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**Attachment and kinship care: An exploration of the experiences of young adult women
who were raised in informal kinship care contexts**

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By

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ABSTRACT

This exploratory qualitative study investigated young adult women's relationships with their mothers and informal kinship caregivers. The study explored how young adult women experienced their relationships with their maternal figures and the attachment patterns that emerged in their relationships. The sample consisted of seven black young adult women who were raised by their grandmothers or great-aunts. Semi-structured interviews were conducted to collect data and a narrative analysis was employed to analyse the data. The findings of the study highlighted the impact of informal kinship care on participants' relationships with both maternal figures and the significant role that informal kinship caregivers have played in their lives. In addition, the findings indicate that individuals raised in informal kinship care form multiple attachments with their mothers and informal kinship caregivers, however these attachments are hierarchical as they have a preference for their informal kinship caregivers. Lastly, this study illustrated that in an environment where parents are employed away from home, die young and are unable to fully commit to taking care of their young children, informal kinship care can make a positive contribution to the lives of black children in South Africa.

CHAPTER ONE

1. Introduction

A significant number of women in South Africa do not co-reside with their children as they have to migrate to seek employment or live in areas closer to where they are employed, thus meaning that their children are left in the care of others. This is despite the notion of traditional gendered divisions of labour which propels societal and cultural expectations that women should be responsible for the primary caregiving duties of children by assuming the responsibility of physical care such as bathing, feeding, ensuring school attendance and nurturing them (Hatch & Posel, 2018) to name a few. Men's duties are extended outside of the household context as they are expected to assume the role of financial providers (Hatch & Posel, 2018). However, perceptions and notions of the roles of men and women, particularly in the household domain, have been challenged and to some degree widened due to the increasing number of women participating in the labour market (Hatch & Posel, 2018). Therefore, it could be said that nuclear families in South Africa are ideal types of families that are predominantly a feature of families who are in middle and upper classes. Rather than a nuclear composition of households being a norm, the composition of extended families due to informal kinship care is prevalent in the South African context (Mokone, 2006).

1.1. Research question

What are the experiences of young adult women who were raised in informal kinship care by maternal figures other than their biological mothers?

1.2. Research aim

The aim of this qualitative study was to explore the nature of young adult women's relationships with their mothers and informal kinship caregivers. Additionally, the aim was to explore how young adult women experienced their relationships with their maternal figures as well as to understand the attachment patterns that emerged.

1.3. Rationale and problem statement

One could assert that there is a dearth of research in South Africa that particularly focuses on the quality of relationships that are forged and maintained in informal kinship care contexts as well as the factors that play a role in these relationships. For example, some studies conducted in South Africa provide an overview of dynamics of poverty in our society and how these affect children, the households that they live in as well as the extent of their access to adequate services (Hall & Wright, 2010). Similarly, another study conducted in South Africa investigated how child mobility is influenced by maternal status as well as the household socioeconomic status and composition (Madhavan, Schatz, Clark & Collision, 2012), while another, also conducted in South Africa, explored children's residence patterns and whether their ethnicity plays a role in the living arrangements that are made (Sibanda, 2011). An additional study has investigated the experiences of foster carers who care for orphans receiving the Foster Care Grant in order to make informed interventions that can address the difficulties carers face (Hearle & Ruwanpura, 2009). There has also been a study that focused on the impact of labour migration on households and the extent and nature of its impact in households in rural areas (Dzomba, 2014) as well as how the patterns in adult migration and the migration strategies families undertake impact the children (Hall, 2017). Additional research has focused on South African policy initiatives that are concerned with care and families (Rabe, 2017) as well as the implications of care dynamics for family relations (Rabe, 2017). Furthermore, research has explored how parents' experiences and circumstances shape the development of young people as well as the impact that unstable parental co-residence has on the educational and sexual development of children (Marteletto, Cavanagh, Prickett & Clark, 2016). Moreover, Dolbin-Macnab, Rodgers, Ryan and Traylor (2009) conducted a retrospective study which explored adults' experiences of being raised by their grandparents or great-grandparents, the evolution of their intergenerational relationships and how the caregiving context influenced their relationships. Lastly a study conducted by Goldschmidt, Alexander, Seabi and Maree (2019), examines black adults experiences of being raised in kinship care during adolescence and their how their upbringing influenced their psychosocial well-being as adults.

Although this list of studies is not exhaustive, it gives an indication that there is a paucity in literature about the quality of the relationships between an individual raised in kinship care, their carer as well as their biological mothers. The paucity is further highlighted by the limited research

that has investigated individuals' attachment patterns when they are raised in informal kinship care by a maternal figure other than their biological mother. Bearing the aforementioned in mind, the researcher was interested in the experiences of young adult women who were raised in the relational context of informal kinship care as the likelihood of their biological mothers' involvement and/ or frequency of contact with informal kinship care families is higher compared to a formal kinship care contexts (Messing, 2006; Washington, Cryer-Coupet, Coakley, Labban, Gleeson & Shears, 2014). In addition, a considerable amount of insight could be gained about the relationship between the participants, their biological mothers and their informal kinship carers because the researcher was interested in exploring the attachment patterns between young adult women raised in informal kinship care and both their maternal figures. Lastly, this study contributes to existing literature as currently, it appears that there is a lack of studies that use attachment theories to understand the relational dynamics in the context of informal kinship care, particularly when the separation from a primary attachment figure was prolonged and/or permanent.

1.4. Report overview

This research report consists of five chapters and each chapter is organized as follows; Chapter one includes a brief introduction to the study, the research question and aim, the relevance of this study, the rationale and problem statement. Chapter two, focuses on defining the key concepts of informal kinship care, a review of literature that is related to informal kinship in South Africa and abroad as well as Attachment Theory which is the theoretical framework for this study. Chapter three consists of explications of the research approach, research question, aim and objectives, sampling, population, recruitment, data collection, data analysis, ethical considerations, trustworthiness of the study and the researcher's reflexive account. Chapter four highlights the research findings and is followed by Chapter five where the findings are discussed in relation with relevant literature. Finally, Chapter five is also comprised of the conclusions, the limitations of this study and recommendations for future research.

CHAPTER TWO

2. Literature review

This chapter focuses on literature relating to kinship care both in the international contexts and in South Africa. Through engagement with this literature, this chapter will include definitions of key concepts as well as a discussion of the prevalence of and factors leading to informal kinship care and the characteristics of informal kinship caregivers in South Africa and countries abroad. Thereafter, this chapter focuses on Attachment Theory by providing the background to the theory and discussing the theory's focus on women as primary caregivers as well as the implications of applying the theory cross-culturally.

2.1. Definitions and types of kinship care

The term kinship care is used to refer to the full-time care of children by relatives when a child's parent or parents are unable or unwilling to care for them (Dolbin-Macnab, Rodgers & Traylor, 2009; Xu & Bright, 2018; Washington, Gleeson & Rulison, 2013). In addition, the term kinship care is also used to refer to living arrangements for children to be cared for by their relatives or individuals with whom they have had a relationship or shared a strong emotional bond with such family friends, grandparents or godparents (Geen, 2004; Manukuza, 2013). There is a variety of ways in which kinship care is defined and often, the term kinship care is divided into two types of care; namely 'formal' and 'informal' kinship care as defined by Manukuza (2013). Similarly, Geen (2004) uses the terms 'public' and 'private' kinship care which are synonymous with 'formal' and 'informal' kinship care.

With regard to 'formal' and 'public' kinship care, the formal process of assigning care and placement of children is overseen by statutory agencies who place children with relatives following court proceedings in cases of abuse, neglect, abandoning or orphanhood (Geen, 2004; Mkhwanazi, Makusha, Blackie, Manderson, Hall & Huijbregts, 2018)), and although the children are wards of state, they remain in the care of their kin. In contrast, statutory and welfare agencies have no involvement in the process of child care placements in 'informal' or 'private' kinship care and the decisions regarding child care are made within the family, often depending on factors such as the quality of the relationship between the child and the carer, the carers health and wellbeing, income and work possibilities to name a few (Geen, 2004; Mkhwanazi, et al., 2018). Furthermore,

‘informal’ or private’ kinship care placements occur when a child is placed in the care of a relative in the case that their biological parents are unable to care for them or if they are deceased on (Manukuza, 2013). Although there appears to be a distinction between the two types for kinship care, Geen (2004) argues that there is a lack of clarity with regards to the terminology and that kinship care arrangements lie on a continuum and has both informal and formal elements rather than there being two distinct types of kinship care.

Geen (2004) asserts that on one end of the spectrum, relatives are recognised by the state as foster carers of children and on the other end, relatives care for children upon their parents’ request, however without the state’s involvement. Geen (2004) further posits that in the middle of the spectrum lies childcare arrangements and placements that are made with the assistance of child welfare agencies but are not formalized as well as childcare arrangements where informal caregivers have legal custody of children in their care. In South Africa, the term foster care is used to refer to the care of children by carers who are not their parents. ‘Related foster care’ is used to refer to the placement of children in the care of their relatives and ‘unrelated foster care’ refers to the type of placement where a child is not related to their foster parent/s and has been placed in this type of care due to no support from their biological family. Furthermore, with both types of foster care, the placement can be short-term or long-term depending on the arrangement made (Manukuza, 2013). Lastly, both types of care can either be ‘formal’ or ‘informal’, although most families tend to apply for formal kinship care placements that include legal procedures which allow families to apply for foster care grants. However, it is important to note that in some cases, carers may apply for grants to benefit their own needs rather than those of the children in their care (Manukuza, 2013). In this study, the term ‘informal kinship care’ will be used to refer to the care arrangements made for individuals who were reared by a relative in the absence of their biological parents who were absent for reasons such as death, substance abuse as well as relocation due to work and/or completing their studies.

2.2.Kinship care in the broader context

2.2.1. Prevalence of informal kinship care internationally

The literature on kinship care suggests that informal kinship care is a form of alternative care whereby a child is raised and cared for by either their grandparents, relatives or family friends in a family environment in cases of parental absence or orphaning (Manukuza, 2013; Xu & Bright, 2018). The arrangements are often made by the child's parents and kinship caregivers "on an on-going or indefinite basis" (Manukuza, 2013, p.14), depending on the circumstances. In many cases of kinship care, the placement of children in the care of relatives or extended family members is influenced by the notion of 'family preservation' in terms of a child remaining rooted in the parents' culture. In addition, placement with relatives is also encouraged as there is a higher chance of a reunion between parent and child (Manukuza, 2013) for parents who are still alive. Furthermore, informal kinship care may also be a high priority as it allows for the preservation and protection of important kinship ties which play a key role in an "individual's sense of identity and continuity" (Harris & Skyles, 2008, p.1020) that is formed by and rooted in the attachments in one's environment as well as their link to their biological family (Harris & Skyles, 2008). In Xu and Bright's (2018) paper, it was put forth that in different parts of the world, such as America, Australia, Scotland, England, Spain and Norway, there has been an increase in the number of children placed in informal kinship care over the last two decades. Xu & Bright (2018), found that 27% of the 400,000 children who lived in foster care in the United States of America were placed in kinship care and similar results were observed in Australia as 49% of the children were also placed in kinship care. Other countries include Scotland with 10%, England with 10% and Norway with 13% of children who also live in kinship care. Lastly, 60% of Spanish children are cared for and raised by their grandparents (Xu & Bright, 2018).

This may be an indication that this form of alternative care is a high priority as it allows children to maintain their connections with their family, culture, as well as their community and it is likely to be more cost-effective than placing a child in non-kinship care or foster care (Xu & Bright, 2018). In addition, recent research conducted in the United States of America suggests that children are often placed in the care of grandparents (Levetan & Wild, 2016). For instance, it has been documented that there has been an increasing prevalence of changes in family structures in

the United States of America due to grandparents living with and raising their grandchildren in grandparent-headed households where the children's parents are absent (Poehlmann, 2003). As stated by Goodman and Silverstein (2002), grandmothers either take on co-parenting duties when parents do not live in the same household but are present in their children's lives or they become custodial grandmothers when parents are absent. Essentially, the grandparents serve the role of surrogate parents to their grandchildren by providing physical, emotional and financial support (Goodman & Silverstein, 2002; Poehlmann, 2003).

2.2.2. Factors leading to informal kinship care and characteristics of informal kinship caregivers in the United States of America

Evidence of grandchildren who are raised by grandparents is mostly observed among African American families because intergenerational care giving has been common in African American history (Bunch, Eastman & Griffin, 2007). Goodman and Silverstein (2002) as well as Harris and Skyles (2008) further support this notion by putting forth that African Americans are more likely than other racial and ethnic groups to be grandparent caregivers. Literature also suggests that African American communities have had extended kinship networks akin to West African communities that began in the slavery era to ensure the survival of the family and these kinship networks have continued to contemporary times (Goodman & Silverstein, 2002; Messing, 2006; Stewart, 2007). It is further understood that kinship networks have been an "adaptive response to social and economic disadvantage within the African American community" (Messing, 2006, p. 1418), especially in circumstances where children are unable to live with their biological parents (Messing, 2006). According to Harris and Skyles (2008), African American children are more likely than children in other racial and ethnic groups to be raised and cared for by grandparent caregivers who are likely to be related to the children through the maternal blood line, as posited by Denby, Brinson, Cross and Bowmer (2014). Furthermore, caregiving responsibilities are overwhelmingly assumed by aging women, specifically grandmothers, who are most likely single with resources that are limited (Harris & Skyles, 2008).

With regards to the pathways to informal kinship care, literature suggests that they vary considerably from some grandparents being motivated by "a strong sense of family obligation" (Gleeson, et al., 2009, p. 301) to keep their grandchildren within the family, to other grandparents

who intervened “to circumvent temporary or permanent placement of their grandchildren into the child welfare system” (Bunch, Eastman & Griffin, 2007, p.94). The reasons for parents being unable to care for their own children are also varied and distinct. For instance, parents in the United States of America who may be incapacitated by drug or substance use or abuse and live on the street or at home periodically have children who are in kinship care (Bunch, Eastman & Griffin, 2007; Poehlmann, 2003; Washington, et al., 2014). In addition, some parents are unable to assume responsibilities for their children and/or live with them as they are either transitioning after being released from substance abuse treatment facilities or psychiatric hospitalization, or they were released from prison and are still transitioning into their community (Gleeson, et al., 2009; Washington, et al., 2014). Furthermore, some parents are unable to fulfil their care giving responsibilities as they may not have had sufficient economic resources to do so or they may have been teenagers or young adults who were completing their studies, establishing their careers or pursuing economic opportunities, hence placing their children in the care of grandparents (Goodman & Silverstein, 2002). In some instances, grandparents assume care giving responsibilities of children to support single or divorced parents or to care for grandchildren who have been relocated for school districts that are better (Goodman & Silverstein, 2002). Lastly, parental absence may also due to parents’ negligence of their care giving responsibilities (Goodman & Silverstein, 2002), or due to illnesses such as HIV as well as death (Bunch, Eastman & Griffin, 2007; Washington, et al., 2014).

2.3.Kinship care in the South African context

2.3.1. South Africa’s socio-political history & it’s contribution to informal kinship care trends

In South Africa, it is important to take into consideration the country’s segregated past as this had implications on the composition of families and households in the country. To begin with, the racial segregation during the Apartheid era impacted many South African families and particularly the composition of households as the Apartheid regime had imposed legislature which prohibited the permanent urban migration of black people, restricted their movements in urban areas as well as their opportunities for housing and employment (Hall & Wright, 2010; Mtshali, 2015; Sibanda, 2011). Consequently, many black South Africans worked in urban areas whilst their families and

dependents were forced to reside in the homelands (Hall & Wright, 2010; Sibanda, 2011). The term ‘homelands’ refers to areas in South Africa to which non-white or non-Europeans such as black, coloured and indian people were relegated if they were considered to be non-productive or “redundant to the needs of the White Economy.” (Hall & Richter, 2018, p. 25). Under the apartheid regime, non-white or non-European individuals and families were forcibly removed from towns or other urban spaces designated to white or European people. Temporary residence in white or European areas was granted to non-white or non-European individuals, pending their fitness to work. However, if they were no longer needed in the labour market, they were expected to return to their assigned homeland. Although forced removals affected coloured and indian people, it is black individuals and families who were disproportionately affected (Hall & Richter, 2018).

Socio-politically speaking, South Africa has experienced a change over a period of years as a result of urbanization and the development of cities, factories as well as commercial businesses (Sibanda, 2011) which influenced labour migratory patterns. In addition to the aforementioned, labour migratory patterns have also been a key influence in the shift of patterns regarding family and household structures, relationships and cohabitation to name a few (Sibanda, 2011). Although the apartheid regime and its restrictions on black people’s lives were abolished, labour migration patterns persist and the socio-political ramifications of the previously entrenched laws are still visible in present-day South Africa (Posel & van der Stoep, 2008, Sibanda, 2011). In their paper, Hall and Wright (2010) illustrated the striking racial difference in child-parent co-residence and they attributed the stark contrast to the legacy of migration, labour and housing policies during Apartheid. Hall and Wright (2010) also found that of the children who lived with both parents, 29% were black, 53% were coloured and 70% were white. Furthermore, of those who did not reside with either of their parents, 25% were black and 4% were white (Hall & Wright, 2010). This statistical evidence of the composition of contemporary South African households is also supported by Marteleto, Cavanagh, Prickett & Clark (2016) who posited that black children are more likely to live in extended households with relatives, compared to white children who are more likely to be raised in nuclear family households. The reason attributed to black children being raised in extended households is the legacy of poverty and the apartheid eras legislative restrictions which contributed to the culture of collectivism and interdependence in black families. One could assert that this is evident in black households where there are absent spouses and parents who live

and work in urban areas because their families in rural areas are financially dependent on them (Sibanda, 2011). Consequently, it is an uncommon occurrence for black children to grow up with both parents present in the household (Hatch & Posel, 2018).

Although patterns of urban labour migration have historically and traditionally been seen amongst male adults, there has been an increase in the migration of female adults who are on average women with children or those who are of child-bearing ages (Hall & Wright, 2010; Posel & van der Stoep, 2008). Hall (2017) asserts that the increase in the labour migration of women has been due to the feminisation of the labour force as well as the increase in the prevalence of migration amongst South African women. Madhavan, Schatz, Clark and Collision (2012) support these findings as their paper illustrates that between 1993 and 1997, the age of female labour migrants increased from 7.4% to 8.9%. In addition, Hall (2017) notes that 34% of the urban migrant population was made up of women and that by 2008, 37% of labour migrants were black women. Furthermore, Posel and van der Stoep (2008) estimated that 22% of children who live in urban areas and over 30% of children in rural areas do not co-reside with their mothers. From these statistical findings, one could posit that one of the key reasons for maternal absence is labour migration as it is working-age adults, most often those from poorly resourced areas, who have to migrate for work (Mkhwanazi, et al., 2018) which therefore means that children are affected as a result. Despite the increase in female labour migration amongst black women, it is highly likely that this demographic retains their attachment to their home of origin (Hall, 2017), especially when they have children in the care of female relatives who are able to provide substitute care (Madhavan, et al., 2012) in their absence. This therefore suggests that a sizeable number of children are cared for by extended family members, thus indicating the significant role of informal kinship networks as sources of support and childcare (Hatch & Posel, 2018).

2.3.2. Pathways to informal kinship care

In South Africa, child care in informal kinship arrangements are shared or delegated and the decisions surrounding this matter are often influenced by the availability of resources and opportunities for care, which by are in large intertwined with the legacy of apartheid and are circumscribed by systems of inequality which families across the race, gender and class lines are unable to control (Mkhwanazi, et al., 2018). Additionally, it has been established that relatives are

the first option for informal kinship care and they are more likely to take or be given child care responsibilities (Levetan & Wild, 2016) of children who do not reside with their parents. In addition to labour migration as a catalyst for changes in the composition of many black households, the absence of biological parents can also be attributed to orphaning, HIV/AIDS mortality, poverty, school choices, how household resources and care responsibilities are allocated (Hall & Wright, 2010), as well as substance abuse or neglect (Mtshali, 2015). Moreover, some mothers may opt to place their children in the care of their relatives due to high cost of living, the nature of their jobs as well as lack of support and childcare in the areas where they are employed (Posel & van der Stoep, 2008).

2.3.3. Characteristics of informal kinship caregivers

According to Pretorius and Ross (2010), kinship care placement is the most prevalent type of foster care in South Africa and it has been a long-standing practice particularly in black families. Whether short-term or long-term, informal kinship care placements are favoured over formal kinship care placements and non-related care placements as children often know the family members with whom they are placed, this thus makes the transition and the adjustment easier but also aids in the continuity of familial relationships and cultural practices (MacDonald, Hayes & Houston, 2016; Pretorius & Ross, 2010).

In their paper, Mkhwanazi, et al., (2018) highlight that care is gendered because it is mainly women who are the main caregivers when care arrangements for children whose parents are unable to care for them. Additionally, female kinship caregivers are tasked with the responsibility of responding to and ensuring that the needs of the child are met. Their responsibilities, if possible, also extend to providing a safe, sensitive, responsive, consistent and nurturing environment with routine that would allow a child to develop healthy social relational and behavioural skills as well as confidence (Mkhwanazi, et al., 2018). Female caregivers of children in informal kinship care are usually either older sisters, cousins, great-grandparents, however in most cases, care and parenting responsibilities are assumed by grandmothers (MacDonald, Hayes & Houston, 2016; Mkhwanazi, et al., 2018). Mtshali (2015) notes that black grandparents have played a pivotal role in providing parental support and in bringing up their grandchildren. It has also been asserted that grandmothers are a primary source of support as black parents prefer them as parenting sources and rely on them

more often than other family members to provide care (Mtshali, 2015). Therefore, in light of the increasing prevalence of grandparents raising their grandchildren, one could assert that nuclear families consisting of both parents raising their children are the ideal, rather than a reality in the South African context. Thus, it is arguably worthwhile to consider the nature and quality of the relationships between grandmother's and their grandchildren as well as how the relationship can be a source of attachment for both of the caregiving grandmother and their grandchild (Goodman, 2012).

2.4. Understanding the maternal caregiving role through the lens of Attachment

Theory

According to John Bowlby, who formulated and founded the basic tenets of attachment theory, infants have a biologically based and driven need to attach themselves to their primary caregiver, most often their mother, by seeking, establishing and maintaining physical proximity to their primary caregivers in order to ensure survival and to promote emotional security (Minde, Minde & Vogel, 2019; Poehlmann, 2003; Wallin, 2007; Yoo, 2014). Moreover, Bowlby postulated that infants exhibit attachment behaviours such as sucking, clinging, smiling, crying, and following, to name a few, which become focused on a specific attachment figure and are exhibited within the second half of the infant's first year of life (Parkes, Stevenson-Hinde & Marris, 1991). These attachment behaviours serve the function of binding a child to its primary caregiver and vice-versa as well as reassuring the child of its primary caregiver's availability (Stevenson-Hinde, 2007).

One of Bowlby's assertions was that attachment is likely to develop between an infant and their primary caregiver when both have positive feelings about one another as well as when they feel satisfaction and enjoyment from experiencing an emotional bond and relationship that is intimate and continuous (Bretherton, 1992; Minde, Minde & Vogel, 2019). In addition, attachment is also likely to develop between an infant and a primary caregiver who is responsive to the infant's cues, who actively interacts with the infant and brings comfort as well as the feelings of safety (Rutter, 1979). In addition, Datta, Marcoen and Poortinga (2005) suggest that the attachment bond and relationship between a primary caregiver and child is an enduring one because it begins in infancy in a care giving relationship. Wherein attachment behaviours are exhibited by infants in order to seek proximity and maintain contact with a primary caregiver who provides care and responds to

the child's needs and demands. Furthermore, it has been suggested that quality in an attachment relationship during infancy and childhood is important as it has an impact on one's development and self-concept throughout their life (Datta, Marcoen & Poortinga, 2005). Lastly, Bowlby also put forth that early bonding and the nature of the infant-caregiver relationship have an impact on interpersonal development and functioning as well as the social relationships that they develop later in life (Rutter, 1979). Attachment theory was further developed by Mary Ainsworth who was able to test Bowlby's ideas through her observational studies of attachment patterns (Bretherton, 1992; Parkes, Stevenson-Hinde & Marris, 1991) and this led to the classification of infant-mother attachments as either secure, ambivalent, avoidant or disorganised and these four classifications were later extended to adult attachment styles (Howe, 2011). According to Ainsworth's classifications, infants who are classified as having secure attachments are those who use their primary caregivers as secure bases when exploring the room. In addition, securely attached infants become upset when separated from their primary caregiver, however, they are comforted when their caregiver returns. The ambivalent attachment style is used to describe an infant who does not use their primary caregiver as a secure base and does not explore the room nor play even when their primary caregiver is present. Infants who are classified as ambivalent become distressed when their primary caregiver departs, but they are not comforted by their primary caregivers return and they may even resist their caregivers attempts to physically comfort them (Sigelman & Rider, 2007). Ainsworth's third classification, avoidant attachment, is used when referring to infants who explicitly exhibit distress when separated from their primary caregivers and tend to appear indifferent or avoid their caregiver when they return. Lastly, infants who are classified as having the disorganized attachment style tend to vacillate between seeking comfort from their primary caregivers when they return and being frightened and moving away when their caregivers approach them (Sigelman & Rider, 2007).

Ainsworth's contribution to attachment theory was the formulation of the concept of an attachment figure who functions as a secure base for an infant to explore their surroundings as well as the development of the concept of maternal sensitivity (Bretherton, 1992; Parkes, Stevenson-Hinde & Marris, 1991). In addition, she developed the concept of "sensitive responsiveness" which referred to a primary caregiver's ability to decipher an infant's emotional cues, to ascertain when the infant needs comfort and protection and to respond appropriately (Mirecki & Chou, 2012; Stevenson-Hinde, 2007), thus promoting security in the infant (Stevenson-Hinde, 2007).

Despite the tendency for attachment studies to focus on mothers as primary caregivers, there is evidence that by 18 months, infants' develop attachments with a hierarchy of figures other than their mothers such as their father, siblings and grandparents (Bretherton, 1992; Minde, Minde & Vogel, 2019), thus meaning that multiple attachments can be formed (Poehlmann, 2003; Rutter, 1979). However, Bowlby put forth that a child has an innate bias to attach themselves to one individual and that this main attachment figure is different from other attachment figures in the sense that "they are not of equal strength and are not freely interchangeable" (Rutter, 1979, p. 286). This may be due to the fact that infants are more likely to form attachments with individuals who regularly and consistently meet their emotional and physical needs (Minde, Minde & Vogel, 2019).

Attachment theory is an appropriate lens through which to view this study because it is an important theory that has played a significant role in understanding of the relationship between a child and their primary caregiver as well as the understanding of how early attachment experiences have a bearing on one's development later in life (Harris & Skyles, 2008).

2.5.Attachment and the maternal care giving relationship

Arguably, the importance of female caregivers has been illustrated in the theories of attachment which have contributed to our understanding of the attachments formed between infants and their primary caregivers, primarily their mothers. Given that Bowlby placed an emphasis on the female primary caregiver (Stevenson-Hinde, 2007) in attachment relationships and because literature suggests that informal kinship care responsibilities are predominantly assumed by female caregivers (Denby, Brinson, Cross & Bowmer, 2014; Madhavan, et al., 2012; Mkhwanazi, et al., 2018), one could argue that the exploration of young adult women's experiences of being raised in informal kinship care by a maternal figures other than their biological mother through the lens of attachment theory is beneficial to this study. The reason for this is because mothers are often the primary caregivers and primary objects of identification for children, particularly for their daughters (Shrier, Tompsett & Shrier, 2004) and in addition, they are considered to be responsible for conveying values and preparing their children to become well-functioning members of their society (Onayli & Erdur-Baker, 2013). Furthermore, Onayli and Erdur-Baker (2013) assert that daughters' relationships with their mothers remain significant throughout their lives because

mothers often devote more time to their children compared to fathers and with mothers as the main caregivers, daughters tend to associate more with their mothers than their fathers.

As maintained by Shrier, Tompsett and Shrier (2004), the relationship between mothers and daughters may have “elements of fusion or strong feelings of attachment, connection, [and] mutuality” (p. 94) and that the relationship has impactful implications on a daughter’s self-identity formation, self-definition, self-esteem, career choices, life satisfaction as well as relationships with their significant others (Onayli & Erdur-Baker, 2013; Shrier, Tompsett & Shrier, 2004) and how they interact in their social environments (Onayli & Erdur-Baker, 2013). This thus suggests that mothers play a crucial role in their daughters’ lives and that a mother-daughter relationship is important to a daughter’s subjective wellbeing and healthy development throughout her life (Shrier, Tompsett & Shrier, 2004) especially when a daughter perceives the relationship to be accepting, loving and low in hostility (Onayli & Erdur-Baker, 2013). Although attachments patterns vary over one’s lifespan and a mother might not be their daughter’s primary attachment figure in adulthood, she may continue to serve as an attachment figure of importance (Rastogi & Wampler, 1999).

It is worth noting that although theories of attachment have played a fundamental role in providing insight and an in-depth understanding of the dynamic nature of relationships between children and their caregivers as well as the impact for these relationships throughout their lives, a substantial number of studies are arguably representative of Western contexts, constructs and ways of understanding attachment (Onayli & Erdur-Baker, 2013). As the theory and research on attachment have developed over the years, concerns and questions regarding the important role that culture plays on the practices of child rearing as well as the applicability of attachment theory cross-culturally have been raised (Mirecki & Chou, 2012; Onayli & Erdur-Baker, 2013). Arguably, the theoretical considerations of attachment theory are predominantly applicable to white middle-class nuclear families (Yeo, 2003), hence the argument that cross-cultural attachment studies tend to be etic instead of emic (Mirecki & Chou, 2012; van Ijzendoorn & Sagi-Schwartz, 2008). Simply put, rather than applying constructs and methods that are culturally and contextually appropriate, cross-cultural studies instead observe non-Westernised cultures and family networks by applying constructs and methods that are Western (Mirecki & Chou, 2012), thus meaning that the culturally laden meanings of the behaviours and actions of those in non-Westernised societies may be

overlooked (Yeo, 2003). Case in point Yeo's (2003) assertion that our understanding and interpretation of caregivers' responsiveness and sensitivity may be contingent on the care giving values of the society that the child-carer dyad lives in. Therefore, a practice such as an established feeding routine may be considered to be normative in the West, for example, but may be regarded as a form of delayed gratification in another context, whilst being regarded as unresponsive and insensitive to a child's needs (Mirecki & Chou, 2012; Yeo, 2003) in a different setting.

In a similar vein, van Ijzendoorn and Sagi-Schwartz, (2008) argue that in contexts and cultural niches where the health, survival, and successful reproduction of humans are not threatened, secure attachments are the expected norm and the assumption is often that the development of this attachment pattern is adaptive as it allows for young children to explore their environments from the security of their caregivers who provide a sense of safety in times of distress. Illustrating a contrasting notion, van Ijzendoorn and Sagi-Schwartz, (2008) also suggest that cultural niches and contexts that are harsh or wherein parents are stressed by the socioeconomic circumstances, young children may be prepared to develop an avoidant attachment pattern by their parents so as to better cope with stressful socioeconomic factors. Therefore, in this type of niche and with these contextual demands, the development of an avoidant attachment pattern may be normative and adaptive (van Ijzendoorn & Sagi-Schwartz, 2008). Bearing the aforementioned in mind, perhaps we could consider the development of different attachment patterns as the development of adaptive strategies that are suited to particular environments. Additionally, the development of different attachment patterns could be seen as responses to particular adaptation challenges, rather than regarding some attachment patterns as healthy and others as anomalies (Keller, 2013).

Therefore, in the context of this study, it is important to bear in mind that nuclear families are not a common occurrence and that because children are more likely to be raised by their grandmothers than their mothers, the development, formation and/or disruptions (Poehlmann, 2003) in the relationships can be anticipated. As such, an attachment perspective would be helpful in investigating and understanding the impact of informal kinship care on families where grandmothers play a crucial role in raising their grandchildren as well as the relational processes that occur.

CHAPTER THREE

3. Research methodology

This section includes a discussion of the research aims, objectives, approach, design and the sampling strategy employed in the study. In addition, an outline of the participants' demographics, recruitment, data collection, data analysis, ethical considerations and criterion of trustworthiness is provided in the section below.

3.1. Research question

What are the experiences of young adult women who were raised in informal kinship care by maternal figures other than their biological mothers?

3.2. Research aim

To explore the relational experiences and attachment patterns that emerge between young adult women raised in informal kinship care and their maternal figures.

3.3. Research objectives

The objectives of this research study were to:

- describe the nature of the participants' relationships with their biological mothers and their kinship carers
- establish the type of participants' kinship carers (i.e. if it's a grandmother, aunt, etc)
- determine the circumstances and pathways that led to the participants being placed in kinship care
- establish the composition of the household in which participants were raised
- establish the frequency of the participants' biological mothers' contact and involvement with the participants

3.4. Research approach

A qualitative research approach was chosen for this study because it allowed the researcher access to the context and social world of the participants, thus as defined by Bryman (2012) and Lee

(2014). One could argue that this aspect of a qualitative research approach is relevant and important for this study as it assisted the researcher in gaining a contextualised understanding of the participants' subjective experiences, perspectives and reflections through their accounts of their upbringing in the context of informal kinship care as well as their relationships with their maternal figures. In addition, using a qualitative approach was deemed fit for this study because qualitative research tends to place emphasis and value in understanding the participants' social worlds from their individual frames of reference, as suggested by Gelo, Braakmann and Benetka (2008) and Bryman (2012). This aspect of qualitative research was important for this study because the researcher was interested in the varying ways in which the participants gave meaning to and interpreted their experiences of informal kinship care. Furthermore, using a qualitative approach allowed for a research report that is detailed and descriptive to be produced which is important given the complexity of the research topic in question. Lastly, a qualitative approach was beneficial to the study as the researcher was able to illustrate the events that occurred in the participants' lives as well as how they have unfolded in their respective social contexts.

From an ontological perspective, a social constructionist approach was taken for this study. Social constructionism is an ontological position in research that maintains that social phenomena and their meanings are continually being realised and constructed by social actors and that social phenomena are constantly being revised given that they are produced in and through social interactions between individuals (Bryman, 2012). As suggested by Gergen (1985) and Bryman (2012), this study took a social constructionist approach because the researcher aimed to provide a detailed explication of how the participants described, explained and accounted for themselves as well as the world in which they live. Lastly, a social constructionism approach was fitted to this study as the researcher was able to illustrate participants' understanding of their experiences as they have existed in the past, as they exist now and perhaps, as they may exist at a later stage.

3.5. Population

A population in research refers to a group of individuals who fit the criteria and characteristics of participants which have been outlined by the researcher (Given, 2008). For this study, the population of interest was young adult women who were between 20 and 35 years of age and were raised in the context of informal kinship care by a maternal caregiver.

3.6. Sample and Sampling

A sample is defined as a set of sources from which the data is drawn and the process of selecting the sample is referred to as sampling (Given, 2008). Snowball sampling (Atkinson & Flint, 2001; Bryman, 2012) was chosen as a sampling strategy because the population that the researcher was interested in was a hidden population that was relatively difficult to access. Through this sampling technique, the researcher identified one participant who then referred another individual as a participant who fit the inclusion criteria of the study. This participant was included in the study. The researcher hoped that the participants would be able to identify individuals that they know would be interested in partaking in the study and people who met the inclusion criteria; however, they were unable to do so.

Given the time constraints of the study, the researcher also employed a convenience sampling strategy (Bryman, 2012) by sharing an advertisement of the research (Appendix E) on the university's learning management system, Sakai and the social media application, WhatsApp so as to identify as many participants as possible. This sampling strategy was beneficial to the study because the researcher was able to reach a population that was accessible and as such, participants who were interested in participating in the study contacted the researcher and they were included in the sample. Although the researcher aimed to interview fifteen participants, only a total of eleven potential participants was reached and a sample of seven participated in the study. Two potential participants were not included in the study as they resided outside of Johannesburg and the remaining two did not respond to the researcher's attempts to schedule an interview. The sample included in the study consisted of seven black young adult women who were raised by an female informal kinship caregivers in South Africa.

Where the sample size and saturation (Gentles, Charles, Ploeg & McKibbin, 2015) of this study is concerned, the researcher was assured that the sample size of seven participants was sufficient. Given that the researcher did not encounter additional or new information to the data that had been collected, the researcher was confident that saturation had been reached after seven interviews and that further data collection would not be necessary as similar information to existing data would be yielded.

3.7. Recruitment of participants

With regard to recruitment, the recruitment of participants only commenced once permission to conduct the study was gained from the university. In terms of recruiting participants, researcher designed an advertisement (Appendix E) that had the relevant details pertaining to the study. The researcher was assisted by the administrator and course coordinator in the Psychology Department as well as her supervisor and the course coordinators in the Social Work Department who circulated the researcher's advertisement on Sakai, the university's learning management system that is accessible to both staff and students. The researcher also approached Psychology and Social Work Honours students at the beginning of their seminars to inform them about the study and to invite them to participate if they wished to do so. This approach to participant recruitment was taken because the researcher aimed to reach a population that was as wide and enriching as possible. Subsequently, the researcher received emails from students who expressed their interest in participating in the study. The researcher then sent an introductory email with the participant information form attached for each participant. Thereafter, the researcher scheduled a time and venue for each participant's interview.

The researcher also shared the advertisement on the social media platform, WhatsApp. The reason for this approach is that the researcher had knowledge of family members and acquaintances who were reared in informal kinship care by maternal figures other than their biological mothers and that this social network of people is also acquainted with other individuals who share similar characteristics in terms of their upbringing. The researcher asked for participant referrals from individuals with whom she is acquainted and it is through referrals from the researcher's social network that the researcher was able to identify participants relevant to this study. Once permission was granted from the potential participants that their information may be shared with the researcher, the researcher requested the contact details of the identified individuals from her social network and acquaintances so as to make initial contact with potential participants via email and WhatsApp text messages. The purpose of the initial correspondence with each individual was for the researcher to introduce herself, to provide details about the study and their role in the study as well as to gauge their willingness and interest in participating in the study. In addition, the researcher also attached a participant information form that served as an introduction to the study. After the individuals had read the information form and confirmed their interest in participating in the study, arrangements were made for the interviews to take place. It is important to state and

specify that the researcher did not include individuals with whom she is related to nor acquainted with as part of the sample. Rather, those within the researcher's social network were engaged as resources to identify viable participants.

3.8. Data collection

As illustrated in Appendix A, the interview schedule used during the data collection phase consisted of three semi-structured questions that were posed to the seven participants. The researcher utilised semi-structured interviews as a method for data collection given that semi-structured interviews often yield rich, detailed data (Bryman, 2012). This was important for this study because the researcher had a vested interest in establishing an in-depth understanding of how participants framed and understood their experiences in informal kinship care contexts from their subjective standpoints.

As a method of data collection, semi-structured interviews were beneficial to the study as they offered a relative amount of flexibility and leeway for both the researcher and the participants as illustrated in Bryman (2012) as well as in Humphrey and Lee (2004). The flexibility of semi-structured interviews was a key factor in this research because it allowed the researcher the freedom to respond towards the direction taken by the participants, the ability to adjust the questions depending on the important issues that emerged and it allowed the researcher to further investigate and gain clarity by asking additional, probing questions when participants' responses were unclear, short or vague. Where participants' flexibility was concerned, the use of semi-structured interviews gave participants a degree of freedom in answering the interview questions, thus allowing them to share detailed accounts of their experiences as well as additional information which was elicited even when the researcher had not posed a question directly pertaining to the responses given (Bryman, 2012; Humphrey & Lee, 2004).

At the beginning of each interview, the researcher explained the nature of the research and the participants' involvement, ethical aspects of the study as well as the need and purpose of the audio recorder. Participants were then asked to select a pseudonym and to sign the informed consent form as consent to be interviewed and to be recorded with an audio tape recorder. The researcher conducted one private interview with each participant and the duration of each interview ranged from twenty minutes to forty-five minutes depending on each participant. Six of the seven participants were students from WITS University and their interviews were conducted in private

rooms in either the Psychology or Social Work Department where the quality of the recording was not affected by any background noise, per Bryman's (2012) guidelines. The participant who was not a WITS student preferred to be interviewed in her home and that is where the researcher met with her to conduct the interview. Following Bryman's (2012) suggestions, each interview was audio recorded and this allowed the researcher to fully engage with and be present in conversations with each participant and to freely converse with participants without being distracted by note taking. The audio recordings were also beneficial to the study as the researcher was able to transcribe the interviews verbatim, thus yielding transcripts that reflect the true nature of the interaction between the researcher and participants, the participants' experiences and the ways which they have chosen to relay them.

3.9. Data analysis

As an essential aspect of qualitative research, data analysis is comprised of various procedures such as coding, using writing memos from the outset and throughout data collection, as well as developing and connecting concepts in the data to literature that is relevant to the study (Given, 2008).

A narrative analysis was deemed suitable for this study because it is an analytic method that allowed the researcher the ability to explore participants' experiences and perspectives of their world as well as how they lead their individual and social lives (Connelly & Clandinin, 1990; Wiles, Rosenberg & Kearns, 2005). One of the main tenets of this analytic method is its focus on human experiences (Connelly & Clandinin, 1990) and how individuals have attached and assigned "meaning to their experiences through the stories they tell" (Moen, 2016, p.60) as well as their interpretations and constructions of the world around them (Wiles, Rosenberg & Kearns, 2005). An additional value that underpins narrative analysis is that, from childhood throughout their lives, individuals are continuously creating narratives to order or structure their experiences as well as to make sense of themselves and others (Moen, 2016). It is therefore through listening to the stories shared by participants that the researcher was provided with useful insights into important events and processes. This thus made it possible for the researcher to produce engaging narratives from the rich data (Connelly & Clandinin, 1990; Wiles, Rosenberg & Kearns, 2005) because "talk makes visible the unseen personal realms of experience, and embodies social contexts such as family, home and community" (Wiles, Rosenberg & Kearns, 2005, p. 90). Through narrative

analysis, the researcher was able to interpret and understand the layered meanings of talk during the interview as well as the connections between them. Moreover, the researcher was able to pay attention to and explore participants' embedded meanings and evaluations of themselves, their experiences and their context (Wiles, Rosenberg & Kearns, 2005).

To begin the process of analysing the data collected as posited by Terre Blanche, Durrheim and Painter (2006), the researcher read and re-read the transcribed interview transcripts so as to be familiar and well-versed on the structure, context and content of the interviews. The researcher analysed each individual interview transcript by also making note of the character's involved in the participants' narratives, the issues or topics they dealt with, places where events happened as well as the interweaving and interconnecting story lines of their narratives. In doing so, the researcher was able to explore and understand the participants' experiences of events from their perspectives as well as able to interpret and make meaning of their subjective experiences and the meanings assigned to them as illustrated in Connelly and Clandinin (1990), Pham (2018), Thomas (2010) as well as Wiles, Rosenberg and Kearns (2005).

In narrative analysis, there are three narrative coding and analysis tools which aid the analysis and seaming together of the narrative data by the researcher (Connelly & Clandinin, 1990). These tools include broadening, burrowing as well as storying and re-storying as defined by Connelly and Clandinin (1990) and Kim (2016). At the first level of analysis, which is broadening, the researcher coded the interview data of each transcript in terms of participants' socio-cultural milieus and the meanings attributed to them in the context of their upbringing in informal care contexts. Additionally, the researcher made note of commonalities between transcripts and across the data set, thus allowing the researcher to ascertain the prevalent informal kinship care experiences pertaining to the participants' socio-cultural milieus. These included where participants were raised, whom they were raised by, the pathway to informal kinship care as well as the composition of the households in which they were raised.

The second level of analysis involved the use of the second coding and analysis tool which is referred to as 'burrowing' according to Connelly and Clandinin (1990) and Kim (2016). The researcher continued to code the data of the interview transcripts so as to be able to make note of patterns in participants' responses, both in individual transcripts and across the data set. Thereafter, the researcher highlighted reoccurring and prevalent themes that emerged from the data. The

themes identified include ‘Participants’ experiences of their relationship with their informal kinship caregivers’, ‘Participants’ experiences of their relationship with their biological mothers’, and ‘Participants’ feelings and or challenges related to their experiences of being raised in informal kinship care contexts’.

By engaging with burrowing as a coding and analysis tool in this way, the researcher was able to thoroughly explore specific and important details such as the nature of participants’ relationships with their biological mothers and informal kinship caregivers, the nature and dynamics of these relationships throughout their lives as well as participants’ feelings and understandings about these relationships. Furthermore, the researcher was also able to gain insight into participants’ feelings, dilemmas and understanding of their rearing in informal kinship contexts as well as the impact that particular events or characters in their narratives had on them. Lastly, burrowing allowed for the researcher to be able to be sensitive to the nuanced meanings that the participants expressed and to understand participants and the varied contexts of their meanings (Connelly & Clandinin, 1990). The themes identified during the analysis of the data will be further elaborated on in chapters four and five.

In regard to storying and restoring, the researcher employed this coding and analysis tool following the processes of broadening and burrowing. As prescribed by Kim (2016), the researcher endeavoured to story and re-story the transcribed data in way that allowed the significance of the participants’ lived experiences of informal kinship care to come to the fore. As an additional measure of analysis, the researcher also incorporated temporality, sociality, and place to this level of analysis.

According to Clandinin and Huber (2010), temporality, sociality, and place are the three commonplaces that are integral to narrative inquiry as they allow the researcher to explore the complexities of participants’ lived experiences within and outside of the narrative inquiry as well as the possibilities of the participants’ future lives. Temporality refers to participants’ pasts, present and future as well as the people, places and events in their narratives (Clandinin & Huber, 2010). In addition, the sociality of a narrative inquiry pertains to participants’ personal conditions such as their feelings, reactions and desires as well as their social conditions which include the socio-cultural milieus in which their experiences unfolded. Lastly, place in a narrative inquiry refers to the particular physical locations where participants’ experiences and the events in their lives

occurred. As suggested by Clandinin and Huber (2010), the researcher simultaneously explored these three dimensions of a narrative inquiry and this allowed the researcher to inquire, explore and understand participants' experiences over time whilst taking into consideration the series of events which unfolded as well as the places where they took place as described by the participants.

3.10. Ethical considerations

In terms of ethical considerations, this study took into consideration, 'Ethical clearance and organisational or community permission', 'Voluntary participation', 'Informed consent', 'Confidentiality', and 'Potential for harm'. Where research with human beings is concerned, researchers' adherence to ethical guidelines is an integral aspect of the research process as they serve as guidance for studies to be conducted in such a way that the rights, dignity and welfare of participants are protected (Goodwin, 2010).

3.10.1. Ethical clearance and organisational or community permission where necessary

Prior to the process of conducting interviews with participants from WITS University, the researcher sought permission to conduct the study on the university's premises through a letter addressed to the registrar (Appendix B). The researcher received ethical clearance from the University of the Witwatersrand's Human Research Ethics Committee (Non-Medical). The ethical clearance number for this study is MPSYC/19/002IH (Appendix D). The permission to conduct the study on the premises of the university was granted by the deputy registrar (Appendix C). The researcher only approached participants who expressed their interest in participating in the study following receipt of the approval and permission from the university.

3.10.2. Voluntary participation

As posited by Bryman (2012), voluntary participation is an integral ethical component of any research study as it serves as evidence that participants have not been forced or coerced to participate in the study and that participants have a clear understanding that there will be no negative consequences should they declined to participate or decide to withdraw from the study at a later stage. As such, the researcher ensured that the participants understood that they were willingly and legally participating in the research study and that they were aware of their right to withdraw from the study at any point if they wished to do so. Voluntary participation was also important in this study because the researcher aimed to collect data from individuals who had a

genuine interest and willingness to take part in this study as well as participants who were prepared to freely and honestly contribute to the data so that the findings of this study reflected their authentic subjective experiences, as illustrated by Shenton (2004).

3.10.3. Informed Consent

Informed consent is an important ethical consideration because the researcher needed to ensure that the participants taking part in this study were fully aware of what the research entailed as well as what they would be asked to do during their participation. The researcher adhered to the ethical standards of research protocol as outlined by Bryman (2012) by giving each participant an information sheet (Appendix F) prior to conducting the interviews. The participant information sheet also provided an outline of the research aims, research goals, nature of the study as well as information regarding their participation so as to ensure that participants understood the contents of the participant information form, that they were well informed about the study and to provide them with the opportunity to ask questions or voice concerns prior to their interviews. Lastly, the participants were also required to sign an informed consent form at the beginning of each interview as confirmation that they have consented to being interviewed and that they had been made aware of and understood the study as well as the purpose of the audio recordings (Appendix G).

3.10.4. Confidentiality

According to Wiles, Crow, Heath and Charles (2006) and Kvale (2007), confidentiality in qualitative research pertains to assuring the participants that the researcher will not divulge the participants' personal particulars and ensuring the participants' privacy through the use of pseudonyms. Therefore, the researcher endeavoured to anonymise any identifiable information regarding the participants who took part in this study. To further ensure privacy and confidentiality, the researcher asked participants to choose and state their pseudonyms which were used to refer to them from the outset and throughout the study so as to not reveal their identity. This was done as a measure to ensure that the true identity of the participants is only known to the researcher and that their identity was concealed throughout the study so that the participants' views cannot be linked to a particular individual. Once the interviews were transcribed and each transcription was labelled using pseudonyms, the interview transcripts were stored in a password protected computer and folder which belongs to the researcher. The researcher's supervisor had access to the transcripts however, this did not compromise the integrity and confidentiality of the

participants as their real names and any identifying information remained disguised to the research supervisor.

3.10.5. Potential for harm

The researcher did not expect that this study would result in participants being harmed physically or psychologically, however given that the study is interested in the nature of the participants' relationships with their biological mothers and maternal informal kinship carers, the researcher anticipated that the interview questions may elicit emotional responses or cause anxiety in participants who don't have a good relationship with either their biological mother or informal kinship carer. As part of a contingency plan, the researcher planned to make referrals to the Counselling and Careers Development Unit (CCDU), Lifeline or The South African Depression and Anxiety Group (SADAG) for counselling services to appropriately address the issues that may arise. Participants were provided with information, however no referrals were made as none of the participants showed signs of emotional distress or discomfort during the interviews nor did they explicitly express their need for counselling services. Each participant had the contact details of each organisation so that if the need arose for counselling services after the interview, they could contact either the CCDU, SADAG or Lifeline privately which is particularly important for participants who didn't want the researcher to know.

3.11. Criterion of trustworthiness

In terms of trustworthiness, Bryman (2012) defines this aspect of research as criterion that aids the assessment and establishment of the quality of a qualitative research inquiry such that the research findings are trustworthy (Given, 2008). The researcher took into consideration transferability, dependability and confirmability in order to ensure the trustworthiness of this study as posited by Guba (1981) and Shenton (2004).

Firstly, transferability in a qualitative research pertains to whether findings of a study can be applied in others contexts and populations as well as the extent to which this is possible (Bryman, 2012; Guba, 1981; Shenton, 2004). As such, researchers undertaking qualitative studies are encouraged to provide thick descriptions and rich accounts of the phenomenon and the context in which it is investigated as well as the findings so as to ensure that readers are able to understand the study and to enable them to make comparisons to other contexts and research reports where

the phenomenon occurs (Bryman, 2012; Shenton, 2004). Where the transferability of this study was concerned, the researcher provided detailed descriptions of the sample selection process and the sample's characteristics as well as thick descriptions of the data, and findings in order to provide sufficient information so that the study can be applied in other contexts by future researchers who may be interested in this topic.

The researcher aimed to ensure credibility is achieved by ensuring that there was a congruence between the research findings and reality of the participants (Shenton, 2004). In order to do so, the researcher used the questions in the interview schedule found in Appendix A to ask questions that provided responses that were relevant to the research question and in turn, reflected the participants' lived experiences of being raised in informal kinship care. Furthermore, the researcher followed Shenton's (2004) suggestion for employing iterative questioning and as such, the researcher used probes to ascertain detailed information as well as returning to matters previously raised to clarify the researcher's understanding as well as to settle discrepancies or contradictions.

Dependability in qualitative research refers to the extent to which future researchers are able to replicate a particular and this is made possible through studies which detailed explications of the research design and methods and processes (Shenton, 2004). For this study, the researcher ensured this component of trustworthiness by providing detailed information about the implementation of the research design, detailed descriptions of the researcher's plans, research methodological processes and how they were executed.

Confirmability is concerned with the researcher's ability to illustrate that they have acted in good faith by ensuring that their own values and personal inclinations have not swayed the way in which a study is conducted (Bryman, 2012). In addition, confirmability refers to ensuring that the findings reported are the result of participants experiences rather than the researcher's preferences (Shenton, 2004). With regard to this study, confirmability was ensured as the researcher acknowledged beliefs and reasons that underpinned the decisions that were made for the methods employed and by providing explanations for the reason particular methodological approaches were taken. Furthermore, the researcher endeavoured to ensure confirmability by documenting the findings in such a way that they reflect the participants' true experiences and perspectives, rather than being influenced by the researcher's personal preferences. In order to achieve this, the

researcher acknowledged her predispositions and reflected on the research process in a reflective appraisal of the research in the reflexivity section below.

3.12. Reflexivity

In qualitative research, reflexivity refers to the researcher's capacity to reflect on the research process, the methods employed, their values as well as their biases (Bryman, 2012). Reflexivity also entails the researcher's engagement with how they influenced their study and practicing sensitivity to their own cultural and social context as well as that of their participants (Bryman, 2012; Given, 2008).

In terms of my own reflexivity, I was surprised that some participants had more than one informal kinship caregiver as I had assumed and taken it for granted that it is possible that one person may be cared for by different caregivers throughout their lives. Given that I had not personally experienced being reared by an informal kinship care giver and therefore not being well versed on the subject, I felt that I had to be mindful and sensitive in my interactions and responses to my participants as they were raised under circumstances that were quite different to mine. My bias in this regard was that my participants might take offence to what I say, however, that was not the case as they were quite forthcoming with their experiences. Perhaps if it were not for this bias, I may have been more comfortable asking questions that could have yielded richer data.

In addition, I had to be conscious and wary of my urge to probe further so as to allow my participants to take up the space that they needed to. Bearing the narrative data analysis in mind, I was aware that I ought not to ask too many probing questions, however this was difficult given my keenness and curiosity about my participants' experiences.

Lastly, in hindsight, I think that there were missed opportunities to explore the impact of maternal mortality on the participants as some of the participants had either lost their mother, grandmother or both maternal figures. I had the biased assumption that participants' maternal figures would be alive and I was taken aback when participants spoke of their deceased maternal figures. I was also unsure of how to respond to this information, partly due to not wanting to upset my participants but also due to not wanting to seem insensitive by exploring the matter further. My bias in this case was that participants would not want to discuss their deceased maternal figures as I had

assumed that they would not want to discuss this topic further. This stems from my personal experiences of being sensitive about maternal figures in my life who are deceased and as such, I think that this bias became a barrier in how I engaged with my participants about their deceased maternal figures.

CHAPTER FOUR

4. Presentation of Research Findings

This chapter presents the research findings. The findings are presented according to the themes and the quotes from the interview transcript data and are used to support the findings. The themes include; ‘Participants’ experiences of their relationship with their informal kinship caregivers’, ‘Participants’ experiences of their relationship with their biological mothers’ and ‘Participants’ feelings and or challenges related to their experiences of being raised in informal kinship care contexts’.

4.1. Participants’ experiences of their relationship with their informal kinship caregivers

Participants’ descriptions of the nature of their relationships with their maternal caregivers varied in nature. Their accounts of their relationships with their informal kinship caregivers revealed that they were either raised by their maternal or paternal grandmothers, or cared for by maternal great aunts due to their mothers being away as a result of death, substance abuse as well as relocation due to work and/or completing their studies.

They identified and referred to their grandmothers as their mothers, owing to the prominence of being primarily raised by them. Their grandmothers assumed the role of mothers in their grandchildren’s upbringing. Dineo was raised by her parents until the age of six before being placed in her maternal grandmother’s care in the Free State. Dineo grew up in informal kinship care in a household with her grandparents, two brothers and two cousins. Reflecting on her experience of her relationship with her grandmother, she said:

“Uhm...it was a good relationship but okay, how do I explain it? Uhm...I...don’t...(laughs)... [take your time]...okay she was a mother figure, ne? And uhm...the love she had for us ne? Ya it was just unconditional.”

Dineo later added that:

“So that thing. I don’t know I didn’t get that much attention. As much as I said she had love, she would take care of us but the...the...there...there was not that special attention, ne?”

Which thus indicates that although she had a healthy relationship with her grandmother, she may not have had as close a relationship as she may have desired as her grandmother had to take care of four other grandchildren and Dineo.

Refilwe was also raised in the Free State and she stated that her parents relocated her to live with her grandmother at three months old because her mother had to return to work. Sharing similar sentiments and reflecting back to her childhood experience of her upbringing by her maternal grandmother, Refilwe said:

“Well, I guess even now she is the best thing. She is my mom. She...I don’t know I had a great relationship with her. Uhm...she was a bit of a softy. A little bit strict [mmm] but I definitely had a good relationship. I didn’t have a discipline problem. I was always a good child, so I absolutely love my grandmother. I don’t remember ever having conflict with her.”

Refilwe also spoke about her current relationship with her maternal grandmother and said:

“I think it’s still...it’s still amazing. She’s still my mother. She’s still everything to me. I don’t think we ever had a crack or anything in the relationship.”

In Tshegofatsho’s experience of her upbringing in her paternal grandmother’s care in Gauteng and her accounts of her relationship with her grandmother, she said:

“I would say we were actually extremely close like extremely close. She was my best friend.”

“...our relationship it was just a mother-daughter kind of relationship with her...”

And in her reflection of her relationship with her grandmother prior to her grandmother’s death in January 2019, Tshegofatsho also recounted that:

“She was my mother...actually you know I refer to her as my mother. My late mother. Uh...she was there for me so she is the one who actually taught me a lot you know like when it comes to schooling and everything [mmm] I went through it through her.”

Echoing similar sentiments about the closeness between her and her maternal grandmother, Asanda gave a detailed account of her and her grandmother's relationship by saying:

“So it was that thing of I could still talk to her about anything and then I was more close to her...oh no...(laughs) I remember this other time I came to visit here. I came to visit my mom. It was in December. And then...no, not in December, in June and then I think into the second week and I was like, I think I want to go back now. I think I want to go back home now and then I started crying and my mother didn’t know what to do with me and then they said: “What do you miss? What do you need?” and I said “I want my granny.” So we had that relationship, like we had a lot of things that we shared. Those cute little traditions like drinking coffee before we did anything, uhm ... at the end of the month when we go for pension, I always go with her so it was always that thing...like we were always doing things together.”

From the extract above, it is clear that Asanda’s relationship with her grandmother was close, that they enjoyed each other’s company as they spent a lot of time together and that she had a clear preference for her grandmother, even when she left the Eastern Cape to visit her mother in Gauteng during school holidays.

In comparison to the participants’ experiences above, Lucky’s description of her relationship with her paternal grandmother who raised her from the age of two in Kwazulu-Natal differs in the sense that she highlights the physical and material needs that were met by her grandmother, in addition to her emotional needs such as when she said:

“So ugogo would wash for us, she would clean, she would cook, uhm I loved ugogo. I was so attached to ugogo do you get what I’m saying? She would buy me clothes.”

“But ugogo was literally the primary caregiver. And you know what I liked ne, I don’t know if I could get that from my parents.”

And lastly, she stated:

“I just think in a society whereby the mother is the primary caregiver, my mother was not the primary caregiver but I was honoured enough to have my grandmother as a primary caregiver and uhm being raised by my paternal family has fostered a very good relationship with my dad so I tend to be very close with my dad than I am with my mom.”

In the extracts above, Lucky also acknowledges the important role that her grandmother played in her life as well as how integral her upbringing in an informal kinship care context was to the establishment of her relationship with her father, whilst also comparing her grandmother's role and her view of the care that her biological parents may or may have not been able to provide for her.

Unlike Dineo, Refilwe, Tshegofatsho and Lucky who were raised by one maternal informal kinship caregiver, Betty and Ntombi had the experience of being cared for by two different maternal caregivers for either short or extended periods of time. For example, in Betty's description of her relationship with her maternal grandmother who had raised her until she was four years old in Limpopo, said:

"Like I never uh...like what? I was never too close to my grandmother but she's my mother now like I refer to her as my mother, ya. Like we never had like a close relationship. I always go to her like, whenever we're sitting and talking, it's like serious stuff only. We never like really chat and like ya."

Betty later added that:

"Ya but then ag..we weren't really close like I used to call my grandmother "mama" because like she raised me..."

"I was never too close to my grandmother but she's my mother now like I refer to her as my mother, ya. Like we never had like a close relationship. I always go to her like, whenever we're sitting and talking, it's like serious stuff only. We never like really chat and like ya."

When Betty was asked about her current relationship with her grandmother, Betty responded by saying:

"Ya, I don't even...I'm not even allowed to go out at night when I'm with her"

"Maybe she's scared that maybe I might mix with the wrong people. Maybe I might end up falling pregnant. Stuff like that, ya."

“She’s still strict. [mmm] Ya, she’s still strict. Like whenever she’s around eh, she asks: “Did you go to church?”, “Did you do this and that?” Ya, she’s still strict, nothing has changed about her...”

With reference to her second experience of maternal informal kinship care giving, Betty spoke of living in Limpopo in her maternal uncle’s household after her mother’s death and being cared for by his wife for two years before she left for boarding school. When Betty reflected on her relationship with her aunt, she said:

“Uhm...because like she...she’s a teacher, ne. Like most of the time, we like talk about school, school, school. Like she pushed like school-wise, ne? So eish relationship was like...how would I describe it? Like it was more of like a teacher and a learner type of relationship. Ya, like we weren’t that close. [oh okay] Ya.”

The above extracts and Betty’s experience of her relationships with her grandmother and aunt indicate that the depth of her relational experience with both maternal caregivers differs from those of Refilwe, Dineo and Tshegofatsho given that Betty did not make reference to the closeness of either relationship. Rather, her descriptions and accounts of both relationships may be a reflection of her emotional connection with both maternal caregivers as well as how they related to one another in the caregiving relationship.

Much like Betty, Ntombi was also cared for by two maternal informal caregivers at different points in her life and these caregivers included her maternal great-aunts but she referred to them as her grandmothers. Ntombi reported that she relocated to live with one of her great aunts because her mother did not have a child minder to care for Ntombi after school whilst she was at work. This led to Ntombi living in the North West Province from when she was 6 years old to 8 years old. When she spoke of her relationship with the first great-aunt that she resided with, and the informal kinship caregiver with whom she still has a close relationship, Ntombi said:

“The best (sighs) yoh she’s the most sweetest person ever and I love her to bits. I visit her often even now. So even the relationship at that time she would be like...you know when they say you have been treated like an egg? I was that type of person to her so she was the best person and she’s good with kids.”

Ntombi also added that:

“No, she...she...she’s amazing guys (smiles) we are...we’re not best friends but she’s my go-to person. She’s the one person that should anything happen to her, I would be like...depressed for a month...ya.[also other aunt]”

These extracts could be said to indicate the closeness, value and meaningfulness of her relationship with her great-aunt as well as her feelings about her, particularly with reference to her dependence on her as her “go-to-person” as well as her sense that she would have a difficult time processing her emotions should ill-harm befall her great-aunt. However, in a stark contrast to the excerpt above and to the abovementioned experiences of the other participants, Ntombi explicitly constructed her second caregiving experience as negative given how her other great-aunt treated her when she lived with her from when she was 9 until she was 13 years old in the Western Cape. For example, Ntombi said:

“and the one that I lived with the longest she was...ooh...I sometimes say she was a witch but ya. She was incredibly uhm...abusive like emotionally not to say physically but she was abusive emotionally.”

“So she was that type of person. and she was strict, but her strictness was on certain people. [okay] so some other people she would not be as strict as she was on us. She would say things like, “Ya, your mother doesn’t want to take care of you.”.”

In the excerpts above, Ntombi refers to her great-aunt’s preferential treatment towards the children in the household, namely her great-aunt’s tendency to favour her own children over Ntombi and another cousin who also lived in the same household. In addition, it is possible that the negative feelings that Ntombi had towards her mother and her mother’s absence when she was younger may have been exacerbated by her great-aunt’s comments and viewpoints on Ntombi’s mother.

4.2. Participants' experiences of their relationship with their biological mothers

Participants constructed their experiences by way of reflecting on their relationships with their mothers in the past, and by providing detailed accounts of their current relationships.

According to Dineo, her parents were unable to continue with their childcare responsibilities due to their employment in other cities, hence why she and her siblings were sent to live with her grandparents in the Free State. When Dineo spoke about her feelings and experience of seeing her mother when she was able to take time off from work to visit Dineo and her brothers, she said:

"I loved her. I don't want to lie. Okay, when she came, I would be so excited, ne? And I would be sad when she left. I felt like she could stay permanently but it was not possible."

And in regard to the nature of her relationship with her mother when she was young, she expressed that:

"I longed to have a relationship with her, that didn't prevent me as seeing her as my mother."

"...we had a good relationship but we didn't bond too much, I don't want to lie. We didn't have a strong bond. That mother-daughter bond."

"...she was not a kind of a mother who would, you know there are parents who would show excessive love to their children and things like that? She was not that type."

Although she describes her relationship with her mother as "good," she seems to have idealised perceptions about mother-daughter relationships and how they ought to be. Considering the excerpts above, it may be that the relationship she shared with her mother may have fallen short of her expectations, particularly when it came to the explicit expression of love and affection.

With reference to her relationship with her mother when she was older, she said:

"okay, my relationship with my mother although we were not together uhm...uhm...it...it got improved [mmm] to tell the truth. It was improved. Maybe it was also the gap of now seeing that the grandmother is not there, now we're starting to, you see? Trying to bond and things like that. It was...it was improving and uhm...she went an extra mile uyabona (do you see)? To make sure that I'm okay at school."

“...in the...the...the latest years up until she passed, we had a strong relationship. She was like my friend. I was like her friend...”

Taking the above extracts into consideration, it is evident that Dineo’s relationship with her mother and the relational dynamics between them improved in terms of the emotional aspect. In addition, Dineo acknowledges that her grandmother’s death in 2008 provided an opportunity for their relationship to develop and that although their relationship, in her terms, took the form of friendship, it was still a strong one until her mother died in 2018.

According to Asanda, she was placed in the care of her maternal grandparents three months after she was born because her mother had to complete her schooling and find employment. When Asanda shared her experience of her relationship with her mother as a young girl, she stated that:

“It was kind of distant for a very long time. I don’t know if she didn’t know how to...I don’t know... how to relate to me, but I was afraid of her.”

And when she reflected on the nature of their relationship currently, she said:

“But ya our relationship is picking up now. Okay, it picked up. We’re really close now. We’re close close.”

“We have that, you can even say it’s sisterly because she’s still quite so young, and stuff and then now she has to be a mother to my younger sister. We have like that relationship like I had with my grandmother before she passed on.”

In Betty’s account of her relationship with her mother when she was young and still living with her grandmother in Limpopo, said:

“...my mother was just that person that comes after a while with sweets and I’m just happy for the sweets that I get from her and ya that was it.”

And with regard to her perspective on her mother’s absence whilst she was completing her tertiary studies and pursuing her career:

“Because I was like never really close to her, like it didn’t really matter whether she’s around or not [mhmm] ya.”

Betty had said that she was cared for by her grandmother until she was four years old and that she relocated to live in Gauteng as her mother had completed her studies and was employed, thus meaning that she was able to care for her. Betty had also disclosed that her mother had died when she was ten years old and in her reflection of the relationship she had with her mother before her untimely passing, Betty expressed that:

“I think it was more of a friendship in a way, ya ‘cause like we used to share a lot of things hey. Ya like I wasn’t afraid to tell her anything, ya...so friendship.”

Refilwe shared her experience of her relationship with her mother during her formative years whilst she was living in the Free State with her grandmother,

“I think with that...the reason why I say she was in and out ‘cause I really don’t remember her before six. I don’t remember my mom. I don’t remember, you know the odd weekend visits and so on. [mmm] I don’t remember those. [oh okay] I really don’t. But I know she was...like I knew I had a mom that was in Gauteng, [mmm] but I honestly can’t tell you what the relationship was at that time, or how I related to her.”

Interestingly, the way in which Refilwe has constructed her experience illustrates that her mother made physical contact with her occasionally by visiting on weekends though she could not recall her mother being present. In contrast to the other participants who had recollections of their mother during their formative years, Refilwe does not recall being in contact with her mother or having a relationship with her, despite having had knowledge that she had a mother who lived in another city.

She reflects on the current nature of her relationship with her mother as follows:

“It’s getting better. It’s getting better. Uhm...I guess you could say we are building a relationship. We’re friends.”

When Lucky spoke of her relationship with her mother when she was a young girl, she mainly expressed the role her mother played in terms of the frequency of their contact and the material

needs that were met whilst her mother was working and living in Gauteng as demonstrated in the quote below:

“My mother would call me every day at three, like literally every day. Ne? And I know every month she would travel to Durban and just buy me izinto (things). She’d buy me clothes.”

With regard to the recent development of her relationship with her mother as well as her awareness of the contention between them, Lucky said:

“So ya I started staying with my mom ngo2016 (in 2016) and then I started to realise ukuthi (that) we’re not as close as I’d always imagined us to be. We had amafallouts amaningi (many fallouts) and one of the reasons why we were not getting along very well is because I was angry.”

“So we may not be close but as long there’s ipeace (peace) between us, that’s what I’m all for...”

Ntombi spoke about her experience of her relationship with her mother whilst she was in the care of her great-aunt in the Western Cape and said:

“(Sighs) I think I would say I regarded her as an aunt not really my mother because it was more like, oh it’s my mother yes, but my aunt. You know I had the feeling that it is my mother but in some way it felt like she is more of somebody else’s mother than my mother. Uhm...because we didn’t have that close relationship...”

And then she talks about her current relationship with her mother, her assertions are as follows:

“(Sigh) I love her but...I feel she...I don’t know (clears throat) how would I describe it? (sigh) It’s not a love and hate. No. I just feel that she is not responsible. I feel she is really not responsible as a mother. (coughs) I really feel she’s not responsible and I feel she’s selfish. [mmm] ya.”

“So even now...from then until now (clears throat) we really don’t have a good relationship. We fight a lot and uhm she has decided to move out of the house now.”

Compared to relational experiences shared as discussed above, Tshegofatso’s construction of her experience is different given that her mother’s absence was permanent rather than inconsistent. The reason for this is that her mother placed her in her grandmother’s care at 4 months old and did

not resume her care giving responsibilities. Consequently, this resulted in them not having a relationship from when she was young and to date as an adult. When she spoke of her relationship with her mother, Tshegofatso said:

“...but my mom didn’t make an effort to you know like call or come and visit, you know?”

“I’m not talking my mom bad but my mom is an alcoholic after all. So...for her, she was too much focused on her life of drinking than taking care.”

“...she’s always someone who wants to....chill at the taverns, drink with her friends indoors and stuff like that is not a good environment for a child to grow up in. Yah, that’s how I ended up in the care of my grandmother.”

“So throughout that time uhm...I knew that I had a biological mom because they told me and everything like that. Uh...but we didn’t have a relationship you know, at all.”

Tshegofatso continued to share the complexity of her relationship with her mother and made reference to her feelings about her mother by saying:

“Even some people they just know my grandmother as my mother but they don’t know my mom at all, you know? So we don’t have a relationship at all, so...uhm...it’s like I don’t feel anything. Yah, honestly, I don’t feel anything. I can’t say...there’s nothing to describe because there’s nothing there at all, you know? It’s just one of the like...just a normal person in our family but nothing besides that.”

4.3. Participants’ feelings and challenges related to their experiences of being raised in informal kinship care contexts

Participants’ constructions of their experiences of feelings or dilemmas of being raised in informal kinship varied, however there were some similarities in the challenges that they were faced with. For example, Betty reflected on her experience of living and being cared for by her aunt as follows:

“So like ya, like...(sigh) but she was fine in a way, hey. Like she kinda like treated us equally, me and my cousin but ah there was a time where I felt that okay, I’m just...somebody in this house. I’m...like this is not my mother. I can’t just ask her for anything I want and like at the time, like,

okay. Like there was a point where we would like...okay you want something but you decide not say. You just let it pass because like you know that okay these are not my parents. They probably won't respond the way I want them to respond."

Echoing similar sentiments not belonging and in this case resentment, Lucky expressed that:

"I felt like they had to accommodate me but I think to be fair leyofeeling (that feeling) came from a place of thinking that I do not belong, you feel the need to accommodate them and you feel the need to be accommodated for."

"...the only reason why I resented her [my mother] is because I had to be kept a secret kubona bonke abantu (from everyone) because I'm still kept a secret."

"Because my mom can't bring herself to say to them [my half-siblings], "this is your aunt." Or "uLucky (Lucky) is my child." So she will say...so I call her 'mom' but on the other hand, I don't get treated like I belong kule (to this) family. So they think the closest thing it's either uLucky is our cousin or uLucky is the helper and we're just not related to her."

"For the longest time bengi angry mengivuka ekuseni (I would be angry when I woke up in the morning) and I'd see her ironing my siblings' clothes. When she sits with them abayenzise ihomework (doing homework with them) because I thought, 'You couldn't even do that with me.'"

The extracts above illustrate the contention of Lucky's experience of being raised in informal kinship care. These extracts also evidence the complexity of Lucky's feelings and emotions related to being kept a secret from her step-father's family as well as her mother and step-father's social network given his status as the leader of a church.

Therefore, despite being a member of her mother and step-father's household, she is not explicitly referred to as a member of the family. The excerpts above illustrate that rather than being known as the daughter, Lucky's mother introduces her as her younger sister and that is also who she is known as to her mother's in-laws, although her step-father knows that she is her mother's daughter. Where Lucky speaks of being denied recognition as her mother's daughter in their home, she is referring to her younger half-siblings' confusion about who she is given that their mother has not

told them that she is their older sister in order to maintain the facade of Lucky not being her daughter.

Refilwe expressed her awareness of the contrasting nature between the relationship that her mother has with her and that which her mother shares with her older sister by saying:

“Ya, my older sister [oh okay] has a very great relationship with my mom because obviously she spent more time with her. That’s how I concluded that they know each other better, they laugh at the same things. My sister is older. She’s like six years older than me. Eight years I think, ya, so...ya. I think their relationship is better than mine and my mom’s.”

Further expressing her desire for a closer relationship with her mother, she said:

“I wish my relationship with my mom was better [mmm] but at the same time, I’m close to my younger siblings, I’m close to my grandmother, so I want to say that it doesn’t matter because I still had a maternal figure [mmm] but at the same time, everyone wants to have a relationship with their mom so ya, I wish it was different.”

An additional dilemma and experience that was mentioned was age as there were particular challenges that arose as their grandmothers aged. For example, the role reversal that was observed when Dineo stated that:

“Now that my grandmother was getting old, she’s getting sick and things like that. So I had to do things at home. Like we would...uhm...(laughs)...cook to start with...”

Similarly, Tshegofatsho said:

“So yah we’ve been all together but you know when you grow up, especially when you grow up with like a grandmother, there is a problem with an age an difference [mmm] I’ll be honest with you. So there are some certain things that I want...uh...probably I am going through a certain stage in my life and then she wouldn’t understand. So that age difference was just a problem at times, you know?”

“I remember I think I was 13 or 14 years of age, so I now wanna wear a jeans and then she’s not gonna buy me the jeans because she wants me to wear dresses, you know? So it was tough because

now I would see like most of my age group you know having this and then that's part of the things I didn't like you know...about her sometimes, you know?"

"sometimes I wished I had my mother around. Like my mother was around because I would feel that you know what the age gap it was too much because she didn't understand most of this stuff, you know? Because even when I started my periods, I remember my menstruation. It was tough because she told me that "You know what, I don't know. I'm no longer doing those things."

4.4. Conclusion of research findings

In summary, the findings in this chapter indicate that the young adult women who participated in this study were predominantly placed in the care of their grandmothers, however, there was some variation as some were placed in their care of their aunts or great-aunts. In addition, participants were placed in informal kinship care by their parents who were unable to assume primary care of their daughters either due to completing their studies, pursuing careers in other cities or as evidenced in one case, due to substance abuse. Six participants reported having had close relationships with their caregivers and positive experiences of being raised in informal kinship care, apart from one participant who had a negative caregiving experience with her great-aunt. With regard to participants' relationships with their mothers, four participants reported that they had good relationships with their mothers, however, three were ambivalent or expressed anger and frustration about their mothers' absence during their formative years. Furthermore, the ambivalence, frustration and/or anger were often either related to feeling displaced as a result of being raised in informal kinship care, or related to not having as close a relationship with their mothers as they desired and some experienced difficulty navigating the generational gap between themselves and their grandmothers. In Chapter five, the abovementioned findings will be discussed in relation with the relevant literature so as to yield an in-depth exploration of the research findings.

CHAPTER FIVE

5. Discussion of research findings

The section below is comprised of a detailed discussion of the findings of this study and these findings will be discussed in relation with attachment theory as well as the relevant literature pertaining to mother-daughter relationships and young adult women's experiences of their relationships with their maternal informal kinship caregivers and their mothers.

5.1. Participants' experiences of their relationship with their biological mothers

The findings of this study agree with the findings of literature pertaining to maternal absence as six of the participants' mothers were absent due to labour migration from their households of origin to their areas of work or absent due to completing their studies, thus meaning that participants' mothers were not co-resident with them. One participant's mother did not co-reside with her due to alcohol abuse. Additionally, the characteristics of the participants' mothers is similar to those illustrated in Posel and van der Stoep's (2008) paper as four of the seven participants reported that their mothers were young and unmarried when they were placed in informal kinship care. Although Tshegofatsho's experience of maternal absence was an exception to the experiences of other participants' in this study, her experience is consistent with the findings of literature where maternal absence was due to substance misuse or abuse (Bunch, Eastman & Griffin, 2007; Poehlmann, 2003; Washington, Cryer-Coupet, Coakley, Labban, Gleeson & Shears, 2014).

The perceptions of some participants about their mothers' accessibility and availability during their separation from them when they were young may have facilitated the closeness that they described in their narratives. Although both reported that they were not close to their mothers when they were younger, they did however make reference to the growth in the strength and closeness of their relationships as they became older as well as the improved emotional quality thereof. One could also put forth that Asanda and Dineo's narratives reflect the emotional significance of their relationships with their mothers and that the way in which they constructed their experiences of their relationships with their mothers illustrated the high level of felt attachment (O'Connor, 1990). Additionally, Asanda and Dineo's experiences of their mother-daughter relationships could be said to demonstrate the ongoing dependability and supportive properties provided by their mothers in the form of emotional support such as giving advice, having conversations with their daughters

about their daily lives, as well as practical help such as shopping and financial support and in Dineo's case assisting with the care of grandchildren (O'Connor, 1990) prior to her passing.

Asanda and Dineo's relationships with their mothers were also characterised by ongoing interdependence as both their descriptions of their relational experiences with their mothers indicated that their mothers also depended on them emotionally as well as with practical help in the house and in Dineo's experience, financial assistance as she offered to look after her mother when she became older. Despite having close relationships, the level of intimate confiding in these mother-daughter relationships was low given that participants felt that there were certain topics that they were unable to broach with their mothers. It is important to note that this complex and ambivalent way of relating in these mother-daughter dyads is similar to mothers and daughters who live in the same household as most daughters tend to divulge information their mothers would not be privy to with their friends and are more comfortable confiding in their friends, as illustrated in a study conducted by Bojczyk, Lehan, McWey, Melson and Kaufman (2011).

Lastly, it is also worth mentioning that Dineo and Asanda's experiences of the interdependence in their relationship with their mothers corresponds with Onayli and Erdur-Baker (2013) assertions that mothers and daughters with relationships such as in these two dyads tend to be close, however, their interdependency does not limit their ability to make their own decisions as they feel free to do so without fearing negative responses from the other.

In contrast to sentiments of closeness that were shared by Dineo and Asanda, Lucky and Ntombi's descriptions of their relationships with their mothers illustrated ambivalence towards their mothers. For both participants, the relational experience with their mothers has been challenging given factors such as Lucky's mother's unwillingness to publicly acknowledge her as her daughter and Ntombi's mother's tendency to put her own needs before her daughter's. According to Hershberg (2006), daughters and mothers each play a role in shaping their relationship through the patterns of their interactions and ways of being with one another, however their interactions may become problematic in the case that the needs and relational experiences of the daughter are sacrificed in order to accommodate and prioritise the mothers' personal needs or agenda. Given Lucky and Ntombi's experiences, it could be suggested that their relationships and interactions with their mothers bear similar characteristics to Hershberg's (2006) description of problematic

mother-daughter relationships. Although Tshegofatsho has opted to not have a relationship with her mother due to her alcoholism as well as her physical and emotional unavailability throughout her life, this participant's relationship with her mother is also contentious in the sense that their interactions are characterised by negative behaviour such as disapproving each other's behaviour, anger and disagreements that devalue the opinions or assertions of the other, hence her withdrawal from her mother (Branje, 2008).

5.2. Participants' feelings and challenges related to their experiences of being raised in informal kinship care contexts

According to Dolbin-Macnab, Rodgers and Traylor (2009), challenges often arise in grandparent-grandchild relationships because grandparents struggle to fulfil and navigate their role as both parent and grandparent. Additionally, the generational gap as well as outdated parenting practices and skills may lead to tension in the relationship. Case in point the generational gap that was referenced when Tshegofatsho talked about her experience of the impact of the age gap between her and her grandmother. Therefore, regardless of how close Tshegofatsho was to her grandmother, she struggled to establish her autonomy given that her grandmother did not approve of her dress-sense, but rather preferred for her to dress according to her conservative standards which were a mismatch to Tshegofatsho's contemporary views on fashion. With regard to participants' feelings or challenges that they experienced as a result of growing up in informal kinship care, their experiences are similar to those of the participants in Messing's (2006) paper and the findings of Dolbin-Macnab, Rodgers and Traylor (2009).

Considering Tshegofatsho's accounts when she talked fondly of her grandmother and the positive aspects of their relationship, it is possible that she may have experienced thoughts and feelings that were conflicting as on one hand, she had a close relationship with her grandmother but on the other, she disliked how she was parented by her grandmother. An additional challenge that was exacerbated by the generational gap was during adolescence when Tshegofatsho experienced her menarche, which was a particularly difficult time for both her and her grandmother as she needed guidance during this milestone, however her grandmother was unsure of how to assist her. This resulted in Tshegofatsho longing to have her mother present, thus one could assert that perhaps she yearned for her mother's guidance and support during this transitional period during puberty.

Although Messing's (2006) paper focused on the perspectives of children from Northern California who were cared for by a relative, the findings of this paper echo the experiences documented in that study as the children oscillated between feelings of disappointment, anger or resentment towards their mothers and feelings of hope to either live with their mothers or be cared for by them. In regard to feelings of anger, this was illustrated by Lucky when she discussed her views on her mother's choices and the family dynamics which have left her feeling like an outsider. Additionally, she expressed feelings of resentment that pertained to being kept a secret which has contributed to her being unable to fully assume her role as her mother's daughter and an older sister to her half-siblings. Similar to the children in Messing's (2006) study, Lucky also seemed to have experienced disappointment in her mother's inability to care for her and this was exacerbated by her seeing how her mother is able to fulfil her parental role with Lucky's half-siblings.

Another participant who may have felt let down by her mother is Refilwe, who expressed her feelings about observing the close nature of her mother's relationship with her older sister. In addition, it may be that she was disappointed that her mother was unable to dedicate as much time to her as she did with Refilwe's sister, thus resulting in her being disappointed with the quality of their relationship. Although Refilwe's experiences illustrated her disappointment and sadness, they also illustrated her desire to have a close relationship with her mother, particularly a relationship that meets her expectations of a close mother-daughter relationship. What is also evident from her experience is that whilst she yearns for a past where her mother was present and a current relationship that is of better quality, she also showed an appreciation for her grandmother's ability to fulfil her parental role, thus meaning that she had a maternal figure. Refilwe also acknowledged that being reared in informal kinship care has resulted in her close relationship with her younger siblings. As highlighted by Messing (2006), one could put forth that Refilwe may have felt this way so as not to discredit her grandmother as her caregiver but also due to her loyalty, love and appreciation for her grandmother.

5.3. Participants' experiences of their relationship with their informal kinship caregivers

Echoing the conclusion reached by Myers, Jarvis, and Creasey (1987) in their study of children's attachment behaviours towards their grandmothers, participants' constructions of their relationship with their kinship caregivers illustrated that grandmothers can indeed function as attachment figures due to the important roles that they have played in their lives. In addition, grandmothers in this study have functioned as attachment figures for the participants as they have played integral roles in their grandchildren's interpersonal and intrapersonal development, they were consistent maternal figures who provided emotional and physical care and because they were emotionally invested in their grandchildren, hence being a "secure base" for some participants (Poehlmann, 2003).

Where participants reported closeness with grandmothers, it may be due to the disruptions in the parent-child attachment relationships when participants' mothers were no longer physically and/or emotionally available, accessible or responsive to them as attachment figures and when care was discontinued (Poehlmann, 2003). In addition, these disruptions in the parent-child attachment relationships may have been temporary, such as in the separation between Betty, Refilwe, Ntombi, Dineo, Lucky and their mothers or a permanent disruption as illustrated in Tshegofatsho's experience. One could posit that regardless of whether the disruptions were temporary or permanent, the participants may have been able to form relationships and attachments with their grandmothers possibly due to repeated interactions with their grandmothers prior to being placed in their care, their grandmothers' attachment state of mind as caregivers as well as the quality of their interactions whilst being in their care (Poehlmann, 2003). Although attachment literature suggests that young children experience periods of despair, fear, protest, distress and in some cases detachment in reaction to separation from their parents, this was not evidenced in participants' narratives. For participants such as Ntombi and Tshegofatsho, the reason for this may have been that their despair escalated to hopelessness about their mother's return, thus leading to withdrawal from them (Poehlmann, 2003). In addition, Tshegofatsho and Ntombi could have responded in this way to their mothers' absence due to the low responsivity and sensitivity their mothers may have exhibited and despite their mothers being accessible to them physically, these individuals may have had negative or low expectations of their mothers, hence their preferences for and reliance on their grandmothers (Poehlmann, 2003).

5.4. Patterns of attachment in the context of informal kinship care

The findings of this study are consistent with Poelmann's (2003) assertions regarding the representations individuals have of their relationships with their grandparents as the participants of this study also made reference to the significance of their grandmothers' role in their lives as well as how they served as sources of emotional support. Moreover, participants' experiences illustrated that their grandmothers also functioned as attachment figures given that they were caregivers who had an emotional investment in the participants, they cared for them emotionally and physically and because they were consistent figures in the participants' lives. In terms of the attachment patterns that emerged in the different relationships between each participant and the maternal caregivers, their experiences are quite varied given that they were placed in informal kinship at different ages and because some participants remained in the care of their grandmothers until young adulthood, whilst others lived with their mothers intermittently. As such, the participants' attachment pattern ranged from secure, ambivalent or avoidant depending on the maternal figure concerned. None of the participants' attachment styles met the criterion related to the classification of disorganised attachment. These attachment patterns will be discussed below.

5.4.1. Avoidant attachments

Regarding Tshegofatsho's attachment style with her mother, it could be suggested that her style of attachment from infancy until currently as an adult has been 'avoidant' and this could be attributed to her mother's lack of involvement in her life (Wallin, 2007) as stated by Tshegofatsho. Based on her assertions that her mother made no effort to be in her life and that she chose her social life and consumption of alcohol over her responsibilities as a mother, one could suggest that the avoidant nature of Tshegofatsho's attachment to her mother may be attributed to her mother's rejection of attachment behaviour that would elicit closeness with her daughter, thus rather than expressing or showing a desire for proximity and being responsive to her needs, her mother withdrew by being emotionally and physically unavailable (Wallin, 2007). Therefore, it could be put forth that the consequence of Tshegofatsho's mother's emotional and physical unavailability and at times inaccessibility is that her view of her mother is of a caregiver who is unresponsive to her needs. Based on her assertions on the current state of her relationship with her mother, it may be that she has learned to accept that this is the nature of their relationship (Whelan, 2003). According to Kobak & Madsen (2008), physical separation experienced during infancy and in early childhood can be regarded as a type of threat to the responsiveness and accessibility of a caregiver. However,

for children who are older and adults such as Tshegofatsho, it may be that the prolonged absence of the caregiver, their physical inaccessibility, emotional disengagement, lack of responsiveness, as well as the exhibition of signals of rejection and/or abandonment which lead to the perception of threats to the availability of one's caregiver. These factors are believed to disrupt communication lines (Kobak and Madsen, 2008).

Another participant whose attachment style could be classified as 'avoidant' is Ntombi, however in her case, it is her relationship with the great-aunt whose care she was placed in from 9 to 13 years of age in the Western Cape. In Ntombi's case, the nature of her relationship with her great-aunt when she was younger is unknown as no reference was made to this aspect, however given her assertions of her experience of being cared for by this maternal caregiver, it could be asserted that the exposure to an alarming environment and a caregiver that was not responsive to her possible communications of distress and needs to be soothed (Wallin, 2007). Given that her great-aunt showed preferential treatment that favoured her own children, it may be that Ntombi may have experienced her great-aunt as someone who lacked sensitivity. Considering the fact that her great-aunt expressed no desire for emotional proximity and availability, Ntombi may have experienced this as rejection, thus resulting in an 'avoidant' attachment style. Consequently, Ntombi continues to have a negative representation of this relationship and she did not express a desire to be in contact with her great-aunt, nor to have a relationship of a better quality.

5.4.2. Secure attachments

Despite the avoidant relationship she has with her mother, Tshegofatsho's experiences of her grandmother's caregiving illustrate that they had a close relationship which was greatly influenced by the fact that her grandmother was her only consistent maternal caregiver from when she was four months old until her grandmother died in 2019. Similarly, Asanda who was placed in her grandmother's care at three months of age and Refilwe who was cared for by her grandmother from when she was four months old also reported that they had close relationships with their grandmothers from infancy to young adulthood. Asanda stated that her grandmother died in 2011 and Refilwe's grandmother is reported to still be alive. Furthermore, Lucky also expressed that she had a close relationship with her grandmother who cared for her from 2 years of age until she died in 2006. Lastly, Ntombi was placed in the care of her great-aunt at the age of 6.

Consistent with the classification traits of a secure attachment, it could be suggested that these participants' relationships with their grandmothers were secure from when they were placed in their care from infancy as they were consistent and resilient relationships that were characterised by "sensitivity rather than mis-attunement, acceptance rather than rejection, cooperation rather than control, and emotional availability rather than remoteness" (Wallin 2007, p. 19) in response to their needs. In addition, these relationships could also be classified as secure as they appear to have been reciprocal and satisfying relationships that were positive for both the grandmothers and their granddaughters (Whelan, 2003). Given the ages at which Refilwe, Lucky and Asanda were placed in informal kinship care, their grandmothers may have been their principal attachment figures, thus meaning that they preferred their grandmothers, rather than their mothers when they were in need of soothing or comfort (Wallin, 2007). Lastly, in Ntombi's relationship with the first great-aunt who cared for her, it could be that she was able to establish a secure attachment with her great-aunt due to her caregivers responsive and attuned caregiving styles which challenged her experience of inadequate environmental experiences with her mother, thus meaning that she was able to trust in her great-aunt's emotional and physical availability and accessibility (Whelan, 2003).

5.4.3. Ambivalent attachments

Ambivalent attachment styles could be said to have been observed in Dineo and Betty's relationships with both their mothers and grandmothers. Additionally, Ntombi, Lucky and Refilwe's relationships with their mothers also bear the characteristics of ambivalent attachment styles. According to Wallin (2007) and Whelan (2003), individuals who are classified as having ambivalent attachments to their caregivers are likely to have had caregivers who were inconsistently, unpredictably or occasionally available and responsive to their needs. Although the caregiving may not be physically harmful to an individual with an ambivalent attachment to their caregiver, the inconsistent nature of the experience of caregiving often results in them being unsure of where they stand with others as their needs were met in a random or inconsistent fashion by their caregivers (Wallin, 2007; Whelan, 2003).

It could be asserted that Betty's attachment to her grandmother may have been ambivalent given that she and her grandmother were not close and because her grandmother was more preoccupied with meeting Betty's physical needs and safety. It appears that Betty may have wanted a closer

emotional relationship where they spoke about topics that were more personal and important to Betty rather than limiting conversations to academics and church attendance. Perhaps Betty's ambivalence may be as a result of her grandmother's readiness and availability to care for her physically, but her emotional unavailability and lack of responsiveness to Betty's need for a deeper emotional relationship may have been perceived as insensitive. In addition, Betty's grandmother has characteristics akin to those of caregivers whose attachment styles are deemed ambivalent as she has always been strict and preoccupied with Betty's whereabouts and social life, which may be an indication that perhaps the ambivalent nature of their relationship could also be attributed to her discouragement of Betty's autonomy (Wallin 2007). In terms of the ambivalent nature of her relationship with her mother, Betty's attachment to her mother may have been ambivalent due to her mother's absence when Betty was young, thus meaning that she was inconsistently and unpredictably available both physically and emotionally (Wallin 2007). This mother-daughter relationship could also be considered to be ambivalent given her blasé response to her mother's visits when she was younger and the friendship-like relationship that she referred to when speaking about her relationship with her mother when she was older.

In Dineo's case, her assertions indicated that her relationship with her grandmother was healthy given that she described it as "good" and given her reference to the love that she experienced from her grandmother. Although the nature of their relationship prior to the informal kinship care was not ascertained during the interview, it is likely that she had always had an ambivalent relationship with her grandmother. It is also possible that her grandmother's emotional availability and responsiveness may have been inconsistent given that she assumed the caregiving role for five of her grandchildren, thus meaning that it is possible that she was unable to be attuned to Dineo's specific needs. Where her relationship with her mother is concerned, Dineo's relationship with her mother could also be classified as ambivalent. However, it is important to state that this is a speculative assertion as the nature of Dineo's relationship with her mother prior to their separation did not come to the fore during her interview.

With reference to Refilwe, Lucky and Ntombi's relationships with their mothers, their relationships could be said to be ambivalent because, as referenced above, mothers of ambivalent children are often only available, accessible and responsive to their children in an unpredictable

and inconsistent fashion which leads to their children believing that their needs will only be met occasionally (Wallin, 2007). Although Refilwe and Ntombi's mothers did not overtly reject them verbally and physically, their absence and unresponsiveness to their emotional needs may have still been experienced as rejection and their lack of responsiveness to their signals may have been perceived as insensitive (Wallin, 2007). As asserted by Wallin (2007), it is possible that these mothers may have been unpredictable in their responses and availability to their daughters due to their own state of minds which may have impacted their ability to be attuned to their daughters.

Compared to Refilwe and Ntombi's mothers, Lucky's mother could be said to be overt in her rejection of Lucky's signals for closeness given that she has chosen to not publicly acknowledge Lucky as her biological daughter so as to not mar the image people have of her and her Lucky's step-father. As a consequence, Lucky's half-siblings do not know that they have an older sister and she feels as though her mother does not treat her like her own daughter. It could further be suggested that the ambivalent nature of this relationship has persisted from childhood as Lucky's focus of the material goods her mother brought her during her visits may also be an indication that although their relationship lacked depth emotionally given her mother's emotional unavailability, her mother still met and satisfied her material needs.

Lastly, the commonality of these three participants' is that even though they have experienced inconsistencies and varying degrees of unresponsiveness in their ambivalent relationships with their mothers, they continue to make an effort to have a relationship with them (Whelan, 2003). Moreover, although there are elements of contention as a possible result of expressing their attachments needs but being met with unresponsive mothers, they may continue to alternate between frustration at not having their needs met and a desire for a relationship with their mothers (Whelan, 2003).

5.4.4. Conclusion of research discussion

As illustrated by the findings of this study, the consequence of maternal absence is the placement of children in the care of informal kinship caregivers who were mostly grandmothers. One of the participants could be classified as having an avoidant relationship with her mother and one participant seems to have had an avoidant relationship with her informal kinship caregiver. In

addition, four participants' attachments to their informal caregivers could be regarded as secure, and two participants could be said to have ambivalent attachments to their informal kinship caregivers. Furthermore, five participants' attachment styles to their mothers could also be classified as ambivalent. Lastly, none of the participants' attachment styles to their mothers and informal kinship caregivers showed characteristics related to the disorganised attachment style.

Taking into consideration the nature of the relationships between the participants, their grandmothers and mothers from an attachment perspective, one could argue that understanding the transcribed data through the use of this conceptual framework has allowed for a deepened understanding of families in which grandchildren were raised by their grandmothers as well as the developments and revisions the attachment relationships may have undergone (Poehlmann, 2003). In addition, this theory has allowed for an understanding of the formations and possible disruptions in their dyadic relationships, the changes, challenges and complexities related to intergenerational relationships (Poehlmann, 2003).

5.5. Conclusion of research report

The participants in this study were all from South Africa and given that the participants were black women who were raised by black grandmothers, these findings can be equated to the documented American literature (Bunch, Eastman & Griffin, 2007; Denby, Brinson, Cross & Bowmer, 2014; Goodman & Silverstein, 2002; Lee, Clarkson-Hendrix & Lee, 2016) on prevalence of kinship care in African American communities and the likelihood of black grandmothers being involved in informal kinship care compared to grandmothers in other racial or ethnic groups. From the findings of this research report, it can be asserted that grandparents, particularly grandmothers, are more likely than other members of the family to assume the role of informal kinship caregivers for young children and that it is uncommon for parents to co-reside in the same household as their children. Although there was slight variation as some participants were cared for by their aunts or great-aunts, the findings above also illustrate that grandmothers also play a pivotal role in the physical and emotional well-being of their grandchildren and that in addition to assuming a parental role, they can also function as attachment figures for individuals who were raised in the absence of their parents.

With regards to attachment patterns in the context of informal kinship care, this study illustrated that participants had formed multiple attachments, however, the attachment relationships with their informal kinship care givers and their mothers were not of equal strength. Rather, their attachment relationships were hierarchical in the sense that participants mostly reported having closer relationships and ‘secure’ attachments with their informal kinship care givers than their mothers. In addition, participants preferences for their informal kinship caregivers indicated that they had closer relationships with their informal kinship caregivers as they were their primary caregivers who were readily available and accessible both physically and emotionally when participants needed comfort and security. Moreover, it is highly likely that participants showed bias and preference for their caregivers as they may have been consistently sensitive and responsive when meeting their emotional and physical needs, thus promoting feelings of safety and increasing the quality of their relationships. Furthermore, viewing the experiences of young adult women who were raised informal kinship care through an Attachment Theory lens was beneficial to the study as it facilitated the understanding of how informal kinship care impacts relationships between young adult women and their maternal figures. This study also highlights that although nuclear

families and traditional representations of household compositions tend to be represented as the norm, these types of families are an ideal rather than a reality in South Africa. Lastly, representations of nuclear families as the norm tend to place an emphasis on parental involvement in childrearing, thus underplaying the positive contribution and integral role that informal kinship care plays in the life of black children in South Africa.

5.6. Limitations

One of the first limitations that surfaced in this study was the limited time in which the study had to be completed. The researcher anticipates that additional time would have been beneficial as the researcher would have been able to conduct two rounds of interviews thus allowing for an in-depth focus on the nature of relationships between individuals. The first round of interviews would have served as an opportunity for the researcher and participants to become better acquainted and also as an opportunity for the researcher to ask the interview questions asked in this study (Appendix A). A second round of interviews would serve as an opportunity for the researcher to ask further questions about particular areas of interest that came to the fore in the first interview and it would also be beneficial as the researcher would also have an opportunity crosscheck their findings of the data with the participants so as to ensure that their experiences are accurately recorded. An additional limitation of the time constraints is that there wasn't an opportunity to include the perspectives of the participants' mothers and caregivers. These perspectives would have allowed for further insight into the caregiver-child dyads.

Lastly, given the retrospective nature of the research, an additional limitation was that some participants found it difficult to remember particular events or stages in their childhood, thus limiting data due to inaccessible memories.

5.7. Recommendations for future of research

Future research could be conducted to investigate the characteristics of individuals' relationships with their mothers and caregivers prior to being placed in informal kinship care as well as to ascertain whether participants had a relationship with and attachment to their informal kinship caregiver prior to being placed in their care. In this way, future research may be able to establish the processes and possible changes that occur in these relationships due to placements in informal

kinship care, thus possibly informing informal kinship care policies, practices and placement strategies in a way that would enable both children and caregivers to have positive experiences and outcomes.

Given the small size of the sample, further research could expand the investigation to include participants from different races, cultures, contexts and socio-economic backgrounds so as to include a sample size that is more diverse as well as to allow for a comparison of informal kinship care experiences to be made across the sample.

Lastly, future research could focus on three generations of women in the context of informal kinship care and studies could simultaneously explore the experiences of mothers who did not raise their daughters, the experiences of grandmothers who assumed caregiving responsibilities of their granddaughters and young adult women who were raised by their grandmothers in the absence of their mothers. It is important to note the future researchers will first have to establish that all mothers, grandmothers and daughters are alive as this would allow for each individual's narratives to be included in the study. Thus, this would allow for comparisons to be made and a deeper engagement with the complex nature of the relationships.

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APPENDICES

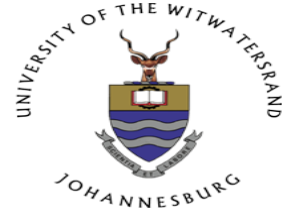
APPENDIX A - Interview schedule

- Can you please tell me a little about what motivated you to take part in this study?
- I would like to get to know you better. Can you tell me about yourself and your upbringing?
- Is there anything else that you would like to share about yourself and your upbringing that you feel is important for me to know?

APPENDIX B - Letter to the registrar



Psychology
School of Human & Community Development
University of the Witwatersrand
Private Bag 3, WITS, 2050
Tel: (011) 717 4500 Fax: (011) 717 4559



Good day Ms. Hale Modau,

I, Thato Ratune, a Master of Arts by Coursework and Research Report in Psychology student at the University of the Witwatersrand hereby request permission to recruit participants through the university's electronic mailing system to take part in a research project that I am conducting. I am conducting a study titled 'Attachment and kinship care: An exploration of the experiences of young adult women who were raised in informal kinship care contexts.' The aim of my study is to explore young adult women's experiences of maternal care in informal kinship care contexts and it seeks to explore the attachment patterns between the participants and their biological mothers as well as their kinship carers.

The risk associated with this study is minimal as no physical or psychological will be inflicted on the participants. However, it is possible that some participants may feel uncomfortable or emotionally unsettled during the interview in which case I will stop the interview and contain the participant by calming them down. If necessary, a referral to the Counselling and Careers Development Unit's (CCDU), Lifeline or The South African Depression and Anxiety Group (SADAG) will also be made so as to provide participants with counselling services and emotional support to appropriately address the issues that may arise.

Prior to each interview, I will explain to the participants that their participation is voluntary and that they have the right to withdraw at any point during the study. Furthermore, they will be informed about the nature and procedure of the research and will be asked to sign an informed consent form to ensure that they understand the nature of their involvement and agree to participate in the research.

The project has received ethical clearance from Ethics Review Committee at University of the Witwatersrand and is being supervised by Dr. Busisiwe Nkala-Dlamini who may be contacted at

busisiwe.nkala-dlamini@wits.ac.za. Please do not hesitate to contact me at thato.ratune@yahoo.com or on 060 345 3423 should you require any further information. Thank you in advance for your cooperation.

Kind Regards,

Thato Ratune

APPENDIX C- University permission letter

UNIVERSITY OF THE
WITWATERSRAND,
JOHANNESBURG



OFFICE OF THE DEPUTY REGISTRAR

29 July 2019

Thato Ratune
Student number 550456
MA Research Psychology (Coursework and report)
School of Human and Community Development

TO WHOM IT MAY CONCERN

"Attachment and kinship care: An exploration of the experiences of young adult women who were raised in informal kinship care contexts"

This letter serves to confirm that the above project has received permission to be conducted on University premises, and/or involving staff and/or students of the University as research participants. In undertaking this research, you agree to abide by all University regulations for conducting research on campus and to respect participants' rights to withdraw from participation at any time.

If you are conducting research on certain student cohorts, year groups or courses within specific Schools and within the teaching term, permission must be sought from Heads of School or individual academics.

Ethical clearance has been obtained. (Protocol Number: MPSYC/19/002 IH)

A handwritten signature in black ink, appearing to read 'Nicoleen Potgieter'.

Nicoleen Potgieter
University Deputy Registrar

APPENDIX D- Ethical clearance certificate

UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG

HUMAN RESEARCH ETHICS COMMITTEE (SCHOOL OF HUMAN & COMMUNITY DEVELOPMENT)

CLEARANCE CERTIFICATE

PROTOCOL NUMBER: MPSYC/19/002 IH

PROJECT TITLE:

Attachment and kinship care: an exploration of the experiences of young adult women who were raised in informal kinship care contexts

INVESTIGATORS

Ratune Thato

DEPARTMENT

Psychology

DATE CONSIDERED

12/06/19

DECISION OF COMMITTEE*

Approved

This ethical clearance is valid for 2 years and may be renewed upon application

DATE: 12 June 2019

CHAIRPERSON
(Dr Peace Kiguwa)



cc Supervisor:

Dr Busisiwe Nkala-Dlamini
Psychology

DECLARATION OF INVESTIGATOR (S)

To be completed in duplicate and **one copy** returned to the Secretary, Room 100015, 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 be contemplated from the research procedure, as approved, I/we undertake to submit a revised protocol to the Committee.

This ethical clearance will expire on 31 December 2021

PLEASE QUOTE THE PROTOCOL NUMBER IN ALL ENQUIRIES

CALL FOR PARTICIPANTS

I would like to invite you to participate in my research study titled, 'Attachment and kinship care: An exploration of the experiences of young adult women who were raised in informal kinship care contexts'.

The aim of my research is to explore young adult women's experiences of maternal care in informal kinship care contexts.

I am interested in the experiences of young adult women between the ages 20 and 35 who were cared for by a female informal kinship caregiver other than their biological mothers.

So, if you or anyone you know were raised by a grandmother, aunt or any female family member, this study is looking for you!

If you are interested in sharing your experiences, please contact:

**Thato Ratune-Master of Arts in Psychology
Cell no: 060 345 3423 Email: thato.ratune@yahoo.com**

APPENDIX F– Participant information form



Psychology
School of Human & Community Development
University of the Witwatersrand
Private Bag 3, WITS, 2050
Tel: (011) 717 4500 Fax: (011) 717 4559



Dear participant,

My name is Thato Ratune and I am currently a Master of Arts by Coursework and Research Report in Psychology student at the University of the Witwatersrand. I would like to invite you to participate in my research project titled ‘Attachment and kinship care: An exploration of the experiences of young adult women who were raised in informal kinship care contexts’. The aim of my research is to explore young adult women’s experiences of maternal care in informal kinship care contexts. I am interested in the experiences of young adult women between the ages 20 and 35 who were primarily cared for by their biological mothers from birth to at least two years of age prior to being placed in the care of a female informal kinship caregiver.

I really appreciate your willingness to participation in my study. Kindly note that your participation in this study is voluntary and it involves one private interview with me which will be approximately an hour in duration. Please note that although the content of the interview will include your experiences, attitudes and opinions, however, neither your individual name nor any identifiable information will be used. This research has been designed to disguise your name or any personal information using pseudonyms so that those who read the study cannot associate any information to you as an individual. Your name and personal details will only be known to me as the researcher and the data obtained for this study will be treated with strict confidentiality. Once the interviews have been transcribed and each transcription is labelled using your pseudonyms, the interview transcripts will be stored in a password protected computer and folder which belong to me, the researcher.

The risk associated with this study is minimal as no physical or psychological harm will be inflicted on you. It is possible that you may feel discomfort during the interview given the sensitive nature of the topic. In such a case, I will stop the interview and attempt to contain you by calming you

down. If necessary, a referral to the Counselling and Careers Development Unit's (CCDU), Lifeline or The South African Depression and Anxiety Group (SADAG) will be made for counselling services to appropriately address the issues that may arise. The CCDU can be contacted at 011 717 9140, the Lifeline toll free number is 0861 322 322, and the SADAG Mental Health Line is 011 234 4837.

Should you have further questions regarding your involvement in this research study, please do not hesitate to contact me on 060 345 3423 or at thato.ratune@yahoo.com. You may also contact my supervisor Dr. Busisiwe Nkala-Dlamini at busisiwe.nkala-dlamini@wits.ac.za. We shall answer any questions you may have to the best of our ability. If you have any concerns and complaints about the study, please contact Human Research Ethics Committee (Non-Medical) on Jasper.Knight@wits.ac.za or Ms. Shaun Schoeman on +277 11 717 1408 or Shaun.Schoeman@wits.ac.za.

Thank you in advance for your cooperation.

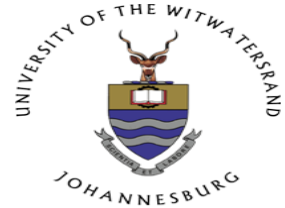
Kind Regards,

Thato Ratune

APPENDIX G - Informed consent form



Psychology
 School of Human & Community Development
University of the Witwatersrand
 Private Bag 3, WITS, 2050
 Tel: (011) 717 4500 Fax: (011) 717 4559



Participant details (pseudonym, contact number & email address)	
Name of researcher	Thato Ratune,
Level of study	Masters
Department	Psychology
Title of project	Attachment and kinship care: An exploration of the experiences of young adult women who were raised in informal kinship care contexts.
Supervisor	Dr. Busisiwe Nkala-Dlamini

Please tick blocks next to the relevant statements			
1. The researcher has explained the nature of the research and what my participation entails	Verbally	<input type="checkbox"/>	
	In writing	<input type="checkbox"/>	
2. I have given my consent to be interviewed	Yes	<input type="checkbox"/>	
	No	<input type="checkbox"/>	
3. I have given my consent to have this interview tape recorded	Yes	<input type="checkbox"/>	
	No	<input type="checkbox"/>	
4. I acknowledge and understand that my participation in this research study is voluntary and that I may withdraw from the study at any point if I so wish to.	Yes	<input type="checkbox"/>	
	No	<input type="checkbox"/>	
5. The tape recordings can be transcribed:	only by the researcher	Yes	<input type="checkbox"/>
6. The researcher has explained to me that tape recording of the		Yes	<input type="checkbox"/>

interview will be erased once the report has been written.	No	
--	----	--

I _____ agree to participate in the research project of Thato Ratune who is interested in exploring the experiences of young adult women who were raised by maternal figures other than their biological mothers and as well as the attachment patterns between the participants and both of their maternal figures

Participant's signature: _____ **Researcher's signature:** _____ **Date:**
