negative impact on the people's lives by perpetuating poverty amongst other social problems.

Globalisation is described by Patel (2005, p. 10) as “fundamental, rapid and complex social changes in contemporary societies that have far reaching consequences for people”. These consequences can be seen from the nature of the global economy which is capitalistic as it promotes the concentration of wealth by a limited group of the population, resulting in the majority of the population being poor as they do not have the economic power in terms of opportunities and resources used to uplift their standard of living. This view is confirmed by Appel (2008, p. 2) saying that “while many poor South Africans were lifting themselves from abject poverty, the rich in South Africa were getting richer, most likely due to access to economic opportunities”. The same author quoted Netshitenzhe saying that “many studies, including the Income Expenditure Survey by Statistics South Africa found a widening inequality gap in the country.” This clearly demonstrates the characteristic of capitalism which aims to promote economic growth with less consideration of socio-cultural issues affect the communities. As a result, Marx's social theory locates the source of social problems in “capitalism as it evolves control over the means of production through the exploitation of the working class” (Donham 1990, p. 82).

Economic growth is linked to the privatization of state owned assets which results in the retrenchment of employees. This results in the unemployment of a large section of the population who are in the low income group. Patel (2005, p. 16) noted that “privatization results in economic insecurity which in turn leads to limited investors in trade”, which compounds poverty as the majority of the population will be unemployed, rendering them unable to provide for their basic needs. The loss of income results in poverty which disempowers people as it affects their psychological, social, emotional, spiritual and economic aspects, giving rise to other social ills that include health problems, substance abuse, mental health problems, child neglect and abuse to mention a few. Based on these observed effects of globalisation it can be argued that it contributes to the “fragmentation of the society” (SinghaRoy 2003, p. 41).

One would ask what is the impact of globalisation on the social welfare system in South Africa? The approach to social welfare in South Africa evolved from being residual to being developmental. The social problems that arise from the effects of globalisation require a strategic response to minimize its impact on the society. As a result, a developmental social welfare system was adopted in South Africa to respond to the negative impact of globalisation on the well-being of the people. Lombard (1996) indicates that the social development approach reflects the democratic political dispensation, aiming to be responsive to the socio-economic challenges resulting from globalisation. A developmental approach draws its knowledge base from “economic theories, systems approach, structural change model, neoclassical counter revolution and international dependence revolution” (Lombard 1996, p. 162). The influences of various theories reflect a holistic approach to the enhancement of people’s quality of life.

To realize developmental social welfare, a White Paper for Social Welfare was developed in 1994 which laid a foundation for the implementation of a developmental approach to social welfare and the Integrated Service Delivery Model for Social Welfare (ISDM) was developed to guide practice which put emphasis on “social protection, maximization of human potential and fostering self-reliance and participation” (National Department of Social Development, 2004). ISDM emphasizes the provision of services at various levels of intervention that include “prevention, early intervention, statutory and reintegration levels which enforces a work ethos of viewing people’s lives holistically” (National Department of Social Development, 2004). The assessment of children in foster care that is investigated by this research study is located in this model of service delivery for social welfare.

2.2.3. POVERTY

Poverty can be categorized as absolute and relative. Absolute poverty refers to “impoverishment which is defined independently of any reference group and is based entirely on income or expenditure and is restricted to the minimum required for subsistence or meeting basic needs” (Noble, Wright & Cluver 2007, p. 54). Noble et al. (2007, p. 54) further define relative poverty as “relating to a reference group, conceptualized by reference to the general living standards of

the society as a whole or in terms of resources required to participate fully in that society”. The 1995 World Summit for Social Development in Copenhagen provided a comprehensive definition of poverty “as a condition characterized by severe deprivation of basic human needs, including food, safe drinking water, sanitation facilities, health, shelter, education and information” (UN, 1995 as cited in Noble et al. 2007, p. 55).

Poverty is further understood within the context of varying measures used to determine the poverty line. Mashigo (2010, p. 110) refers to a definition by the “South African Advertising Research Foundation’s measurement of poverty using the Living Standard Measure (LSM) 5. LSM 5 categorizes people who have an income ranging between R748 and R2 289 as poor”. Appel (2008, p. 1) quoted Netshitenzhe from the Presidency presenting a report titled "Towards a Fifteen Year Review Synthesis Report", indicating that "when using the R322 per person [per month] poverty line, in 1995 about 53% of households was living below that line. In 2005, that figure has decreased to 48%.” He added that “when using the lower poverty line measure of R174 per person a month, the number of households in 1995 stood at 3%, decreasing in 2005 to 2%.” This indicates that a significant percentage of South Africans are living below the poverty line taking into consideration that last year there was a spate of job losses in the country which may have increased the number of people without an income.

A developmental assessment is intended to promote participation of the clients and ultimately contribute towards the foster children developing into independent young adults and their quality life improving. The debate raised by Noble et al. (2007) on the relation between poverty and social exclusion is relevant to this discussion as it would be interesting to find out if the assessment process contributes towards social inclusion. Burchardt et al. (as cited in Noble et al. 2007, p. 59) defines social exclusion as “an individual socially excluded if he or she is geographically resident in a society but for reasons beyond his or her control he or she cannot participate in the normal activities of citizens in that society and he or she would like to so participate”. Mashigo (2010, p. 110) concurs with this relation noting that people who are poverty stricken are “marginalized and excluded from the mainstream economy” for instance by

not having access to funds to initiate or sustain business ventures that can generate an income that will provide relief from poverty. As a result, they are more likely to continue being dependent on social security to sustain their lives. Such living circumstances have rippling effects on people's psychological and social well-being as they may feel disempowered due to the inability to participate actively in their society.

Children in foster care are reported to experience further social inequality as it was reported that they experience "intra household inequalities according to gender and relationship of children within the family" (Noble et al., 2007, p. 57). Noble et al. (2007, p. 57) also made reference to other studies which reported that "fostered children and non-biological children in Africa receive lower levels of resources". These findings indicate that foster children are subjected to relative poverty. Their circumstances can further exacerbate their conditions if they do not have access to good social services due to poor assessment, as they would be socially excluded from participating actively within their society. The lack of assessment services to foster children can be seen as oppressive and a discriminatory social work practice.

To address the negative effects of globalization, the government needs to balance the provision of the basic needs along with the development of the economy which will promote self-sufficiency and create an environment that stimulates economic growth. This response would address poverty by creating a balance between the social needs and economic growth within a state. However, people are not completely powerless and solely dependent on the state to improve their situation as has been attested by Marx, by the strengths perspective, the systems theory, person centered approach and theories of development. Marx states that the working class possesses a degree of power that can be used to change their situation through revolution. "Revolution occurs when the material productive forces of society come into conflict with existing relations of production" (Mayer, 1994, p. 206). Marx talks about social change in a capitalistic economy that is brought about by the weaknesses of capitalism that lead to the downfall of capitalism. The process of creating wealth within a capitalistic country experiences predictable episodes that lead to an economic crisis, for instance if the share prices increases or

drop, it may affect the value of the currency used which in turn may lead to economic recession given the intensity of the economic crisis at that time. In such instances, there may be major job losses which directly affect the working class as they are no longer able to provide for their basic needs. These effects would be experienced because the initial purpose of the economy was to gather more wealth for those who control the means of production. The essence of the social change concept is that individuals may be rendered victims by circumstances that are out of their control, however they do not remain incapacitated continuously as they have the capacity to organize themselves to change their situation. A society that is seen as a system needs to maintain a state of equilibrium by using mechanisms and strategies that would promote a socio-economic environment that is well balanced. The South African social welfare system aims to achieve this balance by promoting social development.

2.3. MANIFESTATION OF SOCIAL DEVELOPMENT

Social development is facilitated through a developmental approach which is described as a “process of planned social change to promote social wellbeing in conjunction with a dynamic process of economic development” (Midgely, 1995, p. 25). It aims to address the people’s immediate and basic needs such as shelter and security in conjunction with skills development to enable people to be actively involved in economic development, which will meet the long term needs for sustained economic participation and self-sufficiency. A developmental state needs to facilitate the manifestation of social development by incorporating the following pillars of social development. Firstly, people must be seen as diverse human beings that have a need to meet their basic needs like food, shelter, health, education and employment. In addition, there should be political and economic fulfillment. People must not be seen as recipients of basic needs through the social security net provided by the state however, they must be seen as participants with a capacity to influence politics and the economy as these are issues that they interact with on a daily basis (Patel, 2005). This form of interaction between people and their environment means that there is a heightened sense of consciousness and social inclusion. For instance, the political decisions made on social welfare or health matters may impact on their wellbeing positively or negatively. This raised sense of consciousness will put an individual in a position where he can decide to influence politics directly or indirectly through carefully planned actions.

Secondly, there must be social change as a development process which aims for positive change, assisted by planned intervention (Elliott, 1993). Social change requires a conscious decision to engage in activities carefully planned to influence change and promote social justice. Thirdly, there must be an integrated approach and intervention strategies through policy developments that are well researched and developed in consultation with communities. The approach is diverse as it incorporates a number of approaches and various professions are regarded as important to produce the desired outcomes (Patel, 2005). This approach is applicable to developmental assessment because various professions are required to assess the diverse nature of human beings.

Kondlo (2010, p. 7) identifies additional elements that must be in place to realize a developmental state which include “effective capacity of the state institutions, the coherent functioning and organization of state institutions and their relationship with non-state institutions and actors as well as the participatory nature of governance”. This means that there is a need to have the partnership between the machinery of the state institutions and civil society in place and their functions synchronized in such a way that it promotes service delivery. These identified elements serve as a basis for social development, placing emphasis on benefiting individuals within the society. This will in turn contribute to a broader society by encouraging economic participation and political consciousness. The three pillars identified earlier are indicated in the ISDM which is also underpinned by the social development concept which sees the focus of developmental social welfare as being on social protection, the maximization of human potential and on fostering self-reliance and the participation of the recipients of services (Department of Social Development 2004, p. 11). This approach shows a potential to respond to the current needs of communities that include poverty and unemployment, which are brought about by globalisation. It will be of interest to establish, through investigating the experiences of social workers, if these elements are in place to facilitate the provision of assessment services.

2.4. LEGISLATIVE FRAMEWORK

There are increasing numbers of children who are in need of care and protection requiring alternative care. The database of the South African Social Assistance Agency indicated that 365

000 foster children received foster child grants in October 2009, accessed through the provisions of the Social Assistance Act 13 of 2004 and its Regulations and 80% of these children are in related foster care placement (de Koker, de Waal, & Voster, 2006). It is estimated that there will be 873 330 double orphans by 2011 (Barberton, 2006, p. 122). These statistics indicated that there may be an increased number of children requiring alternative care in future.

South Africa is a signatory to the United Nations Children's Rights Commission to promote and maintain children's rights. One of these is a right to participate in matters that affect a child's life (UNCRC, 1989). Child participation is informed by the basic human right of social inclusion aiming to validate the existence of an individual and their capacity to influence issues that affect their lives. Section 22 of the South African Constitution (1996) makes provision for this right, along with other children's rights that include access to care and protection. Given the context within which the foster care programme occurs, where there is an increase in a number of children requiring statutory intervention and a limited number of social workers, the following questions are raised: How is the social welfare system structured to meet its objective to protect the rights of children? Does the system provide an environment that is conducive for the welfare system to meet these demands? Chiroro, Sudat and Woolnough (2009, p. 78) commented on the status of the welfare system saying that "due to. . .and severe shortage of social service professionals, it is difficult to envisage best practice protocols working efficiently in South Africa at this point in time". The government's response is important for these challenges to be met and includes the provision of a rights based legislation.

In response to children who are vulnerable and in need of care and protection, the Children's Act 38 of 2005 made provision for a child to be placed in foster care as an alternative placement to parental care. It also makes provision for developmental assessment of children who are brought before the Children's Court to be compulsory. Section 157(1) of the Children's Act 38 of 2005 indicates that, in making a decision whether to place the child in alternative care, the court must "consider a report completed by a designated social worker on the conditions of the child's life which must include an assessment of the developmental, therapeutic and other needs of the child". The intervention plan must reflect the responsive services to be provided which

must be within the practice framework provided in the Integrated Service Delivery Model, with assessment as one of the key processes in service delivery.

Essential social conditions to promote the rights of children include physical safety and nurturing families that have the resources to provide health care, early childhood development and education amongst others. (Barbarin & Richter, 2001). The welfare system in SA encompasses the provision of such conditions by providing foster care services that serve as an alternative care placement for children who cannot live with their biological parents. It ensures that they have an opportunity to grow up in a nurturing family environment where they can develop relationships and receive care that will contribute positively towards their development through education, health and other social services. Section 181 of the Children's Act No. 38 of 2005 states that foster care is intended to "protect and nurture children by providing a safe and a healthy environment with positive support". A child may be placed in foster care if the Children's Court finds that the child is in need of care according to section 150 if a child has been abandoned or orphaned and is without any visible means of support; displays behavior that cannot be controlled by the parent; is in a state physical or mental neglect to mention a few. Section 180(3) of the Children's Act makes provision for children to be placed in related or unrelated foster care.

Since there is a demand for related foster care placements, Giese (2008, p. 18) argues the social workers are preoccupied with handling "foster care applications and renewals, living little time for prevention and early intervention services or to deal with complicated child protection services". This raises the following question which may be an area for further research, is the Children's Act responsive to the current circumstances of children who are in need of care and protection? The provision of the Children's Act indicates that foster children placed in related and unrelated foster care are both vulnerable and require some level of social work intervention to address their needs.

The family that looks after a vulnerable child is able to receive assistance to obtain the required resources to provide care and protection to such children through statutory intervention, placement in foster care through a court order. Placement in foster care allows children to gain access to a basket of services that include free education, early childhood development, free health care services, foster child grants, therapeutic and developmental programs. The foster family and the biological family can access family support, family therapy, capacity building and supervision services. Access to these services can assist in the provision of the children's basic needs and be beneficial to the children's development as Barbarin and Richter (2001, p. 268) confirm that early childhood development offers an opportunity to reduce the undesirable effects on development of those children exposed to poverty and violence.

Social work intervention requires intensive involvement with the clients to be able to provide quality service. Assessment is one of the social work processes that inform intervention by identifying intervention strategies that will be responsive to the needs of a child. The overall aim is to rebuild the family structure so that it will provide a conducive environment within which a child can develop fully to be an independent and self-sufficient adult. The systems approach indicates that the children should be seen in relation to their "biological, psychological cognitive and other domains" which inform the structure of assessment (Rauch 1993, p. 72). The question to be asked is, what stance does the social development theory require social workers to undertake to be able to realize the objective of meeting a child's needs? One of the stances that may be undertaken by a social worker is a radical stance by raising the awareness and consciousness of individuals which will enable them to realize and utilize their potential. This has to be coupled with mobilizing resources within their environment to facilitate the realization of clients' goals.

2.5. THEORETICAL FRAMEWORK

There are a number of theories that can be used in the assessment and intervention process with children to contribute toward the improvement of their lives using a developmental approach. The developmental assessment tool is meant to assess the developmental needs and strengths of the child. In other instances the assessments are conducted "in relation to risk, need, and

potential change” (Adams, Dominelli, & Payne, 2009, p. 222). The developmental assessment tool is used to identify the source of the behavioral problem and guide rehabilitation efforts (The Circle of Courage, 2002). The developmental assessment tool is also designed to deepen an understanding of a child’s participation, competencies and resources identifying the caregiving and learning environments most likely to help the child to fully utilize his or her developmental potential (Greenspan & Meisels, 1996, p. 11). The developmental assessment incorporates developing a care plan aimed to facilitate potential change in a child’s life. To ensure that the assessment of particular aspects of the child’s circumstances is informed and influenced by a broad knowledge base as the developmental assessment is informed by the theories of development, strength perspectives, empowerment theories, social theory, systems theory, ecological theory and person centered approaches (Homan 1999; Howe 2009; Lesser & Pope, 2007; Saleebey, 2006). The involvement of a child in the assessment process recognizes that a child has “the ability to bring about change through his or her own efforts and beliefs” (Howe 2009, p. 165).

Systems theory sees a person as a part of a system in a reciprocal relationship with other elements which constitute the whole (Homan, 1999, p. 58). A person is seen to be in constant interaction with his or her environment at various levels. The various levels have an influence on the functioning of an individual and he/she also has an influence on the functioning of these environmental factors. The systems model identifies various levels which include a person at the lowest level of the model, followed by the “microsystem, mesosystem, exosystem and macrosystem” (Homan, 1999, p. 59).

During the process of interaction, an individual influences change in other parts of the system to establish a state of equilibrium. One of the features of a system is that there is constant change and there is an inclination to establish a new balance within the components of a system. Thus, a person is seen as one of the interrelated parts of a system that form a whole that influences change and constantly adapts whenever there is change within the system to maintain balance. Homan (1999, p. 59) supports this theory by seeing an individual as affecting his or her environment and thus as possessing a certain degree of power to influence change within the system. The systems theory concept of social change is similar to Marx’s as the inclination to maintain a “state of equilibrium”, which is equated to the “inherent power” that people have to

be influential, moves people to the point of creating change rather than being passive (Homan, 1999). The use of the developmental assessment tool to assess children, youth and families who become involved in statutory services reflects the aspect of systems theory, as the tool's four elements of belonging, mastery, independence and generosity are seen as interdependent. One of the desired outcomes of assessment is to develop a plan of action that will facilitate interaction between the child and the significant people. Such a plan of action can assist to break the barriers that constrain a family's interactions and transactions which are seen by the systems perspective as "opportunity structure of its immediate environment" (Broderick 1993, p. 57). The interaction and communication of the family is influenced by the syntactics which involve how accurately a message is conveyed; semantics which involve understanding the meaning of communicated messages and accurate empathy and pragmatics which looks at the impact of communication on behavior (Broderick 1993, p.47-48).

The strengths perspective theory uses the same premise as systems theory to guide intervention with individuals where they are viewed as active agents of change within their environment because they have the strengths, described by Saleebey (2006, p. 10) as "capacity, possibilities and resources", that can be tapped into to create change. Some of the principles of strengths perspectives theory that are central in the interaction with clients are the following: An individual, group, family or community has strengths that must be acknowledged by respecting them as individuals as well as respecting their potential (Homan 1999, p. 58; Saleebey 2006, p. 16). The use of this principle in practice may direct the social worker's intervention to identify strengths in individuals that can be used to contribute towards facilitating change in their lives. Engagement with individuals occurs within the premise that there is awareness and recognition of the assets within the community that are used effectively to meet the stated needs (Saleebey 2006, p. 19). Working from a premise that every environment is full of resources, the role of a social worker will be to assess the clients' environment critically to identify potential resources within that environment that can be utilized to facilitate change. Barbarin and Richter (2001, p. 270) draw attention to children's strengths, indicating that the "social risks do not always have a negative impact on the development of children as they have the ability to adapt to the circumstances they are faced with".

This observation concurs with one of the premises of the theories of development and systems theory which indicates that development is fluid as a child is part of a system and that the reciprocal influence resulting from the child's constant interaction with his environment constantly shapes the child's development (Saleebey, 2006). This process is referred to by Piaget as "accommodation of a situation to what may be similar to what one knows and organization of ideas into coherent systems" (Grain 1992, p. 122). However, Barbarin and Richter's (2001) view may not mean that since children are resilient it is, therefore, not necessary for them to receive intervention services when they go through difficult situations. Children in difficult situations require psychosocial support to build or enhance their resilience (Exchange, 2004). As the outcomes of development cannot be predetermined by the existing adverse circumstances, assessment should be used to improve the developmental outcomes by identifying developmental challenges. This will result in the provision of "variations to developmental impairment" by providing conditions conducive to development that help to minimize the negative impact of social risks and thus increase the chances of positive development (Barbarin & Richter 2001, p. 252). Barbarin and Richter (2001, p. 252) note that "children are resilient as they have innate abilities that include high cognitive abilities and perseverance that contribute towards negating the impact of social risks" (2001, p. 253). Saleebey (2006 p. 13-14) describes resilience as a process of the continuing growth and articulation of capacities, knowledge, insight and virtues derived through meeting the demands and challenges of one's world, however chastening". Thus, identifying these strengths and raising the children's awareness of these through counseling, coupled with other developmental interventions, will contribute positively towards meeting their developmental needs.

Adams et al. (2009, p. 212) notes that the "ecological framework rejects single factor approaches and maintains that the many contributing factors interact in four domains: within individual, through interpersonal relationships, in the community and wider society". He further indicates that effective assessment should amongst other things seek alternative explanations. This can be done by critically analyzing data obtained through assessment, exploring alternative explanations to the experienced challenges and developing alternative intervention plans to address these issues. The intervention plan can be used during the helping process to contribute towards change and Saleebey (2006, p. 82-84) indicates that it requires conducive conditions for growth and change which include people's strengths described as capacities, resources and assets. A

social worker needs to put more focus on these strengths and assist clients to recognize these which will assist the clients to use their strengths to facilitate change to their circumstances. Saleebey describes this form of intervention as “stimulating the discourse of narratives of resilience and strengths” (Saleebey 2006, p. 79). This process can be encouraged by a good helping relationship which provides suitable conditions to cultivate such a positive thinking. The helping relationship needs to apply the principles of the strengths perspective (Saleebey 2006, p. 79). It includes empowering clients by “assisting them to discover and expend the resources and tools within and around them” (Saleebey 2006, p. 11).

2.6. ASSESSMENT PROCESS

Compton, Galaway and Cournoyer (2005, p. 194) see assessment as involving “the collection, exploration, organization and analysis of relevant information for use in decision making about the nature of the problem and what is to be done about it”. It seeks to “ascertain which parts of a client’s life are critical and essential to understanding the client’s goals and aspirations for the treatment process” (Turner 2002, p. 104). An assessment undertaken using a strength-based approach, can be defined as “a process of highlighting important areas of strengths” (Turner, 2002). Assessment is also seen as attempting “to get a reading on the client’s overall person in a situation and breaking out the critical areas for attention in the treatment process” (Turner 2004, p. 104). It can also be used to “identify how strengths can be mobilized to support positive change, as well as how deficits and problems may be addressed” (Adams et al. 2009, p. 213).

Assessment can be seen as the first step undertaken by a social worker in the intervention process in an effort to understand the client’s environment, which will guide a social worker on aspects to be focused on during intervention. Hepworth, Rooney, and Larsen (2006) identify a series of processes to engage in, during the assessment process that include determining the unmet needs, considering the developmental stage of the client, determining if the agency or social worker is suited to provide services responding to the client’s needs, identifying client’s eligibility for services, making appropriate referral to other resources, developing intervention plan or goals, identifying resources available and those required to meet the goals and identifying skills required to execute activities.

The assessment can benefit orphaned children who become vulnerable as they have no parental care which may have a negative impact on their development and are susceptible to experience poverty because their source of income is eliminated once one or both parents die. The adverse effects of development can be eliminated by having a “better understanding of the conditions and factors that facilitate and promote the favorable development of children” (Barbarin & Richter 2001, p. 268). These factors will provide a guide on what to pay attention to when assessing the needs of children. These factors may include internal and external factors. Internal factors involve cognitive development, ability to form relationships, health status and external factors include availability of family, community support and resources within the community to address the developmental needs. Barbarin and Richter (2001, p. 270) note that these factors include “strengthening families through access to social grants and early childhood development programs”. Strengthening of families also involves providing supportive services that are responsive to their individual needs and empowering them to be self-sufficient through parenting skills and economic empowerment.

Parker and Bradley (as cited in Adams et al., 2009, p. 222) agree with Coulshed and Orme (2006) that for assessment the professional is required to have the following skills: communication, observational skills, an ability to recognize, systematize, synthesize and rationalize information gathering. Assessment is an ongoing process during intervention to continually re-evaluate progress made, determining if there is a need to change the course of action towards addressing the identified problem. Compton, Galaway and Cournoyer (2005, p. 196) note that it is a “dynamic process that continues until termination”. Adams et al. (2005) support Heron’s model of inquiry that builds in a reflection process in each phase of the assessment process (Heron & Reason, 2001as cited in Adams et al., 2009, p. 222).

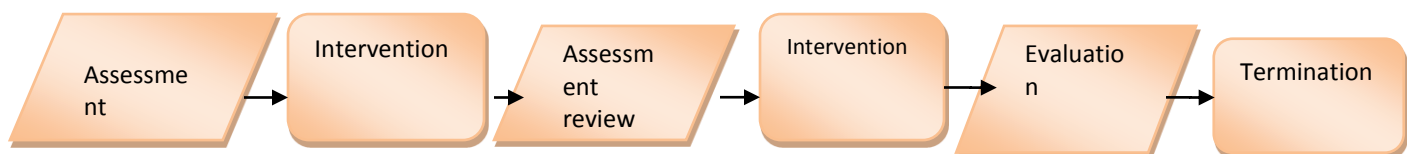


Figure 1: Assessment and intervention process in social work

Assessment requires a social worker to continually review the data already gathered in relation to the activities undertaken and emerging information (See Figure 1). This dynamic process should be evident in the research findings that should demonstrate that the assessment tool's design incorporates the concept of on-going assessment and that the developmental assessment process is not a once-off event as depicted in Figure 1. Adams et al. (2009, p. 213) see assessment within an ecological framework as “recognizing the unique influence and relevance of the immediate environment and interconnecting systems on an individual's situation”. However, Barbarin and Richter (2001) draw attention to the interaction that an individual has with his environment. This approach indicates that people are not passive recipients of influences from other elements in their environment but they also have an impact on their surroundings. Figure. 2 below indicate an interaction between an individual and his surroundings. Assessment must focus on each of these interactions. The outcomes of the assessment process can form the basis for continuous monitoring and evaluation of the effectiveness of intervention, which later contributes towards the assessment of the impact made by service delivery on the investment in children's development.

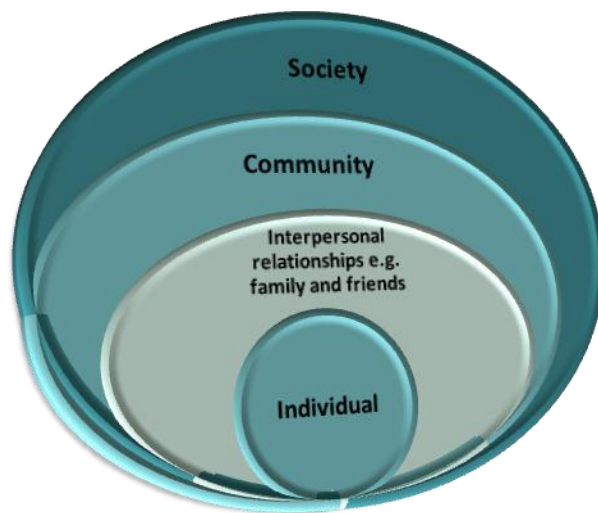


Figure 2: Interaction between an individual and the environment

2.7. CENTRAL ELEMENTS FOR FACILITATING THE ASSESSMENT PROCESS

2.7.1. FACTORS IMPACTING ON THE ASSESSMENT PROCESS

For effective assessment to take place, there are a number of issues that must be taken into consideration. There are limitations associated with assessment which include age, gender, level of cognitive development, language and culture which may influence the outcomes of assessment. A research study indicated that older children were more likely to receive services after an assessment compared to smaller children. (Bruhn, Duval & Louderman, 2008, p. 539). This may be due to the difficulty experienced when conducting assessment with younger children as they have shorter attention spans. Kirst-Ashman (2007) explains that cultural differences may impact on the assessment process that includes the interpretation of verbal and non-verbal communication.

When conducting assessments, the conventional assessment tools and theories of development may no longer be applicable to the current circumstances that children are faced with. Dashiff et. al., (2009) state, for example, that the “developmental stage called adolescent is not uniform as it is characterized”. If the conventional tools and theories are used in the current circumstances, there is a possibility that they may not be applicable and compatible which will raise a concern about the validity of the outcomes of that assessment. In a study conducted by Murphy and Maree (2006) reviewing South African research in the field of dynamic assessment, it was found that when conventional tests are used in isolation the validity of prediction decreases and information is not comprehensive in most instances. This is supported by criticism put against psychometric tests that include bias against the client’s cultural issues (Murphy & Maree, 2006).

2.7.2. MULTI-DISCIPLINARY ASSESSMENT

The provision of services within a welfare system needs to be accompanied by accessibility to developmental programs that are responsive to an individual’s needs. When customizing an intervention plan, there is a need to assess each child’s circumstances to be able to develop a plan responsive to the individual’s developmental needs. Assessment needs to be performed in an

environment that allows for the contribution of other professionals due to the complexity of a human being. Adams et al. (2009, p. 215) indicates that “an interprofessional coordinated approach to assessment should capture and address the complexity of individuals’ lives and allow those involved in the assessment to address issues from a wide range of perspectives”. However, practice indicates different experiences from what the ideal policies prescribe for intervention. Assessment occurs within organizations where tension exists regarding the allocation of time, the time required for assessment, the hidden costs that come along with the time spent by various professionals and the level of engagements by these professionals (Adams et al., 2009).

Adams et al. (2009) also noted a potential for conflicts due to some professionals having more power over others. Bruhn et al.’s (2008, p. 543) study highlighted the difficulty of “managing complex systems” and the importance of continuing to devote resources to the evaluation process promoting continuous quality service delivery. These challenges impact on the effectiveness of the assessment systems. These challenges indicate that service delivery is not designed to facilitate effective service delivery. This links to a question that was raised by Bruhn et al. (2008, p. 543) on the level of synchronized services “between the child welfare system and early intervention systems”.

The issues raised in this study are of relevance to the South African welfare system and other service delivery entities within government in facilitating multi-professional assessment services. The structural arrangements for facilitating a holistic approach to service delivery are faced with challenges that include governance, synchronization of services, lack of communication, lack of acceptance and trust of other professional judgments that are not of the same background, “unavailability of services in the area in question, lack of affordable transport to access the service, inability to pay a fee, and cultural or language barriers” (Coulshed & Orme, 2006; Lofell, 2007, p. 312). Other factors that may inhibit effective coordination of services within a multiprofessional setting as anticipated by the multidisciplinary approach are a lack of coordination due to unclear role clarification and responsibilities, existing bureaucracies and the lack of cooperation between agencies. Other assessment services may be expensive to provide as noted by Milner and O’Byrne (1998). As a result, under-assessment and limited access to assessment services may be prevalent. All these noted challenges need to be considered in the

evaluation and restructuring of assessment services and should be resolved through consultation with relevant stakeholders. Once these issues are resolved, the outcomes will contribute towards the development of a comprehensive, synchronized assessment system and the provision of effective structural arrangements for the facilitation of assessment services.

2.7.3. PARTICIPATION OF FOSTER CHILDREN AND THEIR FAMILIES

Assessment facilitates participation in the helping process as the emphasis of strengths and empowerment gives preeminence to the client's level of understanding of the facts; discover what the client wants and assess personal and environmental strengths on multiple levels (Hepworth et al. 2006). The assessment process is meant to involve the children and their families in the intervention process so they can have ownership of the process, thereby encouraging participation in the programs. Other authors share the same view as Fox et al. (as cited in Merritt, 2008, p. 1337) noting that if the children's views on permanency are neglected during the assessment and planning process then children receive messages that they are not valued. Compton et al. (2005) highlight the importance of good social work practice which incorporates the clients' which must be central in all interventions with children. Literature suggests that the inclusion of children in the decision making process, "encourages hope, self-respect and addresses a lack of concern for their inclusion in planning for their future" (Merritt, 2008, p. 1337). Children want to be empowered and provide some input regarding their treatment plan and desired placement outcomes (Merritt, 2008, p. 1337). The Children's Act makes provision for child participation to be central in social work intervention.

Coulshed and Orme (2006) noted that participation in the assessment reduces the power relations between a client and a professional. The participation of children in the identification of their strengths and acknowledgement of a need to develop by identifying developmental needs, contribute positively to their self-esteem, maximizing their potential and fostering self-reliance and ownership of the assessment process. In addition, the benefit of child participation includes an "increased belief in ability to achieve desired goals described in terms of self-confidence, a sense of competence or self-efficacy" (Griesel, Swart-Kruger & Chawla, 2009, p. 89). Katz

(1997, p. 3) noted that “unless children are consulted about their own views of their own progress, they cannot learn to assume responsibility for it”. More than that, the involvement of children in issues affecting their lives can facilitate change (Griesel et al., 2009).

2.7.4. PARTICIPATION OF FOSTER PARENTS

As indicated above, participation in assessment should be inclusive of all the significant people in a child’s life and one of those that are critical, is a prospective foster parent who will be the primary caregiver. Fisher, Ellis and Chamberlain (1999, p. 163) who identified the foster parents as “frontline interventionists”, indicated that foster parents must be trained in behavioral management and treatment strategies. It would be beneficial for a foster parent to be included in the assessment process to be able to understand where the child is coming from and understand the behavior that is displayed by the child. Wotherspoon and Petrowski (2008, p.2) say, for example, that “well-meaning foster parents may view some of these children’s behaviors as purposeful when in fact they are not”. Awareness of this information will assist the foster parent to respond to the child’s behavior and their interaction in a way that will contribute towards building a trusting relationship with the child and contributing towards the helping process through positive guidance and support to the child. It will also foster a sense that they are change agents in the helping process. The involvement of foster parents in the assessment process is one of the strategies that can be developed with foster parents as recommended by Wotherspoon and Petrowski (2008). Other roles that may be undertaken by foster parents during the intervention process include participating in capacity building sessions on the developmental assessment tool which will assist them to gain an understanding of the tool, sharing information with the social worker through their observations made on the child’s behavior and progress, assisting the child to access the services identified in the care plan that may include attending therapeutic counseling sessions, group sessions, developmental programs, health care and educational services.

2.8. NEEDS OF CHILDREN IN FOSTER CARE AND THE EFFECTS OF UNDER-ASSESSMENT

Children are placed in foster care because they are in need of care and protection due to circumstances that may have created instability in their lives, rendering them vulnerable. In a study conducted in South Africa by Cluver, Gardner and Operario (2007, p. 755) on the psychological distress amongst AIDS-orphaned children in urban areas, it was found that “children orphaned by AIDS may be a particularly vulnerable group in terms of emotional and to a lesser extent behavioral problems”. The literature review conducted for the same study indicated that these children also experienced multiple losses, stigma, depression, suicidal tendencies, post-traumatic stress symptoms and peer problems. This indicates that these children are vulnerable and in need of and protection that will result from a comprehensive assessment of their situation, from receiving responsive services and from being within a nurturing and caring environment. Under-identification of developmental delays among young children by child welfare systems has been widely documented (West, Richardson, LeConte, Crimi & Stuart as cited in Bruhn et al., 2008). South Africa’s experiences are not isolated from other countries as it is documented that children who are raised in impoverished environments and in extreme deprivation are likely to show cognitive impairment as well as attachment difficulties (Vogel & Holford 1999, p. 184). In a study conducted at Tara Hospital, it was found through assessment that 35% of children from the sample had learning disabilities yet only 2.2% received remedial education (Vogel and Holford 1999, p. 183). These statistics indicate the importance of conducting an assessment and providing adequate services to respond to the identified needs.

There is documentation of the prevalence of developmental delays and stressors experienced by children who may end up being placed in foster care or other forms of alternative care. Children in foster care were reported to be demonstrating developmental delays that include physical, developmental, emotional, behavioral, educational and mental health problems (Bruhn et al., 2008; Pediatrics, 2000; Leslie, Hurlburt, Landsverk, Rolls, Wood & Kelleher, 2003); Delilah (2008) notes that in a study conducted by Burns it was found that children who were involved in child welfare services who had suffered conditions such as neglect and poverty necessitated a greater need for mental health services. She further indicated that children in foster care face

many educational obstacles because of frequent moves which affect their performance educationally. It was also reported that neglected children experience poor attachment, developmental delay, poor physical development and antisocial behavior (Pediatrics, 2000). Delilah (2008) notes that these children may experience numerous feelings that may include confusion, fear, apprehension of the unknown and loss. These findings indicate that children are vulnerable to various psychosocial challenges that may affect their development. These issues need to be addressed as soon as possible to prevent or decrease poor developmental and mental health outcomes that may ultimately affect a child's educational experience and their quality of life in adulthood as they leave school earlier and unprepared to live independently (Delilah, 2008; Bruhn et al., 2008).

The children in foster care who may be seen as more vulnerable are those who are about to exit the foster care system. Some of these children who have no family of origin may find themselves homeless and, with no work experience, also jobless and they would have a higher dependency on government for support (Vacca, 2008; Casey Family Programs, 2007; Trout, Hagaman, Casey, Reid & Epstein 2008). It has been established in research that, many inner-city African American adolescents undertook adult-like roles at a very early age (Dashiff, DiMicco, Myers & Sheppard, 2009). In a study conducted by Chiroro et al. (2009, p. 56-61) it was found that the youth who "aged out of the foster care system experienced socio-economic hardships. Their main challenge related to financial strains and the financial difficulties that included having many debts to pay off, having no income or having only one income which was not sufficient to provide for their basic needs; and not being able to afford the basic necessities". They also "had problems finding employment" and of those who had a source of income," earned a low income of between R300 and R500 a month".

These findings may mean that there was no thorough preparation for independent living leading to these youths experiencing difficulty establishing themselves as independent young adults and as a result they live in poverty. These findings suggest that there is a possibility that the need to prepare these youth for independent living was not identified and as a result they were not prepared to function independently. Avery & Freundlinch (2008, p. 2) confirm the above findings that "youth who are at this stage are not prepared to be independent, because they are at

a period where they are making progress toward independence rather than achieved independence”. These findings indicate that the effects of non-assessment may have far reaching effects on the foster children’s quality of life.

2.9. PROFESSIONAL RESPONSE TO THE NEEDS OF CHILDREN IN FOSTER CARE

Sakamoto and Pitner (2005) argue that social work practice can be informed by the context within which the practice is located which could include political, social or multicultural influences. This is evident in South Africa’s social welfare system. An important aspect raised in their discussion is that critical consciousness is central to social work practice and involves “continuously examining how our own biases, assumptions and cultural worldviews affect the ways we perceive difference and power dynamics” (Sakamoto & Pitner, 2005). This approach can assist social workers to continuously review their approach to service delivery and whether it contributes towards the present socio-cultural and political demands placed on the communities and if it ultimately contributes towards their social development.

The assessment process must be located within the social work practice as one of its professional responsibilities. This can be seen from the definition provided by Zastrow (2010, p. 66) of a “professional practice as involving the dynamic processes of engagement, assessment, intervention and evaluation at multiple levels”. This definition indicates that assessment is one of the professional obligations to be provided to clients. To facilitate this professional role, social workers need to view assessment as an activity undertaken to facilitate change in their clients’ lives. Zastrow (2010, pp. 70-71) defines this activity as “change process” by undertaking an “enabler role aiming to help individuals or groups to articulate their needs, clarify and identify their problems and to explore resolution strategies”. The application of these processes should occur in all the cases that a social worker undertakes and should become second nature to practice. The literature indicates mixed experiences which vary from the effective use of assessment tools to non-use of these. These varying results may be due to the prevailing conditions in different settings such as the structural arrangements and availability of resources that either facilitate or impede an enabling environment in which to conduct assessments.

2.9.1. NON-USE OF THE ASSESSMENT TOOLS BY PROFESSIONALS

It is documented that social workers tend not to use the assessment tool. It is noted that child welfare systems, historically, have not been effective in their response to the developmental needs of children through identification and treatment (Leslie et al., 2003; Bruhn et al., 2008). The evident gaps include lack of identification of need, lack of expertise, inadequate evidence, gaps in information, lack of referral for service and linkage with service providers and delivery of services. As a result close to a quarter of children were reported to receive half of the recommended services (Milner and O'Byrne, 1998; Bruhn et al., 2008). In a review of studies focusing on the rates of service delivery, conducted by Bruhn et al. (2008, p. 539), they noted that these studies did not "address the question of how service delivery is mediated by assessment for and identification of probable delay within the context of the child welfare system".

The reasons cited for non-use of an assessment tool by Adams et al. (2009) were the complexities of individual situations and organizational arrangements, lack of recognition of known risk factors, lack of systematic investigation and assessment of available information, concentration on the immediate rather than carefully evaluating both long term and short term evidence, reluctance to revise initial assessments in the light of new evidence and the lack of drawing all the complex information together, documenting sources, considering the impact over time on the child and synthesizing updated information. One of the objectives of this research study is to identify reasons that inhibit the use of the assessment tool and it will be interesting to find out if the respondents' experiences are similar to those indicated in the literature or not. The study should also indicate the unique conditions that contribute to these experiences.

The identification of problems at a later stage leads to accessing programs late, which means that children "miss an important opening for early intervention and prevention of compounding already present difficulties through the stress and distress created by placement change" (Milburn, Lynch & Jackson, 2008, p. 33). Harden (2004) noted that for foster children who are already vulnerable from experiences of maltreatment, and other environmental risk factors like poverty, development is further compromised if they experience more trauma and instability

while in care. If the negative situation continues without an appropriate response there is a possibility that the foster care placement may breakdown. Literature reviewed by Harden (2004) indicates that one third to two thirds of foster care placements are disrupted within the first two years of placement.

Foster children who are about to exit the foster care system may be unprepared to leave independently because “these children may not be fully evaluated” to determine their needs and may lack planning for the achievement of long term needs that include preparation for independent living and “as a result they may be denied adequate services” (Vacca 2008, p. 488). The long term effects may contribute to the foster children being unable to cope and live independently within the society when they age out of the system. Such circumstances were also noted by Rashid, Doherty and Austin (2001) when this group of foster children was expected to be independent and self-sufficient they struggled to become so because they experienced challenges that included the lack of employment, homelessness, mental health problems, and substance abuse problems. As a result, these youths’ right to social inclusion is infringed upon as they are reintroduced into the cycle of poverty. This emphasizes the importance of conducting a thorough assessment at the right time that would influence the development of a care plan and a permanency plan that would guide intervention. The intervention would be guided to prepare foster children to be psychologically stable, enhancing their social skills and developing the necessary skills and knowledge to participate actively in the economy, thus facilitating independent living and ultimately contributing toward reaching the objective of social development.

2.9.2. USE OF ASSESSMENT TOOLS BY PROFESSIONALS

Bruhn et al. (2008) conducted a study on the centralized assessment system used for assessment of young children in foster care. They described the centralized system as “a system of screening that relies on screeners who are specifically employed and trained to carry out this purpose” (Bruhn et.al., 2008, p. 538-543). The findings indicated that a “centralized programme of assessment for early childhood developmental delays resulted in higher rates of screening and identification of developmental delays of young children in foster care than in the absence of centralized systems”. This meant that children were more likely to be referred and evaluated for

early intervention services and the rate of service delivery exceeded expectations. Further, findings indicated that there was a change from office-based assessment to a home-based assessment, facilitating access to the programme. In a study conducted by Leslie et al. (2003) it was found that policies that are inclusive were related to the primary location of assessments.

They also noted that the significantly high rate of problems among children in foster care and the possibility of unmet needs suggested the importance of early assessment. The findings, that incorporate under-assessment, assessment of children and factors impacting on assessment, indicate that the facilitation of assessment is not merely dependent on the professionals' abilities or willingness to provide such a service, but are influenced by other factors that may not be in the control of these professionals. It would be interesting to establish the experiences of the respondents regarding this matter as the South African legislative framework through the Constitution and the Children's Act encourages intersectoral collaboration.

2.10. ASSESSMENT INSTRUMENTS

Compton et al. (2005, p. 217) states the importance of using the assessment instruments as "facilitating data collection, aid in organizing and processing data and contribute to decision making". During assessment volumes of information can be obtained and a social worker needs a mechanism to solicit information through interview schedules or questionnaires, to package it for analysis and to make decisions that may include developing an action plan and/or referring a client to relevant service providers. The instruments used need to be valid, reliable and practical. Compton et al. (2005, p. 217) say such instruments need to be "carefully reviewed for validity, reliability, relevance, linguistic and cultural sensitivity". Compton et al. (2005) highlight that instruments used for decision making are usually used to measure some concept like anger, or social support. This suggests that the assessment should be structured. However, it may be argued that the use of structured measuring tools may not be "applicable in all human circumstances as there are other elements that cannot be measured as they may not be valid and reliable for other populations" (Compton et al. 2005, p. 218).

Children placed in foster care as young as babies require to be assessed to determine if there are any developmental delays. Dicker and Gordon (2004) suggest that there should be information

available about the infant's birth and immunization records, and results of screening for metabolic, endocrine, hearing and genetic disorders. An article written by Exchange (2004) notes that the development strategies towards HIV and AIDS are inclined to provide services for older children and youth, ignoring younger children whereas they are also vulnerable to psychological, health and social stressors associated with it. These challenges indicate a need for a comprehensive assessment of the children's needs as early as from infancy. These findings indicate that children are vulnerable to various psychosocial challenges that may affect their development. Bolton (2001); Milner and O'Byrne (1998) provide tools for assessment displayed in Table 1 and 2. The assessment tool in Table 2 appears to be influenced by systems theory as it incorporates the assessment of the individual and other systems that an individual interacts with. It can assist a social worker to collect in-depth data during assessment.

Box 1: Classification of developmental disorders. Severity of retardation Pervasive developmental disorders (e.g. autism, disintegrative disorder). Specific developmental disorders (speech and language, literacy, motor coordination)	Box 2: Assessing communication skills Milestones (first words, phrase speech) Functioning at age 4-5 years (understanding complexity of instructions followed) Pragmatics (Narrative skills, gesture, linking verbal and non-verbal communication).
Box 3: Evaluation of social skills development Milestones (social smiling) Functioning at age 4-5 years (Integration of facial and vocal expressions of emotions) Current functioning (understanding of emotions)	Box 4: Assessing the developmental interests, activities and play Milestones (joint interactive play, parallel play) Functioning at age 4-5 years (social aspects: playfulness; cognitive level: curiosity, complexity) Current function (collecting and hoarding)
Box 5: Observational and cognitive assessment Observational assessment (settings with family, cognitive testing, school/assessment unit) Cognitive evaluation (social maturity, play, intelligence, motor coordination)	Box 6: Making a diagnosis Determine age, intellectual and cognitive level Identify relevant medical conditions Identify relevant psychosocial factors.

Table 1: Framework for assessing development (Adapted from Bolton, 2001)

	Person	Partner	Family	School/Work	Home environment	Community	Society
Historic							
Physical state							
Behavioral							
Cognitive							
Affective							
Relational/ interactive							
Risk							

Table 2: Data collection grid (Extracted from Milner and O’Byrne (1998))

2.11. IDEAL STRUCTURE OF AN ASSESSMENT INSTRUMENT

The literature strongly suggests a multi-professional approach to assessment. This approach requires the involvement of various entities which requires that there should be a clearly defined structure for facilitating the provision of assessment services. The following suggestions were made by various authors on how the assessment context should be constituted. Adams et al. (2009, p. 220) provides a list of critical issues that need to be thought through and agreed upon by the agencies involved regarding the formulation and the structure of the assessment system. These issues include accountability, coordination and sharing of information, confidentiality, norms and standards for assessment, administration, clarification of roles and responsibilities, legal and funding issues. These elements need to be negotiated amongst all the role players to lessen tension and promote synchronized assessment services.

The suggested general principles of assessment should include participation of clients and significant others to ensure that their rights are not infringed and to facilitate an interactive intervention process (Pediatrics 2000; Bolton, 2001; Milburn et al., 2008). In preparation for assessment, Milner and O’Byrne (1998) recommend that social work assessments could be improved by having a clear statement of intent, accountability values, a systematic approach to data collection, development of multiple and testable hypotheses, decisions that lead to measurable outcomes and consumer feedback. Pediatrics (2000, p. 1147) suggested that a

comprehensive assessment needs to be conducted even after placement in foster care which must include the assessment of various components of an individual looking at how these interact and make use of age appropriate validated instruments. The assessment must be able to anticipate possible risks and focus on early identification and interventions. The assessment tools used must be culturally sensitive, child sensitive, child welfare sensitive, compact, efficient and be able to be completed within a reasonable amount of time. Adams et al. (2009, p. 219) indicated that the “assessment and other records should be capable of expansion to take account of complex, changing needs over time and the involvement of new agencies”. The assessment process should focus on assessing the child’s early development, description of strengths, weaknesses and current abilities, obtaining previous assessments and multi-disciplinary evaluation (Pediatrics 2000; Bolton, 2001; Milburn et al., 2008).

The availability of checklists for strengths and problematic behaviors facilitates the assessment process (Compton et al., 2005). They also suggested that a professional has a responsibility to know the assessment tool thoroughly. This will assist the professional to prepare for the assessment by taking into consideration the elements that may impact on the assessment process and decide on possible strategies to use that will minimize the impact of these influencing factors. To reduce the risks of error or bias Coulshed and Orme (2006) suggest that the professionals must improve their self-awareness regarding their over optimism and rationalization of data; getting supervision to help release blocked feelings and treating all assessments as working hypotheses that have to be substantiated with emerging knowledge. Preparation for assessment can assist professionals to have an “awareness of potential errors of each evaluation or assessment strategy to help minimize errors in interpretation” (Katz, 1997, p. 2). Katz also notes that there should be a balance between global or holistic evaluation and detailed specific assessments of young children.

Coulshed and Orme (2006) recommend that there should be a system for monitoring the assessment process. Noble et al. (2007) note that the benefits of this include improving accuracy from feedback received and reducing discriminatory and oppressive intervention through team assessments. This process involves monitoring the facilitation of an assessment process by a professional which could be facilitated through supervision or team assessments. It will also

assist the social workers to provide adequate supervision to children in state care which is important (Noble et al., 2007). Dicker and Gordon (2004, p. 14) emphasize the importance of conducting impact evaluation as they recommended that “the developmental assessments for children in foster care should include an evaluation of the quality of foster care environment and the planned permanent family as well as re-evaluation of the child’s developmental progress and care-giving needs periodically and at every change in placement”.

2.12. DEVELOPMENTAL ASSESSMENT TOOL USED IN SOUTH AFRICA

The developmental assessment tool used in South Africa was influenced by the Circle of Courage Model of Youth Empowerment developed by Mr. Martin Brokenleg, Mr. Larry Brendtro and Mr. Steven Van Bockern (Circle of Courage, 2002). It is a strength-based model that is “grounded in contemporary developmental research, perceptive insight in early youth works pioneers and Native American philosophies of child care” (Van Bockern, Brendtro & Brokenleg, n.d, p. 3). The developmental assessment tool encompasses various approaches which include the ecosystems, strength- based, developmental and economic-based approaches. The Inter Ministerial Commission on Young People at Risk was established to implement Project Go to “manage the process of crisis intervention and transformation of the Child and Youth Care System and to ensure “that children are not moved deeper into the Child and Youth Care Centres” (Department of Social Services and Population Development, n.d, p. 240-241) . For example in the event of foster placements breaking down, there was likelihood that the foster children would be transferred to a Child and Youth Care Centre.

The developmental assessment tool had a limitation in that its use was limited to foster children who had the likelihood of being transferred to a Child and Youth Care Centre, as a result there may have not been a standardized use of the developmental assessment tool in all foster care cases. It is only recently that developmental assessment was regularized for foster care through the requirements of section 157 of the Children’s Act 38 of 2005 now requires for a developmental assessment of children who are brought before the court for placement in alternative care. The abovementioned developmental assessment tool’s limitation may have presented a problem in practice which forms part of this research study’s inquiry aiming to

establish the social workers' experiences using the developmental assessment tool when rendering foster care services.

The statutory involvement in a child's life is restrictive in its nature as the child's usual environment may be altered. The use of a developmental assessment tool may be beneficial to "determine the least restrictive and most empowering environment and programme suitable to the child and or family's developmental needs at any given moment" (IMC 1999, p. 9). The assessment tool makes provision for an intervention plan to be developed, which facilitates the process of minimizing the impact of change created by the statutory involvement in a child's life. It can also make recommendations regarding the type of services that should be accessed that will address the child's developmental needs. The IMC identified the following objectives of the developmental assessment tool: To understand the strengths and immediate care, protection and developmental issues for children; to make a recommendation with regard to the intervention plan and decide on the least restrictive and most empowering intervention option (IMC 1999, p. 10).

The IMC underpinned the developmental assessment tool on the following principles: Each human being has strengths. It focuses on the strengths of an individual as a basis to facilitate development, acknowledging that they have potential that can be harnessed. Focusing on the strengths of a client encourages a sense of worth and provides hope that their circumstances may change for the better. This is important as it encourages the client's participation in his or her development provided that there are opportunities presented to promote development. Each human being has an immense potential to be whole and to be effective within their daily living experiences. It acknowledges the circumstances that people live in and aims to build on and maximize the resources they have. Since the statutory involvement in a child's life creates change, there is a need to create stability and normalize his or her environment. The developmental assessment contributes towards the creation of stability in a child's life by having a plan to work towards, becoming more resilient and having a general healthy development (IMC 1999, p. 34).

The developmental assessment tool is based on a belief that an individual's circle consists of belonging, generosity, mastery and independence. These four parts must be intact and if there is one part that is not strong, other areas suffer, resulting in emotional and behavioral difficulties (Circle of Courage, 2002). This model is similar to the systems theory that sees a person as a system with interlinked parts. If one of these parts is not functioning well, it will cause disequilibrium to the whole system. The four parts are described below (Circle of Courage, 2002; IMC, 1999): Belonging relates to a well-developed sense of belonging, a desire to feel connected to others, feeling valued, important and protected by others. It is considered to be the most important component in the circle upon which the others are based. If a person does not have a good sense of self, the other areas of his or her life will not develop fully. The family and immediate community like the school, church, local social groups would have the most important influences on the development of a child's self-esteem. If this area is compromised, the child may make connections with negative influences attempting to feel important and accepted within a social structure.

Mastery is a feeling of being competent in one's abilities, seeking more skills and knowledge and being willing to try new things. If this element is lacking, a child might feel a sense of failure and be afraid to try an unfamiliar task due to fear of failure and a low self-esteem. Independence relates to a strong sense of control of self, one's behavior and one's life. There is a well-developed sense of autonomy, accept responsibility for themselves and actions. If this element is compromised, a child would be easily influenced by others and blame circumstances/others for his or her actions. Generosity refers to the empathetic feeling towards others and wanting to help them and receiving pleasure from helping others. If this element is lacking, a child might be stingy, wanting to receive instead of giving. The model requires a 'reclaiming environment' to facilitate change in the child's circumstances. This environment may include an appropriate and responsive intervention informed by assessment and the availability of resources (Circle of Courage, 2002).

The developmental assessment tool structure has the following properties (IMC, 1999): It has a care plan that is developed after synthesizing data collected through an Individual Development Plan (IDP). This data is translated into a care plan that is discussed with the clients that will guide the social work intervention to address the developmental needs of the child. There is a review of the care plan that must be conducted after 6 months to assess if the intervention strategies yielded any results. If there are any results they should be assessed to see if there is a need to continue with the plan as it is or whether it should be revised based on the issues that emerged or changes that occurred in the client's life. This must be reviewed and agreed upon with the client, significant others and other professionals involved. (Refer to Appendix E). Lastly, it has a placement review format aimed to ensure that the IDP meets the young person's developmental needs (Department of Social Services and Population Development, n.d, p. 279). The assessment guidelines highlight the importance of identifying a purpose for assessment and specifying the intention of the report. They also emphasize the importance of a strength based approach indicating that strengths must be identified as a priority. The guidelines emphasize the involvement of the family and the use of a multi-disciplinary approach when gathering information, identifying risks to the child's development, identifying alternatives to address broad developmental issues within legal constraints, identifying specific developmental goals within the care plan (Department of Social Services and Population Development, n.d, p. 279).

The developmental assessment tool also guides a social worker to identify developmental outcomes desired and developmental needs in each of the four aspects as indicated in Table 3 (Department of Social Services and Population Development, n.d., p. 248). To illustrate this, when a child has a developmental need for belonging observed through the unattached behavior, a social worker can be guided to identify the child's needs associated with those indicated in a Table and can identify relevant developmental outcomes desired like developing attachment with significant others.

	BELONGING	MASTERY	INDEPENDENCE	GENEROSITY
DEVELOPMENTAL OUTCOMES DESIRED	Attached Loving Intimate <i>Relationships of trust/intimacy.</i>	Achiever Creative Motivated	Self-discipline Responsible <i>Develop skills and confidence to assert positive leaderships and self-discipline.</i>	Sharing Caring <i>Experience joy of helping others. Ubuntu</i>
INDICATES DEVELOPMENTAL NEEDS	Unattached Clinging Aloof	Non-achiever Gives up easily Over achiever	Undisciplined irresponsible	Selfish affectionless

Table 3: List of developmental outcomes desired and developmental needs (Adapted from Project Go Developmental Approach. Department of Social Services and Population Development, n.d., p. 248)

2.12.1. ANALYSIS OF THE DEVELOPMENTAL ASSESSMENT TOOL

Looking at the recommendations of various authors on the qualities of an assessment tool, the developmental assessment tool has some acceptable standards. The tool creates an opportunity for participation of the child and significant others during the cycle of assessment and intervention process. This can be seen from the requirement for the development of an IDP. The four elements of the IDP allow the professional to conduct a comprehensive analysis of the client looking at the child and his or her environment's immediate, intermediate and broader elements. Its limitation might be the professional's interpretation of these elements in relation to the client's situation. The IDP assists the professional to develop a care plan after synthesizing data. The care plan must tabulate the activities that need to be undertaken and time frames for completion of these activities. The tool also incorporates a mechanism for a professional to monitor the assessment and intervention process. The review of a care plan is meant to be used to synthesize data collected through assessment and review this in relation to the outcomes of intervention provided during the specified period. It also incorporates a mechanism for supervision of the client using the activities identified, the time frames provided in the care plan

and the review of the care plan. Panel discussions that consist of a multi-disciplinary team is a mechanism incorporated to facilitate the review and to ensure that it's intended purpose is executed.

2.13. CONCLUSION

This chapter presented a historical background of social welfare in South Africa indicating the influence of politics and the evolution of social welfare in South Africa. The theoretical framework for a developmental social welfare and the legislative framework in South Africa were discussed providing a foundation for a discussion on social work intervention with particular reference to the assessment of children in foster care. A discussion on the manifestation of social development emphasized the importance of structural issues that must be in place to realize its implementation, that include recognition of people as multifaceted beings, social change, integrated approach and intervention strategies and the important elements for a development state that were identified by Kondlo (2010).

The literature review also presented the theoretical framework and a body of knowledge on the assessment of children based on researches conducted on the subject. The literature indicated varying experiences that are manifested in practice by professionals around the assessment of children who are placed in foster care. These included research around challenges experienced by children in foster care, assessment and under-assessment of foster children and its implications, the practice of multi-professional assessment and its implications, the challenges brought by structural arrangements and practice in the assessment of children and the assessment tools used in practice. The literature indicated that the use of relevant theories and approaches, policies, availability of resources, skills and knowledge of professionals on assessment, and the use of appropriate assessment tools are important for the facilitation and sustenance of effective assessment and intervention processes. The review also brought up interesting debates on the subject for instance exploring the use of assessment as an intervention strategy to facilitate and contribute towards the social development of communities. Such debates will be discussed in the following chapter in relation to this research study with the aim of finding alternative explanations to the experiences of social workers using the developmental assessment tool.

CHAPTER 3

RESEARCH DESIGN AND METHODOLOGY

3.1. INTRODUCTION

This chapter will provide a description of the research design and methodology used to achieve the objectives of the research study. It will focus on the research methodology, research design, sampling procedure, method of data collection, research instrumentation and data analysis. It will also outline the limitations experienced during the course of the research study. Lastly, it makes reference to the ethical research considerations.

3.2. AIM OF THE STUDY

The main aim of study was to gain an understanding of social workers' experiences surrounding the use of a developmental assessment tool for determining the needs of foster children.

3.2.1. OBJECTIVES

The objectives of the study were: To determine social workers' knowledge and understanding of the developmental assessment tool. To identify reasons that inhibits the use of the developmental assessment tool; To explore social workers' views about the factors contributing to the tool not being used; To identify the challenges that social workers face in using the tool.

3.3. RESEARCH METHODOLOGY

The nature of the research topic required a qualitative research methodology to be used to gather data that would provide in depth understanding of the respondents' experiences. The research aimed to gather in depth information that would provide answers to the research question which is; what are the social workers' experiences using the developmental assessment tool when rendering foster care services? This methodology was used because it was an effective strategy that enabled the researcher to collect data that captured the respondents' experiences, perceptions

and thoughts without being intrusive (Grinnell, 1988). Neuman (1997, p. 115) describes it as a process that “seeks to discover” the meaning attributed to the respondents’ experiences. The qualitative research method provided the researcher an opportunity to describe the phenomenon studied in a less structured manner (de Vos et al., 2005).

3.4. RESEARCH DESIGN

The strategy that was used in this research was phenomenological design. Fouche (2002, p. 270) defines “phenomenology”, as a research strategy which “aims to understand and interpret the meaning that subjects give their everyday lives”. This strategy assisted the researcher in discovering the experiences of selected respondents who had used the developmental assessment tool through the data collection method of one on one interviews. This was explained to the respondents as allowing the researcher to ‘enter their world’.

de Vos further explains that it “involves systematic data collection of meanings, themes, general descriptions of the experience analysed within a specific context” (de Vos, 2002, p. 273). The exploratory nature of the research was utilized to capture and to seek explanations of the respondents’ experiences of using the developmental assessment tool. The exploratory nature of this form of research prompts the researcher to “consider alternative interpretations of data” de Vos et al. (2002, p. 357). Grinnell (1988, p. 328) concurs on the nature of exploratory studies that they “aim to generate tentative insights and explanations which can then be studied more rigorously at other levels of research”. The research provided an opportunity to the researcher to interpret data as described by the two authors with the aim of providing in-depth understanding of the experiences by linking the various data obtained. During the analysis process, the researcher linked data obtained from the participants and the literature reviewed on the subject and came to a conclusion that some of the social workers may have not used the developmental assessment tool regularly. Grinnell and Unrau (2011) refer to the process of ensuring trustworthiness of the research as triangulation.

3.5. SAMPLING PROCEDURE

The sampling procedure used was purposive that is a type of non-probability sampling strategy. Purposive sampling involves the selection of a sample for observation that is known to have the

potential of providing the most comprehensive understanding of the subject studied (Rubin & Babbie, 2005). The sample selected consisted of social workers working with foster care that have been exposed to the developmental assessment tool. The sample was drawn from the social workers located in the Far East Rand at Ekurhuleni and ten (10) respondents were interviewed for the study. Fouche (2002, p. 273) explains that when phenomenology is used as a strategy for conducting research a researcher utilizes “long interviews (with up to ten people) as methods of data collection”. However, Patton (as cited in Strydom and Delport, 2005, p. 328) indicates that “there are no rules for sample size in qualitative enquiry. The sample size depends on what you want to know, the purpose of the inquiry ...what will be useful and what can be done within the available time”. Patton’s view emphasizes that research is about the nature and saturation of data that is obtained compared to the quantity of interviews conducted for purposes of quantifying the research findings.

3.6. METHOD OF DATA COLLECTION

The research study utilized semi-structured interviews as a method of data collection since the interview schedule was formulated to focus on essential questions but also allowed the researcher to ask questions that were not pre-determined to obtain further explanations of data obtained (Grinnell, 2002). This method of data collection was useful in this type of research because it helped the researcher to “follow up particular interesting avenues that emerge in the interview” (Greeff., 2005, p. 296). The interviews were flexible enough to gain more in-depth information without being limited by the presence of an interview schedule, as probes and follow up questions were used to seek clarification of responses that were unclear during the interviews. Face to face interviews were used during the data collection process that took approximately an hour. This method of data collection allowed the participants to relate their experiences and thoughts without many limitations that may have been presented by a structured interview.

The researcher developed an interview schedule following guidance from the research objectives, formulating questions that would assist the researcher to obtain information from the participants that would yield the required information to respond to the objectives of the study. The interview schedule was consulted with the supervisor which was also submitted to the

Graduates Research Committee. Inputs received from these experts were incorporated to the interview schedule. Strydom (2005) emphasizes the value added to the research by obtaining inputs from the experts which may include assessing the feasibility of the study and the practicality of using the interview schedule. Grinnell and Unrau (2011) add that the consultative process enhances the credibility of the study. Obtaining inputs from experts improved the quality the research tool and subsequently of this study.

The research tool was piloted with two respondents to test the suitability of the interview schedule and its effectiveness to yield the required data (Strydom, 2005). This process provided an opportunity for the researcher to identify and rectify the gaps that existed by refining the wording used to improve the clarity of questions asked. The outcomes of the pilot study indicated that the research instrument was efficient, reliable and yielded the anticipated results. The outcomes of the pilot study were discussed with the researcher's appointed supervisor. The responses from the pilot study will be included in the analysis and findings of the total study.

3.7. RESEARCH INSTRUMENTATION

An interview schedule was used as a research instrument during the study. It contained questions which Greeff (2002, p. 302) describes as providing "a set of pre-determined questions that might be used". The interview guide had parameters which included a demographic profile and the questions exploring the experiences of respondents when using the assessment tool. Data collected from the abovementioned questions, were used as a guide for formulating themes during data analysis. The questions asked were clear without any ambiguity with the purpose of eliciting clear and specific responses, as Rubin and Babbie (2005, p. 209) warn against the use of ambiguous questions because some researchers may "personally identify with a complex question".

3.8. DATA ANALYSIS

Data analysis is a process of synthesizing, interpreting and providing explanations of the phenomenon studied. A thematic content analysis was used for data analysis. de Vos (2002, p. 340-344) identified the guiding steps that are interactive and so do not limit the researcher to a linear procedure and which can be used interchangeably in data analysis. These are: planning for

recording data, data collection and preliminary analyses, managing data, reading and writing memos, generating categories, themes and patterns, coding data, testing emergent understanding, searching for alternative explanations and writing a report. The method used to analyze data required the researcher to formulate themes which were extracted from the emergent and salient issues and informed by the questions in the interview schedule and the objectives of the study. Strydom (2005, p. 282) notes that the “problems experienced with data analysis depend mainly on the degree of structure given to the research process”. The interview schedule was not too rigid for the interviews yet it provided a framework for analyzing data. The researcher transcribed data from the tape recordings for interpretation. This provided the researcher an opportunity to engage with and be immersed in the data. de Vos (2002, p. 344) says that this process provides an opportunity of heightened awareness of the data and openness to subtle messages that are central to identifying and organizing data into themes, categories and patterns.

Grinnell and Unrau (2011, p. 462) indicate that the trustworthiness of the research can be established by “specifying the context of the interviews” and how this is incorporated to the analysis of the data. An example is provided by Grinnell and Unrau (2011, p. 463) indicating that “data collected later in the study may be more relevant than those gathered in the beginning”. All the interviews took place within the similar context whereby the researcher had one on one interviews with the participants. Some of the findings derived from the individual interviews from the beginning of the interviews up to the last interview which formed part of the themes were consistent which confirmed the experiences of the social workers interviewed.

The researcher used a color coding system to classify information into different themes and categories. Using these various forms of organizing data helped the researcher to differentiate amongst the various categories identified and to link the data in an effort to establish relationships amongst the themes and to provide alternative explanations of the reported experiences. de Vos (2005) suggested that the reorganized data needs to be read over again in order to immerse the researcher in the data and as a result a different understanding and interpretation of the data may emerge. The researcher also identified “salient themes, recurring ideas and patterns of beliefs that link people and settings together” (Strydom & Delport, 2002, p. 344). When categorizing the data, the researcher also looked for meanings in the responses

expressed by the participants that are consistent and distinct from one another and reflected an interaction between or an existing relationship amongst the data and the complexity of these findings provided alternative explanations (de Vos, 2005). Emergent understandings were incorporated into the larger constructs providing an opportunity to search for alternative explanations through the constant engagement with the data. During the process of data analysis the researcher evaluated whether the obtained data provided an answer to the research question through constant linkages amongst the themes/variables. This process provided an opportunity for developing alternative explanations of the data obtained in a way that made the most sense when answering the research question. The researcher used various types of quotations from the respondents to provide explanations. These quotations included embedded quotations that were used to illustrate certain points and long quotations to convey more complex and understandings and different ideas of the respondents (Delpont and Fouche, 2002, p. 358). The use of the direct quotations are also seen by Grinnell and Unrau (2011, p. 497) as a measure used to enhance the credibility of the study by providing the readers of the research an opportunity to “determine for themselves if they agree” with the researcher’s interpretation. The researcher also used tables and graphs where possible to display the information for easier presentation.

3.9. LIMITATIONS OF THE STUDY

“Generalization suggests that, all appropriate subjects or individuals of the total set will not participate in the study” (Grinnell, 1988, p. 240). Given the nature of qualitative research, the sample size was relatively limited, thus not representative of the total number of the studied population. As a result, the research results could not be generalized within the population identified for the research study. For instance, the rate at which the assessment tool is used or not, by social workers could not be determined due to the sample size of the study. The data only presented the perceptions, explanations, thoughts emotions and observations of the respondents on the subject, which meant that its occurrence cannot be quantified. However, this does not mean that the information is not valuable as Rubin and Babbie (2005, 462) indicated that such findings provide a “source of insight on the subject studied” which could be a basis for future investigation.

Time and resource constraints limited the scope of the research study as the research could have been extended to incorporate “triangulation of measures” by reviewing the archive files for social workers and interviews with social work managers to be able to produce a more robust study (de Vos, 2002, p. 341). Although there was some South African literature available on assessment in foster care within the psychology and psychiatry field, there was limited South African literature on the same subject from the social work profession. The nature of the research topic may be threatening to the respondents by possibly eliciting feelings of incompetence in their professional capacity. This anticipated limitation was alleviated by explaining the intentions of the research and how the participants might benefit from the study. All the research participants were willing to participate in the study.

3.10. ETHICAL CONSIDERATIONS

The researcher acknowledges the code of ethics prescribed for research. The code of ethics for undertaking research makes reference to confidentiality, anonymity and the willingness to participate or not to participate in the research study. The researcher obtained an Ethics Clearance from the University of the Witwatersrand Human Research Ethics Committee (HREC-Non Medical) and permission to conduct the research study from the Research Unit of the Department of Social Development, Gauteng.

The participants in this study were assured that participation in the study was voluntary therefore participants could refuse to participate in the study if they so wished. Based on this, the participants were provided with information about the study to be able to make an informed decision. None of the participants were coerced to participate in the study. They were also assured of anonymity and confidentiality in the research report. The researcher obtained permission before the interview commenced from the respondents to use a tape recorder for purposes of capturing data. They were assured that the information would be kept confidential. The participants will be informed of the research findings once the study is completed and the findings of the study will be made available for reading by interested readers. The researcher was assigned a supervisor by the institution to guide the researcher throughout the investigation. The research proposal was subjected to the review of the institutional ethics committee for approval,

in order to protect the human rights of the research participants. The researcher also made a presentation to the Department on the proposal.

3.11. CONCLUSION

This chapter described the research methodology and research design that was used for this research study. It also described the strategy that was used to conduct the research study, which was best suited to the nature of the research topic. The research design provided an opportunity for the researcher to gain an in depth understanding of the experiences of the respondents. The instrumentation and interviews conducted facilitated the process of data collection. The method used to analyze data was effective in presenting the data in a way that would make sense. The following chapter will present the data and its analysis thereof.

CHAPTER 4

PRESENTATION OF THE FINDINGS

4.1. INTRODUCTION

This chapter will present the findings and analysis that will be linked to the literature review presented in Chapter 2. The main aim of the findings and analysis is to provide an understanding of the social workers' experiences surrounding the use of a developmental assessment tool for determining the needs of foster children. The research findings will give demographic information about the participants and present the main findings which are grouped according to the themes developed. The findings will be presented according to the identified themes as demonstrated in Figure 4. The aim is to respond to the objectives of the study. The objectives of the study are to determine the level of knowledge and understanding of the developmental assessment tool by social workers, identify reasons that inhibit the use of the tool, explore social workers' views about the factors contributing to the tool not being used and identify the challenges that social workers face in using the tool. This chapter will present the researcher's analysis of the research findings by organizing the findings according to the identified themes.

4.2. DEMOGRAPHIC INFORMATION

The researcher interviewed 10 participants all of whom were female and were qualified and practicing as social workers. The participants were mainly based at the Department of Social Development at the Benoni and Springs offices. Their years of experience ranged from 1 year to 11 years and a majority of the participants had work experience of more than 5 years. This may mean that the participants may have been familiar with the developmental assessment tool for the duration of their work experience since they were providing statutory services. As all the participants were qualified social workers' may mean that they were aware of their professional responsibility to provide assessment services to vulnerable children.

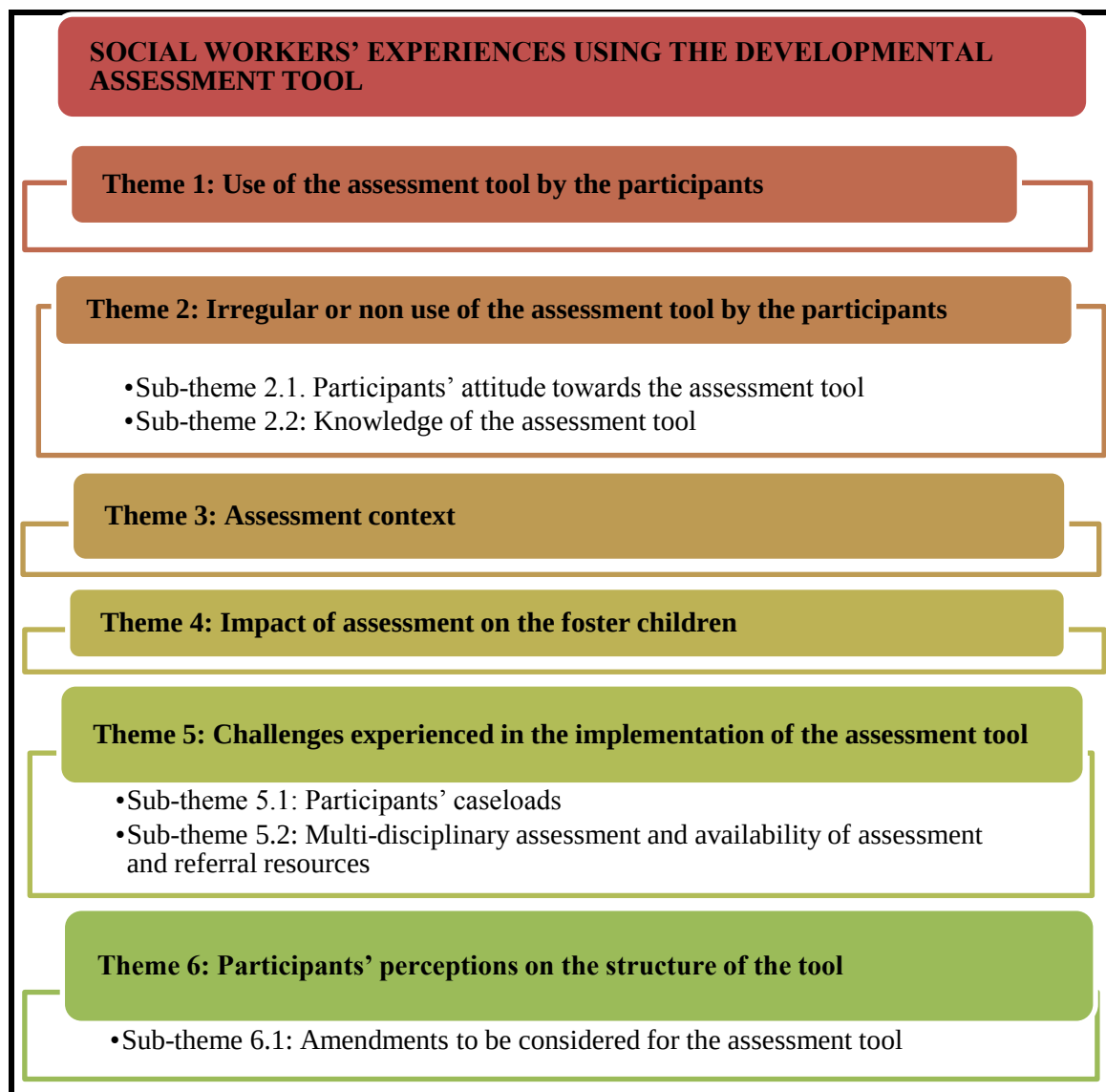


Figure 3: Themes of the research findings

4.3. THEME 1: USE OF THE ASSESSMENT TOOL BY THE PARTICIPANTS

All the participants indicated that they knew and were familiar with the assessment tool. All of them indicated that they used the developmental assessment tool and indicated the benefits of its use. However, the use of the assessment tool varied with participants using one or more of the tool's components for instance the IDP, the care plan and/or the review of the care plan. The benefits of using the assessment tool included, increasing the participants' understanding of the children and their circumstances, identifying the developmental needs of the children assessed and assisting foster children to adapt to their new environment as one of the participants

explained that *“the IDP helps you as a social worker to get to know and understand the child. If you use it you understand the child as she is, getting to communicate with the child and she in return gets an opportunity to express her views. You are able to engage with the child directly, compared to the interviews where most of the time you engage with the foster parent”*. It also facilitated communication, as one of the participants explained that it provided an opportunity for the foster children to *“express their views”* including the parents and foster parents, identifying their strengths, their developmental needs and identifying the children’s permanency needs as one participant said *“these are his needs, skills, achievements, in future this is what he needs”*. Other benefits of assessment were identified by Merritt (2008, p. 1337) which include *“encouraging hope, self-respect and addressing a lack of concern for their inclusion in planning for their future”* which are additional to those identified by the participants.

The benefits of using the assessment tool may be the direct outcome of involving clients in the intervention process. As seen in the literature review, most of the authors reiterated the importance of participation in the helping process. This study also indicated that participation may also assist to break the barriers to communication and interaction minimizes the development of invalid opinions, stigma, and perceptions about certain situations or people. The participation of clients in the intervention process is a rights-based approach that aims to unleash the inherent power within people to consciously influence change to their situation using their strengths. Participation also provides an opportunity to influence systems around them (Saleebey, 2006). This form of intervention draws knowledge from systems theory, rights-based and strengths-based approaches.

Non-involvement of family members in the helping process can be disempowering and develop perceptions about the helping process as is explained by one participant *“. . . parents tend to think that I can't do anything to this child because this is the social worker's child, whatever decision I need to make I have to consult a social worker”*. This indicates that the parents may feel disempowered by the involvement of the social worker in their family which may affect their psychological and social wellbeing, which is contrary to the intention of the intervention

process that aims to empower and strengthen people. As a result, the participation of parents in the assessment and intervention process can be helpful to breakdown negative perceptions formed about the involvement of social workers in their family life and facilitate participation. The involvement of the family in the assessment process promotes family participation and ownership of the intervention process.

The involvement of foster parents in the assessment process was seen to be important by one of the participants saying “*the foster parents should receive training on the IDP . . . Have a programme with the foster parents to update their skills and parental guidance or even their relationship with the biological parents as well*”. Wotherspoon and Petrowski (2008) indicated that there need to be “strategies” developed with foster parents to “address the child’s underlying needs”. Their involvement in the assessment process is one of the helping process strategies that may be used to assist the foster parent to understand where the child is at and respond in a way that will facilitate change in the child’s life. This will assist in the development of the notion that the foster parents are also partners and change agents in the helping process. This is supported by Chiroro et al. (2009, p. 48) describing foster parents as “vital agents” in a foster child’s life since “they are an important point of contact for foster children”. Other benefits of using the developmental assessment tool raised by the participants included the facilitation of a multi-disciplinary assessment and provision of the necessary services to the foster children contributing towards their development and preparation for independent living.

The findings also indicated that the assessment tool had benefits for the participants as it assisted them to “*navigate through the intervention process and monitor the foster care placements*” to prevent foster placements from breaking down and determining a need for further intervention. It also assisted them to reflect on the intervention they had rendered over a period of time and to review their intervention plans. This finding affirmed one of the social work principles: that the social workers must have critical consciousness of their intervention approaches and the factors that may impact on it (Sakamoto & Pitner, 2005). When social workers are constantly critical of their intervention processes, it will assist them to identify if there are any biases or injustices they attach to the helping process which will in turn assist them to decide if there is a need to change their intervention strategies or not. Or they can direct their intervention strategy towards tapping

into the strengths of the clients, encouraging the clients' willingness to change their situations which will contribute towards sustaining the intervention efforts.

This intervention strategy is supported by the concept of social development that requires "planned social change" as a client approaches a welfare system with the intention to change his or her situation (Midgely, 1995, p. 25). A social worker needs to undertake an "enabler" role to facilitate change in the client's life when undertaking the "dynamic process of engagement, assessment, intervention and evaluation". (Zastrow, 2010, p. 66). Through this action, a social worker directly facilitates the planned change process by undertaking the professional responsibility to conduct an assessment with the intention of drawing a planned strategy for intervention or a care plan together with the clients to facilitate change to their circumstances. The incorporation of participation in the assessment process contributes toward reducing the power relations between a client and a social worker (Coulshed & Orme, 2006). This form of intervention further promotes a non-discriminative social work intervention drawing on rights-based and developmental approaches to intervention (SA Constitution, 2004; Noble et al., 2007; Mashigo, 2010). It would also facilitate the realization of their human rights, care, protection and social inclusion.

One of the objectives of using a developmental assessment tool is to monitor the placement and assist the foster children to adjust to their new environment. As the participants identified this as one of the assessment tool's benefits, it may be used positively to strengthen the foster care placements by providing the necessary support to the foster child (that may include psycho-social counseling, life skills and technical skills training amongst others) and the foster parents (which may include training in child development, behavior management and trauma management amongst others at an appropriate point in a child's life). The support provided to foster parents may be determined by the child's needs at the time, so as to enable them to cope better with the child's needs, ensuring that the foster care placement does not break down. The monitoring process encompasses the essence of Compton's et al. (2005, p. 196) "dynamic process" concept. This dynamic process requires a constant reassessment of the initial

assessment's outcomes during the intervention process which requires the social workers to gauge the progress made during intervention and reformulate the care plan or intervention plan. The frequency of monitoring may determine the continuity of the dynamic process of assessment which may be an area of focus for future research.

An additional dimension to this finding is indicated by Coulshed and Orme (2006) and refers to monitoring the assessment process. This means that the assessment process does not just occur at the intervention level with the clients. In addition it is beneficial if the assessment process is evaluated by looking at the processes undertaken by a social worker during assessment and monitoring whether it is used appropriately to achieve its intended purpose. To monitor the social workers' assessment requires supervision. One respondent confirmed the benefit of supervision claiming that it would enhance the assessment of the clients by ensuring that it is conducted appropriately which would help in the development of an intervention plan that is responsive to the clients' needs. On the contrary, the lack of supervision may have a negative impact on assessment even contributing to non-assessment as one participant indicated “. . . *you'll find that right now I'm just sitting here teaching myself how to do the job*”.

The participants indicated that there are a number of roles that a supervisor can undertake in the supervision process that include assisting the participants to incorporate the use of the assessment tool to plan their work properly and to manage the workload effectively using the available administrative tools. These supervisory roles can contribute positively towards the assessment process that can be strengthened during the monitoring of the assessment through guidance. This indicates that the numerous roles of supervisors may influence the provision of assessment services and in addition, can assist in regularizing the provision of this service.

4.4. THEME 2: IRREGULAR OR NON USE OF THE ASSESSMENT TOOL BY THE PARTICIPANTS

The findings indicated that there are varying levels of utilization of the assessment tool by the participants. Two out of ten participants indicated that they used the developmental assessment

tool partially; as one participant said “. . . we are not making use of the care plan”. Three participants indicated that they use the assessment tool in certain circumstances such as where it is enforceable, upon request, the placement of children with unrelated foster parents and when children have behavioral challenges. One of the two participants explained that *“In most cases with foster care it's not used a lot”*. Two other respondents said *“I don't use the tool in all of my cases . . . when I remove the child . . . and I only use it when I've attended the panel meetings at the place of safety”* *“that tool is not being used”*. The responses suggested that there is no standardized practice for the assessment of children in foster care which was also noted by Milner and O'Byrne (1998).

This raises a question on what contributes towards non assessment as it is supposed to be one of the intervention processes as described by Zastrow (2010). The research findings indicated that there are a number of reasons that may contribute towards irregular or non-use of the assessment tool and these may impact on one another. These reasons are almost similar to those identified in the literature study (Leslie et al., 2003; Bruhn et al., 2008; Milner and O'Byrne, 1998). These contributory factors included the following: The participants' lack of knowledge about the assessment, lack of capacity, lack of skills and expertise on the assessment tool, the assessment context, social workers' high caseloads, multi-disciplinary collaboration, inaccessibility and unavailability of assessment and referral resources that may relate to the fragmented structure of the assessment services.

4.4.1. SUB-THEME 2.1.: PARTICIPANTS' ATTITUDE TOWARDS THE ASSESSMENT TOOL

The research findings indicated that there might be a general negative feeling regarding the use of the assessment tool as one participant said *“I don't think the social workers like it (IDP), I don't either! . . . part that most social workers in general feel that it is labor intensive”*. The participants mentioned other contributory factors to the non-use of the assessment tool that included laziness, apathy leading to detachment from their clients and being in a comfort zone.

“There's a problem with the care plan because we are lazy. You just take the care plan and just write it out as it is and it's very limiting”. *“I think they're overworked and they're also in the*

comfort zone, they don't want to do it, they're in the comfort zone". "Even us social workers we discourage each other . . .". "I'm going to say last week preferably because they know that name of the child they've been with to court, and then I'll ask what kind of a child is Vuyo? They won't tell me, because it's not used".

Another possible contributory factor was that "The literature did not indicate any of the experiences mentioned above, except for a "reluctance to revise initial assessments in the light of new evidence" (Adams, 2009). The findings indicated that these contributory factors were purely related to the participants' interaction with the assessment tool which raised a question, whether this could be linked to other factors that relate to the structure of the welfare system that include the high case loads, lack of supervision, shortage of social workers, unavailability and accessibility of resources for assessment and referral services. This was confirmed by Chiroro et al.'s. (2009) study that found that the shortage of social workers have an impact on service delivery.

4.4.2. SUB-THEME 2.2: KNOWLEDGE OF THE ASSESSMENT TOOL

It was also found that there was a lack of knowledge and understanding of the assessment tool. The respondents' views were that lack of knowledge was central to the social workers' disinclination to use the tool and their unwillingness to use it indicated that there might be a negative mindset which could suggest a need to change the mindset on assessment within the social work profession *as one participants said "that's why the social workers don't want to use the tool because they don't know their tool"*. In one of the participant's responses, the researcher observed that the participant could not make a distinction between a care plan and a review of the care plan as the participant said *"for me they are nearly the same"*. Another participant said *"no, here they're not using it for a care plan they are using it only for assessment, because if you're going to use it for a care plan, the care plan is very limited"*. It was also found that another contributory factor is the lack of skills and techniques to facilitate the assessment process which was noted from the following responses from the participants: *"I think that is a short fall for the assessment at this stage, because we have the tool, we have the full concept, but there really is no technique"*. *"I think it would be a challenge if a new social worker would assess the child"*. *"...with this IDP assessment there need to be a technique as well"*.

The lack of expertise was also mentioned in the literature that included the lack of recognition of known risk factors, systematic investigation and assessment of available information, revision of initial assessments in the light of new evidence, concentration on the immediate rather than carefully evaluating both long term and short term evidence and lack of drawing all the complex information together and documenting sources (Adams et al., 2009). These findings indicated that the inability to identify valuable data to be used for assessment may limit the type of responses through intervention that may be provided to the foster children. These experiences reiterate the need for constant supervision as they indicate that this skill is not innate within social workers but can be developed and refined through the guidance and learning experiences provided during supervision. As a result, the lack of understanding of the assessment tool may be attributed to the lack of guidance and supervision as the participants said *“I think it would be a challenge if a new social worker would assess the child”*. *“Goes back again to management...what are they doing to motivate their staff. You’ll find that right now I’m just sitting here teaching myself how to do the job”*. The role of supervision appears to play an important role in the social work practice especially for new social workers as one said *“now I do not experience any challenges because I have learned a lot”*.

4.5. THEME 3: ASSESSMENT CONTEXT

The participants indicated that there are aspects that may be seen as part of the assessment context that may have influence on the assessment process. These include the location where the assessment is conducted, the child’s age, culture, and the theoretical framework and techniques used to facilitate the assessment process. As one participant said the *“child’s age, developmental stage and culture is very important”*. The essence of the participant’s response was that these factors need to be taken into consideration when a social worker is to conduct an assessment. One of the examples used by the participant in relation to the impact of culture on assessment was the *“maternal family can not release the child because akabhada lelwanga inhlawulo (there was no acknowledgement of the fault that the child’s mother was impregnated outside of the marriage)”*. Its impact on the assessment and the intervention process may have been that the maternal family looking after the child did not recognize the paternal family and the father and as a result they were reported as unknown to the maternal family for foster care investigations. This misleading information, resulting from unclear interpretation of data based on cultural

influences, steered the intervention process in a different direction that may have had a negative impact on the foster children's best interests by not involving the paternal family in the intervention process.

Two participants indicated that one of the strategies to be used to mitigate the outcomes of these aspects is to identify the purpose for conducting an assessment using the developmental assessment tool and to be able to identify the expected outputs from the assessment process as the participants said *"you can do anything with it, but you just need to know in what context you're using it"*. *"Mostly what we do with the IDP, it says uh this is your output"*. Clarification of this information prepares the social worker to adapt the techniques to be used during the assessment process to direct it towards achieving the intended outcomes of the process. The benefit of using a range of techniques to facilitate the assessment process was demonstrated by one of the respondents which included using *"... clay, painting, sand and whatever you need to do get information"*. Another important aspect in the assessment process was the theoretical framework that should inform and guide the intervention process as one participant indicated the importance of a theoretical background in practice saying that *"... find strength in the child"*. It was evident that as a professional, it is important to be aware of and incorporate the theoretical framework that informs intervention strategies that may include the strengths perspective, systems theory and the ecological approach.

The literature on child assessment raised certain issues such as, the child's developmental stage and the child's pace of engagement during the assessment process that the social worker needs to be aware of and adapt to those circumstances (Bruhn, Duval & Louderman, 2008, p. 539). However, conventional assessment tools need to be used with caution because circumstances may have changed and these tools may no longer be relevant to the current social circumstances that children are faced with. (Murphy & Maree 2006). Due to the changing social circumstances the children's experiences and learned skills may have changed. This raises a question around the applicability and relevance of the conventional assessment tools and theoretical frameworks to these changing circumstances which in turn questions the accuracy of the assessment findings.

It also raises the question as to whether it is necessary for the assessment tool and theories of development to be reviewed and customized to the South African context. This was highlighted by one of the participants saying that *“a 7 year old in a child headed household is more experienced than a twelve year old in a normal family. Other children have skills and responsibilities that the other ones will never have”*. This may have major implications on the validity and accuracy of the assessment outcomes if the assessment tools and theoretical frameworks used do not correlate with and address the circumstances of the clients assessed. This may be an area of focus within the helping profession for further debates, possibly leading to the development of alternative theories and assessment tools that would respond to the South African context.

4.6. THEME 4: IMPACT OF ASSESSMENT ON THE FOSTER CHILDREN

The findings suggest that children present with behavioral challenges as one respondent said *“let’s say that a child has behavioral problems . . . sometimes you need to make a follow up to really have sessions with that child to address those things, it becomes a challenge. Then you end up failing the child in a way”*. This could mean that such children may not benefit fully from the intervention process. This may have resulted in the participants feeling that they had neglected and failed the children as two of the participants said *“... I think it's injustice to the child”* and *“it's like "onka sello oselatlhe ohlape matsogo” (meaning that one is dumping a child in foster care and forgetting about the placement)*. The literature review indicated that there are numerous developmental needs that foster children present with before placement or that are aggravated by the placement in foster care (Bruhn et al., 2008; Pediatrics, 2000; Leslie, Hurlburt et al., 2003). They may also experience difficulties later in life coping and participating meaningfully within their environment as it was found in other studies including a study conducted by Chiroro et al., 2009; Vacca, 2008; Casey Family Programs, 2007; Trout, Hagaman, Casey, Reid & Epstein, 2008).

In a study conducted by (Chiroro et al., 2009), it was found that the foster youth who exited the foster care system experienced socio-economic hardships which included dropping out of school, difficulty providing for their basic needs, finding employment and financial difficulties. Based

on some of the participants' experiences mentioned above, there is a possible link between non-assessment and the foster children not being prepared for independent living as indicated in Chiroro's et al. (2009) study. These experiences raise the same question that was asked by Bruhn et al, (2008) regarding the influence of assessment to service delivery within the context of the child welfare system. A meaning that can be assigned to these experiences could be explained using the social exclusion concept and the social development theory. Due to the possible lack of assessment, these foster children were not prepared for independent living since they had experienced difficulty coping with their lives and interacting meaningfully within their society. As a result, these youth's rights to social inclusion were limited; they experienced poverty and were unable to participate actively in the economy thus not contributing positively towards social development.

These findings and other studies suggested that unpreparedness of the foster youth for independent living may be linked to non-assessment. One could argue that if there were sufficient resources and capacity to conduct assessment it would contribute towards social development and facilitate social inclusion. Social development could be achieved through the combination of promoting participation of foster children, the involvement of other professionals and providing the necessary assessment and intervention services. Intervention may have a positive impact on the foster children's lives by increasing their potential and opportunities to interact and participate actively in the society because their psychological, social, educational and economic needs would be met. This will contribute positively towards social development as these foster children would have had their immediate needs met and would have been prepared for economic participation through skills development (Midgely, 1995). This may increase their opportunity to break the cycle of poverty as they would be economically independent. The contribution of assessment towards social development is demonstrated in Figure 4 below.

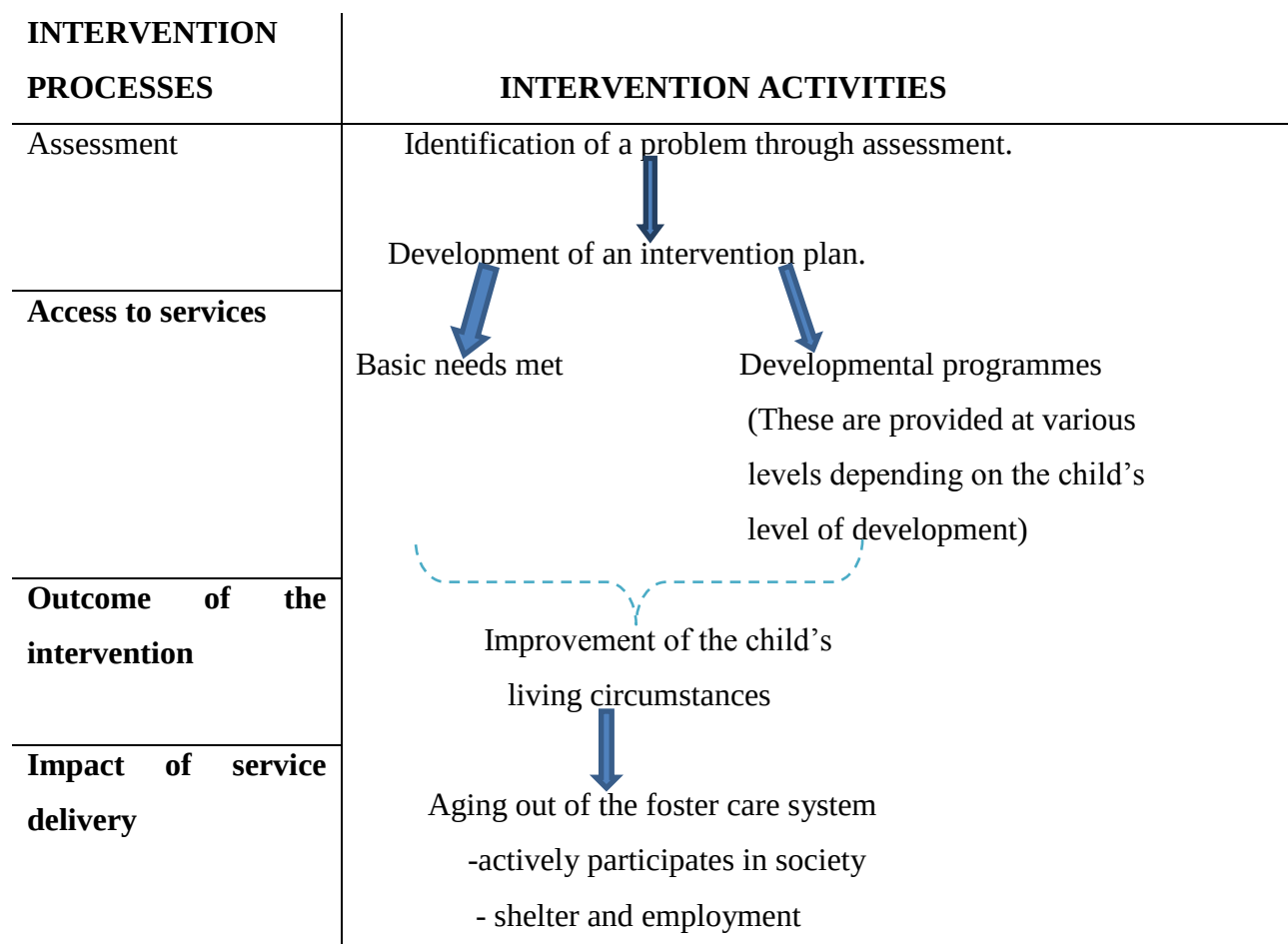


Figure 4: Contribution of assessment towards achieving social development

4.7. THEME 5: CHALLENGES EXPERIENCED IN THE IMPLEMENTATION OF THE ASSESSMENT TOOL

4.7.1. SUB-THEME 5.1: PARTICIPANTS' CASELOADS

There appears to be a link between irregular or non-use of the assessment tool and the work environment of the participants with a particular reference to the high caseloads undertaken by these professionals. This relates to the questions raised under the discussions on the irregular or non-use of the assessment tool and the participants' attitudes. Out of the 10 participants, eight of the participants attributed the irregular use of the assessment tool to high caseloads that were inclusive of foster care cases. Most of the participants cited high caseloads that ranged from 100 to 200 except for one participant who had fewer than 20 foster care cases. Two participants said *"I have more than 90, close to 100 case loads, it would be difficult for me to develop IDPs in all*

these cases". *"What's limiting us now are our case loads because we cannot focus on one family whereas there are still others who are still applying"*. These figures may be indicative of the negative impact that the shortage of social workers in the country has in relation to the demand for foster care.

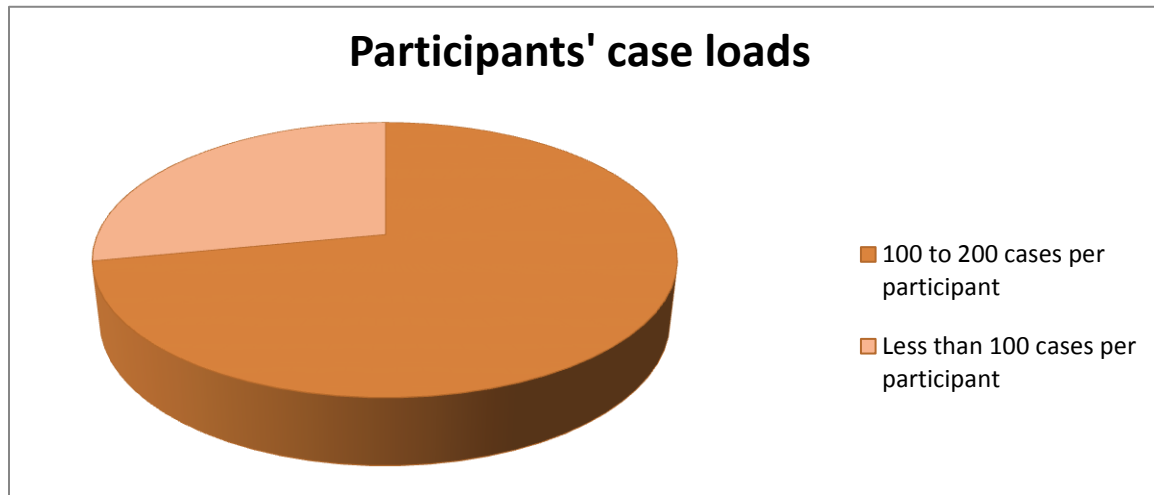


Figure 5: Participants' case loads

It was also reported that the pressure did not just arise from the high caseloads, it also came from the senior managers requiring deliverables based on the set targets as one respondent said *"directors up there in the regions just want stats, they just want numbers"*, which may have been interpreted as senior management's lack of acknowledgement of the challenges impacting on their work. This finding suggested that the working conditions that included the high caseloads and pressure from senior officials may have had an impact on the participants and their use of the assessment tool in a number of ways. Firstly, the circumstances evoked feelings of being burnt out, overwhelmed, apathy and helplessness as the participants indicated that *"there's a time when you can have a nervous breakdown from all of these things. If I'm overwhelmed with so much work I switch off"*. Secondly, it may have affected the frequency and quality of follow ups that were supposed to be provided as part of supervision as one participant said *"sometimes you need to make a follow up to really have sessions with that child to address those things, it becomes a challenge"*. Thirdly, it was reported that there was less intensive work in the foster care cases due to *"our unavailability to be more focused on that particular family or problem due to our*

case loads”. Fourthly, children may have been affected negatively as they were susceptible to secondary abuse and neglect by the system as one participant said “. . . *children now are exposed to more abuse, more trauma*”.

Due to the pressures on the welfare system, the social auxiliary workers were incorporated into service delivery to provide support services to social workers. The research participants expressed varying experiences regarding the social auxiliary workers. One participant experienced the social auxiliary workers as beneficial in the light of a shortage of social workers as she said “*it's better because we have social auxiliary workers*”. Another participant indicated that there was a challenge around the unclear definitions of roles and responsibilities between the two professional groups as the respondent said “. . . *unfortunately we don't have enough social workers in the field, we have social auxiliary workers who don't want to do anything in their office and they were hired to help social workers but...(shrugs)*”. These experiences indicated that there is a need to standardize the use of this support service. There is also a need to clarify the role of social auxiliary workers in the assessment of child foster care.

The elements identified above can be located at a micro level of intervention which is defined by Kirst-Ashman (2007, p. 129) as “intervention involving an individual client”. The social work profession may influence and facilitate change on some of these contributory factors through the supervision of social workers and the implementation of social work functions that must be undertaken at the various levels of intervention (prevention, early intervention, statutory intervention and after care) as indicated in the ISDM. The social work functions must also include assessment, intervention and evaluation services (Department of Social Development, 1994; Zastrow, 2010).

4.7.2. SUB-THEME 5.2: MULTI-DISCIPLINARY ASSESSMENT AND AVAILABILITY OF ASSESSMENT AND REFERRAL RESOURCES

Other contributory factors indicated in the findings related to the involvement of other professionals in the assessment of foster children, the availability and access to resources that facilitated the provision of assessment and referral services. Six participants attributed the good working relationships with other professionals to networking which facilitated a multidisciplinary approach to helping as the participants said *“I refer the child to the relevant parties or programs”*. *“I’ve used kid’s clinic, I’ve used the Department of Education it was very helpful and other organizations I haven’t experienced any problems yet”*. *“Usually we involve them in groups and sometimes maybe if there are some other organizations outside the community we try to refer the clients to, like NICRO if the child has criminal behavioral activities. We also use the probation section in our offices because they have groups of children with behavioral problems, so we do involve them in those kinds of groups”*. *“During assessment I see the child on my own and the teacher assesses the child her way then I’m able to put together the different interviews so that I can be able to write a report”*. *“I think you need to be clever and use other role players as well, because when I do the mastery concept I use the teachers at school. I network with them and I would send a report out just to assess the mastery needs”*.

Other participants indicated that they experienced challenges facilitating a multidisciplinary approach to in the assessment of children and linking them to the appropriate services as the participants had difficulties gaining access to other professionals like school teachers, doctors and psychologists. *“If we had this proper working relation in place to say if we come across a child that has educational needs then we specifically refer them when they get there they will get the necessary assistance, or there is a psychiatrist that is mainly going to work with our children, or a psychologist, it would makes our work easier”*. *“The cases today are so difficult to finalize within 90 days, it’s just impossible because you can’t find placement for the children, children have special needs, there are special educational needs”*. *“. . . disadvantage we have is that our networks and the other departments that we have to work hand in hand with are a challenge. It is difficult to get hold of the psychiatrists or the psychologists”*. *“ this . . . hospital, you go there*

you want maybe a child's medical report, a medical assessment of age, they will say you have to wait, make an appointment even though you've made an appointment”.

The same challenges were identified within a school setting where the teachers are unable to provide assistance due to constraints that exist within that setting. One respondent said “...*there was another teacher who said you cannot expect me to leave my class while the Education Department expects me to be in my class the whole 8 hours*”. “*They don't even know that the school profiles exist because they don't keep the children profiles at school especially those who are at the primary level, that's another challenge...*” These blockages may have made it difficult for the participants to facilitate the assessment process. These circumstances may have also not created an environment through structural arrangements that was conducive for the participants to finalize their investigations for foster care cases on time to meet their targets. This raises a question about the nature of structural arrangements put in place to facilitate the provision of standardized assessment services.

The varying experiences of the participants indicated that there is a need to standardize the assessment services at a macro level which is defined by Kirst-Ashman (2007, p. 122) as involving “agency or social change that affects larger numbers of people than individuals, families or small groups”. To standardize practice requires a number of mechanisms to be put in place that include: ensuring compliance with the specified norms and standards and with the requirement of the Children’s Act to conduct developmental assessment of children for statutory purposes; the availability of resources and capacity to provide assessment services and the synchronization of services amongst the various professionals required to participate in the provision of assessment services. The synchronization of services may involve reaching agreements, through consultations on: the provision of assessment services, the clarification of roles and responsibilities, the allocation of resources and the issues identified by Adams et al. (2009, p. 20). Bruhn’s et. al. (2008) study raised a question on the level of synchronized services between the child welfare system and early intervention systems. The experiences of these participants indicated that the synchronization of services included other levels of intervention; in this case it is assessment.

The findings indicated that there is inaccessibility to other professionals which seemed to have had an impact on the social workers' productivity. This created blockages that they did not have control over. These findings also indicated that non-use of the assessment tool may not be solely attributed to social workers' attitudes as a view expressed by one of the participants, but may result from a combination of other influencing factors that impact on one another within the micro and macro levels of intervention. They include these "complex systems" that may be beyond the social workers' control for example, governance matters on intersectoral collaboration and the inaccessibility of assessment and referral resources especially for children with special needs (Bruhn et al., 2008). The existence of a functional structure for assessment services at a macro level is important for providing a conducive and an enabling environment for the provision of assessment services at a micro level (Bruhn et al., 2008; Coulshed & Orme, 2006; Lofell, 2007; Milner & O'Byrne, 1998). The interaction of these factors is demonstrated in Figure 6 below.

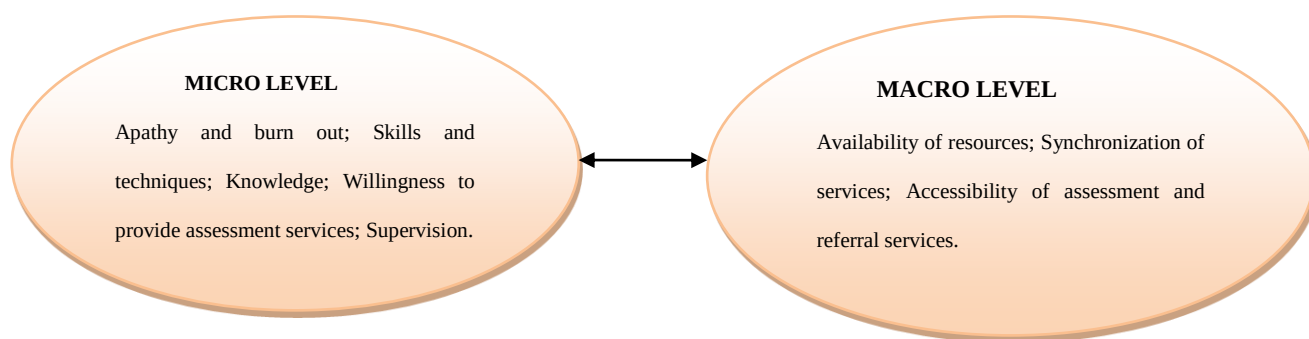


Figure 6: Interacting factors impacting on irregular or non-use of the assessment tool

The assessment services that are to be provided need to be synchronized to ensure that the children have access to the required services by ensuring that there is efficient intersectoral collaboration through clear clarification of roles and responsibilities, allocation of funds to facilitate and sustain the assessment services and monitoring and evaluation of these services. An assessment model that was identified in a study conducted by Bruhn et. al. (2008) indicated that a centralized assessment system was effective in improving the rate of assessments for children. In the review of the assessment services in South Africa, this model may be considered and

lessons be taken from it, taking into consideration that the model for South Africa must incorporate and respond to the contextual issues (geographical location, culture, language and availability of human and financial capital).

4.8. THEME 6: PARTICIPANTS' PERCEPTIONS ON THE STRUCTURE OF THE TOOL

The participants expressed varied experiences on the structure of the assessment tool. All the participants appreciated the usefulness of the assessment tool, but their views varied on the particular elements of the assessment tool. For instance, the 'belonging' and 'mastery' elements assisted them during the assessment to gather valuable data since they did not have the *"expertise of the psychologists"*. They indicated that belonging and mastery also effectively revealed valuable information on the circumstances of the child's life as one participant said *"I think, because most of the children we're working with are the children with unknown fathers, so they claim unknown fathers only to find that they do have paternal relatives who should be involved in the child's life"*. Since the assessment tool was perceived to be broad, it allowed for flexibility when it was adapted for various circumstances during the assessments as one participant explained that *"it's so broad you can actually do anything with it, you use it any way you see fit to assess a child"*. However, some of the participants expressed their views on the shortcomings of the assessment tool as one of the participants implied that it is not a panacea for all circumstances as *"people are different and unique, maybe this person who drafted this was focusing on certain aspects"*; it is limited to the assessment of the child instead of incorporating the assessment of foster parents and their environments as the participant said *"I'm using the assessment tool to assess the child...because that's the only thing it does, it assesses the child and then I go to court and finalize everything. I don't know the behavior of the foster parent"*.

When analyzing the varying responses from two participants on this matter, where one participant sees the tool as flexible and the other participant seeing it as rigid; this suggests that the assessment tool should incorporate techniques and the aspects identified in the assessment framework provided by Milner and O'Byrne (1998) that incorporates a person, partner, family, school, work, home environment, community and society to enhance its implementation.

These varying experiences may raise a question about the extent to which the assessment tool can be reliable and flexible and whether the techniques used with the assessment tool can be beneficial to the assessment process. As one participant indicated, there is a gap in the assessment tool as “. . . *there really is no technique*”. This view may mean that the techniques to be used with the assessment tool could guide to social workers obtain sufficient data during the assessment process. One participant viewed the time frames used in the developmental assessment tool as unrealistic saying “*I think this time frame in reality it doesn't work. . . what if within this six months you couldn't link the child with the appropriate resource to help him/her, what then, what does it mean*”? The participant's experience may have been influenced by the challenges experienced in accessing assessment and referral services. As a result the participant may have felt that it was pointless to attach a time frame knowing that the activity might not be undertaken whereas in practice time frames are attached to monitor progress made. The varying experiences raised a concern about the degree of the reliability of the data produced by the tool. Possible future research could test the assessment tool for reliability and the results of this would influence the decision on whether to review the use of this assessment tool.

A participant pinpointed the use of the assessment tool in relation to the current social welfare context saying that; “. . . *Nowadays kids who are 7 year old might have skills, that a 12 year old might not have, depending on which environment he was raised. That is why I'm saying age appropriate responsibility used as a yardstick, limits us in a way. A 7 year old in a child headed household is more experienced than a twelve year old in a normal family. Other children have skills and responsibilities that the other ones will never have*”. The participant's experience may indicate that the frameworks provided by the conventional theories may no longer be applicable to the current social circumstances as experienced by children in South Africa. This experience could support the recommendation that the assessment tool may need to be revised to incorporate the current social context. The same participant felt that the developmental assessment tool does not make provision for continuity in its implementation when the cases are transferred to other social workers. This indicated a need to incorporate measures for the participation of other professionals in the development and review of the IDP and care plan where panel discussions may be used as a mechanism for engagement.

Another issue raised by the participant was about the authenticity of the IDP. *“My problem is that you cannot measure whether it has actually happened or not. There is no measure to say this IDP is true and this child was part of it, the family was part of it”*. The participant felt that the assessment tool should reflect the involvement of the clients by incorporating a mechanism that would authenticate such involvement and which might also serve as a monitoring and accountability mechanism.

4.8.1. SUB-THEME 6.1: AMENDMENTS TO BE CONSIDERED IN THE USE OF THE ASSESSMENT TOOL

There were recommendations that were specifically expressed by the participants regarding the amendment of the assessment tool and facilitation of its implementation. One of the participants recommended that *“if some social workers specialize in this area I think that would be better. . . maybe with more experienced social workers they have to specialize and focus mostly on monitoring foster care cases, then that's where you monitor whether the assessment tools have been done properly”*. The possible benefit may be that the respective social workers would be highly skilled in this subject which will in turn improve the quality of services delivered. It was also recommended that there should be capacity building on the developmental assessment tool for social workers, social auxiliary workers and foster parents as the participants said *“. . . I think we need to be retrained”*. *“. . . the foster parents should receive training on the IDP so they can be able to do their own evaluation of where does the child fit in, what are his needs before we even place the child. Also in our ideal worlds it should be every three months where we have a programme with the foster parents to update their skills and parental guidance or even their relationship with the biological parents as well, so that they know that they have to perform a service to this child and it is not their child to do as they please with the child”*.

A participant noted that the assessment tool needs to make provision for people's dynamic nature as the participant said *“people always come up with something else that you've never encountered before, people are different we need to acknowledge that. So the tool has to make an exception like where they can allow people to elaborate or comment on something, or provide*

additional information". The literature indicates that the assessment tools may not be applicable in all human circumstances (Compton et al., 2005). This indicates that the assessment tool needs to be reviewed for its applicability in other human circumstances. In addition, one participant indicated a need for the assessment tool to be accredited as the participant said "*otherwise it's not going to be recognized by any psychologist*". This may have implications for the professional nature of social work assessment as the literature indicated that other professionals may disregard the views of professionals that are not of the same background (Coulshed & Orme, 2006). The accreditation of the assessment tool may imply that the profession's assessment should be elevated to a level where it can be recognized as professional and can be recognized by other professional fraternities.

4.9. LIMITATIONS OF THE STUDY

The nature of the research study limited the study to an exploration of the participants' experiences of the use of the assessment tool. It emerged during the study that there are elements that need to be studied further to enhance the findings of this study. Firstly, the sample size, time restrictions and limited resources constrained the scope of the research study. The data could have been triangulated with the social workers' archive files and with interviews with social work managers which would have produced a more robust study. Secondly, the study did not make provision for testing the validity and reliability of the assessment tool may be worthwhile because of concerns about its credibility and authenticity that emerged during the study.

4.10. CONCLUSION

The research findings fulfilled the objectives of the study and indicated that the respondents had knowledge about and an understanding of the developmental assessment tool. Data that were gathered from the individual interviews provided in depth-understanding of the experiences of the participants on the use of the developmental assessment tool. Out of the research findings, there was a clear understanding of the benefits experienced by the participants of using the assessment tool. The benefits that related to the intervention process included the engagement of the foster children and the significant people in their lives which enabled the participants to acquire the necessary data to develop a plan of intervention or a care plan. It was evident that the participation of the clients facilitated the ownership of the assessment process that was

empowering and promoted the right to social inclusion. This indicated that the assessment process can contribute toward a rights-based approach. It can be concluded that the participation of the clients in the assessment process contributes towards the “planned social change” that is one of the elements of social development.

Findings from the literature established that foster youth struggle to make the transition to adulthood and that this may be because of a lack of assessment (Chiroro et al., 2009). When looking at Bruhn’s et al. (2008) question which is “how service delivery is mediated by assessment for and identification of probable delay within the context of the child welfare system”? The findings of this study indicated an opposite effect of the relation between assessment and social development. This raised an argument that if there was an environment that is conducive, the desirable effects of assessment would be clearly indicated. The conclusion is that given an enabling environment, assessment would mediate service delivery within the social welfare context and contribute positively towards social development. This indicates a need for a study to investigate the causal relationship between assessment and social development.

The respondents also benefited from the use of the assessment tool as they were able to plan their cases more effectively and had an opportunity to reflect on their intervention and how they had contributed towards changing the circumstances of the foster children through a review of the care plan which is one of the components in the developmental assessment tool. The importance of supervision in the assessment process was emphasized and the literature drew attention to the importance of monitoring of the assessment process. The important element that emerged was that monitoring during the assessment process should not be limited to the implementation and review of the care plan but the social worker must also be monitored throughout the process.

These findings also indicated irregular or non-use of the assessment tool and that there are factors inhibiting its usage located at the macro and micro levels of intervention. This indicated that there is a lack of standardized use of the assessment tool. The research results indicated that there are contributory factors that inhibited the regular use of the assessment tool which included the participants’ attitudes towards the assessment tool, their knowledge, skills and techniques and

multi-disciplinary assessment. The study also indicated that there are factors that characterize the assessment context that may have had an influence on the assessment process. These may require to be taken into consideration for further planning on the provision of assessment services which may require a review of the assessment tool and theoretical frameworks to make it responsive to the current circumstances of the children in foster care.

The factors that are located at the micro and macro levels of intervention that influenced the use of the assessment tool were found to affect one another. As a result, there is a need to facilitate change at a micro level through supervision and influence change at the macro level by ensuring that the required structures are in place, the provision of assessment services is synchronized and the required capacity and resources for assessment and referral services are provided. The findings indicated that there were concerns about the structure of the assessment tool that include its authenticity and its credibility. This raised questions about its reliability and the validity of its results. As a result, there were recommendations made for the improvement of the tool that include the mentioned concerns. It was also noted that there is a need to capacitate the social workers, social auxiliary workers and foster parents on the assessment tool to strengthen the capacity of these change agents.

CHAPTER 5

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1. INTRODUCTION

This chapter will provide a summary of the main findings that emerged in the research study. The researcher's conclusions will also be presented based on the research findings. Lastly, the chapter will present the research recommendations that emerged out of the research study based on capacity building, theory, policy formulation, practice and future research.

5.2. SUMMARY OF FINDINGS

5.2.1. BENEFITS OF USING THE DEVELOPMENTAL ASSESSMENT TOOL AND ITS LINK TO DEVELOPMENTAL SOCIAL WELFARE

The research findings provided in-depth understanding of the experiences of respondents with the developmental assessment tool used to assess the needs of children in foster care. The findings indicated that all the respondents were familiar with the assessment tool. Those respondents that used the assessment tool experienced the benefits of using it that included increasing the participants' understanding of the children and their circumstances, identifying the developmental needs of the children assessed and assisting foster children to adapt to their new environment. It also included facilitating communication, providing an opportunity for the foster children to express themselves, identifying their strengths, their developmental needs and identifying the children's permanency. It also facilitated the involvement of the clients in the process of planned change through their participation, promoting social inclusion and contributing towards an intervention that is rights-based.

The findings indicated that the participants were able to evaluate their intervention and that there may be a need to monitor the assessment process through the supervision of social workers to ensure that the tool is used effectively. The monitoring process would ensure that the assessment process benefits the children to be placed in foster care and those that are in the foster care

system by providing for their immediate needs along with the developmental programs that will enable them to be able to participate meaningfully within their environment and be economically independent once they exit the foster care system.

5.2.2. NON-USE AND FACTORS INHIBITING USE OF THE DEVELOPMENTAL ASSESSMENT TOOL

The factors that contributed towards non-use of the assessment tool were identified. These were located at the macro and micro levels of intervention and impacted on one another. The factors located at the macro level included departmental bureaucracies, the inaccessibility of assessment services and the lack of capacity and resources to facilitate the provision of the assessment and referral services which may have resulted in the lack of synchronized assessment services from the various professionals. Those that were located at the micro level included the lack of supervision, respondents experiencing apathy and burn out, the lack of knowledge and skills and the lack/absence of techniques for using the assessment tool and process.

These factors indicated that, as much as the assessment process is a professional responsibility, the responsibility to facilitate the process does not solely lie with the social workers. However, the improvements at the macro level may facilitate the process of creating an enabling environment for provision of assessment services at the micro level of intervention. The enabling environment can be influenced through the synchronization of the assessment services by having agreements through consultations on the provision of assessment services, clarification of roles and responsibilities, allocation of resources and the issues identified by Adams et al. (2009, p. 20) to ensure effective and sustainable multi-disciplinary assessment services. These findings suggested that these factors need to be taken into consideration when responding to the challenges that emerged in this research as they appeared to be central to the improvement of assessment practice.

As can be seen from the findings, there are varying experiences of respondents who use the assessment tool. This indicates that the use of this assessment tool may not be standardized and

may require regularizing to ensure the provision of services. These should be supported by capacity building on the assessment tool for social workers. The effects of non-assessment on the children were also raised. These included the lack of access to and involvement in the appropriate programs and services at the appropriate time which may have aggravated the psychosocial challenges experienced by the foster children and the challenges experienced by the foster youth after exiting the foster care system. As the findings indicated an opposite effect of the relation between assessment and social development regarding the foster youth, an argument was raised that if there was an enabling environment for assessment and the provision of the responsive services, the desirable effects of assessment and intervention would have been clearly indicated. The conclusion was that given an enabling environment, assessment would mediate service delivery within the social welfare context and contribute positively towards the social development.

5.2.3. ASSESSMENT CONTEXT AND POSSIBLE AMENDMENTS TO THE DEVELOPMENTAL ASSESSMENT FRAMEWORK

The research findings indicated that there are elements that are part of the assessment context that may influence the assessment process which included culture, age and changing social circumstances. It was indicated that the participants had to be aware of these factors which inform their assessment strategy in order to circumvent the anticipated risks. These factors need to be considered along with a review of the assessment tool to make it more responsive to the current social context of the children to be placed in foster care and their circumstances in South Africa. The participants made some recommendations for amendments to the assessment tool that included: the adaptation of the assessment tool to foster care, its authenticity and accreditation. Additionally, these findings indicated a need for a review of the theoretical frameworks used in conjunction with the assessment tool. Such a review may raise questions about the relevance and accuracy of the assessment tool's results in relation to the current experiences of children.

5.3. CONCLUSIONS

There is evidence that a benefit of using a developmental assessment tool is that it can encourage a developmental approach to social welfare in the provision of services to the provision of social welfare services and thus contribute towards social development. However, the unstandardized use of the assessment tool needs to be addressed. There is a need to synchronize services at the macro and micro levels to ensure that the professional roles are undertaken effectively and the services are provided within the parameters of developmental social welfare. There is a need to consider a review of the assessment tool and the theoretical framework to make them responsive to the current social context. There is also a need to provide capacity building on the assessment tool along with the synchronization of the assessment services to provide an enabling environment for providing assessment and referral services that can be regularized, monitored and evaluated.

Given the challenges experienced by the social welfare system that include the shortage of social workers and an increasing demand to provide care and protection services, there may be a need to undertake an evaluation process of the social welfare's capability to provide the required assessment services. This critical evaluation needs to take the following question into consideration: Are the social welfare system and other related professions in the country at the level of providing the required assessment services given the challenges currently experienced within the social welfare system with particular reference to foster care? On the other hand how is the government going to ensure that such services are provided as prescribed by the legislative framework in the country? The social welfare system needs to assess the level at which it is to gauge its capability to provide such services. This exercise needs to be undertaken to contribute towards meeting its obligation to ensure that the rights of children are being met and that its functions are in line with its founding principle of social development. The provision of an enabling environment for conducting assessment will enable the social workers to provide the required assessment services and may change their attitude towards and improve their experiences of using the tool, leading to an increased use of the assessment tool.

5.4. RECOMMENDATIONS

The following research recommendations need to be considered for further improvement of the assessment services in foster care within the welfare system in South Africa: The current developmental assessment tool needs to be reviewed to incorporate foster care, authenticity, accreditation and relevance to the current social context.

There should be ongoing capacity building of social workers, social auxiliary workers and foster parents on use of the assessment tool. This must be supported by the provision of supervision services to the social workers and monitoring of the assessment process to ensure that sufficient and standardized assessment services are provided to children that are to be placed in foster care and those who are already in the foster care system.

There needs to be a synchronization of the assessment services to facilitate an enabling environment that will promote the assessment of children to be placed in foster care and those that are in the foster care system within a multi-disciplinary context. There must be a provision of sufficient resources to facilitate the provision of assessment services within the foster care programme.

The following research needs to be undertaken: triangulate the experiences of social workers, supervisors and clients on the assessment services; conduct a study investigating the correlation between assessment and social development; assess the capacity of the welfare system to provide the required assessment services to meet its mandate to care for and protect vulnerable children; conduct a longitudinal study tracking children in foster care and the impact of assessment services on their lives.

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APPENDICES

APPENDIX A: Information sheet

APPENDIX B: Interview schedule

APPENDIX C: Approval to conduct research letter

APPENDIX D: Human Research Ethics Committee (Non-Medical)

APPENDIX E: Individual Development Plan

APPENDIX F: Care Plan and Review of a Care Plan

APPENDIX: A

PARTICIPANT'S INFORMATION SHEET

Hi

My name is Sibongile Khoza, registered for M.A programme with the University of the Witwatersrand. I am conducting this study for purposes of meeting the requirement towards the programme. The research topic is 'Application of a developmental assessment tool by social workers practicing foster care in the Far East Rand, Ekurhuleni'. The purpose of the study is to establish your experiences in the use of developmental assessment tool. The study has been endorsed by the Department of Social Development and permission has been obtained from the Department of Social Development you respectively work for. The research results will be shared with the Department of Social Development by making a presentation and availing a copy of the final research report to the Department and the research participants when requested.

You have been selected to be part of the study because you are working within the foster care field and hopefully you may share your experiences. Your participation in the study will provide valuable information that will be used to make valuable recommendations in the study that will be beneficial for the practice of foster care as it may inform future decisions with regard to the implementation of the assessment tool.

Your participation in the study is voluntary and you will not be coerced to participate in the study in any way. You have a right to refuse to participate in the study with no negative consequences. If you participate in the study you have a right not to answer any questions you may not wish to respond to and your identity will be kept confidential by not making any reference to your identity in the research document. The interview will be one on one and will take approximately an hour.

Your contribution will be appreciated.

Sincerely,

Sibongile Khoza

Note: My contact number is (078) 102 6542 in case there is a need to clarify certain issues with regard to the study.

APPENDIX: B

INTERVIEW SCHEDULE

DEMOGRAPHIC INFORMATION

Male _____ Female _____

You are employed by Department. Yes ____ No _____

Are you a social worker by profession? Yes ____ No _____

How long have you've been practicing as a social worker? _____

EXPERIENCES ON DEVELOPMENTAL ASSESSMENT TOOL

1. Have you used the tool previously? Yes____ No ____

2. If you have used the tool previously, what were the benefits of using the tool?

3. Which aspects of the tool did you find useful and explain the reasons.

4. Which aspects of the tool were challenging for you and explain the reasons.

5. How did the tool contribute towards your intervention with your clients? Please explain.

6. What were the challenges you had experienced when implementing the tool?

7. If you have not used the tool, what contributed to the non-use of the tool?

8. What changes do you think should be effected to facilitate the use of the tool?

9. What do you think about developmental assessment of children in foster care? *It's purpose, significance and contribution to intervention.*

10. What do you think is the significance of developmental assessment of children in service delivery of foster care services?

APPENDIX: C

13-05-11;15:19 ;

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DEPARTMENT OF SOCIAL DEVELOPMENT

Enquiries: Marcina
Norman
Tel No: (011) 355 7893

TO: HOI/HOO
FROM: MARCINA NORMAN
ADMIN OFFICER: RESEARCH
DATE: 26 March 2010

SUBJECT: Approval to conduct research in the department of Social Development
Purpose

The Research unit after having assessed the proposal on "Application of a developmental assessment tool by social workers practicing foster care in the Far East Rand Ekurhuleni" by Ms. Sibongile Khoza have granted her permission to conduct her research study at the Department of Social Development. She has identified that for the above mentioned research she would like her sample to include social workers from the Ekurhuleni region who deals with foster care placements and uses the developmental assessment tool. I will be contacting you shortly as soon as Ms. Khoza is ready to conduct her research at the center with the necessary dates.

P.S. If you have any queries regarding this memorandum you are welcome to contact me on the above number.

Yours Faithfully

Marcina Norman
Department of Social Development
Head office
Research and Policy Sub Directorate

P.P.

APPENDIX D:

UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG

Division of the Deputy Registrar (Research)

HUMAN RESEARCH ETHICS COMMITTEE (NON MEDICAL)

R14/49 Khoza

CLEARANCE CERTIFICATE

PROTOCOL NUMBER H0 90830

PROJECT

foster care in the Far East Rand, Ekurhuleni

Application of a developmental assessment tool by social workers practising

INVESTIGATORS

Ms SD Khoza

DEPARTMENT

Politics

DATE CONSIDERED

14.08.2009

DECISION OF THE COMMITTEE*

Approved Unconditionally

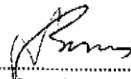
NOTE:

Unless otherwise specified this ethical clearance is valid for 2 years and may be renewed upon application

DATE

21.09.2009

CHAIRPERSON


PP (Professor R. Thornton)

cc: Supervisor : Mrs M Nathane-Taulela

DECLARATION OF INVESTIGATOR(S)

To be completed in duplicate and ONE COPY returned to the Secretary at Room 10005, 10th Floor, Senate House, University.

I/We fully understand the conditions under which I am/we are authorized to carry out the abovementioned research and I/we guarantee to ensure compliance with these conditions. Should any departure to be contemplated from the research procedure as approved I/we undertake to resubmit the protocol to the Committee. I agree to a completion of a yearly progress report.

Signature

PLEASE QUOTE THE PROTOCOL NUMBER IN ALL ENQUIRIES

APPENDIX E:

INDIVIDUAL DEVELOPMENT PLAN (IDP)

BASED ON CARE PLAN DATED:

DATE:

YOUNG PERSON:

SIGNATURE OF YOUNG PERSON:
(IF OVER 12 YEARS):

AGE:

SIGNATURE

CASE MANAGER

SIGNATURE

CAREGIVER:

SIGNATURE

IDP PAGE 1 Name:

Age:

Date:

BELONGING

CP GOALS	STRENGTHS	PROGRAMME/S	SPECIFIC TASKS	WHO?	DUE DATE

IDP PAGE 2 Name:

Age:

Date:

MASTERY

CP GOALS	STRENGTHS	PROGRAMME/S	SPECIFIC TASKS	WHO?	DUE DATE

IDP PAGE 3 Name:

Age:

Date:

INDEPENDENCE

CP GOALS	STRENGTHS	PROGRAMME/S	SPECIFIC TASKS	WHO?	DUE DATE

IDP PAGE 4 Name:

Age:

Date:

GENEROSITY

CP GOALS	STRENGTHS	PROGRAMME/S	SPECIFIC TASKS	WHO?	DUE DATE

APPENDIX F:

Developmental Assessment of children, youth and families

Copyright: South African IMC

Adapted from British "Looking after Children model"

CARE PLAN (CP) AND REVIEW

THE INDIVIDUAL DEVELOPMENT PLAN (IDP) IS INCLUDED

To be completed by the Case Manager and team before the young person is **first** placed within the Continuum of Care.

The Care Plan and IDP is **reviewed** at least after every 6 months or at the specific request of the young person, family or agency. This CP remains attached to all further reviews and IDPs.

The IDP should change as the young person and families' developmental goals are met. The Care Plan should only change if deemed to be in the best interest of the young person.

NAME OF YOUNG PERSON:

DATE OF BIRTH:

Details of the Young Person

Surname:

First names:

Gender:

Date of birth:

or age estimate/date:

Date when the young person first came into contact with the CYC system:

Date of this Care Plan:

Young person's previous address:

Name of principal caregiver at this address:

Relationship to young person:

Has the young person (and family) been engaged with the CYC system prior to this intervention?

YES/NO: _____

If yes give reasons for the involvement and indicate what support and capacity was offered to the young person and family.

Indicate the legal basis for current work with this young person (and family).

Why does the young person and (family) need to be within the Continuum of Care now?

What attempts have been made for the young person to live with a relative or close family friend?

Explain

What resources, supports and capacity building have been offered so far to the young person and family/friends to keep the young person in the community (Please be specific)?

If it is inappropriate or impossible to keep the young person in the community/family-indicate the reasons.

Which organization, relatives and practitioners have been consulted concerning the young person's situation and the formulation of this plan?

What is the overall CP for this young person?

(This refers to the long term "permanency" plan for the young person, not the present care placement within the continuum).

- ☐ Remaining with the family/friends with support/capacity building services.
- ☐ Return to the family within time-limited period. Specify proposed time frame and family member.

- ☐ Return to community (e.g. foster care, adoption, independent living within time limited period. (Specify proposed time-frame and community based option).

- ☐ Special residential care (e.g. facility for the disabled)
- ☐ Other: (Specify)

Explain the reasons for the choice of this plan:

What broad outcomes need to be achieved before this plan is fulfilled?

Outcomes	Who	Target Date
1.		
2.		
3.		
4.		
5.		

What long term developmental and/or therapeutic needs does the young person have which the continuum of care placement must meet?

Belonging: _____

Mastery: _____

Independence: _____

Generosity/care giving _____

If not possible to meet all the above, which should be the priority goals and how should they be addressed?

What type of placement within the Continuum of Care is proposed at this point?

For how long?

What is the contingency plan if the preferred placement is not available or breaks down?

If the young person is under statutory care, for how long is this likely to be?

What is the agreement with the young person and the family with regard to ending this intervention and fulfilling the Care Plan?

What steps will be taken if the young person, family or staff wishes to alter this plan?

The first review of this plan will take place at

_____ Day _____ Month _____ Year _____ Venue _____

The initial IDP will be in place by _____

Responsible organization _____

**CASE MANAGEMENT
SHEET**

Name: _____	Organisation/Address _____	Date: _____ Started/completed _____
Signature: _____		

Name: _____	Organisation/Address _____	Date: _____ Started/completed _____
Signature: _____		

Name: _____	Organisation/Address _____	Date: _____ Started/completed _____
Signature: _____		

Name: _____	Organisation/Address _____	Date: _____ Started/completed _____
Signature: _____		

IDPs ATTACHED

Each Individual Plan is to be attached. This Care Plan is incomplete without
the current and previous IDPs.

REVIEW

of the forgoing Care Plan dated _____
and IDP dated _____

NAME OF YOUNG PERSON:

DATE OF BIRTH:

Date of this review: _____

Date of last review: _____

Current placement and address: _____

Name of the caregiver/key worker: _____

Date since placement or last review when the case manager has seen the young person and caregiver/s
(indicate dates and persons seen)

Date since placement/last review when case manager has seen the young person's guardians and/or
close relatives. Unless the young person has requested that these contacts are not made.

Is all essential information on this young person recorded and is up to date?

If not, please explain.

What resources, supports and capacity building have been offered so far to the young person and family/friends to enable the young person to live within the least restrictive, most empowering environment and programme and/or to reunite and integrate this young person with the community?

If it is inappropriate or impossible at this time to reunite the young person with family/close friends, or to integrate the young person appropriately to the community-indicate reasons.

Is the current CP still relevant? If not, please explain and indicate the new CP below.

What is the overall CP for this young person?

(This refers to the long term “permanency” plan for the young person, not the present care placement within the continuum).

- ☐ Remaining with the family/friends with support/capacity building services.
- ☐ Return to the family within time-limited period. Specify proposed time frame and family member.

- ☐ Return to community (e.g. foster care, adoption, independent living within time limited period. (Specify proposed time-frame and community based option).

- ☐ Special residential care (e.g. facility for the disabled)

- ☐ Other: (Specify): _____

Is this young person waiting for any statutory processes to be completed?

If yes, please specify:

Since which date has been this pending?

What needs to be done to speed up the statutory process?

Summarise changes in the young person's circumstances and development since the first assessment or last review, based on the current IDP.

Belonging:

Mastery:

Independence:

Generosity/care giving

Does this current IDP and day-to-day programme meet the young person's identified needs and CP goals? If not, please explain and indicate what should be highlighted in the new IDP.

Indicate how close the child has been to his family/community.

Does this young person have contact with family/significant others? Explain.

If the current placement within the continuum seems unsatisfactory, what alternative plans have been considered and why?

Will the new placement meet the goals of the CP? Explain.

Is the young person satisfied with the care within his/her present placement? Attach documentation to indicate that the young person has been consulted.

**WHETHER THE YOUNG PERSON IS TO RETURN TO THE COMMUNITY, MOVE TO A NEW PLACEMENT OR
REMAIN WHERE HE/SHE IS, THIS REVIEW SHOULD RESULT IN A NEW IDP**

