

**Contributions to resilience of family beliefs
about adversity and spirituality**

Oanthata Bonolo Sentle

2018

Contributions to resilience of family beliefs about adversity and spirituality

by

Oanthata Bonolo Sentle

Submitted in partial fulfilment of the requirements for the degree

MAGISTER EDUCATIONIS
(Educational Psychology)

Department of Educational Psychology
Faculty of Education
University of Pretoria

SUPERVISOR
Prof. Salomé Human-Vogel

PRETORIA
APRIL 2018

Dedication

I dedicate this research study to my loving husband Mr Thatayaone L. Ratsie and my parents Mr and Mrs McLeod. Thank you for believing in my dream. I will forever be grateful for the sacrifices you made for me and the endless prayers you uttered on my behalf. May God richly bless you, thank you and I love you.

“Follow your passion, be prepared to work hard and sacrifice, and, above all, don’t let anyone limit your dreams”

- Donovan Bailey

Declaration of Originality

I, Oanthata Bonolo Sentle (student number 13260822), declare that the dissertation, which I hereby submit for the degree Magister Education in Educational Psychology at the University of Pretoria, is my own work and has not previously been submitted by me for a degree at this or any other tertiary institution.

Oanthata. B. Sentle

April 2018

---oOo---

Acknowledgements

I would like to extend my heartfelt appreciation to the following people who supported me in achieving this milestone:

- My heavenly father, for giving me the strength to press on and stay focused on my end goal. It was not an easy journey but God kept and sustained me through every challenge I faced. Thank you heavenly father for your faithfulness and favour.
- To my family, Mr and Mrs McLeod, Flora and Stuart McLeod. I am truly blessed to have such an amazing support system.
- To my darling, my love, my husband, Mr T. L. Ratsie, I run short of words to express my gratitude, for the sacrifices you made to ensure that I obtain this degree. It takes a special kind of man to sacrifice the first two years of marriage just to see his wife achieve her dreams, you are one in a **billion** my love.
- Mrs Phenyo Ramakoloi, my best friend you have been my rock throughout this degree and in my personal life, I am eternally grateful for the words of encouragement and prayers that always lifted my spirit.
- To my close friends and sisters in the Lord, Mrs Angie Lesole, Ms Tlamelo Ntshambiwa, Ms Amantle Lungisani, Ms Natasha Nsebula, Dr Otlhapile Dinakenyane, Ms Julia Sentle and Ms Phetolo Reetsang, ladies your prayers and motivation sustained me when I felt overwhelmed in my journey. May God bless you abundantly.
- To my supervisor, Prof. Salomé Human-Vogel, thank you for pushing me out of my comfort zone and supporting me in completing this study. I learnt a lot from you, which I believe will aid my professional growth.
- Lastly, I would like to thank my uncle and aunt in law Mr and Mrs Ntshambiwa, for their constant prayers and uplifting words of encouragement. I am blessed to have such loving elders in my life.

---oOo---

Ethical Clearance Certificate



UNIVERSITEIT VAN PRETORIA
UNIVERSITY OF PRETORIA
YUNIBESITHI YA PRETORIA
Faculty of Education

RESEARCH ETHICS COMMITTEE

CLEARANCE CERTIFICATE	CLEARANCE NUMBER: EP 16/06/01
DEGREE AND PROJECT	M.Ed Contributions to resilience of family beliefs about adversity and spirituality
INVESTIGATOR	Ms Oanthata Sentle
DEPARTMENT	Educational Psychology
APPROVAL TO COMMENCE STUDY	22 March 2017
DATE OF CLEARANCE CERTIFICATE	9 April 2018

CHAIRPERSON OF ETHICS COMMITTEE: Prof Liesel Ebersöhn

A handwritten signature in purple ink, appearing to read 'Bronwynne Swarts'.

CC Ms Bronwynne Swarts
Prof Salome Human-Vogel

This Ethics Clearance Certificate should be read in conjunction with the Integrated Declaration Form (D08) which specifies details regarding:

- Compliance with approved research protocol,
- No significant changes,
- Informed consent/assent,
- Adverse experience or undue risk,
- Registered title, and
- Data storage requirements.

Ethics Statement

The author, whose name appears on the title page of this dissertation, has obtained, for the research described in this work, the applicable research ethics approval. The author declares that she has observed the ethical standards required in terms of the University of Pretoria's *Code of ethics for researchers and the Policy guidelines for responsible research*.

---oOo---

Abstract

Contributions to resilience of family beliefs about adversity and spirituality

by

Oanthata Bonolo Sentle

Supervisor: Prof. Salomé Human-Vogel

Degree: M. Ed. (Educational Psychology)

Families that live in high risk areas in South Africa are faced with multiple stressors on a daily basis. Published research on family resilience has shown that families have the ability to thrive and adapt positively despite adversity (Walsh, 2012). However, little research has been directed towards understanding the specific role that belief systems play towards fostering resilience in a family that perpetually lives in adversity. This research was aimed at identifying and understanding how belief systems, as a key process of resilience, promote and facilitate positive adaptation in families living in Diepsloot, South Africa. The findings from this study could possibly add on to existing literature pertaining to how beliefs systems foster resilience in families living in poverty stricken communities.

The family resilience framework was used with the main focus being belief systems as a key process of resilience. Bronfenbrenner's Ecological Systems theory also formed part of the conceptual framework in order to get a holistic picture of the various factors that influence a family's beliefs system and how all these brought about resilience. The study was not only limited to what theory portrays as resilience but, by taking into consideration the families' articulations of resilience, more valuable information relating to the nature of belief systems surfaced through group discussions and interviews.

Through using secondary data analysis research design a thematic analysis was conducted on data collected from families that attended the two Positive Parenting Workshops in Shumbashaba conducted in 2016. The findings from the themes

answered the questions regarding the value of beliefs systems in families and how these fostered resilience in families living in high-risk areas.

Key words

- Belief systems
- Resilience
- Family
- Risk
- Commitment
- Diepsloot

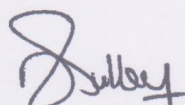
---oOo---

Declaration – Language Editor

To Whom It May Concern

23 March 2018

I, Peter J. Hulley (I.D. 581216 5147 086), edited an MEd (Educational Psychology) thesis entitled "Contributions to resilience of family beliefs about adversity and spirituality" for Oanthata Bonolo Sentle (St. No.: 13260822), a student at University of Pretoria.



Peter J. Hulley

Writing & Editing
072 340 1665
012 654 7101

---oOo---

Table of Content

	Page
Chapter 1	
Overview of the Study	
1.1 INTRODUCTION	19
1.2 CONTEXT OF THE STUDY	19
1.3 THEORETICAL BACKGROUND OF THE STUDY	3
1.4 PROBLEM STATEMENT	5
1.5 RATIONALE	5
1.6 PURPOSE OF THE STUDY	6
1.7 WORKING ASSUMPTIONS OF THE STUDY	6
1.8 THEORETICAL FRAMEWORK	7
1.9 CLARIFICATION OF KEY CONCEPTS	8
1.9.1 BELIEF SYSTEMS	8
1.9.2 FAMILY	8
1.9.3 RESILIENCE	9
1.9.4 RISK	9
1.10 RESEARCH QUESTIONS	9
1.10.1 PRIMARY RESEARCH QUESTION	9
1.10.2 SECONDARY RESEARCH QUESTIONS	9
1.11 RESEARCH METHODOLOGY	10
1.11.1 PHENOMENOLOGICAL INTERPRETIVIST PARADIGM	10
1.11.2 QUALITATIVE CASE STUDY METHODOLOGY	10
1.12 RESEARCH DESIGN	11
1.12.1 SECONDARY DATA ANALYSIS	11
1.12.1.1 Identification of data set	11
1.12.1.2 Evaluating the data set	11
1.12.2 FORESEEN CHALLENGES	12

Chapter 1 Overview of the Study

1.13	DATA ANALYSIS AND INTERPRETATION	13
1.13.1	DATA PREPARATION	13
1.13.2	DATA SOURCES	13
1.13.3	CRITERION USED FOR ANALYSIS	13
1.13.4	ANALYSIS OF THE DATA	13
1.13.4.1	Familiarisation with data	14
1.13.4.2	Generating initial codes	14
1.13.4.3	Searching for themes	15
1.13.4.4	Reviewing themes	15
1.13.4.5	Defining and naming themes	16
1.13.4.6	Producing the report	16
1.13.5	VALIDITY/RELIABILITY/TRUSTWORTHINESS	16
1.14	ETHICAL CONSIDERATIONS	17
1.14.1	INFORMED CONSENT	17
1.14.2	ANONYMITY AND CONFIDENTIALITY	17
1.15	POSSIBLE CONTRIBUTIONS	18
1.16	LAYOUT OF STUDY	18
1.17	CONCLUSION	19

---oOo---

Chapter 2 Literature Review

2.1	INTRODUCTION	20
2.2	DEFINING BELIEFS SYSTEMS	20
2.2.1	VARIATION IN WESTERN AND TRADITIONAL BELIEF SYSTEMS	21
2.2.2	BRONFENBRENNER'S ECOLOGICAL PERSPECTIVE.....	22
2.3	FAMILY BELIEF SYSTEMS AS A KEY PROCESS FOR RESILIENCE	25
2.3.1	DEFINING RESILIENCE.....	25
2.3.2	HOW BELIEFS SYSTEMS FACILITATE RESILIENCE.....	26
2.3.2.1	Spirituality as a form of belief system	26
2.3.2.2	Religion as a form of belief system.....	29
2.3.2.3	Promotes positive outlook.....	30
2.3.2.4	Facilitates meaning making	31
2.3.2.5	Promote a sense of coherence.....	33
2.4	CONCLUSION	34

---oOo---

Chapter 3 Research Design and Methodology

3.1	INTRODUCTION	35
3.2	RESEARCH DESIGN AND STRATEGIES	35
3.2.1	SECONDARY DATA ANALYSIS AS A RESEARCH DESIGN.....	35
3.2.1.1	The primary research question for the present study	35
3.2.1.2	Secondary research questions	36
3.2.2	SECONDARY DATA SELECTION STRATEGY	36
3.2.3	ADVANTAGES OF SECONDARY DATA ANALYSIS	38
3.2.4	LIMITATIONS OF SECONDARY DATA ANALYSIS	39
3.2.5	RESEARCH METHOD: QUALITATIVE CASE STUDY	40
3.2.5.1	Collage	41
3.2.5.2	Family drawings.....	42
3.2.5.3	Field and observation notes.....	43
3.2.5.4	McMaster Family Functioning Assessment	44
3.2.5.5	Visual data.....	45
3.2.5.6	Clinical report.....	47
3.2.6	PARADIGMATIC APPROACH.....	47
3.2.6.1	Interpretive phenomenological paradigm.....	47
3.3	CONTEXT OF THE PRESENT STUDY	48
3.4	DATA ANALYSIS	49
3.4.1	SECONDARY DATA ANALYSIS OF THE FILES	49
3.4.1.1	Families in Diepsloot	49
3.4.2	SOCIO-ECONOMIC/EMPLOYMENT STATUS	50
3.5	THEMATIC ANALYSIS OF THE DATA	51
3.5.1	THEMATIC ANALYSIS PROCESS	52
3.5.1.1	Phase 1: Familiarisation with the data	52
3.5.1.2	Phase 2: Coding	55
3.5.1.3	Phase 3: Searching for themes	56
3.5.1.4	Phase 4: Reviewing the themes	57
3.5.1.5	Phase 5: Defining and naming themes	58
3.5.1.6	Phase 6: Producing the report.....	59
3.5.2	LIMITATIONS OF THEMATIC ANALYSIS.....	59
3.6	ETHICAL CONSIDERATIONS	60
3.6.1	INFORMED CONSENT	60
3.6.2	ANONYMITY AND CONFIDENTIALITY	60
3.6.3	RESPECT FOR PRIVACY	61

Chapter 3
Research Design and Methodology

3.7	RIGOR OF THE STUDY	61
3.8	CONCLUSION	61

---oOo---

Chapter 4

Qualitative Findings of Data Analysis

4.1	INTRODUCTION	63
4.2	FINDINGS FROM THEMATIC ANALYSIS OF THE DATA	63
4.2.1	THEME 1: IDENTIFIED RISK FACTORS	64
4.2.1.1	Risk factors within the microsystem	64
4.2.1.2	Risk factors within the mesosystem	65
4.2.1.3	Risk factors within the macrosystem	68
4.2.1.4	Risk factors within the chronosystem	70
4.2.2	THEME 2: FAMILY PROTECTIVE FACTORS	71
4.2.2.1	Spirituality	71
4.2.2.2	Positive outlook	77
4.2.2.3	Meaning making during adversity	78
4.3	CONCLUSION	80

---oOo---

Chapter 5 Summary

5.1	INTRODUCTION	81
5.2	RESPONDING TO THE RESEARCH QUESTIONS	81
5.2.1	RISK FACTORS	81
5.2.2	PROTECTIVE FACTORS	83
5.2.3	HOW DOES MEANING MAKING FOSTER RESILIENCE DURING ADVERSITY?.....	84
5.3	WHAT ARE SOME OF THE PRACTICES THAT FAMILIES ENGAGE IN TO ENHANCE THEIR ABILITY TO BOUNCE BACK FROM NEGATIVE EVENTS?	84
5.4	WHAT ARE SOME OF THE BELIEFS THAT FAMILIES ASCRIBE TO WHEN FACED WITH ADVERSITY?	86
5.4.1	MEANING MAKING.....	86
5.4.2	SPIRITUALITY	87
5.4.3	POSITIVE OUTLOOK	88
5.5	LITERATURE CONTROL	89
5.6	LIMITATIONS OF THE STUDY	90
5.7	POSSIBLE CONTRIBUTIONS	91
5.8	CONCLUSION	91
	References	91
	Appendices	115

---oOo---

List of Tables

	Page
Table 3.1: Documents used as sources of information for this study	36
Table 3.2: Categories used for analysis the 14 files.....	48
Table 3.3a: Risk Factors/Challenges that families face in Diepsloot Community.....	52
Table 3.3b: Protective factors for families in Diepsloot	53
Table 3.4: Table displaying identified Themes and Subthemes	56

---oOo---

List of Figures

	Page
Figure 3.1: Family types that attended the Positive Parenting Workshops	49
Figure 3.2: Family size and frequency of employment	50
Figure 3.3: Risk factors in the Diepsloot Community	54
Figure 3.4: Mind map used to facilitate report writing process	57

---oOo---

List of Photographs

	Page
Photograph 3.1	40
Photograph 3.2	42
Photograph 3.3	43
Photograph 3.4	43
Photograph 3.5	44
Photograph 3.6	45
Photograph 3.7	45
Photograph 3.8	55
Photograph 3.9	55
Photograph 3.10	55
Photograph 4.1	67

---ooOoo---

Chapter 1

Overview of the Study

1.1 INTRODUCTION

Walsh's work on family resilience has made a huge contribution towards obtaining a broader understanding of ways in which families function and heal during adversity (Walsh, 2012). Resilience can be defined as, the ability a family system has to adapt and move on when faced with adversity (Ungar, 2012). Published literature has highlighted various factors that foster resilience, such as having a positive outlook on life (Rubin & Chung, 2006), finding meaning when faced with adversity (Chigeza & Roos, 2011), and social support from others (Theron & Theron, 2013).

Resilience, therefore, can be seen as vital especially within the South African context in which many families live in poverty (Spaull, 2013). The focus of the present study was to explore and understand how families in Diepsloot attained resilience. Diepsloot is a settlement on the outskirts of Johannesburg, in Gauteng Province of South Africa, which is regarded as a disadvantaged community (Harber, 2011). Some of the challenges that families residing in Diepsloot face are poor housing (Harber, 2011), poor sanitation (Mahajan, 2014), and a high crime rate (Gross, 2016), all of which are exacerbated by lack of employment (DeWitte, Rothmann, & Jackson, 2012).

Drawing on Walsh's Family Resilience Framework, I explore in the present study how families in Diepsloot rely on their beliefs as a key process of resilience to overcome the various stressors they face. Belief systems can be defined as ideologies and principles that people rely on to make sense of their world (Uso-Domenech & Nescolarde-Selva, 2012).

1.2 CONTEXT OF THE STUDY

The context of the study was the Shumbashaba equine assisted family-oriented intervention project, which is presented by the University of Pretoria (Department of Educational Psychology) in collaboration with Shumbashaba Community Trust in Diepsloot, South Africa. Equine assisted therapy entails the use of horses within a therapeutic and learning environment as part of an intervention (Burgon, 2011). This

form of therapy focuses on the interactions of the client with the horse (Chandler, 2017), the reflections clients have based on this experience and how it relates to their daily human functioning (Fine, 2015). In this particular project (from which the data in the present study originated) arena activities formed part of the Positive Parenting Workshop programme (see Appendixes G & H), the families interacted with the horses to complete certain tasks, after which they reflected on their experiences with the horses, which are believed to mirror a person's inner world (Trotter, 2012). Therefore, through reflective discussions, the families were able to ascribe meaning to the behavior they displayed within the arena and link it to how they approach various situations in life.

Diepsloot (an Afrikaans word that translates into "deep ditch") is an informal settlement to the north of Johannesburg, mainly characterised by densely packed and overcrowded shacks (Cross, 2014). The majority of the houses in Diepsloot are informal, and built by using scraps of corrugated iron, plastic bags and wood. It is therefore not surprising that families living in the area are constantly faced with inadequate electricity and water supply, poor sanitation and sewage drainage, and overall poor service delivery.

A common characteristic of families that live in Diepsloot is that they are of low socio-economic status (Cross, 2014), which implies that many families go without having their basic daily needs met for periods of time. The elevated rate of unemployment among the people living in Diepsloot gives way to heightened incident of criminal acts in the area. The scarcity of a police presence within the community has prompted community members to form their own groups to help curb this phenomenon. Hungwe (2012) highlights that, due to poor government support, Diepsloot community members tend to engage in mob justice activities as a way of controlling crime. However, these practices at times tend to spark xenophobic attacks, which could be seen as an attempt to make the Government of South Africa aware of the existence of numerous grievances among the community members (Hungwe, 2012).

As part of their practical training, students pursuing their Master's degree in Educational Psychology at the University of Pretoria, in collaboration with the Shumbashaba Horses Helping People Community Trust organised Positive Parental Workshops for families residing in Diepsloot, with the aim of understanding of how families within the disadvantaged environment coped and their various sources of support. The community trust conducts programmes that target families that reside in townships around Johannesburg. Beneficiaries of these programmes are people

living with any form of disability, victims of trauma or abuse and youth that come from disadvantaged environments. The programmes are designed to empower and refine some of the skills which can help the target population to reach their fullest potential in various aspects of life, through education, counselling and activities that involve the therapeutic use of horses.

The objectives of the Positive Parenting Workshops that were held on May 15th (see Appendix G) and August 20th 2016 (see Appendix H) included understanding the meaning of risk and adversity to the families that attended the workshops, how they supported each other, the skills and strategies they used to gain support from their community, and the role their family played in fostering resilience. The data collected from these workshops was suitable for the present study because it highlighted the various risk factors to which families in Diepsloot are exposed. Therefore, I obtained insight into the families' context of living.

The families' documented responses allowed me to identify some of the beliefs and resources the families rely on to survive living in a disadvantaged settlement like Diepsloot and how these facilitate resilience within the different households. It further led to deepened appreciation of the role that various belief systems play within each family unit, and how these are passed on from one generation to the next.

1.3 THEORETICAL BACKGROUND OF THE STUDY

The definition of resilience tends to differ in relation to the context within which researchers find themselves. Ungar (2012) defined resilience as the ability people have to mobilise the resources available to them, in order to acquire optimal health. Dass-Brailsford (2005) perceived resilience as, the ability an individual has to maintain a certain level of functioning during adverse times. Theron (2012), on the other hand, perceived resilience as, the ability one has to adaptively adjust and develop despite constant exposure to adverse situations or negative circumstances. Hence, one can conclude that resilience entails the ability to recover, adapt, and move on in life regardless of external negative circumstances that may be at play at a particular point in time.

Research on resilience emerged from studies aimed to examine the varied recovery outcomes of children who were at risk of psychopathology (Sapienza & Masten, 2011). The research shifted from focussing mainly on individual traits (Black & Lobo, 2008) to other areas such as resilience in relation to age (Theron et al., 2011), disadvantaged states (Rutter, 2012) and adverse living conditions (Bhana & Bachoo,

2011). Evidence from these studies suggests that healthy attachments (Theron, 2013), self-regulation (Brokenleg, 2012), utilisation of adaptive problem solving skills when faced with crises (Theron, 2013), and acquiring support from social circles within which one is active in (Ungar, 2012) contribute to resilience.

Walsh (2015) highlighted the role that belief systems play with regard to promoting resilience and enabling a family to move forward during periods of distress. According to Ghani, Ibrahim, Aziz, and Mahfar (2015), belief systems allow people to make sense of things happening around them. These attributes form the values and principles that govern and enhance their ability to cope with demanding stressful events in life. Krüger, Bankoff, Cannon, Orlowski, and Schipper (2015), on the other hand, defined belief systems as, any set of ideas which emerge from spirituality, faith, divinity and religions. These could be centred on philosophies, folktales, myths and worldviews. Ngomane and Mulaudzi (2012) highlighted that beliefs are a result of generational knowledge that is deeply rooted within the cultural context of a society and passed on from one generation to the next. Therefore, beliefs could be seen as the values, ideas and practices to which people ascribe, which play a role in how they make meaning and view their life in general.

Within the South African context belief systems tend to maintain the sacred nature of some events that take place within families, for example, pregnancy in many cases is seen as an honour and therefore is preserved (Ngomane & Mulaudzi, 2012). On some occasions families believe in the importance of drinking and bathing with herbs to remove bad luck or gain protection from evil spirits (Raftopoulos & Bates, 2011), but on most occasions herbs would be used in funerals to cleanse the family from bad omens (Bogopa, 2010). These ideologies or practices therefore serve various purposes for the particular family or community, which may include meaning making when faced with adversity, normalising rites of passages such as birth, initiation, marriage or death and maintaining a sense of stability.

A study conducted by Carter (1999) revealed how religious traditions as a form of belief system contribute to immerse inner strength in single mothers in low economic households, which leads to the development of effective coping mechanisms, and results in the family being resilient (Ghani et al., 2015). Belief systems therefore play a vital role in the daily functioning of people, as they enhance stability and promote wellbeing within the family. The rational beliefs held by family members have the ability to foster positive adaptation during a stressful period (Ghani et al., 2015).

1.4 PROBLEM STATEMENT

Over the years there has been an increase in literature pertaining to resilience within the South African context. These include understanding resilience in students and exploring how educational services promote resilience (Theron & Theron, 2013).

The residents of disadvantaged settlements such as Diepsloot are faced with various stressors, such as a high rate of unemployment (DeWitte et al., 2012), poor sanitation (Mahajan, 2014) and a high crime rate (Gross, 2016). However, there has been little research conducted with regard to understanding how families residing in a high risk environment such as Diepsloot are able to cope and continue functioning despite their disadvantaged environment, with the main focus on the belief systems they utilised to attain resilience. Available research focuses on how girls in Diepsloot perceived resilience (Nienaber, 2017), evaluation of the effectiveness of the Resilient Educators Support Programme among people living with Human Immunodeficiency Virus (HIV) and Acquired Immunodeficiency Syndrome (AIDS) (Van der Waal, 2010). Therefore, the present study aimed to understand how families in Diepsloot, South Africa, draw on their belief systems to make meaning of the various stressors they face and how these beliefs foster resilience.

1.5 RATIONALE

Studies suggest that families have the ability to heal and positively adapt in life despite adverse situations (Walsh, 2012). The present study therefore explored the significance of belief systems as a key process of resilience for families residing in Diepsloot. According to Lightfoot and Valsiner (1992), aspects of belief systems such as meaning making of adversity, positive outlook and transcendence or spirituality are essential for the functionality of the family. Therefore, one can assume that belief systems play a vital role in the ability of a family to overcome any stressors they face (Walsh, 2012) and derive meaning from it (Rubin & Chung, 2006).

In the present study, through understanding the various belief systems to which each family ascribed, a deeper understanding was gained concerning their significance during times of adversity. This led to the appreciation of how various values, ideologies and patterned behaviour enabled a system to bounce forward and heal despite being constantly exposed to adverse situations.

1.6 PURPOSE OF THE STUDY

The purpose of this study was to explore and understand the extent to which belief systems support resilience in families that live in Diepsloot, South Africa. Guided by this purpose, I attempted to explore the families' expression and utilisation of belief systems and how these foster resilience. Through the analysis of the various themes that emerged from the data regarding belief systems and their function to the family, a clear picture was obtained of how resilience as a process unravelled when families faced stressful times and how each member demonstrated commitment towards the unit.

1.7 WORKING ASSUMPTIONS OF THE STUDY

The present study was directed by the following assumptions:

- Families in high risk areas tend to be confronted with many problems in their daily lives compared to those in low risk areas (Black & Lobo, 2008). With the ever-increasing rate of unemployment, new infections of HIV/AIDS and crime that is spiralling out of control, (Kamper & Badenhorst, 2010), families that were of low socio-economic status and residing in some of the impoverished settlement in South Africa are prone to experience challenges in their daily life.
- Families hold various meanings and articulations to the causes of problems they faced (Walsh, 2003, 2012). Literature by Graham, Gwyther, Tiso, and Harding (2013) revealed how the Xhosa people relied on their traditional beliefs to make sense of bad experiences, such as death and life after death. This helped them to view death as an extension of life and not the end of it. Kotzé, Els, and Rajuili-Masilo (2012) stressed that peoples drew on their religion, tradition and other mystical beliefs to make meaning out of their life experiences.
- Families have a variety of patterns or ways that they used when faced with a crisis and these differed according to the magnitude of the problem (Walsh, 2003). That is to say, the attitudes, perceptions and beliefs (Willoughby, Hall, & Luczak, 2015) that people ascribed to over time played a valuable role in how they appraised and responded to stressors. Ungar (2013) stated that one's coping and management of problems could therefore be seen as being embedded within one's culture, which was an integral part of one's life.

Therefore, through constant interactions with the environment one learnt acceptable ways of dealing with problems.

- Families with a strong and functional belief system were more likely to be resilient compared to families that had no belief system in place (Dass-Brailsford, 2005). Studies suggest that traditional beliefs and affiliations played an essential role in resilience (Lobar, Youngblut, & Brooten, 2006).
- In terms of my own personal assumptions, research has shown that spirituality could be vital in fostering resilience during adversity (Theron & Theron, 2013). Given the fact that my faith is orientated towards Christianity, I may have been biased to assume that Christian families are more likely to be resilient compared to non-Christian families.

1.8 THEORETICAL FRAMEWORK

To attain in-depth understanding of belief systems, the conceptual framework in the present study was based on Walsh's Family Resilience Framework, focusing on belief systems as a key process (Walsh, 2012). Family resilience, in Walsh's view, moves away from focusing on the individual resources that each family has which led to resilience but goes a step further to look at risks and resilience in the family (Walsh, 2015). Resilience therefore could be perceived as an ever-changing process that facilitates the ability of the family positively to adapt during adversity (Theron & Theron, 2013). Problems, stressors and persistent challenges such as deaths, illnesses, birth of a child, divorce or loss of a job, impact the family system over time (Walsh, 2012). The family resilience framework therefore recognises the potential for personal, as well as relational transformation and growth when going through adverse times (Rutter, 2012).

The present study was also informed by the *ecological perspective*, which I used to gain an understanding of how people relate with their social and physical environment (Stokols, Lejano, & Hipp, 2013). Drawing on this ecological perspective, it became possible to identify some of the risk factors that families in Diepsloot are exposed to within their environment and how these affect their way of life within the community.

In the present study, I also investigated the protective factors that enabled the families to cope with the various risks within their environment. Lerner (2006 as cited in Ungar, 2012) stated the importance of looking at a person's interaction with their environment as a possible contributing factor towards attaining resilience. Based on the ecological perspective, understanding of belief systems in the present study was

focused on both the social and physical environments within which families were placed. Hence, by taking into consideration the context of the families it was easier to understand some of the beliefs they held and the purpose they served in the unit. It is important to note that the present study, spirituality was regarded as a belief system because it encompasses various internalised values that families rely on to gain meaning regarding life events (Raftopoulos & Bates, 2011).

Taking into consideration the systems within which family members were active also helped understand the formation and transmission of beliefs, for example, their family of origin, friends, church, community and other social affiliations. This also raised my awareness to the complexity of some belief systems and how, in order to understand their role within the family, one should unearth their origin and the nested systems that maintain their existence (Bottrell, 2009).

1.9 CLARIFICATION OF KEY CONCEPTS

The following are the key concepts that were used in the study:

1.9.1 BELIEF SYSTEMS

According to Walsh (2012), belief systems are the shared constructions of reality, influenced by multigenerational and spiritual beliefs, that emerge through family and social transactions, which increase effective functioning and options for problem solving, recovery and growth. Beliefs could also be viewed as structured norms, which tend to vary according to the context within which one resides. These stem from experience and some are learnt from the society in which one is situated (Uso-Domenech & Nescolarde-Selva, 2012). Belief systems therefore in the context of the present study were conceptualised as a group of related ideas which were learnt and shared by individuals and groups (Uso-Domenech & Nescolarde-Selva, 2012).

1.9.2 FAMILY

A family can be seen as a group of people related by birth or adoption, and living under one roof (Walthery & Plewis, 2015). When taking the cultural tradition perspective, the family is seen to include even the extended members of the unit, both living and dead. The extended family is collectively responsible for child-rearing, and children are socialised to accept parenting from grandparents, aunts and uncles, and to treat cousins as siblings (Theron & Theron, 2013). In the present study

individuals were also regarded as a family based on the assumption that the beliefs they held were passed on from their family of origin.

1.9.3 RESILIENCE

Walsh (2003) defined resilience as: the varied ways in which families adapted and coped during hard times, resulting in the ability to bounce forward in life. Other researchers such as McAllister (2013) perceived resilience as, the ability for an individual or family to access internal or external resources which were at their disposal in order to deal with adverse situations. The American Psychological Association adopted a broader definition by viewing resilience as a process that entails adapting well when faced with adversity, traumatic events or any significant amount of stress which stem from various aspects of a person's life (Lee, Cheung, & Kwong, 2012). Therefore, resilience could be seen as a process of adaptation during significantly stressful periods in life (Theron & Theron, 2013), which may be influenced by one's culture or context, resulting in the ability to bounce forward (Walsh, 2015).

1.9.4 RISK

Patterson (2002) defined risk as the continuous exposure to overburdening events over a period of time. These events have the ability to affect the general functioning of the unit, as well as change lives. McAllister (2013) viewed risk as the possible or repeated exposure to a potentially traumatising incident.

1.10 RESEARCH QUESTIONS

1.10.1 PRIMARY RESEARCH QUESTION

How do belief systems foster resilience in families living in disadvantaged environments?

1.10.2 SECONDARY RESEARCH QUESTIONS

- ❖ How does meaning making foster resilience during adversity?
- ❖ What are some of the practices that families engage in to enhance their ability to bounce back from negative events?
- ❖ What are some of the beliefs that families ascribe to when faced with adversity?

1.11 RESEARCH METHODOLOGY

1.11.1 PHENOMENOLOGICAL INTERPRETIVIST PARADIGM

The present study was guided by the phenomenological interpretivist paradigm, using this paradigm, my aim was to understand belief systems based on how people continuously create, interpret, and rationalised their actions in order to make meaning in life within a particular context. In the present study I viewed human behavior as complex and contextually embedded (Scotland, 2012) and thus the focus was on understanding the subjective viewpoints of families and their personal meanings (Maree, 2012) regarding belief systems and how these facilitate resilience, with the primary goal of getting an insider's perspective and their interpretation of reality (Cohen, Manion, & Morrison, 2011). Mack (2010) highlighted that interpretations by human beings are unique. Hence, people hold varying interpretations about the same event, which could only be understood within their context. Therefore, in the present study, I aimed to gain an understanding of how families in Diepsloot experience adversity in their daily lives and how their belief systems are used to foster resilience within their daily functioning.

1.11.2 QUALITATIVE CASE STUDY METHODOLOGY

According to Van Maanen (2006), qualitative methodology is an umbrella term that encompasses techniques that aim to describe, decode, translate and find meaning in order to understand a phenomenon or gain a deeper understanding of a problem within a particular context. It is often described as a naturalistic, interpretive approach, concerned with exploring phenomena using an insider's view or stance, and drawing on the opinions and accounts of research participants as a starting point for research (Harding, 2013).

With relevance to the present study, a qualitative case study methodology was applied to help me gain in-depth understanding of what the families that attended the Shumbashaba Positive Parenting Workshop presented by M.Ed (Educational Psychology) students in Diepsloot think about their lives. The thematic analysis of the clinical files that were subsequently compiled at the close of the two workshops enabled me to explore and gain insight into how the families spoke about their lives and how they constructed knowledge and meaning (Tubey, Rotich, & Bengat, 2015) concerning the risks they face, how they cope, and what was important to them. The themes that emerged from the data showed evidence of the role played by beliefs in the resilience of the participating families; thus making way to increased appreciation

of varied reactions, values, and lessons that families learn throughout their life (Levers, 2013). This provided me with an opportunity to explore, describe, understand and translate the unique experiences and perspectives that families experience which could be linked to beliefs systems and resilience; thus making room for new insights and greater perspectives (Keyton, 2011).

1.12 RESEARCH DESIGN

In the present study, a secondary data research design was applied. Which entails the use of pre-existing data that was obtained from a previous study (Johnston, 2017) to answer a research question that may be different from the original study from which the data was collected (Khan, 2011).

In the present study, I relied on data that was contained in the clinical files compiled by the Master's students during the Shumbashaba Positive Parenting Workshops. The clinical files were 14 in number and each family had its own individual file.

1.12.1 SECONDARY DATA ANALYSIS

1.12.1.1 Identification of data set

Johnston (2017) stressed the importance of identifying sources of information that could be valuable to one's choice of study. For this study, I chose to apply a qualitative case study of families from Diepsloot. Yin (2012) defined a case study as an inquiry into a particular phenomenon within a natural context, with the aim of understanding events or behaviour over which the investigator may have no control.

Different family types attended the Positive Parenting Workshops; these being nuclear, extended, single parent, and families that were headed by a guardian. The families numbered 14 in total, consisting of 17 females and eight males, eight mothers, nine daughters, three bachelors and five sons.

1.12.1.2 Evaluating the data set

Johnston (2017) highlighted the value of evaluating the data set that one was choosing when carrying out secondary analysis in order to check how appropriate it is for the study that one wants to undertake (Smith & Osborn, 2008). As mentioned earlier, a qualitative case study approach was applied in the present study. I chose to use the clinical files from the Shumbashaba Positive Parenting Workshops, which were compiled for the 14 families that were in attendance. I was of the opinion that

the data collected from these workshops contained information that could give me insight into the challenges faced by families living in Diepsloot as a result of their disadvantaged environment.

The sources of information within the clinical files were field notes, transcription notes of interviews with the families, visual data in the form of collages that the families made and a comprehensive clinical report. The field notes, group discussions and interviews helped me to source information regarding life in Diepsloot and the challenges that the families faced, and how they overcame them. Focus group discussions, arena activities and individual family interviews were used in order to explore the different and unique personal encounters (Maree, 2012) of the families with regard to adversity and resilience. The discussions held provided a deeper understanding of social processes, various perspectives and accounts (Petty, Thomson, & Stew, 2012) relating to belief systems and resilience. The documented reports in the clinical files allowed me to gain an understanding of meaning making as facilitated in the families and how they articulated and justified their response to life challenges using these elements, and how this sustained them during hardship.

1.12.2 FORESEEN CHALLENGES

Given that I did not have control over how the information that formed the data set of the present study was collected, it is possible that essential information that may have answered the research question may have been omitted. Therefore, suggesting that some of the key concepts may not have been covered in detail in the initial research (Brakewood & Poldrack, 2013). Although the Positive Parenting Workshops were focused on exploring how families survive in a disadvantaged environment, there was no specific focus on identifying the belief systems that they used to foster resilience. Thus I may have missed out on information that could have been vital to answering the research question.

Secondly, the inconsistent attendance of the families to the Positive Parenting Workshops which became evident in some of the documents on the file may have affected the content of some documents that were used for analysis. Based on the clinical reports contained in the files, some family members either did not attend either workshop or only attended one of the workshops. Hence, some information on file was left incomplete and this may have affected the overall clinical impression that could have been revealed by the clinical report.

1.13 DATA ANALYSIS AND INTERPRETATION

1.13.1 DATA PREPARATION

Prior to conducting this study, ethical clearance was obtained from the University of Pretoria Ethics Committee. I collected the clinical files from the University of Pretoria after seeking permission from the lecturer in charge of the files. Each file contained the name of the families that attended the Positive Parenting Workshops. Before commencing the analysis, I checked that the files were 14 in number and that each had a note attached that indicated that it had been evaluated and approved by the relevant supervisor from the University of Pretoria.

1.13.2 DATA SOURCES

The information that was used during the data analysis process in the present study was obtained from all 14 clinical files. During the analysis I relied on the field, interview and observation notes, and the clinical reports contained in each file.

To keep track of what was contained in each file a register was created that listed all the documents in the files. This helped ensure that no document was misplaced during the process of analysis (see Appendix A). Each file contained identifying information of each family, which made it easier to return each document to its correct file.

1.13.3 CRITERION USED FOR ANALYSIS

Prior to starting the analysis process I created a table in which factors that would be searched for in the database were listed. Each factor was based on the research question (see Appendix B). First on the list was the identification of the risk factors that the families had reported as being a challenge in Diepsloot. These could be in their immediate family, between them and their neighbours, in the school, and community in general. Secondly, protective factors within the community were identified, and how these were useful to fostering the family's wellbeing.

1.13.4 ANALYSIS OF THE DATA

For the purpose of the present study, thematic analysis was used to make sense of the data gleaned from the files. Seale (2012) defined thematic analysis as, an approach whereby a researcher made sense of information collected by grouping it into themes or patterns, which in turn reduced the amount of data into meaningful

information. Bowen, Edwards, and Cattell (2012) also defined thematic analysis as, a qualitative method that examined data with the sole goal of understanding and representing the lived experiences of people. Therefore, thematic analysis in this study was used to identify and analyse patterns in the qualitative data, which resulted in a rich description of the data (Clarke & Braun, 2013).

Thematic analysis was therefore appropriate for the present study as a way of understanding the families' interpretation of experiences (Alhojailan, 2012), based on a holistic view of their belief systems during times of distress (Bearman & Dawson, 2013). In addition, by considering the individual differences and the meaningful nature of the varying perspectives (Baker & Lewis, 2013) awareness was raised to the various aspects that played a role in how families experienced various events and their response to them (Alhojailan, 2012).

1.13.4.1 Familiarisation with data

To begin the analysis process I read through the written documents contained in each clinical file. There were visual recordings that were in my dropbox, which documented the discussions held during the workshops. A verbatim transcription was made of the recordings (see Appendix C & D), to avoid early interpretation that could lead to distortion of the words and meaning (Harding, 2013). There were also transcriptions in the clinical files which I read repeatedly to then identify key words, phrases and themes within the data.

1.13.4.2 Generating initial codes

According to Clarke and Braun (2013), coding can be seen as a process through which a researcher generates labels for features that may be of relevance to the research question guiding the analysis.

After reading through each file, I made a list of categories that could reflect key concepts to guide the study. These categories were: identified risk factors, and protective factors identified in each family (see Appendix B). Taking the theoretical framework into consideration, I considered the risk and protective factors in the family and the community. The table designed for the purpose was used to facilitate this process and all the keywords and statements identified in each clinical file in line with this inquiry were written down. To ensure that all categories were reflected and none overlooked (St. Pierre & Jackson, 2014) frequent reference was made to the

research questions, in order to take note of key concepts of the study (Harding, 2013).

Based on the specially created table, I processed the data to generate codes by using the first letters of a word or phrase, for example unemployment was coded as EU and poor housing PH (see Appendix L). Braun and Clarke (2014) stressed that the data coded should be meaningful and organised. Thus a code book was used as a guide and reference, to help revise and provide clarity about the data (DeCuir-Gunby, Marshall, & McCulloch, 2011).

1.13.4.3 Searching for themes

Once I had completed the coding, the codes within each category were then sorted into potential themes (see Appendix F). A theme can be defined as, a consistent and meaningful pattern that emerged from data that was relevant to the research question (Clarke & Braun, 2013). This process entailed finding various ways of expressing the trends that were evident within the data, finding relationships between themes (Clarke & Braun, 2013) in terms of the descriptions that were articulated to belief systems and how these fostered resilience.

Connections between themes were sought by revising the list of identified categories and checking where they were applicable to the participants (Harding, 2013) and evaluating the possible meaning or causal relationship that existed between categories (Thomas, 2006).

1.13.4.4 Reviewing themes

After the relevant themes had been identified, I refined and reviewed each one to ensure that they captured the important features that related to the research question and how it was related to the whole data (Braun & Clarke, 2014). This process of reviewing themes aided in checking for consistency and ensured that all the themes related toward one central concept. Thus it ensured the identification of patterns that emerged from the themes (Braun & Clarke, 2006). During this process, the goal was to ensure that the themes reflected the true meaning of data and that they captured all essential aspects needed to fully answer the research question.

1.13.4.5 Defining and naming themes

During this phase, the themes identified from the data were analytically interpreted. Resulting in a detailed definition of each theme and the relationship it had to all the themes identified within the data (Braun & Clarke, 2014). This stage of the analysis also helped to select which of the data extracts to use in the final report, and naming the selected themes in such a way that they were informative and led to a holistic understanding of the data (Braun & Clarke, 2006).

1.13.4.6 Producing the report

The final phase of the data analysis was to write a comprehensive report that narrated a rich story regarding the findings that emerged during their analysis and where it is situated in terms of academic schools of thought (Braun & Clarke, 2014). During this phase the final refining of the analysis took place and this was done through the integration of literature and determining the final arrangement of themes (Braun & Clarke, 2014). In the present study, multiple sources of information were used, which enabled me to acquire a varied number of responses and perspectives (Fusch & Ness, 2015) in relation to belief systems and resilience. Other techniques of data collection were used as a way of attaining data saturation. According to Fusch and Ness (2015), failure to attain or reach data saturation has quite a significant impact on the quality of the research. Data saturation can be defined as, a stage at which no new insights could be found (Bowen, 2008), when no further coding was possible or achievable (Fusch & Ness, 2015), and when there was sufficient information to conduct a duplication of the study (Walker, 2012).

1.13.5 VALIDITY/RELIABILITY/TRUSTWORTHINESS

Harding (2013) defined validity as, an accurate reflection of the findings on the data collected. Validity during data analysis was upheld by reading the transcribed information repeatedly and listening to the recorded audio; thus ensuring that the interpretations made were consistent with the discussions that took place with the participants. In addition, verification of the transcribed scripts with the recordings was done, in an effort to reduce inconsistencies within the data (Mero-Jaffe, 2011).

Triangulation can be defined as using various methods to collect and analyse data, as a way of increasing the validity and objectivity of a study (Fusch & Ness, 2015). In the present study, different methods of data collection were used to ensure that there was validity in the data collected and that all perspectives were reflected.

Furthermore, comparison of information obtained using the various methods of data collection were conducted in order to check for consistency within the data. Heale and Forbes (2013) defined this as triangulation. Furthermore, the findings found were justified to another colleague who had extensive knowledge on the topic. Which this helped reduce any bias made unknowingly and also highlighted areas that were overlooked (Harding, 2013).

1.14 ETHICAL CONSIDERATIONS

Seale (2012) stressed that ethical considerations need substantial attention in research. Meaning that throughout the study a researcher must ensure that whatever he or she does was in line with the standardised rules and regulations. Harding (2013) also highlighted that a researcher must not use false opinions as a way of gaining the participants' trust, as this would forfeit the whole purpose of the project.

1.14.1 INFORMED CONSENT

Research is an area of learning that requires of a researcher to gain access to a participant's personal space and privacy. Therefore, consent needs to be addressed before commencing with any activity (Miller, Birch, Mauthner, & Jessop, 2012). In the present study, I ensured that all the clinical files used contained a signed informed consent document.

It is important to note that all ethical matters relating to data collection during the workshops were adhered to, and the families were fully informed that the information collected would be used for research purposes.

1.14.2 ANONYMITY AND CONFIDENTIALITY

In terms of anonymity and confidentiality, the names and other identifying information of the participants were not included in the final report. In addition, all collected information and media recording devices were kept in a locked cabinet and were accessible only to me, as the researcher.

During the analysis, I ensured that pseudonyms were used to represent each family, and these were maintained even when quoting the direct phrases and statements that the families provided.

1.15 POSSIBLE CONTRIBUTIONS

I am of the opinion that the findings from the study helped generate a deeper understanding and appreciation of the various belief systems that exist in families based on a South African context, and how these fostered resilience. It further facilitated the discovery of practices, values and ideologies that served as sources of strength during adversity.

Secondly, this study could be the basis of future research in terms of exploring and understanding resilience in families living in disadvantaged environments.

1.16 LAYOUT OF STUDY

The contents of my study were divided as follows:

CHAPTER 1: OVERVIEW OF THE STUDY

This chapter provides the reader a general overview of the background information, rationale, conceptual framework, purpose of the study, research questions, methodology, and ethical considerations that guide this study.

CHAPTER 2: LITERATURE REVIEW

This chapter comprises of discussion on factors that the families faced and how resilience was attained by the use of belief systems, and how this in turn promoted commitment in families.

CHAPTER 3: RESEARCH DESIGN AND METHODOLOGY

The sample selection, data collection, documentation and analysis using qualitative methods is explained and discussed in depth in this chapter.

CHAPTER 4: FINDINGS OF THE RESEARCH

In Chapter 4, the raw data obtained from the analysis is presented and interpretation discussed. The themes that emerged during the data analysis are presented, and an explanation provided as to how they related to the existing theory discussed in Chapter 2.

CHAPTER FIVE: SUMMARY

This chapter provides a summary of this study. The findings of this study are related to the purpose and research questions. Also discussed are the limitations and recommendations for future studies.

1.17 CONCLUSION

In this chapter the motivation behind my interest with the present study is provided, being the fact there is little research done with regards to how family belief systems support resilience and commitment, especially in families living in high risk areas such as Diepsloot. The purpose of the study is stated and the key concepts that will be used are defined. A brief discussion of the research design and methodology is provided, along with the ethical considerations to which the study adhered. It is my hope not only to add to existing literature, but also cultivate a deeper understanding of the various belief systems that exist in families and how these become fundamental during times of adversity.

---oOo---

Chapter 2

Literature Review

2.1 INTRODUCTION

The focus of this chapter is on the review of literature from various scholars with regards to how they conceptualise belief systems. The chapter also entails a discussion of Walsh's Family Resilience Framework in relation to how belief systems as a key process plays a role in fostering resilience.

Studies indicate that the belief system of the parents (Rubin & Chung, 2006), teachers (Fives & Buehl, 2012) and community (Boudry & Braeckman, 2012) are interrelated, and have a reciprocal effect on each other. The findings from these studies suggest that a family's belief system can be a product of societal influences such as culture or religious affiliation. Thus any change in these influential factors can slightly alter or completely change the belief system of a family. Therefore, a holistic understanding of belief systems arises from the realisation that a family does not exist in isolation (Bhana & Bachoo, 2011). Other factors within their environment play a key role concerning why some beliefs are considered more valuable than others, and how these are taught and reinforced within the unit.

2.2 DEFINING BELIEFS SYSTEMS

Plato portrayed beliefs in light of attitudes that people rely on as a means of providing a representation of one's entities that make up their thought process (Gilbert & Pilchman, 2014). On the other hand, Nescolarde-Selva and Usó-Doménech (2013) viewed belief systems as, the structured norms that people use to make sense of their world and cope with various events in life. Bhana and Bachoo (2011) defined belief systems as, a set of collective attitudes, thought processes and values which families rely on to obtain positive outcomes in life. Therefore, one could perceive belief systems as ways in which people try to make meaning in every situation they face based on their cognitive representations (Gnanaprakash, 2013), past experiences (Landau, 2007), religious views (Greeff & Thiel, 2012), cultural values (Denis, 2007), and philosophical beliefs concerning life (Frankl, 2006).

According to Walsh (2012), a family's belief system has a major impact on how the unit copes and adapts to the various events that the family encounters throughout life. Aspects of belief systems such as meaning making of adversity, positive outlook and transcendence, or spirituality are essential for the functionality of the family (Lightfoot & Valsiner, 1992). The set of collective attitudes, thought processes and values which a family relies on to obtain positive outcomes on life (Bhana & Bachoo, 2011) play an influential role on how they view a situation, their suffering, and the possible solutions they may have (Walsh, 2012). This entails being able to look at any challenge as a learning curve and not seeing it as catastrophic (Lowe, Sampson, Gruebner, & Galea, 2015), hopeless or just unbearable (Linley & Joseph, 2011) and drawing on the elements of coherence, positive outlook (Lila, Gracia, & Murgui, 2013), spiritual and religious aspects to overcome a stressful situation (Simon, Murphy, & Smith, 2005; Walsh, 2012).

2.2.1 VARIATION IN WESTERN AND TRADITIONAL BELIEF SYSTEMS

Although beliefs are a universal practice, it is important to note that there is a significant difference between Western and traditional African thought patterns (Agrawal, 2014). Thornton and Scheer (2012) perceived traditional beliefs as indigenous and folk knowledge, along with values that have been passed down from one generation to the next. These help maintain the culture and help form a community's identity and heritage (Williams & Hardison, 2013). In contrast, Western beliefs focus on understanding phenomenon from a scientific view point, where the focus is on facts and the cause-and-effect relationship of occurrences (Kraft, Lodge, & Taber, 2015).

Traditional belief systems within the African context are holistic and encompass every aspect of human life (Beit-Hallahmi & Argyle, 2004). Hence, they are intertwined into everyday activities and practices. In the traditionalist view everything is perceived as interconnected, interrelated, and influenced by a greater power or entity (Meiring, 1996). In addition, authors such as Berkes (2012) highlighted that the traditionalist view places much emphasis on divination and taking into consideration one's ancestral lineage to understand their existence and their cultural roots (Petty, 2016). In contrast, the Western thought is more analytic and scientific in nature (Mazzocchi, 2006) and nothing is seen as related. The focus is on understanding aspects that can be observed, measured, manipulated and predicted. Thus entities are grouped into relevant categories, as opposed to everything being seen as being intertwined (Meiring, 1996).

Secondly, Westerners are more individualistic. They believe in freedom of thought, where one can hold a belief that is independent from others. Whereas traditional communities are collective and thus tend to have shared values, practices and beliefs by which their members have to abide (Meiring, 1996).

Thirdly, traditional African communities are more oriented to magical-mystical beliefs. While the Westerners look for logical and historical beliefs (Meiring, 1996). For example, traditional beliefs are based on the assumptions that the environment in which a community resides is sacred, meaning that there are spirits and powers that have a major impact on the life of their community. Examples of these could be mystical caves, forests and mountains (Taringa, 2006).

2.2.2 BRONFENBRENNER'S ECOLOGICAL PERSPECTIVE

Urie Bronfenbrenner's work suggests that human beings do not live in isolation. Instead, they are nested within various systems that impact their development (Bronfenbrenner, 1999). Bronfenbrenner identified five systems that play a role on the development of individuals, namely, the microsystem, mesosystem, exosystem, macrosystem, and chronosystem (Bronfenbrenner, 1999).

In the present study, Bronfenbrenner's theory was beneficial in highlighting some of the risk and protective factors that are present in people's lives and how these in turn shape the manner in which they live and adapt to their surroundings. In terms of the research question, this theory was useful in identifying the roles that each system plays in fostering resilience within families that live in Diepsloot, near Johannesburg, South Africa.

The microsystem is the first and most influential system within the structure, as it directly affects the individual (Neal & Neal, 2013). For instance, some of the beliefs that parents hold are a result of values and thoughts that they were exposed to within a particular setting (Grusec, 2006). Therefore, as children are born into the family they are inducted into those beliefs, as they form part of the parental knowledge which governs how they are expected to behave within the family and the roles they are expected to play (Wu, 2012).

Belief systems in some families, therefore, act as a guide (Baloyi, 2014) and provide a sense of direction (Gibson, 2013) when dealing with crises with the family. Instead of using haphazard problem solving strategies, relevant procedures and routes are taken to seek help and also keep the system from completely falling apart (Mhaka,

2014). Therefore, it is safe to assume that parental beliefs play a key role in the behaviour of the members within a family unit, and how the unit progresses over time and adapts during times of adversity (Sigel, McGillicuddy-DeLisi, & Goodnow, 2014). For example, if parents believe in ancestral worship, whenever they experience a problem they would be quick to consult the ancestors, instead of trying to find someone to blame. This practice then compels the family to work together towards appeasing the ancestors in order to gain a solution to a problem (Parrinder, 2014). This faith in the ability of the ancestors to restore order within the family results in a sense of hope and assurance that things will return to a state of normalcy; hence, fostering a sense of perseverance which can then deem the unit as resilient.

It is important to note that parental beliefs can magnify or minimise the impact of negative events such as poverty, illness, and death on the family (Murphey, 1992). Hence, if the parental system takes a negative view or perception of a problem within the unit this then leads to heightened feelings of fear, uncertainty and despair, which then affects the ability of the unit to adapt when faced with adversity (Bornstein, 2012).

The mesosystem, based on Bronfenbrenner's work, takes into consideration the various interactions between microsystems (Neal & Neal, 2013) such as, interactions between family members, or between the family and school. Skinner and Pitzer (2012) found that the ability of children to successfully handle frustrations within the classroom environment is linked to their ability to handle problems that are external to the learning environment. The encouragement they obtain from the teachers fostered a sense of perseverance, which led to a sense of mastery, which can then be generalised to real life situations. Therefore, some of the behaviours children learn outside of the family unit either reinforce or disregard the values that they are taught at home.

The exosystem encompasses events or people that indirectly affect the individual (N. Skinner, 2012). These have the ability to shift dynamics within the microsystem. Which include affiliations to churches, social groups, and other organisations within the community (Garmestani & Benson, 2013). According to Gunnestad and Thwala (2011), affiliation to religious groups or organisations is important because during time of adversity families or individuals can seek help whether emotional, physical or financial support. By virtue that they identify with a particular church or religious society, people feel that support is readily available to them and therefore they feel a sense of hope that they will overcome any situation they face.

When looking at Bronfenbrenner's macrosystem level, most of the beliefs that a family holds are culturally determined and are social representation of contextually based knowledge (Shermer, 2011) which is transmitted through socialisation and other cultural practices. A community's cultural values serves as a guide for daily interactions within a particular context, and thus influence meaning making and contribute to a family's resilience (Chigeza & Roos, 2011). In addition, Schatz and Gilbert (2011) also stressed this point by indicating that the belief systems that people adhere to have the ability to influence their responses to particular events or illness. And these are mainly determined by the social context within which one resided. Therefore, societal beliefs can influence people's behaviour and how they respond to life situations, which may hinder or foster resilience.

Greeff and Loubser (2008) reported that social support is essential. Having the assurance that one is not alone when faced with a crisis is the ultimate key to resilience. This notion suggests that external support is vital for a family in distress.

However, it is important to note that sometimes the rigid cultural system of community at times could also increase the stress level of a family facing adversity. Especially, for example, if a family has a member infected with the human immunodeficiency virus (HIV). If the stigma regarding the illness was dominant in the community the family could possibly face further ridicule--especially if the community still believed the myth that the virus was a result of promiscuity.

The chronosystem takes into consideration the element of time and how it can affect various aspects of society (Skinner, 2012). It is important to note that parental beliefs can change over time due to the fact that culture, religion, and other facets of life change (Fullan, 2004). With the new trends and evolutions within society, children may have varying views from their parents, which can then impact upon the belief systems in the unit. For example, in the African tradition a female child is expected to stay in the house for three months after giving birth (Magesa, 2014), as it is believed that this will protect the newborn and mother from bad spirits or omens. However, some women tend to not follow traditional rules. Hence, they may violate these customary practices, which at times may result in disapproval from her parents. Due to varying beliefs within the unit, family members may have varied responses to an event; leading to varying appraisal and coping mechanisms, which either result in conflicts or total reformation of the system.

2.3 FAMILY BELIEF SYSTEMS AS A KEY PROCESS FOR RESILIENCE

Walsh's Family Resilience Framework identifies three key processes that are essential for family resilience namely, communication/problem solving, belief systems and organisational patterns (Walsh, 2012). Communication/problem solving focuses on the ability of the family to address and successfully solve problems when they arise (Walsh, 2003). Organisational patterns as a key process, focuses on how flexible, supportive and collaborative a family is when faced with problems and the last key process being belief systems, focuses on the shared beliefs that families have, which can be useful during stressful situations to find meaning and attain a positive outlook on life (Walsh, 2012). According to Walsh all these key processes if utilized efficiently can facilitate the ability of the family to adaptively cope and bounce forward in life (Walsh, 2003); thus making the unit resilient.

The Family resilience framework is consistent with the asset based approach because it looks at strengths that can be utilised to help a family adaptively cope with life events. The focus in the present study however was on the family resilience framework because it gives an in-depth understanding of resilience within a family setting where as the asset base approach is a rather broader framework.

For the purpose of the present study, my focus was on exploring and understanding the role that belief systems play as a key process of resilience in families that reside in Diepsloot.

2.3.1 DEFINING RESILIENCE

According to Ungar (2012), defining resilience has proven to be difficult. Some researchers view it as a personal trait, while others view it as a process that entails utilising resources in one's environment, and strength when faced with challenges. Some researchers view resilience as an attribute of individual traits, which enabled an individual to buffer any type of stressor (Rutter, 2001). In contrast, other researchers conceptualised resilience in a family light of ways in which the unit adapts throughout the course of life when faced with various stressors (Patterson, 2002). In her work, Walsh (2003, 2012) conceptualised resilience as, the capacity to endure during adversity and having the ability to move forward and not be crippled by negative experiences. Hence, the concept of family resilience stems from risks that families collectively face overtime and their ability to overcome and continue to function despite the setback caused (Walsh, 2003, 2012).

Although these views on resilience differ in terms of focal points, the recurring theme in all of them is the ability of the family to overcome stressors throughout life, and continuously adapt and make accommodations for any changes resulting from adversity (McAllister, 2013). By relying on practices such as prayer, consulting religious priests, ancestors and diviners, families are able to make sense of what they are going through and find courage in moving forward in life.

Family resilience, in Walsh's view, moves away from focusing only on the individual resources that each family has which lead to resilience. It also considers the risks and resilience found within the family (Walsh, 2015). Therefore, resilience is the ability to withstand and buffer any event that has the ability to disrupt daily family functioning (Raftopoulos & Bates, 2011). Resilience therefore can be perceived as, the ability of the family to adapt positively during adversity instead of merely seeking someone to blame, while striving to attain meaning and a sense hope for the future (Theron & Theron, 2013). The family resilience framework therefore recognises the potential for personal as well as relational transformation and growth when going through adverse times (Rutter, 2012).

2.3.2 HOW BELIEFS SYSTEMS FACILITATE RESILIENCE

Bhana and Bachoo (2011) indicated that there are several factors within the family system that foster resilience and having a belief system was included in those factors. Greeff and Loubser (2008) highlighted that families face various challenges that could disrupt or disorganise the functional capacity of the system. Hence, traditional belief systems and practices could be used to restore the family's wellbeing.

2.3.2.1 Spirituality as a form of belief system

Defining spirituality has deemed challenging. Some authors view it in light of one's relationship with God, and ascribing to various beliefs and practices such as reading the bible, offering special sacrifices and praying (Raftopoulos & Bates, 2011). On the other hand, spirituality could also be seen in light of the various beliefs to which one ascribes. These could be influenced by their family of origin and tribe, or doctrines with which they identify (Lightfoot & Valsiner, 1992). It is important to note that spirituality has various dimensions, including one's search for meaning in life and the purpose for every event faced, the belief in a supreme being, internalised values that determine one's behavioural responses to events (Raftopoulos & Bates, 2011). Spirituality in the traditional African cultural setting ranges from folktales and chants,

to the various ceremonies that were conducted to signify important events in one's life (Raftopoulos & Bates, 2011).

Lerner et al. (2005) highlighted that spirituality is essential for personal development as well as the positive adaptation to stress and other changes in life. In addition, in their study Raftopoulos and Bates (2011) highlighted that spirituality fosters resilience because individuals tended to seek the meaning and purpose with every event they encountered in life. Thus implying that when one actively engages in finding possible causes and solutions to crises through constant reflection, they could possibly see how they may be contributing to the situation and how they could avoid such in the future. Thus, people who had the element of spirituality within their lives are better able to handle various numbers of stressors in life and had better psychological and mental status (Greeff & Loubser, 2008).

Various studies have revealed that spirituality plays a key role during low moments in one's life such as the death of a loved one, chronic illness, stressful events and depressive moments (Raftopoulos & Bates, 2011). For example, in the Zulu tradition, when someone within a family dies, the family conducts a ritual ceremony called *hlamba izindla* (which means, cleanse your hands) a week after the burial, to bid farewell to the deceased (Bogopa, 2010). A month after the burial another ceremony called *zilela ofile* (which means, listen to the dead) is held. And lastly, a year after the burial, a third ritual called *buyisa* (which entails bringing the spirit of the deceased family member home and accepting their status as deceased within the family) is held (Setsiba, 2012). It is believed these three rituals are useful in preventing illness from befalling the family as a result of a dark cloud of death (Bogopa, 2010). These rituals helped the family during the grieving process and helped them attain closure; thus enabling them to return to a state of normalcy, knowing that the deceased is resting in peace.

Setsiba (2012) highlighted that rituals held during funeral proceedings provided a therapeutic role in returning a family to a state of health. The prayers leading up to the burial day provided the grieving family with social support, which enhanced their ability to adaptively cope with their loss. A study by Kilonzo and Hogan (1999), which explored the psychological implications of mourning rituals in the African context in families affected by HIV and AIDS, revealed the importance of rituals in the psychological adjustment of the bereaved family. Therefore, rituals bring a source of relief to the family that is in mourning, as they serve as a psychological tool that brings about positive adjustment during times of misfortune (Ratele, 2006).

Greeff and Loubser (2008) highlighted that the Xhosa-speaking people perceive ancestors as a connection to the world of the dead, which is viewed as a powerful spiritual being that could be called upon during times of hardship and despair. Therefore, death within the African context is seen as a transition from the world of human beings to the spirit world. When one died it was believed that he or she then became part of the ancestral clan (Baloyi, 2014). Hence, special rituals which involved slaughtering of cows, goats and chickens (Mokgobo, 2015) would be conducted to unite the departed with the family and establish a point of contact with the spiritual world. It is believed that a strong bond between the family and ancestors is essential as the ancestors protect the family from danger and are a source of strength during adversity (Bogopa, 2010). However, if the right rituals were not followed to give a family member the proper death as per their culture, it is believed that they would not transition to the spiritual world (Bogopa, 2010). Instead they would become a ghost. Thus the family may be prone to attacks and this in turn would serve to heighten their sense of anxiety and distress because their protection was not guaranteed.

Given the notion that ancestors are seen as important for the family's wellbeing, it is believed that by use of visions, dreams and other means of cultural communication the family can obtain clarity and solutions to the problems they faced from their ancestors (Greeff & Loubser, 2008). Based on this fact, most families built a sanctuary in a hut set aside for the purpose of being sacred, where the father or head of the family offered sacrifices to ancestors such as beer or a burnt offering as a form of communication (Denis, 2007). Maintaining a good relationship with the ancestors was vital for the family's survival and enhanced the prosperity of the clan (Magesa, 2014). This belief in ancestral worship acts as a form of assurance that during times of despair they have a place of refuge where they could seek guidance. Thus, by consulting with ancestors through prayer during times of distress, calmness and a sense of assurance is restored in the family unit (Brittian, Lewin, & Norris, 2013) which resulted in positive adaptation during adversity.

As mentioned earlier, one of the dimensions of spirituality is viewed as a quest to seek meaning and purpose in every crisis faced. This leads to the belief that every event has a reason and a lesson behind it. According to Frankl (2006), through meaning making an individual is able to adaptively cope with any crisis faced. The event is not deemed important but rather the lesson behind it is of more importance. Therefore, instead of viewing an event as catastrophic, a family would aim to identify its meaning, purpose and finding a way to adapt to the change brought about the

event. Thus, during low moments in the life of the family much energy is spent on discovering the meaning behind the situation, instead of dwelling on the negative emotions felt, and this therefore fosters resilience (Raftopoulos & Bates, 2011). An example of this would be how parents, when the family experienced a prolonged period of bad events, tended to call on a sangoma for help with discovering the cause of the events. This consultation with the sangoma provided the family clarity on the possible cause of the problem and which rituals to perform to rectify the matter (Cumes, 2013). Thus they could seek necessary help to ensure that a state of 'normal' functioning is reached again.

2.3.2.2 Religion as a form of belief system

According to Weber and Pargament (2014), religious beliefs tend to foster resilience. The positive beliefs and thoughts that people ponder on during adversity enable them to experience lower levels of stress and anxiety.

Religious ideas and practices tended to have a major influence on the cultural beliefs and life in many communities. Studies have shown that religion promotes mental health, for it encourages positive religious coping, community support, and meditating on positive beliefs and outcomes (Pargament, 2011). In a study comprising of 596 patients who were hospitalised for various medical conditions, Pargament (2011) discovered that patients who relied on positive religious coping methods had a better improved state of health than those that relied on negative religious coping methods. Generally, religion practices such as being affiliated to a church, religious group or any faith based organisation, tended to give individuals the assurance that during times of need they had a place where they could seek comfort and emotional guidance (Weber & Pargament, 2014). Therefore, religion could be seen as a protective factor which becomes resourceful during times of distress.

A study by Raftopoulos and Bates (2011) highlighted that prayer instils a sense of security because people believe that they have a supreme power in the form of God to draw on. God gave them unconditional affection, protection during distress, and also met all their needs at all times. According to Gunnestad and Thwala (2011), prayer and intercession helps people calm down during stressful situations and because they believe that someone is listening to their petitions they are assured that help will come. By virtue that some churches do have designated dates for prayers, people tended to use these specific services to narrate their problems and rely on their faith that the situation would take a turn for the better. To support this view, a

study carried out on Black mothers in the metropolitan area of Johannesburg-Soweto showed that 73% of the mothers revealed that prayer is an essential tool that helped them during times of distress (Barbarin & Richter, 2001).

In a study of families affected by prostate cancer, Greeff and Thiel (2012) highlighted that the religious beliefs and practices that families ascribed to helped reduce feelings of despair and promote feelings of hope, and also helped them address their problems constructively and seek necessary help. Supporting this, Walsh (2012) stressed that prayer tends to be a common practice in many resilient families, and it serves various purposes at various points in the family's life circle. During times of need they perceived God as their provider. In sickness, He is their healer. During trials, He is present. When they were immobilised, He carried them and through constant prayer the participants communicated with God. Thus, they forged on as a family because God would see them through their adversity, thus revealing an ability to grow through adversity and see new possibilities for action in the face of adversity (Greeff & Loubser, 2008). These views concerning God help families and individuals be resilient, for they believe they are not alone. Even in adversity God is paving a way for them and there is thus hope for tomorrow.

However, Weber and Pargament (2014) highlighted that although membership with a particular religious organisation may be fundamental in resilience, sometimes it may also have a negative influence. This is regarded as negative religious coping. For example, a person may feel that they are not being given sufficient support and therefore, because they rely so much on other people for help, they may remain in a state of helplessness.

2.3.2.3 Promotes positive outlook

In a study that focused on assessing how couples facing financial challenges coped, Conger, Rueter, and Elder (1999) discovered that through reaffirming and encouraging each other when going through hardships couples were able to stay positive and hopeful, rather than sinking in despair. In addition, active and equal participation and initiative enabled them to handle the situation without experiencing immense emotional distress. Hence, the ability to show mastery as a couple results in functioning of the unit (Conger et al., 1999).

These findings were consistent with the view that clear and consistent positive feedback, support and positive attitudes in a family and reduces feelings of anxiety, stress and depression when facing trying times (Conger et al., 1999). Thus, a positive

outlook on life helps a family not to be discouraged irrespective of the situation (Rubin & Chung, 2006) and constant encouragement as well as motivation leads to resilience, as opposed to adopting a blaming stance or helplessness during adversity (Raftopoulos & Bates, 2011).

Belief systems therefore foster positive emotions such as hope, courage, comfort and motivation towards the unpredictable events of life (Walsh, 2012). Bradbury and Karney (2004) highlighted that feelings that elevate a sense of self-worth, belongingness and affection are of great benefit. These gave one a sense of hope and perseverance during adversity (Black & Lobo, 2008; Hernández, 2002). Walsh (2003) also highlighted the significance of having a proactive and motivated point of view towards problems. She noted that elements such as hope, perseverance and determination can foster strength and resilience (Hernández, 2002). When fully utilised, these enable a family to gain strength and positively adapt to any disruption in daily functioning (Walsh, 2003).

Black and Lobo (2008) argued it is important to note that being positive about the future did not signal a sense of denial. Instead, it is a more constructive and positive look as to how the problem is viewed and could be addressed. Thus, having a positive outlook should not be seen as an unrealistic stance or pathology in a family, but rather a defence mechanism and strength that could enable the system to function and move forward. Therefore, the ability of the parental unit to affirm strengths and constantly assure members of the family during times of distress (Nadeau, 2001) enables the unit to stay positive about the future and find adaptive ways of coping.

2.3.2.4 Facilitates meaning making

Parental beliefs can help a family to gain insight into the lessons that could be learnt during adversity and thus foster a sense of growth and acquiring new knowledge (Rubin & Chung, 2006). This also becomes important in recognising some level of purpose in life through learning that both negative and positive experiences are building blocks of life (Mattis, 2002). Black and Lobo (2008) highlighted that meaning making within the family is based on how each family member plays a role towards attaining normalcy when in crisis. Through searching for a unified belief as to why an event happened and how it can be best addressed. However, it required a parental unit to have an understanding, manage and have motivation towards resolving the presenting crisis (Park, 2010). In their work Chigeza and Roos (2011) stressed that

meaning making is essential for survival, as well as adaptive coping (Mattis, 2002). Thus through the utilisation of beliefs, family members could construct meaning with every challenge they face, based on how the parental unit reappraise good and bad events that took place within the family. Thus a family's ability to make meaning, how they explore solutions and draw on available resources could be seen as the cornerstone of overcoming challenges faced in life.

Duckett (2009) found that the way families perceived a problem determined their reaction towards the stressors and changes it brought to the unit. Nadeau (2001) highlighted that sometimes families failed to make meaning out of situations, especially when they struggled to come to terms with a stressful event. Hence, the maturity of parents in a home has a significant impact of how the unit made sense and meaning from pain (Denis, 2007). The parents could either use their past experience and knowledge to reduce the impact of a negative event in the family, instead of blaming the other party, thus collectively work to retain stability within the unit. Thus, the coping mechanisms within the family will be largely influenced by the type of thoughts the parents have associated with that particular stressor and their capability to resolve it (Patterson, 2002). Therefore, meaning construction or reconstruction becomes vital to the unit in order to buffer the stress caused (Walsh, 2007).

It is important to note that the way in which individuals attributed meaning when going through adversity differs throughout cultures (Greeff & Loubser, 2008). Thus, the way in which a family copes or responds to negative experiences varies throughout African tribes. This is due to different cultural beliefs and practices, which then give rise to different attributions towards causal factors of "misfortune" or trouble. If the cause of misfortune or problems is attributed to ancestral spirits (badimo), the way in which the family normalised or handled the situation would be more complicated and taxing, as opposed to when a stressor is something that was not linked to any cultural belief or entity. For example, most traditional health practitioners perceived sickness as an indication or act of violence towards an individual or family, which is driven by jealousy (Lobar et al., 2006); implying that sometimes a family member may fall sick because someone cast a spell to destabilise the family. Hence, if a family perceives this crisis as a minor issue, they are most likely to normalise the event and move on, but if the family perceives the issue as disastrous, they are most likely to have negative responses towards it.

2.3.2.5 Promote a sense of coherence

Coherence is important during meaning making. Individuals tend to search for a form of resistance during stressful situations (Park, 2010), which is seen as a sense of coherence which enables individuals to perceive and interpret situations (Walsh, 2012). Sense of coherence consists of three components: 1) manageability, which focuses on one's perception of the availability of resources during times of need, and the extent to which they perceive their ability to cope with the demands that come with crisis (Pargament, 1997); 2) meaningfulness, which focuses on the motivation and appraisal levels towards a crisis (Lightfoot & Valsiner, 1992); 3) whether a problem is deemed too challenging or if it is seen as non-threatening. If a parental system has high levels of these components, they are most likely to solve and cope adaptively with any crises.

The ability of the family unit as a whole to attribute or identify the cause of a particular distress within the family is also regarded as a positive move towards resolving the issue, as opposed to ignoring or denying the existence of the problem (Walsh, 2012). In addition, having clear priorities during crises facilitates effective goal setting and problem solving within a family, thus fostering a collective stance in the unit (Patterson & Garwick, 1998). Olson (2000 as cited in Black & Lobo, 2008) highlighted that a unit functions well when everyone feels that their presence is valued; indicating that they have a sense of worth and security within the family. Thus, if the family share a collective view and goal towards every challenge or crisis and perceives it as solvable (Rutter, 2012), as a sense of cohesion and mastery of a situation is fostered. Which resulted in the reinforcement of a sense of commitment and responsibility with the family. Walsh (2012) further supported this view by stating that if a family has a high and strong sense of coherence they tended to buffer stress easily.

Beliefs can serve as a contributing factor towards healthy development of children in a family unit (Lightfoot & Valsiner, 1992) because they facilitate a sense of cohesion. In a South African study aimed at understanding the perspectives of youth regarding religion, the findings revealed that the beliefs youth hold serve as a moral compass and govern their behaviour and way of life, and these were mainly influenced by parental systems (Brittian et al., 2013). The Tswana communities, for example, have traditional proverbs such as "*matlo go sha mabapi*," "*mabogo dinku a thebana*" and "*moroto wa esi ga o ele*." These three proverbs mainly stress the idea that no person can exist on their own. That one needs the help of others in order to survive in life.

¹ "Cooperation is key" and "No man is an island."

Hence, parents teach children from a young age the value of respecting elders and helping people within their community because this builds some form of relationship between the family and the community. This can be also viewed as a form of *Ubuntu*, a value that is highly valued in the South African nation.

2.4 CONCLUSION

In conclusion, it is evident from published literature that belief systems of families experiencing adversity play a vital role in fostering a sense of resilience. Thus, enabling them to adapt positively to the changes they face and maintain a sense of commitment. However, even though belief systems did help families attain a level of resilience, at times they tended to be hindrances that disabled the family unit. Which therefore raised the argument that not all family belief systems in fact benefit the family. Depending on the situation, some could actually do more harm than good.

---oOo---

Chapter 3

Research Design and Methodology

3.1 INTRODUCTION

In this chapter I describe the research design and methodology applied in the present study. The paradigmatic research approach and how secondary data analysis was applied to answer the research question will be explained. This chapter also offers a description of the data sources used and the data analysis procedure followed to obtain results that could help answer the research question.

3.2 RESEARCH DESIGN AND STRATEGIES

3.2.1 SECONDARY DATA ANALYSIS AS A RESEARCH DESIGN

According to Greenhoot and Dowsett (2012), secondary data analysis entails the application of existing data from previous studies to answer a research question. The researcher may have not been involved in the previous studies but may find the available data useful. According to Vartanian (2011), secondary data offers the researcher quick access to relevant data, thus allowing for a deeper understanding of the phenomenon under study.

For the present study secondary analysis of the clinical files collected from the Shumbashaba Positive Parenting Workshops was ideal, as information contained therein highlighted some of the stressors faced by families living in Diepsloot (see Appendix H). In addition, detail is provided of the strategies and resources those families drew on to function effectively despite their negative circumstances. These personal accounts, therefore, provided lived data pertaining to this study (Seale, 2012) as opposed to this study depending entirely on information provided in the relevant literature.

3.2.1.1 The primary research question for the present study

The main research question that guided the present study was: How do belief systems foster resilience in families living in disadvantaged environments?

3.2.1.2 Secondary research questions

- ❖ How does meaning making foster resilience during adversity?
- ❖ What are some of the practices that families engage in to enhance their ability to bounce back from negative events?
- ❖ What are some of the beliefs that families ascribe to when faced with adversity?

3.2.2 SECONDARY DATA SELECTION STRATEGY

In the present study the clinical files from the Positive Parenting Workshops were accessed as a source of information and no additional data was collected. The Master's students used various activities such as collages, family drawings, community mapping exercises, group discussions and individual interviews to gather information from the families that participated in that study. All the data contained in the files related to the stressors that families faced in Diepsloot and how they overcame these, and hence the information was valuable in answering the research questions provided above. The various data sources were each named, to help identify and differentiate them. With the names being: collages, McMaster Family Functioning Assessment, field and observation notes, family genograms, family drawings and interviews, social ecological map diagram, asset mapping exercise and a clinical report. This would facilitate the reporting of the findings, as recorded in Chapter 4.

The clinical files consisted of different documents such as consent forms, field notes, observation notes, assessments and a clinical report. For the purpose of this study all these documents were analysed in order to answer the research question. It is important to note that during the workshops each Master's student was expected to design their own assessment tools to lead to their better understanding of the family they were assigned. Therefore, the contents of each file varied. Table 3.1 illustrates what documents were found in the individual family files.

Table 3.1: Documents used as sources of information for this study

	Assessment tool used							
	Collage	McMaster	Observation and Field Notes	Family Genogram	Social Ecology Map diagram	Family drawings & Interview	Asset mapping Exercise	Clinical Report
Family								
S01	✓	✓	✓					✓
S02		✓		✓		✓	✓	✓
S03	✓	✓	✓					✓
S04			✓					✓
S05		✓	✓		✓	✓		✓
S06		✓	✓	✓		✓	✓	✓
S07	✓	✓	✓	✓				✓
S08		✓	✓	✓		✓		✓
S09		✓	✓			✓		✓
S10		✓	✓					✓
S11		✓	✓				✓	✓
S12	✓	✓	✓					✓
S13		✓	✓		✓			✓
S14	✓	✓	✓	✓		✓		✓

The tools mentioned in Table 3.1 were applied for the initial assessment. For the purpose of this study they were given labels, as indicated below, to facilitate the reporting on the findings of this study as presented in Chapter 4.

1. Collage = Col
2. McMaster Family Functioning Assessment= MacM
3. Notes = N
4. Family Genogram = Fam Gn
5. Socio Ecology Map diagram = Se Map
6. Family drawing and interview = Fam D & int
7. Asset mapping exercise = Map Ex
8. Clinical report = Clin R

The steps followed to begin the secondary analysis of client files included:

1. The first step was to gain access to confidential files by obtaining the necessary permission from the relevant authorities.
2. I collected the files and read through them as a way of familiarising myself with the data contained in the files.
3. I then processed to identify the various documents within the families that could be included as data sources. A template was used to keep track of what is contained in each file (see Appendix A).
4. As I read through the files I identified the information that met my criterion for analysis (this is discussed in Chapter 4).
5. The 14 files were analysed and the results used to answer the research question of the present study. (The analysis is discussed in detail in the section that deals with thematic analysis.)

Upon completion of the analysis the clinical files were returned to the University of Pretoria for safekeeping.

3.2.3 ADVANTAGES OF SECONDARY DATA ANALYSIS

The advantages of secondary analysis include that it is non-invasive because the researcher does not engage directly with the participants (Smith & Osborn, 2008), and it is less time consuming because the information is readily available (Greenhoot & Dowsett, 2012). It further allows for the generation of new ideas that can add to existing literature (Silverman, 2016).

Using secondary data analysis in the present study provided me with valuable information that could answer the research questions. Analysing the documents helped me identify how the families relied on belief systems to foster resilience during adversity.

Given that multiple documents such as collages, clinical reports and field notes were used during the analysis I had multiple sources of information at my disposal, and sufficient information to answer my research questions. These information sources will be named and described later in the chapter.

3.2.4 LIMITATIONS OF SECONDARY DATA ANALYSIS

Although secondary data analysis is a valuable tool, it does present limitations, which were taken into consideration in the present study. The first limitation, according to Heaton (2008), is that the methods used to acquire the initial data at times can be flexible. Therefore, there can be variation in the data collected in terms of quality and depth of the information. To ensure that this limitation was addressed, analysis of the client files was conducted only after the files had been supervised by the course lecturer.

Another limitation was that, due to the inconsistent attendance of the families at the workshops, some of the information contained in the client files was incomplete. For example, some information with regards to family genograms and individual interviews relating to how families dealt with challenges was incomplete because either the parents were absent or the family sent a representative who was not familiar with the family practices. In addition, some of the variables were defined differently by the participants. Therefore, I had to familiarise myself with the information to avoid making mistakes during the coding phase. For example, the participants used the word trust and hope interchangeably to indicate faith in God. By reading the documents I was able to avoid misinterpreting the implied meaning of the participants.

Vartanian (2011) states that secondary data analysis is challenging, given that one has no control over the questions asked during the data collection process. Therefore, questions important to the study may not be included. Based on this fact, it is possible that valuable information that could have addressed the research questions in the present study may have been omitted during the Positive Parenting Workshops. However, based on the objectives, purpose and activities of the Positive

Parenting Workshop, I believe that the information contained in the data was sufficient to answer my research questions.

3.2.5 RESEARCH METHOD: QUALITATIVE CASE STUDY

Yin (2012) defined the case study method as an empirical inquiry of phenomena through an analysis of a limited number of cases, events or experiences and understanding the relationship between them. It further helps in providing rich contextual based experiences that lead to better understanding of a phenomenon under study (Yin, 2012).

Adopting a qualitative methodological approach for the present study enabled me to explore and understand how families living in Diepsloot construct meaning (Morgan & Sklar, 2012) within their natural settings (Tuli, 2010). Through reading and analysing the documented experiences that families have with regards to life in Diepsloot, I was able to gain insight and understand the various stressors to which they are exposed and how these affect their way of life. This helped me understand the context in which the families live and the coping resources available to them, thus leading to contextual glimpse of their daily experience.

Qualitative methodology is holistic and naturalistic in nature (Maree, 2012). It takes into account different aspects of a person's life, rather than just addressing isolated variables (Harding, 2013). Therefore, the documented discussions and views of the families enabled in-depth understanding and exploration of complex interpretation regarding belief systems from the participants' perspectives (Tuli, 2010) and behaviours that may result during or from stressful events.

In the present study the aim was to understand the perspectives of participants, due to its non-manipulative nature (Tuli, 2010). Qualitative methodology allowed me to carefully analyse the "pure" words and images families used to explain their social experience (Kapoulas & Mitic, 2012). This enabled me to identify and acknowledge various reasons and uncover patterns behind the way families respond to stressors and how these facilitate resilience. Using my conceptual framework (as discussed in Chapter 2), my aim was to explore how belief systems can possibly foster a sense of resilience based on the daily experiences of families that live in Diepsloot. Given that Diepsloot is regarded as a high risk area due to the adverse conditions associated with the community, I wanted to explore and understand how families continue to function despite their disadvantaged environment. This was a non-manipulative approach (Maree, 2012) towards understanding how the families made meaning of

the various stressors they experienced (Denscombe, 2010). It further facilitated greater insight into resilience based on the uniqueness of personal experiences (Cohen et al., 2011) reported by each family. It also promoted greater understanding of the dynamics of human reality (Seale, 2012) and the underlying process and relationships within the social context (Denscombe, 2010).

The 14 clinical files created at the close of the workshops formed the data set for the present study, one file per family. These contained the information gathered during the various activities staged during the two workshops.

As mentioned earlier, each student designed assessment tools for the family they were assigned. The information obtained formed part of the documents included in the clinical files which in the present study served as secondary data, and the documents are discussed below:

3.2.5.1 Collage

Some of the clinical files contained collages that the participants made during the workshops. Butler-Kisber and Poldma (2010) defined a collage as, a visual tool that people make from fragmented pieces of images or words to represent a phenomena they are experiencing. It can be seen as a visual representation of how people experience their world and the meaning they ascribe to various events (Butler-Kisber, 2008). Therefore, a collage can be a tool that is used to solicit information that can lead to better understanding of a person's reality and how they relate to individuals around them (Gerstenblatt, 2013). Photograph 3.1 below was taken during one of the workshops showcasing the creation of a family collage.



Photograph 3.1

The collages contained in the student files varied in terms of the purpose they served during the assessment of the different families. Some depicted the future dreams and goals of a family (Participant S01 file), while others displayed the values by which a family lived (Participant S12 file). Based on the notes made by the students, it would appear that collages provided greater depth and insight concerning the participants' challenges, coping mechanisms and protective factors.

During my analysis, reading the notes that the students made as the families explained their collages led to the identification of the various factors that, despite their disadvantaged environment, promote a positive outlook in the participating families. This also helped me identify common factors that reinforced resilience and the means by which families coped on a daily basis.

3.2.5.2 Family drawings

Drawings can be seen as a projective measure that reveals emotions, and highlights significant relations and influences in a person's life (Ebersöhn, 2010). Drawings therefore can serve various purposes dependent on the nature of the assessment. They can be symbolic representations of a person's world (Allen & Tussey, 2012), which can only be understood by considering the narrative they offer to explain what was drawn (Edwin, 2013).

The drawings contained in some of the files were of the houses and community amenities available to them. These highlighted some of the risk factors the families are exposed to in Diepsloot such as dark allies, shebeens and gang infested zones. Additionally, the drawings displayed the protective factors and assets found within the Diepsloot community such as the church, school and police station. This visual representation helped me gain insight into the context within which those families live and the amenities available within the community.

Genograms also formed part of the drawings contained in some of the clinical files. Bowen (2008) stressed the importance of understanding individuals within the context of their family, as opposed to seeing them as isolated entities (Poot et al., 2011). Therefore, a genogram is useful in revealing psychological aspects and relationship patterns within the family, which leads to better understanding of how the unit functions as whole (Poot et al., 2011).

During the analysis, studying the family genograms allowed me to gain insight into the nature of the relationships within each family and how these facilitated or

inhibited the ability of the system to adapt to stressors. The notes of the Master's students helped in gaining an understanding of the genogram drawn by highlighting the events and processes (Platt & Skowron, 2013) that took place within the system. This led to the identification of the roles that each member played when exposed to a particular stressor to enable the unit to adequately adapt and move forward in life. Photograph 3.2 below was taken during one of the workshops that shows one of the participants creating a family genogram which would form part of the data sources that goes into their clinical files.



Photograph 3.2

3.2.5.3 Field and observation notes

All the clinical files contained field and observation notes made during the group discussions and arena activities held during the workshops (see Appendix K). These provided me with an understanding of the behaviours and thoughts experienced by the participants; thus making it possible to gain insight into the interactions and process (Mulhall, 2003) that took place. This provided context to this study, as it facilitated the identification of patterns and themes across the activities and the significance they held for the participants.

Field notes from the arena activities formed part of the documents contained in the clinical files. The arena activities were centred around the EAGALA (Equine Assisted Growth and Learning Association) Model that places great value on the significance of horses in aiding therapeutic process (Switzer, 2016). Equine Facilitated Psychotherapy (EFP) is a form of Animal Assisted Therapy (AAT), according to Bachi, Terkel, and Teichman (2012), that uses animals to help people adaptively deal with psychosocial and psychological problems (MacLean, 2011). The arena activities

required the families to interact with the horses and later reflect on their experience and perception of the horses' behaviour in relation to the specific tasks that they had to complete within the arena.

The observations that the students made and documented helped me understand the participants' interactions and how their reflection about the activity applied to their life (Bachi et al., 2012). Photographs 3.3 and 3.4 below show some of the participants taking part in the arena activities.



3.2.5.4 McMaster Family Functioning Assessment

According to Ryan, Epstein, Keitner, Miller, and Bishop (2005), McMaster's Model of family functioning is based on the assumption that a family consisted of integrated parts. Therefore, one cannot understand the system by only looking at one part of it. Rather, understanding a family requires one to look at the predominating structure and organisational patterns in the unit (Miller et al., 2012). The McMaster model identifies six dimensions necessary for the effective functioning of a family, namely, problem-solving, affective responsiveness, communication, roles, affective involvement, and behavioural control (Ryan et al., 2005).

In the clinical files, the students provide a checklist reporting on how the families functioned in the six dimensions of the McMaster model of family functioning based on their assessments. These reports enabled me to identify patterns within the families that either facilitated or inhibited their ability to function effectively as a unit. The checklists also revealed the various belief systems and the mechanisms that the families employed to adjust to their lived environment.

Another activity used to assess the functioning of the six dimensions of effective family functioning was an activity labelled “box of problems” (see Photograph 3.5). Based on the notes made on this activity, its purpose was to gain insight into how the families perceived problems and the steps they took in solving them. In addition, the activity revealed the lessons the families learnt when faced with problems and how these are applied to facilitate learning experiences in the unit (see Appendix J).

The documented feedback from this activity provided me with insight concerning the type of problems families faced and the lessons learned. The responses documented also revealed ways in which the families address problems and the support structures they draw on, either within the family or in the community. From the analysis I was able to identify the belief systems and strategies that families employed when faced with problems. These also revealed how the families coped with each challenge they face and the meaning they attribute to each negative experience they encounter.



Photograph 3.5

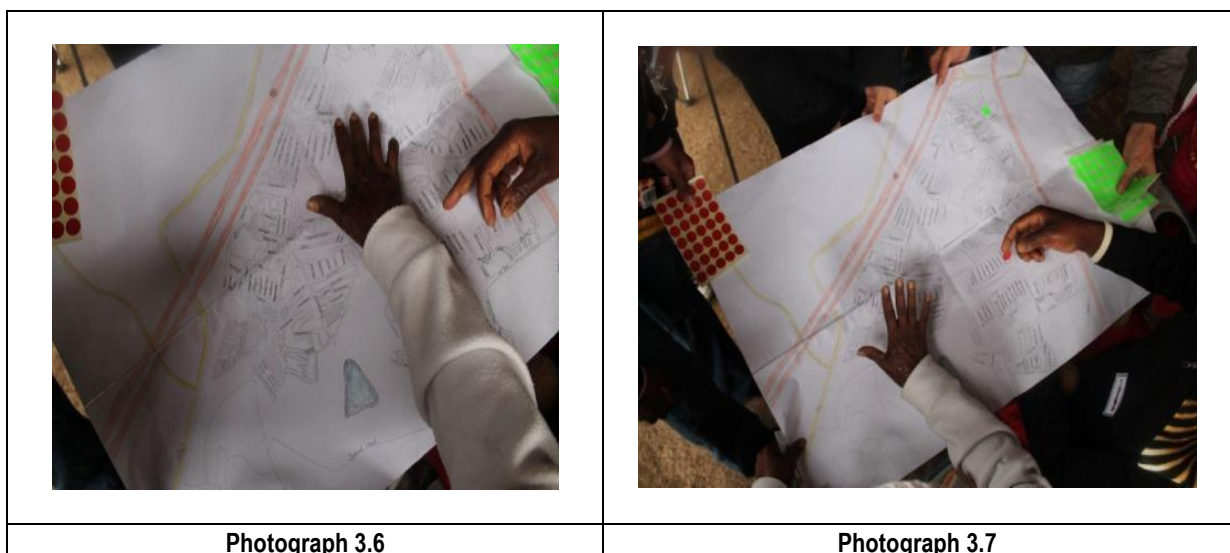
3.2.5.5 Visual data

Visual data is a useful tool when observing, analysing and theorising the visual manifestations of people’s behaviour or acquiring a visual representation of their surroundings as a way of enriching their stories (Delamont, 2012). The video recordings from the workshops provided me with the opportunity to observe the participant’s behaviour in a natural context (Hartel & Thomson, 2011) and provided empathetic understanding (Harper, 2005) of the issues discussed throughout the course of the Positive Parenting Workshops. These recordings were useful in facilitating my understanding of the context of the group discussions and arena

activities which led to increased understanding of the objective viewpoints (Hartel & Thomson, 2011) of the participants concerning their way of life in Diepsloot. This led to the recognition and appreciation of how families perceived and coped with the predominating stressors in their community. This also allowed me to identify the key themes that were evident in the participant's discussions using their exact words (Prosser & Loxley, 2008).

Visual data was valuable to the present study, as it added trustworthiness to the information (Harding, 2013). It depicted images that were not manipulated and was useful in terms of understanding the meanings behind certain non-verbal cues or patterns of behaviour that participants displayed (Delamont, 2012). This information was then saved on Dropbox and was used in the present study as part of the data.

Bronfenbrenner's theory of Ecological Systems stresses the role that various environmental systems have on the development of an individual. It identifies systems that have the ability to hinder or promote healthy development (Bronfenbrenner, 1999). The asset map made during the workshop also helped me identify the needs within the community and available services (Figure 3.4). The map highlighted risk factors and the protective factors predominant within the Diepsloot community. The red dots on the map indicated the danger spots and the green dots were areas that the families regarded as safe. Photographs 3.6 and 3.7 below show the map as displayed by some of the participants.



3.2.5.6 Clinical report

Each file contained a clinical report that detailed each Master's student's clinical impression of their assigned family doing the workshops. The reports provided a holistic understanding of the families in that they provided a summary of the demographic information, clinical observations, and clinical assessment of the families. Hence, the reports allowed me to add and verify the information obtained from other documents pertaining to each family.

3.2.6 PARADIGMATIC APPROACH

3.2.6.1 Interpretive phenomenological paradigm

The present study was guided by an interpretive phenomenological paradigm, which aimed to understand how people experience, perceive and interpret a particular phenomenon or situation (Morgan & Sklar, 2012). The data sources documented the feelings and experiences of parents in relation to the topics discussed at the workshops; therefore my data source is framed by this paradigm. In addition, data analysis in the present study was focussed on analysing the meanings and interpretations recorded in the sources.

Therefore, in the present study, an interpretive phenomenological paradigm allowed me to understand the role that belief systems play in fostering resilience, through identifying themes (Smith & Osborn, 2008) that emerged from the documented personal experiences (Seabi, 2012) of the families that attended the workshops. The detailed descriptions and personal accounts that the families provided reduced any possibility of me making assumptions about their experiences (Palmer, Larkin, De Visser, & Fadden, 2010) and instead provided me with insight as to how they create meaning within their context.

Belief systems are hard to observe or understand because they are intrinsic (Brooke, 2013). Thus, adopting this paradigm within secondary data analysis allowed me to understand families within their context, which provided me with an insider perspective (Smith & Osborn, 2008) to the underlying processes that lead to meaning making and how resilience is fostered.

3.3 CONTEXT OF THE PRESENT STUDY

In the present study, I used original data that was collected during the Positive Parenting Workshops. These workshops were run by the Shumbashaba Community Trust personnel in collaboration with the Department of Educational Psychology, University of Pretoria. The workshops were part of a community intervention programme that was aimed at facilitating personal growth and development which could contribute to the wellbeing of families that reside in Diepsloot. The aim of the workshops was to gain insight into how families in Diepsloot are able to cope adaptively during adversity and further understand the various factors that enabled them to attain a sense of wellbeing (see Appendix H).

The Department of Educational Psychology offered two workshops in 2016, the first workshop was held on 15 May and the second on 20 August. The personnel at Shumbashaba Community Trust invited families from Diepsloot to attend the workshops. This included parents and children who volunteered to take part in the Positive Parenting Workshops (see Appendix I). The data collected from these workshops was used in the present study; secondary data analysis was carried out on all the documents created from the workshops.

The first workshop (15 May 2016) provided me insight into life in Diepsloot in terms of the challenges the families faced as well as positive experiences they had within the community. The emphasis of this workshop was on assessment and intervention with the aim of exploring family functioning using the six dimensions of the McMaster Model (communication, problem solving, affective responsiveness, roles, affective involvement and behaviour control) as operationalisation of key family resilience processes, which are belief system (communication, making meaning of adversity, transcendence), organisational patterns (roles, behaviour control, affective responsiveness and involvement), and communication/problem solving (communication, problem solving) (see Appendix G). The second workshop (20 August 2016) focussed on helping the families design and explore ways in which they could attain their dreams (see Appendix H).

Activities during the workshops included group discussions, arena activities and individual lawn assessments. The data set used in the present study resulted from the information obtained during all these activities.

Based on the nature and purpose of the workshops, I was of the assumption that the information obtained from the families highlighted the various challenges that the

families faced living in Diepsloot and provided detailed descriptions of how they coped with living in a disadvantaged environment.

3.4 DATA ANALYSIS

3.4.1 SECONDARY DATA ANALYSIS OF THE FILES

A secondary analysis was conducted on data gleaned from 14 files which contained the reports, individual activities, and field notes that were gathered in relation to each family that participated in the Positive Parenting Workshops.

The categories indicated in Table 3.2 and their descriptors were taken into consideration during the data analysis.

Table 3.2: Categories used for analysis the 14 files

Categories	Description
Family Type	Families in the present study were viewed as either single parent nuclear, extended or in a person's individual capacity. These categories were used to cater for the variations in family types in Diepsloot.
Socio-Economic and Employment Status	The socio-economic and employment status of the families were taken into consideration to gain better understanding into the family's way of life and the challenges they may experience at a microsystem level.
Risk Factors	Diepsloot is regarded as a high-risk area, it was important to take note of the various risks that families are exposed to, as this would help better understand their living context.
Protective Factors	Taking into consideration the purpose of the present study, it was worth noting the various ways in which families in Diepsloot coped within their environment. Thus by making note of protective factors, it was easy to draw out and identify those that could be seen as belief systems.

3.4.1.1 Families in Diepsloot

To gain better understanding of family life in Diepsloot, the type of family, family size and employment status was taken into consideration. *Family* in the present study was not just based on the "normal" definition being a father, mother and children. Instead,

all types of family compositions were taken into consideration. Figure 3.4 provides the reader a representation of the types of families that attended the workshops based on the demographic information in the clinical files.

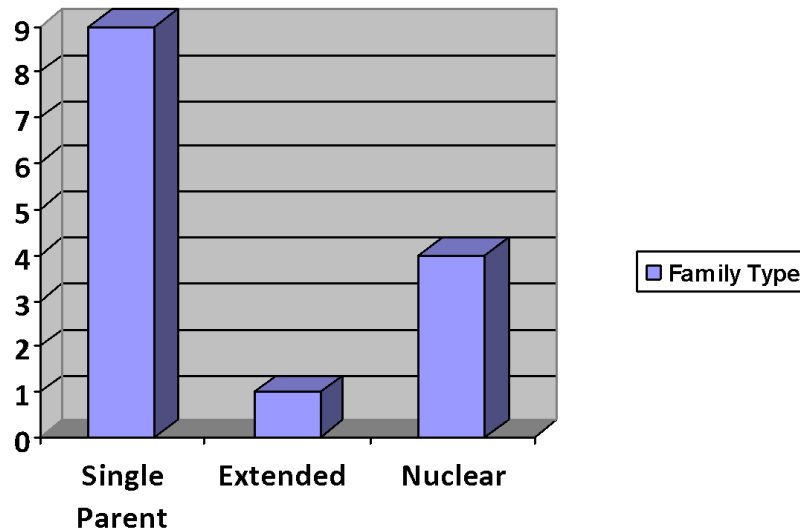


Figure 3.1: Family types that attended the Positive Parenting Workshops

Based on the information obtained from the files, of the 14 families that attended the workshop, nine were single parent-households, four nuclear and one was an extended family. Based on the findings it appeared that the families had an average of three children. And the older children were either living with relatives or were in boarding schools. Reasons the families provided for not being intact included either financial constraints or lack of proper housing to accommodate all the family members.

3.4.2 SOCIO-ECONOMIC/EMPLOYMENT STATUS

According to the World Bank Report, South Africa's economy has shrunk over the past few years, leading to an increase in the unemployment rate (Davies & Van Seventer, 2014). Studies suggest that families living in townships rely on informal means of employment such as street hawking or bartering of goods to earn a living (Barbarin & Khomo, 1997). This therefore suggests that the majority of the households live in poverty or do not have enough financial resources to run their household day to day activities (Statistics South Africa [Statistics SA], 2013).

Of the 14 families, six households appeared to have someone who was employed (Families S02, S03, S04, S07, S11, & S14) and in the remaining eight, no one was employed. In the employed families the job categories included domestic work, street hawking and working for the church within the community. Figure 3.2 displays the number of members per family and the frequency of employment in each family. Based on the size of the families, it is understandable that they tended to struggle to make ends meet, as there was either one source of finance or none at all.

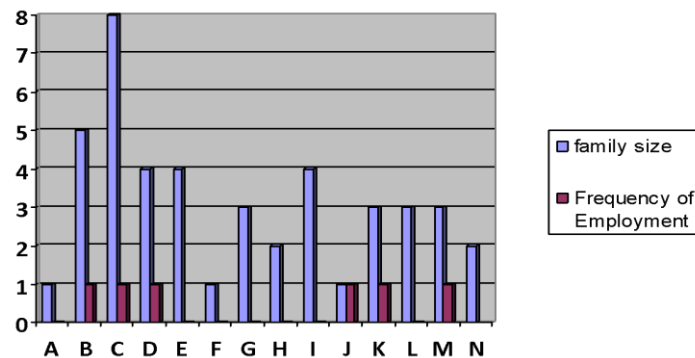


Figure 3.2: Family size and frequency of employment

3.5 THEMATIC ANALYSIS OF THE DATA

For the purpose of the present study, thematic analysis was used to make sense of the data contained in the clinical files compiled after the Positive Parenting Workshops. Seale (2012) defined thematic analysis as, an approach whereby a researcher made sense of the information collected, by grouping it into themes or patterns, which in turn reduces the amount of data into meaningful information. P.A. Bowen et al. (2012) defined thematic analysis as, a qualitative method that examines data with the sole goal of understanding and representing the lived experiences of people.

Thematic analysis was appropriate for the present study, as it facilitated my understanding of the families' interpretation of their experiences (Alhojailan, 2012), based on a holistic view of their beliefs systems during times of distress (Bearman & Dawson, 2013). This was advantageous, as it considered individual differences and the meaningful nature of the varying perspectives (Baker & Lewis, 2013), and helped pinpoint various aspects that played a role in the individual's experiences (Alhojailan, 2012). Hence, thematic analysis promoted the identification of connections that

existed between certain themes. Thus, it revealed how meanings can be interconnected as opposed to being segmented (Alhojailan, 2012); leading to a holistic view of a phenomenon under study. This aspect promoted my understanding of various complexities of families, and appreciation of the uniqueness of each unit in relation to their distinct ways of viewing and tackling stressful events. Additionally, because thematic analysis is systematic (Maree, 2012), it reduced haphazard and possible misrepresentation of data leading to a true reflection of participants' views.

However, it was time consuming and tiring to code and establish the themes (Harding, 2013). Hence, a personal diary containing useful words or a codebook was used (Seale, 2012).

3.5.1 THEMATIC ANALYSIS PROCESS

3.5.1.1 Phase 1: Familiarisation with the data

Thematic analysis was used to analyse the files that the students compiled for their individual family. The first step taken was the verbatim transcription of the audio and visual recordings, to avoid early interpretation that could lead to distortion of the words and meaning (Harding, 2013). I read the written documents and notes in the various client files repeatedly, to allow me to become highly familiar with the data (Clarke & Braun, 2013). Highlighting of key words, phrases and writing notes in the margins of the script was helpful, as it ensured the identification of possible categories for coding (Harding, 2013). I created a template, which could help me write down information as I became familiar with the data (see Appendix B). This template consisted the challenges/risks and protective factors that were reported by each family.

Tables 3.3a and 3.3b provide a summary of the information that I obtained from familiarisation process with the data.

Table 3.3a: Risk Factors/Challenges that families face in Diepsloot Community

	Family													
	S1	S2	S3	S4	S5	S6	S7	S8	S9	S10	S11	S12	S13	S14
Risk factor / Challenge														
Unemployment	x	x	x	x	x	x	x	x		x	x	x	x	x
Inadequate housing	x			x	x	x	x	x	X	x	x	x	x	
High Crime rates	x	x	x		x	x			X	x	x	x	x	x
Gang Violence	x	x	x			x	x		X	x	x	x	x	x
Financial difficulties	x	x	x	x	x	x	x	x	X	x	x	x	x	x
Lack of safety	x	x		x	x	x		x	X	x		x	x	
Unreliable water supply	x				x	x		x	X	x	x	x		x
Poor service delivery	x			x	x	x	x	x	X	x	x	x	x	x

Table 3.3b: Protective factors for families in Diepsloot

	Family													
	S1	S2	S3	S4	S5	S6	S7	S8	S9	S10	S11	S12	S13	S14
Coping mechanism / Protective factors														
Speaking to a friend	x			x	x							x	x	
Prayer		x		x	x	x		x	x	x	x	x		x
Reading the Bible							x	x			x			x
Hoping for the best	x	x	x					x	x	x				x
Speaking with the Pastor or church elder						x		x					x	x
Talking as a family	x					x		x				x	x	
Having faith in God	x		x	x		x			x	x	x		x	x
Attending Church	x	x			x	x	x			x	x			x
Looking for the meaning or reason for the problem					x		x	x	x				x	
Working together	x		x				x	x	x			x	x	
Accepting that problems are part of life and learning from them		x			x			x					x	

Figure 3.3 provides a summary representation of the risk factors the families identified in Diepsloot. From the information obtained from the 14 files, it appeared that high crime rate and gang activities were the major areas of concern for these families; which appeared to be a result of the reported high rates of employment of the people living in Diepsloot.

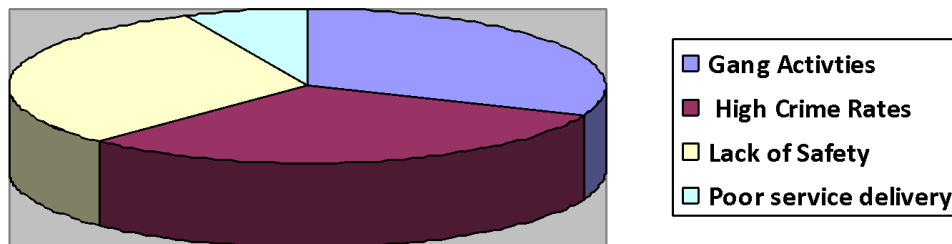


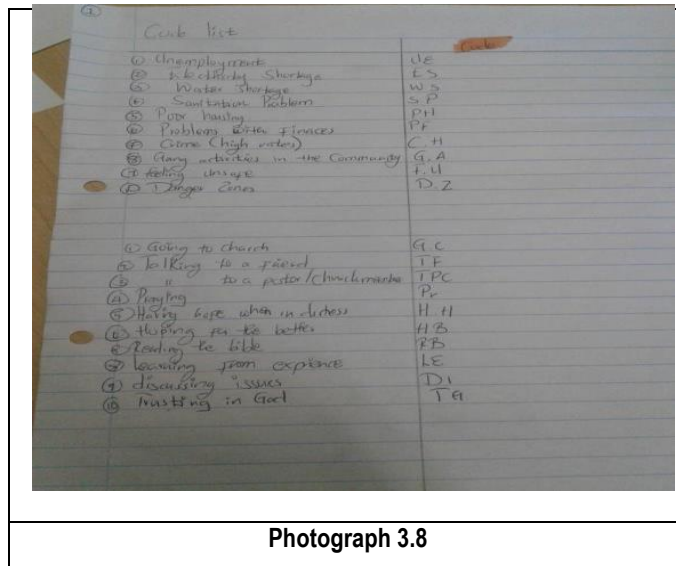
Figure 3.3: Risk factors in the Diepsloot Community

3.5.1.2 Phase 2: Coding

According to Clarke and Braun (2013), coding can be seen as a process through which a researcher generates labels for features that may be of relevance to the research question guiding the analysis. During this phase, the aim was to summarise what the participants said with the aim of identifying and coding major issues (Harding, 2013).

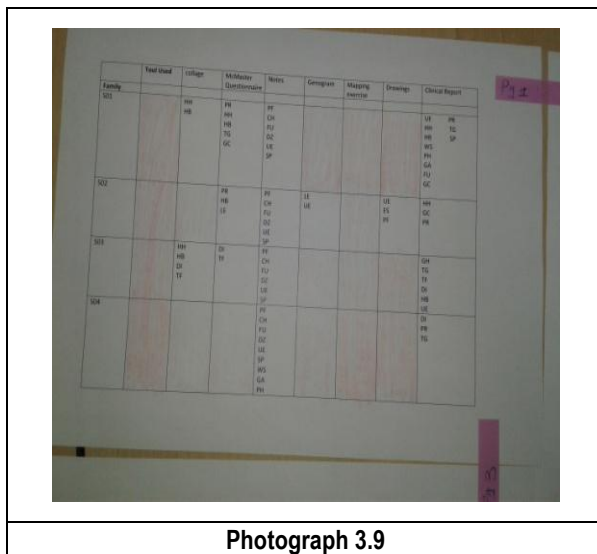
To ensure that all categories would be reflected and none overlooked (St. Pierre & Jackson, 2014) frequent reference was made to the research questions, to take note of key concepts of the study (Harding, 2013). Braun and Clarke (2014) stressed that the data that is coded should be meaningful and organised. Thus, a codebook was used as guide and reference, to help revise and provide clarity about the data (DeCuir-Gunby et al., 2011).

Based on the information that was obtained from the templates used during the familiarisation phase, I compiled a list of codes, which are displayed in Photograph 3.8 (see Appendix L).

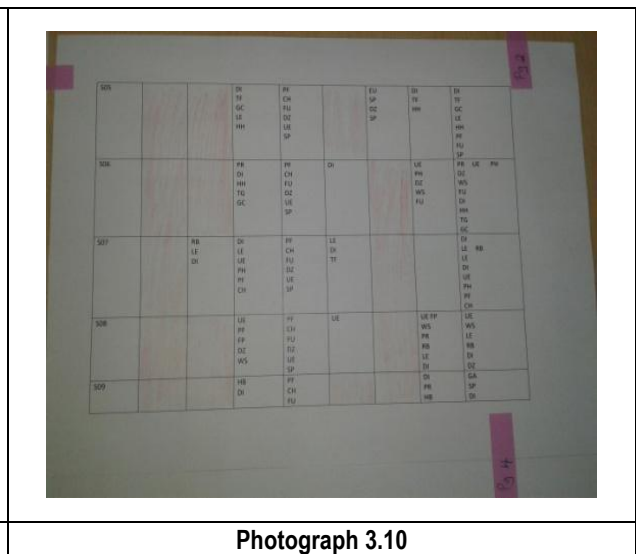


Photograph 3.8

I designed a template that could be used to analyse the various documents in the clinical files and record where each code was evident. Photographs 3.9 and 3.10 display a visual presentation of the coding phase (see Appendix E).



Photograph 3.9



Photograph 3.10

3.5.1.3 Phase 3: Searching for themes

After coding, the next step was to sort the codes into potential themes (Braun & Clarke, 2014) in each category that was identified. A theme can be defined as, a consistent and meaningful pattern that emerges from data that is relevant to the research question (Clarke & Braun, 2013). This process entailed finding various ways of expressing the trends that were evident within the data. Thus finding relationships between themes (Braun & Clarke, 2014) in terms of the descriptions that were articulated to belief systems how these fostered resilience. Connections within the

data were established by revising the list of categories that were found and looking for those that were applicable to the participants (Harding, 2013), and evaluating the possible meaning or causal relationship that may exist between categories (Thomas, 2006).

Table 3.4 indicates the themes and subthemes extracted from the reports and field notes contained in the files.

Table 3.4: Table displaying identified Themes and Subthemes

Themes	Subthemes
Risk factors that affect the family at a microsystem level	Unemployment
Community Risk Factors	High Crime Rates Gang Activities Poor Service Delivery No Sense of Safety
Family Protective Factors	Faith in God Attending Church Positive Outlook on Life Prayer Finding meaning Spirituality
Protective Factors in the Community	Social support from church and neighbours

3.5.1.4 Phase 4: Reviewing the themes

After the themes had been identified, they were refined and reviewed. This process, according to Braun and Clarke (2014), requires one to check if the identified themes captured the important feature that relates to the research questions and how it is related to the whole data (Braun & Clarke, 2014). This process of reviewing themes helped to check for consistency and ensure that all the themes relate toward one central concept. Thus ensuring the identification of patterns that emerge from themes (Braun & Clarke, 2006) the conceptual framework of the study was therefore used in this process to refine the themes. This was done to ensure that themes reflect the true meaning of data and that they capture all essential accepts needed to fully answer the research question (see Appendix F).

3.5.1.5 Phase 5: Defining and naming themes

The identified themes from the data were analytically interpreted, which resulted in a detailed definition of each theme and the relationship it had to all the themes identified within the data (Braun & Clarke, 2014). This stage of the analysis also helped select which of the data extracts would be used in the final report and the selected themes named in such a way that they were informative and led to the holistic understanding of the data (Braun & Clarke, 2006) (see Appendix F).

Figure 3.4 displays the mind map of how I made sense of the information that I obtained from the data and the themes that emerged after all the codes were grouped into the relevant themes.

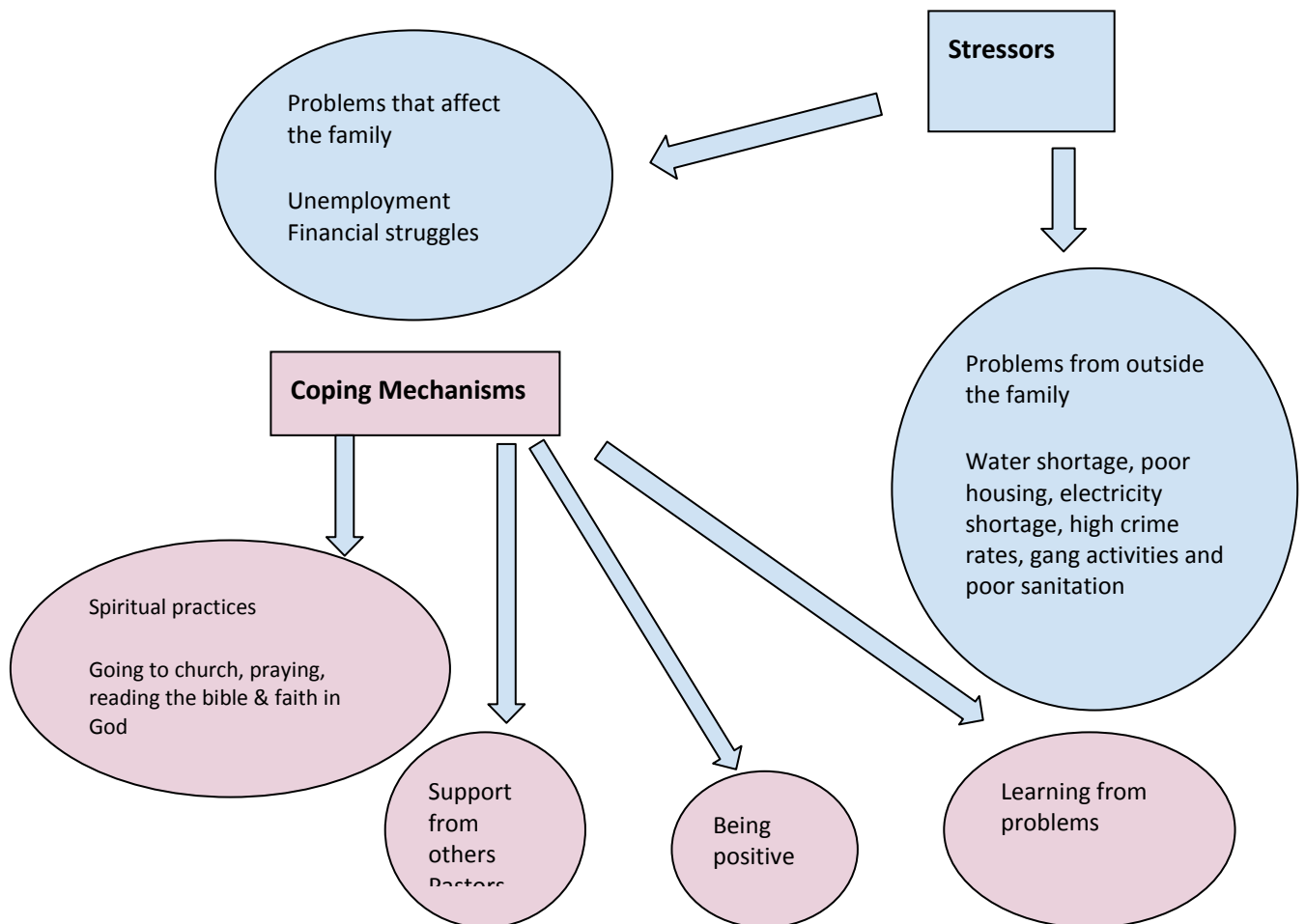


Figure 3.4: Mind map used to facilitate report writing process

3.5.1.6 Phase 6: Producing the report

The final phase of the data analysis entailed writing a comprehensive report that narrated a rich story regarding the findings that emerged during their analysis and where it is situated in terms of academic schools of thought (Braun & Clarke, 2014). During this phase the final refining of the analysis took place and this was done through the integration of literature and determining the final arrangement of themes (Clarke & Braun, 2013). These are discussed in detail in Chapter 4.

According to Fusch and Ness (2015), failure to attain or reach data saturation has quite a significant impact on the quality of the research. Data saturation can be defined as, a stage when no new insights can be found (Bowen, 2008), when no further coding is possible or achievable (Fusch & Ness, 2015), and when there is sufficient information to carry out the exact study again (Walker, 2012). Therefore, the aim of every study should include understanding of how to determine when data saturation is reached, as this may impact the validity of the findings (Fusch & Ness, 2015).

In the present study, it is assumed that because focus groups in the original study were used as a data collection method, they enabled the acquisition of responses and perspectives (Fusch & Ness, 2015) in relation to belief systems and resilience. Other techniques of data collection were used as a way of obtaining data saturation. Furthermore, theoretical saturation was reached by ensuring that thorough work was done during data interpretation and a second party checked the transcription process of data analysis to ensure that data saturation had been attained (Fusch & Ness, 2015).

3.5.2 LIMITATIONS OF THEMATIC ANALYSIS

Thematic analysis offered me a more flexible approach (Braun & Clarke, 2006) to gaining insight and understanding of the research question. However, given the fact that secondary sources were used to obtain the information used in the study, some valuable information may have been omitted during the data collection process. Secondly, as the researcher in the present study, I did not have the opportunity to perform member checking as a way of verifying some of the information in the files. To address the limitations, I ensured that sufficient time was allocated to familiarisation with data to ensure that the findings represented the predominant themes that emerged in all the clinical files.

3.6 ETHICAL CONSIDERATIONS

3.6.1 INFORMED CONSENT

Research is an area of learning that requires a researcher to gain access to a participant's personal space and privacy. Therefore, consent needs to be addressed before commencing with any activity (Miller et al., 2012). Seale (2012) stressed that ethical considerations needed to be given substantial attention in research. Hence, in the present study I consciously ensured that all the clinical files contained a signed informed consent form. These consent forms had been signed in the information session that was held with the families that intended to attend the Positive Parenting Workshops.

Based on the information reported in the files, informed consent was obtained from the participants prior to the Positive Parenting Workshops. Comprehensive and substantial information regarding the nature of the project was provided during the information session conducted with the families. During this session, the families were informed about the purpose of the positive parenting workshop and the research to be conducted. The planned activities for workshops were explained, including the advantages and the disadvantages of taking part in the study. At the end of the session, informed consent was obtained from those families that agreed to attend the positive parenting workshops at Shumbashaba and participation was on voluntary basis.

At the end of the two workshops, the participants were given the opportunity to state whether or not they wanted the information obtained during the course of the day, whether visual, audio or any information gathered to be used as part of the research. In addition, during the workshops before using any form of recording device, permission was obtained from the participants present.

3.6.2 ANONYMITY AND CONFIDENTIALITY

At the start of the parenting workshops the participants signed a confidentiality form, as a form of agreement that the information obtained will be used solely for research purposes. During the data analysis the names and other identifying information of the participants were changed to maintain the anonymity of the families.

3.6.3 RESPECT FOR PRIVACY

The clinical files were kept in a locked cabinet and were only accessible to me, as the researcher. No information regarding clients was shared in any public setting and all communication regarding the study was done only with my study supervisor.

3.7 RIGOR OF THE STUDY

Harding (2013) defined validity as, an accurate reflection of the findings on the collected data. I upheld the validity of this study by analysing information and reading the transcribed information repeatedly and listening to the recorded audio, which ensured that the interpretations made were consistent with the discussions that took place with the participants. Verification of transcribed scripts with the recordings was also done to help reduce inconsistencies within the data (Mero-Jaffe, 2011).

The findings were justified to a colleague who had extensive knowledge of the topic (Harding, 2013). This helped reduce bias and highlighted areas that may have been overlooked during data analysis. Furthermore, comparison of information obtained using the methods of data collection was done, to help check for consistency within the data. Heale and Forbes (2013) defined this as triangulation.

According to Rager (2005), member checking allows participants the opportunity to verify the information that the researcher obtains from them. It is through this process that a researcher can ensure the accuracy, validity and trustworthiness of their transcriptions, recordings and final findings (Harper & Cole, 2012). Member checks, therefore, allow participants to check whether the information documented is consistent to the information obtained (Maree, 2012). In the original study, at the end of each workshop session, a summary of the information collected was presented to the participants and they had the opportunity to verify, add, agree or disagree with the information provided. This process helped minimise any incorrect interpretation in the data, leading to authentic and accurate findings that are a true reflection of participants' perspectives and experiences (Harper & Cole, 2012).

3.8 CONCLUSION

The outlined methodology helped me gain in-depth information that could answer the research question. The Family Resilience Framework was taken into consideration during the analysis process, to ensure that a comprehensive understanding of belief systems is identified and understood.

The findings gleaned from the data are discussed in Chapter 4.

---oOo---

Chapter 4

Qualitative Findings of Data Analysis

4.1 INTRODUCTION

This chapter entails discussion of findings gleaned from the data collected according to the strategies outlined in Chapter 3 and the findings are further discussed in terms of relevant literature. Secondary data analysis was conducted on the 14 files of the families that attended the two Shumbashaba Positive Parenting Workshops. The analysis explored the demographics of the participating families, risk factors that they are exposed to while living in Diepsloot, near Johannesburg, South Africa, and the various belief systems that they draw on to cope with their daily challenges.

During the data analysis process the theoretical framework for the present study served as a guide in terms of identifying the key themes that would help answer the main research question. Bronfenbrenner's concept of the ecological environment was taken into consideration, bearing in mind that humans do not develop in isolation but are nested within systems that shape their development (Friedman & Allen, 2011). Thus when analysing the data, attention was given to all risk and protective factors within various systems in which the families were active (e.g. their household and community). When identifying the protective factors that families drew on to attain resilience, Walsh's Family Resilience Framework (Walsh, 2012) was applied to categorise factors that were an indication of belief systems.

4.2 FINDINGS FROM THEMATIC ANALYSIS OF THE DATA

As discussed in Chapter 3 of the present study, a thematic analysis was conducted on the 14 files that contained information collected during the group discussions and individual activities with the participating families. To guide the discussion here, I will first discuss the various risk factors that the families were exposed to in relation to the various systems as outlined by Bronfenbrenner's theory. Then the protective factors within the Diepsloot community will be focused on and related to belief systems. In some parts of the discussion include a few of the statements used by the participants. However, their real names were not revealed. Rather, letters of the alphabet were used to ensure that the participants' identity was not revealed.

4.2.1 THEME 1: IDENTIFIED RISK FACTORS

During the analysis it was evident that families in Diepsloot are faced with multiple risk factors that affect their way of life. Masten and Gewirtz (2006 as cited in Sektnan, McClelland, Acock, & Morrison, 2010) defined risk as, anything that has a negative or undesirable effect in one's life.

4.2.1.1 Risk factors within the microsystem

Life in Diepsloot is often associated with unemployment, poverty, crime and violence. Crime reports revealed that from 2013 to 2014 there had been a 23% increase in the Diepsloot crime rate (South African Police Service, 2017). Based on the findings, a few number of the parents in Diepsloot have primary level education; while others had not attained any formal education. Therefore, unemployment was a predominant theme among the participating families. These findings correlate with those from Davies and Thurlow (2010), which highlight that unemployment in South Africa is a concern especially in low socio-economic settlements.

Participant S01, MacM: <i>Jobs in Diepsloot are scares, I dropped out of school due to teenage pregnancy therefore I could not find any good paying job. I sell sweets and small packets of chips on the street to get income for my family, which is not always enough.</i>
--

A study by Thobejane (2015) highlighted that a large number of women in South Africa are illiterate as a result of teenage pregnancy, because they leave school in order to take care for their children. This increase in female school dropouts results puts the young mother a risk of having financial problems if she has does not have a strong support structure, which leads to a rise in poverty stricken households in South Africa (Spaull, 2013). Lack of formal education therefore may result in one struggling to find formal work employment as highlighted by the responses below:

Participant S04, MacM: *Finding a job is difficult in in this community, most of us men we work in industrial companies as labourers to earn a living and they pay very little. The problem is a lot of job opportunities are in Johannesburg and not everyone can afford to live there, therefore we end up here trying to hustle.*

Participant S14, Fam Int: *I am a stay at home mother, my husband is the only one who works to provide for poor family and my job is to care for the children. We struggle to get everything that we need therefore we are just grateful when there is food to eat.*

Due to the high level of unemployment, a theme of financial struggle was evident in all the households. Some of the families obtained financial assistance from government grants, their extended families, friends, neighbours, and church members which may, depending on the size of the family, not have been sufficient to cover their needs. Literature has highlighted how the socio-economic status of a family may make it vulnerable to some stressors (Akter & Mallick, 2013). Therefore, suggesting that if a family is of low socio-economic status it may lack the ability to adequately adapt to adverse situations.

According to Yoshikawa, Aber, and Beardslee (2012), poverty at times may influence the quality of relationships within these families, especially the parental unit due to the high stress levels experienced by the unit. Therefore, a family may fail to search for meaning or work together to find a solution for a problem due to the inability of the parental system to gain mastery over the situation as a result of immerse stress. This therefore may lead to the unit adopting maladaptive ways of dealing with negative events or circumstances, which in turn may impact upon the family's resilience (Peer & Hillman, 2014).

4.2.1.2 Risk factors within the mesosystem

The mapping exercise that the participating families had to complete during the group discussion revealed some of the risk factors and danger spots that are predominant within their Diepsloot community. From the information obtained from the files it appeared that a high crime rate and gang activities were the major areas of concern for these families, and these appeared to be a result of the reported high rate of employment within Diepsloot. This was illustrated by some of the responses the various participants provided when questioned about life in Diepsloot:

Participant S04, Map Ex: *Although Diepsloot is a nice place to stay because we do not pay rent, but the high crime rates are a concern. Sometimes you can hear gunshots at night when you are in the house or you hear reports from neighbours that a house has been broken into.*

Cross (2014) reported that indeed Diepsloot community has a high crime rate due to the increasing number of criminals in the area. These activities are also perpetuated by the lack of jobs in the area.

Participant S13, Map EX: *People live in fear and hide in their houses, the streets are not safe. A lot of boys are in gangs and these target everyone even children that are coming from school get attacked. These gangs steal purses or other valuables and sell them to get money or drugs, I think the lack of jobs also makes young boys be rebellious and steal.*

Gross (2016) indicated that risk factors can affect the psychological wellbeing of individuals, leading to heightened levels of distress and fear. As mentioned by one of the participants, due to the gang activity families in Diepsloot have adopted a strict routine that requires its members to be indoors during certain hours and avoid certain “target or hot spots” within the community. Areas such as passages and roads near taverns are regarded as unsafe, as most gang activity such as drug sniffing, theft, rape and sometimes murder occur there.

Participant S05, Map Ex: *Crime in our community is a problem, I always make sure I am home before it gets dark and even pick my children from school to avoid them being attacked. I do not feel safe walking alone so sometimes I ask a neighbour or friend to walk with me.*

Franklin, Saab, and Mansuy (2012) highlighted that prolonged exposure to stressful events can affect the coping mechanisms of an individual, which may lead to the development of helplessness behaviour. This may then result in the adoption of maladaptive ways of dealing with stress, which could reduce the ability of an individual to adapt positively when faced with adverse situations. Thus they become more vulnerable to stress and less resilient. The authors also highlighted that if parents are constantly under stress they may not be emotionally available to their children, because they themselves constantly feel overwhelmed and taxed by stressors, which may affect the stability and functioning of a family unit.

Based on the findings from this analysis, the severity of violence and crime related activities has left families in Diepsloot feeling unsafe and, to a certain extent, unsure whether they will live to see the next day. Peer and Hillman (2014) highlighted the negative impact that stressful events have on the ability of the unit to gain a positive outlook on life and maintain a sense of stability. Not only does stress affect the ability of the family to be proactive, it can affect their ability to use effective problem solving skills, because they see the situation as impossible to change. Therefore, they may not attempt to find ways to resolve it.

Below is a statement that one of the participants gave when speaking about the nightlife within the Diepsloot community. This statement portrayed how the participant perceived life in Diepsloot and how going to sleep every night does not guarantee that one will wake up the next morning. Therefore, seeing the dawn of the next day is a blessing.

Participant S14, N: *The gang activity in Diepsloot is high, they break into houses and take whatever they want. You do not feel safe at night and it makes you wonder if you will make it to the next day alive. As a result of this dangerous night life, it is like everyday I am re-born because going to sleep does not guarantee that you will wake up the next day.*

Elaborating on this statement participants highlighted the following:

Participant S03, Fam D & Int: *Our shacks are not safe at night, thieves can easily break the doors and come in to take whatever they want. At times, they burn muti that makes us sleep and not hear them come into steal, next thing you wake up in the morning and the house is empty.*

Participant S02, Map Ex: *Sometimes at night you can hear you neighbours being attacked and screaming for help, but you just stay in your shack because you fear that if you help you may get attacked too or even shot because these thieves carry weapons. Sometimes you do not help because you get scared that the thieves might come to your house as well so you just stay in bed and hope they do not come to you next.*

From these findings it is evident that this heightened fear of crime among families living in Diepsloot has resulted in a possible reduction in social support, especially in situations where there is the possible risk of one's life being put in danger. As a

result, it is possible that some families may fail to adapt to the challenges that come with living in Diepsloot, given that they may feel that they lack an immediate source of help when in danger. Numerous studies have revealed that a strong social support network reduces the level of distress that a family experiences and increases their likelihood of being resilient when they are faced with a negative situation (Salami, 2010) and enhances their ability to adjust to any change (Wilks & Spivey, 2010) that comes with the negative event. However, based on the reports of the participants, there is little social support, which then implies that when in distress one may fear to ask for assistance because help may not always be available.

While analysing the data it became evident there appears to be a causal link between the risk factors: the high unemployment rate leads to some people resorting to crime in order to survive. The lack of adequate service delivery leads to feelings of unsafety and poor housing amenities. Therefore, one can assume that there is an overlap in the causal and maintenance risks factors, which requires that the family adapt to this adverse environment. Thus resilience becomes essential.

4.2.1.3 Risk factors within the macrosystem

Another risk factor that was raised by the participants was the poor service delivery in Diepsloot. According to Mahajan (2014), Diepsloot is characterised by crowded shacks and brick houses. This includes the unreliable electricity supply and lack of proper housing. As a result, most of the families live in crowded shacks lacking adequate plumbing or sanitation facilities. Below is an aerial picture of shacks in Diepsloot (Diepsloot, Johannesburg, South Africa: Sanitation, n.d.).



Photograph 4.1

Participants in the present study reported that they lived in shacks which were not ideal dwellings, as they had no access to electricity and poor water supply. Therefore, it is possible that the families are at high risk of contracting a water borne disease or inadvertently starting an electrical fire due to their living conditions.

Participant S06, Fam Gn: *I live with my family in a single room, we sleep, bath and cook in it. It is a challenge because there is no privacy. Electricity is a challenge you find that many of the houses rely on illegal cable connections which can be hazardous especially in winter when power supply in high demand. Sometimes the illegal connections cause fires which can then spread to other households because our shacks are too close to each other.*

Participant S11, Se Map: *We live in shacks that are not really in good conditions. Water supply is a problem at times, sometimes there are pipe leakages that are unattended by the municipality. The sewage pipes at times also break and remain unfixed for a long time and then there is a bad smell in the area.*

Mahajan (2014) reported that Diepsloot community is faced with challenges which include lack of basic health services and a well maintained sewage system. Therefore many families are exposed to undesirable living conditions which can affect the families' way of life (Nienaber, 2017).

Participant S09, N: *Water and electricity is a problem in Diepsloot but we do not get any help because there is little attention given to us by the municipality. There is little development in our community therefore we survive on what is available.*

All these factors in relation to poor service in Diepsloot were reported by Vellem (2014), who highlighted that a number of households do not have electricity and other essential services due to resource constraints in Diepsloot (Nienaber, 2017). This coupled with other unsatisfactory living condition results in low poor psychological wellbeing and poor life quality (Ngwenya, 2015). Given that these families feel that the government, at least to some extent, is failing them when it comes to the provision of basic services, it is possible that they may develop a sense of hopelessness as they feel they do not have the necessary support or amenities to help improve their way of life. While some families may attempt to find alternative ways to adapt to the living conditions, some families may fail to handle the stress, and therefore may fail to find hope within their situation.

4.2.1.4 Risk factors within the chronosystem

With the changes in society there is an increase of individuation, in which families are not as close knitted as before. From the findings, it appeared that the participating families living in Diepsloot did not have close relatives living in the area. Most of them had relocated to Diepsloot in search of jobs and further education. Therefore, it is possible that there is little interaction between families, unless they are neighbours or friends. According to Binder, Roberts, and Sutcliffe (2012), social support is vital for a family to cope well when in times of distress. Therefore, individuals with a high level of social support are able to cope adaptively with stressful situation; whereas, those who lack it may fail to cope.

Participant S08, Fam Gn: *I left my family in Limpopo and I came here seeking a better life. I live alone, I made friends with the neighbours that I stay with and I have a close friend who is like family. I have little contact with my family and I barely go home because I do not have money.*

Cameron and Brownie (2010) stressed the value of sharing experiences and problems with people that one is close to and how this leads to more effective problem solving and less distress, as one is able to obtain a different perspective on the problem. However, based on the findings, some families in Diepsloot may not have immediate support within the community and therefore may not be able to receive emotional, social and financial assistance when needed, which could in turn affect their ability to bounce back from stressors.

Participant S02, Fam Gn: *I am a widow my husband passed away and my family is in Zimbabwe. I perceive my church as my family because here in Diepsloot. I have no blood relatives, therefore apart from my children my church is my family.*

Culture differs from society to society (Spencer-Oatey, 2012). Therefore, in some contexts it is against the norm to discuss family matters with non-family members. For example, in African cultures it is believed that all issues are discussed within the family and it is deemed unacceptable for one to tell anyone who is not within the unit to be informed. This is done to protect the family name and status. As mentioned earlier, most families that reside in Diepsloot do not have immediate relatives living within the community. Therefore, some issues may not get resolved, given that the only people available to them would be friends or people from church. In such

instances, a family may lack the necessary social support when faced with crises that they deem sensitive.

Based on the participants' responses the identified risk factors within Diepsloot community are high rates of unemployment and crime, financial struggle, poor housing and sanitation. Goldstein and Brooks (2013) highlighted that risk factors have a negative effect on families. However, despite this, families can draw on protective factors that can buffer the stress caused. These protective factors help eliminate stress and help the unit positively adapt to situations (Werner, 2013) which can facilitate and foster resilience in the unit (Rutter, 2012). The findings from these studies were verified by the responses of the participants in the present study, as they did indicate that they rely on various protective factors to cope with adverse situations in Diepsloot, these will be discussed in Theme 2.

4.2.2 THEME 2: FAMILY PROTECTIVE FACTORS

With regard to protective factors in the present study, the focus was on understanding what strategies the families employed in order to buffer the stress that arose from living in Diepsloot. Based on the Family Resilience Framework that guided the present study, the identified themes during the data analysis were characterised according to the various components that reflect belief systems based on Walsh's conceptualisation of belief systems as a form of resilience. From the analysis I identified key themes that suggest families in Diepsloot actively relied on their belief systems to cope with the challenges with which they are confronted. These belief systems include, spirituality, meaning making and positive outlook, which will be discussed in depth in the sections that follow.

4.2.2.1 Spirituality

Spirituality, according to Hasanović and Pajević (2010), is a belief system that enables people gain meaning when confronted with situations; therefore enabling them to view life as sacred. Lichtenthal, Currier, Neimeyer, and Keese (2010) stated that people who draw on spirituality tend to find it easier to cope with negative circumstances. Spirituality, therefore, can be seen as an effective coping mechanism that can lead to resilience and possible self-growth. It is important to note that spirituality does not necessarily mean belief in God; it can be seen as being a sense of closeness to something one regards as sacred, a connection to a particular group or environment and a connection to creation (Worthington, Hook, Davis, & McDaniel,

2011). In their present study, spirituality was viewed as closeness to God based on the participants' responses.

Faith in God that enabled the participating families to cope with the adverse living conditions in Diepsloot. Believing and trusting in God in some way reduced the intensity of the stress experienced. According to the participants, faith entailed not questioning what happens in life but rather relying on God for help during stressful times. Pargament and Cummings (2010) stressed that people who have faith in God tend to cope more adaptively during stressful times because they believe that God is all knowing. Therefore, God knows a situation would come for which He already has a solution. By adopting this stance in life, the participating families were able to see every challenge in a less threatening manner. Thus suggesting that the participants trust that God will redeem them from any situation they face (Avgoulas & Fanany, 2012). Below are some of the responses the participants gave that indicated how their faith in God helped them buffer stressful situations.

Participant S01, MacM: *Faith helps me cope. I believe that God is always present and He is able to help me when I am in need. My faith in His ability to change my situation helps me believe that I will be okay.*

In the present study faith in God was viewed as hope that God is able to change situations. According to Li, Yang, Liu, and Wang (2016) in their study that measured the quality of life in patients with bladder cancer, they found that patients who showed elements of hope and a belief that things will get better had heightened psychological wellbeing, therefore suggesting that hope is an adaptive coping mechanism that people can draw on when faced with distress. Ní Raghallaigh and Gilligan (2010) verified these findings by highlighting that having faith in God helps people believe that He is present in the affliction therefore He will provide the much needed solution. Faith in God therefore is a source of strength when one is in distress (Malindi, 2014).

Participant S10, MacM: *We trust in God for support and help when we are in trouble we believe that He can save us. By trusting in God's power we believe that nothing is hard for Him and that he will carry us through hard times.*

This response by the participant indicates that when in trouble God is seen as a source of help, Pargament and Cummings (2010) highlighted that trust in God can

help reduce the stress that is brought about by negative events because He is viewed as a powerful being.

Participant S11, Map Ex: *We believe in God, our Saviour. He is all knowing and very powerful. He can fix our problems and protect our children from danger.*

Perceiving God as saviour therefore implies that He has authority over everything that occurs in people's lives, thus they have little control to what happens. Therefore, God is seen as refuge and a reliable source of strength when one is overwhelmed by stressful situations (Munt, 2012) this view then lessens the level anxiety or distress that may be brought about by bad events (Kasen, Wickramaratne, Gameroff, & Weissman, 2012).

In their study regarding how women coped with intimate partner violence, Drumm et al. (2014) found that faith plays a vital role in helping people buffer the physical and emotional abuse they face. Therefore, faith in God for families living in Diepsloot acts as primary source for survival and assurance that God would deliver them from adverse situation. Faigin and Pargament (2011) highlighted that faith in God helps families attain a sense of peace and confidence that they will overcome challenges in life regardless of the negative impact they may have on the family unit. They tend to be hopeful that God will bring a solution to their situation. This belief was evident in the participants with regards to how they perceived God's ability to intervene during times when they felt a sense of helplessness. Below are some of the statements that some of the participants made that were an illustration of their faith in God:

Participant S09, MacM: *God can change situations, when you have faith in Him. You just face life knowing that your father is with you and He is always watching over you and can fix things that may be wrong in your life.*

According to Drumm et al. (2014), individuals always seek to hold on to something that can help them thrive during times of difficulty, this can be cultural beliefs or religious beliefs in order to buffer the stress that is accompanied by negative circumstances. Therefore, faith could be seen as the families' way of trusting that God can change their negative situations and this therefore instils a sense of hope and resilience in them.

Participant S01, Fam Int: *Sometimes things happen in life that can be painful but if it is God's will then He alone can be a source of help. God knows everything even before it happens. He knows that he will save us from anything that is bad.*

This view of God therefore makes the families less anxious and more positive when faced with situations that seemed unpleasant. Hence, they remain optimistic and have a positive sense even when amidst chaos (Ahlert & Greeff, 2012). This therefore leads to heightened levels of resilience, for they knew that with God on their side they would overcome any situation they faced.

Most of the participants appeared to attend church as a way of their ability to view life in a more positive way (Wright & Bell, 2009) and having time to talk to God about their problems. Going to church, speaking to God and listening to the sermons instilled a sense of hope and comfort in families. Attending religious services therefore can be associated with an increase sense of wellbeing (Ní Raghallaigh & Gilligan, 2010). These practices made them feel heard and that there is an immediate source of help during times of distress, which leads to more adaptive ways of dealing with stress. As opposed to staying home, families may obtain emotional and spiritual support from their church, which then makes the situation bearable and solvable. They tend to feel less overwhelmed by their problems but rather develop a sense of courage and strong will (Ahlert & Greeff, 2012). Below are some statements that highlighted the impact that attending church had on some of the participants when faced with stressful situations:

Participant S13, MacM: *Being a strong Christian and attending church helps me cope. Going to church and listening to the pastor preach give me hope that God is alive and He care about me and my family. This makes me feel better and the songs that are sung also help me believe that God is there for me in hard times.*

Participant S04, Se Map: *Attending church on a weekly basis brings about comfort and hope that things will work out for the best. Being around other Christians and in God's house gives me strength and hope that all things will work out. When we worship God together I feel heard by God and feel close to Him.*

Reading the Bible and attending church services appeared to be effective coping strategies (Drumm et al., 2014), as this strengthened the connection people have to God and increases their faith. This instilled a sense of hope and positive outlook that

all negative situations always have a solution, as long as they followed disciplines of the Bible. This therefore gave them a sense of direction and provided them with scriptures they could read to obtain spiritual support and motivation to not lose hope (Faigin & Pargament, 2011). Reciting verses from the Bible relevant to their situation helps the families have faith that God would resolve their problems as long as they stay focused on His Word.

Participant S08, Clin R: *We base our life on the Bible. The bible in our family helps us to know how to behave and what we should do to please God. We read verses that help us to grow in our faith and that remind us who God is. We follow the 10 commandments because they help us know what to do as Christians.*

According to Avgoulas and Fanany (2012), prayer acts as a buffer for anxiety and depression. It is seen as a way of communicating one's problems with a supreme being who can assist in resolving a stressful situation. Studies have shown that prayer serves various purposes for people, these include bringing about peace during calamity (French & Narayanasamy, 2011), getting rid of negative emotions (Bremner, Koole, & Bushman, 2011), reinforcing hope and it acts as a connection to God (Bell, 2009). These various uses of prayer were illustrated in the information obtained from the participants:

Participant S12, N: *We love the Lord. We sing and pray every day in our family because this brings us closer to God. Prayer helps us communicate with God and tell Him our problems so that He can help us.*

Participant S12, Col: *Using prayer to gain hope during challenging times helps us face situations better. When we tell God what is going on He can give us a solution, He listens to our prayers at all times and He alone can find protect us from trouble.*

Participant S05, Fam D: *Prayer gives hope when we are faced with challenges. It helps us to feel heard by God who is our helper, we tell Him what is troubling us and we stay hopeful that the challenges will pass and we will be fine even if it takes time.*

From the data collected it was evident that the families engage in prayer as a way of communicating their needs and distress to God. Not only is prayer a way of letting God know of their distress but it also acts as a tool for hope, because this gives them hope that situations would return to normal. Therefore, when faced with a stress

evoking situation families tend to rely on prayer to relay their distress to God and this reinforced a sense of hope in them, and fostered a level of resilience because prayer heightens their level of perseverance in various situations (Holton, 2010).

For some of the participants their church serves as their second family. Meaning that during times of distress they relied on fellow Christians for help either in the form of prayer, advice, financial assistance and social support.

Participant S13, Fam Int: *My pastor and church act as source of support through prayer. When I face challenges, I seek guidance from my pastors or church elders they help by praying with me and this gives me hope that I am not alone. I have people that can pray for me which strengthens my faith.*

Churches in Diepsloot appear to provide various forms of support to the families that live in the community (Chatters, Taylor, Woodward, & Nicklett, 2015). Being affiliated to a church was essential in promoting psychological wellbeing because it was a source of spiritual support when one is faced with challenges and enhanced a sense of belonging (Segrin & Passalacqua, 2010).

Participant S14, Fam Gn: *Given that we have no family members in Diepsloot, our church is like family. When we are faced with troubles we consult with elders in our church members to get advice and spiritual guidance, they share ideas with us and provide us with other alternatives to our problems.*

Having a sense of belonging in the church reassured families that they did not have to go through challenging situations alone. Instead they could rely on their church to support them (Chatters et al., 2015). This not only gave one the assurance that they had a sense of support but it also reduced their levels of stress.

Participant S05, Clin R: *My daughter is being taken care of by my church and this has helped reduce the financial burden on the family. She attends school and then church helps with money and toiletry, it is a boarding school so we only see her when she has closed schools.*

Participant S10, Map Ex: *I work in the church garden and I get paid with food baskets, which help me feed my family. This job is only temporary until I find something that can give me better pay.*

Heltberg, Hossain, Reva, and Turk (2013) highlighted the role that the church at times plays in helping the less fortunate and how this in turns lessens the financial strain on poverty stricken families. Therefore, having membership to a particular church could mean that families get assistance in the form money or other assistance depending on the identified needs (Krause & Hayward, 2012).

4.2.2.2 Positive outlook

Adopting a positive outlook on life despite adversity appeared to help the families cope with their daily struggles. The families tended to look at the positive aspects of their lives as opposed to dwelling only on the negative (Ní Raghallaigh & Gilligan, 2010). In a study that aimed to understand how people living with HIV coped with their status, it was found that their ability to look forward and set goals in life made it possible for them to function and progress in life, as opposed engaging in self-pity (Emlet, Tozay, & Raveis, 2011). Therefore, negative situations then become less stressful as the focus now shifts to looking for the “good in the bad.” This practise was also evident among the participants in the present study, as they also displayed an element of positive outlook despite their disadvantaged environment:

Participant S01, Col: *I accept life challenges as they come and I choose to adopt have a positive outlook. I believe that there is always something good that is coming my way, so I don't let bad things discourage me.*

A positive outlook also requires one to perceive a better future despite being exposed to unpleasant situations (Tindle, 2013). Therefore, perceiving negative situations as temporary as opposed to permanent helped families cope during adversity. By focusing on positive expectations and outcomes negative emotions are replaced with positive emotions, which then results in heightened levels of motivation when facing challenges (Mak, Ng, & Wong, 2011).

Participant S04, Clin R: *Sometimes identifying positive things in one's surrounding and making use of them is helpful during stressful times. This helps me to stay hopeful and focused on what is going good as opposed to bad, this reduces the stress and frustration.*

Participant S14, Fam D: *I have learnt to not look at what I do not have but instead grateful for what I have. This helps me to avoid being sad over what I have and rather enjoy what God has blessed me with.*

A positive outlook provides families in Diepsloot with hope that their situations would change as long as they are optimistic and worked towards using available resources to achieve their dreams. This reduced feelings of helplessness and increased positive attributes such as being proactive in the pursuit of their dreams. Cameron and Brownie (2010) stressed that being optimistic in life helps people to have a positive attitude when in challenging situations, which reduced their stress levels. This therefore resulted in them having positive outcome expectations in every situation, which in turn fostered resilience.

Participant S02, Fam Int: *We are positive things will change in our community. We are hopeful that our children we will have a better future compared to us.*

Participant S04, MacM: *Trying to be strong in the midst of challenges is good because it keeps us positive that we will get through any problem. Being strong also helps us to stay away from stress and work on solving the problem.*

4.2.2.3 Meaning making during adversity

According to Larner and Blow (2011), meaning making facilitates the ability for an individual to view a negative situation in less threatening terms but rather look for the meaning behind it. Meaning making therefore restores some form of understanding and control in a situation that may be seen stressful (Park, 2010), as it facilitates positive adjustment. People therefore are inclined to seek meaning in every situation, as this enables their ability to cope with the negative ones. Therefore, a search for meaning could be viewed as a positive adaptation to a stressful situation (Linley & Joseph, 2011). The participants in the present study appeared to draw on meaning making to cope when they were faced with stress provoking situations. Below are indications of some of their perceptions of problems in life.

Participant S09, N: *Problems provide us with meaning, they help us learn about life. When we find solutions we get valuable lessons that we can apply to similar situations in life.*

One can then assume that meaning making reduces the distress of a negative event because, instead of finding someone to blame, the family works together to understand why an event happened and the possible solution for it. Meaning making therefore is beneficial in promoting the psychological wellbeing of individuals in distress (Tavernier & Willoughby, 2012), because the focus is not on the problem but

rather it is on the lesson one can take from it. Adopting this stance implies that each problem is faced as an opportunity to learn something, as opposed to a mere punishment.

Participant S03, Fam Int: *Everything happens for a reason, that is the approach I have on life. When something happens I know that it is meant to happen therefore I don't stress because there is a reason for it.*

Participant S11, MacM: *Problems are necessary for learning and growth and at the end of every solved problem lies a gift that brings joy to the family. When we face problems in our family we use them to learn something new and when we solve them we are happy because we did it as a family, the victory is shared.*

The ability to find meaning despite hardship to a certain extent enables families to perceive negative situations as opportunities for personal growth (Ryff, 2014). Thus, instead of focusing on what went wrong, the families search for lessons they can learn from the event that occurred. Therefore, in each problem there is an underlying purpose and once resolved the family has gained some wisdom to apply in the future.

Lila et al. (2013) stated that social support from families and friends tends to help individuals cope during stressful occasions. Published research has also shown that social support is linked to good mental health and psychological wellbeing (Thoits, 2011). Therefore having people that support an individual who is faced with a stressful situation has a positive effect on their ability adaptively cope and recover from the situation. This was highlighted:

Participant S13, Se Map: *Having someone to help you makes it easier and reduces the heaviness of the problem. That means you have someone to talk to who can provide support and advice you. I talk to my friends when I am faced with a problem and she helps me to look at possible alternatives.*

Literature has revealed that social support reduces negative emotions such as depression (Larner & Blow, 2011). Social support can be in emotional, financial or psychological form and in many instances facilitates an individual's ability to adaptively cope with problems with which they are confronted.

Participant S08, Clin R: *Through conversations and giving advice people change. When you share your problems with people it is easy for you to get more options and make better decisions and one can decide which one is the best.*

Through discussing their problems with family members, friends or neighbours the families were able to view a problem from a different perspective and find multiple alternatives (Cacioppo, Reis, & Zautra, 2011). This also helped facilitate meaning making, as one had the opportunity to process their experiences with the help of others. Therefore, they found multiple explanations for the stressors experienced (Larner & Blow, 2011).

Participant S12, Map Ex: *Supporting one other is essential during times of difficulty because we share ideas and this leads to the discovery of possible alternatives to a stressful situation and it reduces the strain on the family that is going through stress.*

Drawing on the various explanations the participants provided, social support in their view included talking and sharing problems with significant others such as neighbours and church members, and being able to come to a decision after exploring all possible options. This helped them make a more informed decision and allowed them to adaptively cope with challenges that came their way. Plumb (2011) stressed that social support is essential as it provides individuals in distress with social and psychological support that can enable them cope with negative experiences, which then facilitates resilience.

The findings from Theme 2 highlighted that families in Diepsloot rely on various elements of belief systems to attain resilience, this then support research that indicates that belief systems can serve as protective factors when in adversity.

4.3 CONCLUSION

This chapter provides a report on the themes that emerged from the thematic analysis of data collected from the Shumbashaba Positive Parenting Workshops conducted in 2016. The risk factors that the participating families were exposed to were identified and their impact on the family system highlighted. Protective factors were highlighted as part of the themes and these were then classified in terms of the sub-categories that indicated belief systems. Published literature was used to support the themes identified and illustrate their link to resilience.

Chapter 5 Summary

5.1 INTRODUCTION

This chapter provides a summary of my study. In this section, I relate the findings of my study to the purpose and research questions. I also highlight the possible limitations of the present study and recommendations for future studies.

5.2 RESPONDING TO THE RESEARCH QUESTIONS

The aim of the present study was to understand how families living in Diepsloot relied on belief systems to foster resilience and move forward in life despite living in a disadvantaged environment. Through the analysis of the data collected from the Shumbashaba Positive Parenting Workshops held in 2016, I was able to identify the risk and protective factors that are predominant with the Diepsloot community; these were thoroughly discussed in Chapter 4. Walsh Family Resilience Framework served as a guide in terms of identifying and understanding how the participants drew on belief systems to positively adapt and move forward with life.

5.2.1 RISK FACTORS

During the data analysis it became evident that families living within the Diepsloot community are faced with multiple stressors in the various systems that they are nested in. These appeared to affect the daily functioning, how they perceived these problems and how they adjusted to them.

Ngwenya (2015) reported that, Diepsloot is a disadvantaged township, the community is characterised by overcrowded houses or shacks. Families tend to share one room and use the communal toilets. Due to the overcrowded nature of the environment, poor sanitation is a predominant problem in the Diepsloot community, as some of the toilets in the area do not work (Ngwenya, 2015); therefore increasing probability of health hazards. This report by Ngwenya (2015) was verified by the participants as they indicated that there is recurrent bursting of sewage pipes in the Diepsloot community, which tend to be left unattended by the municipality, which then resulted in air and land pollution.

Overcrowding in shacks is not the only challenge with which families in Diepsloot struggle. Some of the participants in the present study indicated that they live with their family in a single room. This therefore implies that there is little privacy within the family. Given that there is little space available for the family, one could hypothesize that should one get sick in the family, all the members may be vulnerable to contracting the illness; thus indicating a link between overcrowding and vulnerability to infectious diseases (Kouadio, Aljunid, Kamigaki, Hammad, & Oshitani, 2012).

The participants also mentioned that the shacks in Diepsloot lack adequate supply of water and electricity. They reported that illegal electrical connections are predominant in the community, which is a hazard because when one shack has an electrical fault it could affect others. This trend of illegal connections confirmed Vearey's (2013) findings that a common characteristic of rural settlements is the presence of illegal electrical connections, which at times leaves some cables exposed or led to fires as a result of cable overload or wrong wiring. One participant indicated that there had been incidents where shacks burnt down as a result of illegal electrical connections. However, they still take part in the practice because it is the only way they can get electricity.

Based on the participants' documented reports, the lack of police presence in Diepsloot makes the community unsafe. According to Madienyane (2013), the low police presence on the streets is an indication of the predominant inadequacy with regards to resources in Diepsloot. Poor street lighting and lack of tarred roads are also some of the negative circumstances with which the families are faced. The lack of police presence within Diepsloot can therefore be linked to the participants' reports of the high crime rate. Further, pavements and certain parks are deemed as ideal spots where gangs attack people. This supports the findings from Jewkes et al. (2014), who highlighted that crime rates predominate in informal settlements which makes the environment harsh and risky to reside in. According to the participants, the prevalence of crime in Diepsloot has caused them to adjust their daily routines to ensure that they are home before dark, to avoid being robbed. One of the participants indicated that safety within their shacks is not guaranteed, given that thieves can easily gain access either by forcing the doors open or using traditional herbs which causes the family to fall asleep.

These rampant incidences of crime and violence, according to Gaylord-Harden, Cunningham, & Zelencik (2011), can be the leading cause of psychological distress and increased feelings of helplessness. Based on the participants' reports, one could

hypotheses that they have underlying feelings of helplessness and fear, as they indicated that at times when one family is under attack helping them is not an option as one's own safety is not guaranteed. One participant validated this assumption by indicating that each morning he feels like he is reborn because going to bed does not guarantee that one will wake up the next morning. This displays the lack of security and safety within the community and the strain it must have on the families.

The increase in crime activity in Diepsloot can be linked to the high unemployment rate within the community, based on the participant's perspectives. According to Harber (2011), due to the high rate of unemployment in South Africa, the majority of the population in Diepsloot is unemployed and as a result the youth in the community tend to engage in criminal acts, such as using drugs and committing crimes as a way of making a living. Manase (2014) reported that lower class settlements are prone to high levels of unemployment and poverty, which is the case with Diepsloot. The Development Bank's Social Needs Survey that was conducted in 2008 also revealed that 70% of the houses in Diepsloot were informal settlement dwellings, the rate of unemployment was 54% and approximately 73% of the families lived below the poverty line (Harber, 2011). The participants in the present study all indicated that unemployment is a stressor in their households. The common jobs amongst them are working in factories and being street vendors. Although some of the participants had jobs while others did not, it is evident that finances are a challenge in all those households. This finding supports a study by Naidoo (2011), which revealed that the majority of the families in South Africa are living in poverty and are therefore vulnerable to financial crises.

The above findings demonstrated that families living in Diepsloot face numerous challenges on a daily basis and how these affect their way of life. However, there is evidence of protective factors that families in Diepsloot rely on, which facilitate their ability to buffer the stress that comes with living in a disadvantaged environment and attain resilience.

5.2.2 PROTECTIVE FACTORS

According to Afifi and MacMillan (2011), protective factors are attributes or factors that influence an individual's ability to positively adjust to a negative situation. Rutter (1999) indicated that people have the ability to cope during adverse conditions by drawing on protective factors. Protective factors can either be associated with personal traits, family resources such as emotional support and coherence, and

community protective factors including support from neighbours and religious societies that come to their aid during difficult times.

Theme Four in Chapter 3 highlighted the various protective factors that the families identified and their purpose within the various families in terms of facilitating resilience. In my opinion the information obtained from the participants during the Positive Parenting Workshops was sufficient to answer the primary and secondary research questions, as will be discussed below.

5.2.3 HOW DOES MEANING MAKING FOSTER RESILIENCE DURING ADVERSITY?

Based on the families' responses, it appeared that meaning making facilitated their ability to make sense of the negative circumstances they faced. Wong (2012) reported that meaning making facilitated the ability of individuals to cope with situations that they came across in life. This was done by searching for the meaning behind each occurrence. This enabled families to move forward in life, as opposed to falling "victim" to the situation. During the data analysis it became evident that the participants saw challenges as opportunities to learn and acquire wisdom. One of the participants indicated that each problem faced carries a lesson behind it which is useful for the family's growth. According to Bonanno (2013), meaning making helps one to view a situation in a positive way as opposed to feeling defeated. This then facilitates psychological wellbeing and the ability to adapt when one is in a stressful situation (Steger, 2012). Adopting this approach to every problem therefore lessened the amount of stress that could have been caused if they viewed the problem as unresolvable. Meaning making will be discussed in depth later in the chapter when discussing how the participant used it to attain resilience.

5.3 WHAT ARE SOME OF THE PRACTICES THAT FAMILIES ENGAGE IN TO ENHANCE THEIR ABILITY TO BOUNCE BACK FROM NEGATIVE EVENTS?

A study conducted by Malindi and Theron (2010) regarding resilience of youth in the streets, highlighted that church attendance reinforced the utilisation of positive coping strategies during times of distress. Attending church services and having the opportunity to be encouraged by the sermons every Sunday appeared to instil a sense of hope that things would work out for the good among the participants in the present study. The participants' belief that God knows what is best for them and that He will fulfil all the promises recorded in the scriptures reassured them that the negative circumstances were not permanent. This belief helped them stay positive in

the midst of challenges. One participant referred to God as a saviour, therefore, signifying the belief that he can save them from any situation. The findings from Kim and Esquivel (2011) highlighted that a belief in God is a good coping mechanism for people who may be facing adversity because it instils hope that there is a high power that can change any situation. This view was evident in the participants as one indicated that God is able to change any situation. Therefore, their family always trusted that God would support and redeem them from any situation.

Prayer also played a major role in the ability of the participants to cope when in distress. Based on the information obtained from the data analysis, prayer is regarded as a form of communication with God, through which the participants relay their distress and needs. Most of the families in the present study indicated that they prayed as a family and at church. They believed that God hears their petitions and He will provide the necessary answers they need. Therefore, based on the descriptions the participants gave, God is seen as a sovereign being who is all powerful and an ever present help during times of despair or need. This view gave the participants in the present study hope that He can change their circumstances and this reduced feelings of helplessness and promoted resilience.

Although some families spoke about prayer as a form of coping mechanism, other practices such as singing and reading the Bible were reported as common practices. Numerous studies have highlighted the role that reading the Bible had in facilitating a sense of hope (Malindi, 2014), adaptive coping (Gunnestad & Thwala, 2011) and fostering a sense of direction and control when in adversity (Alawiyah, Bell, Pyles, & Runnels, 2011). One participant in the present study reported that through basing their life on the Bible, they gained a sense of direction and idea as to God's capability and power. Hence, verifying the notion that reading the Bible can be a source of resilience because it strengthens one's spirituality (Reis & Menezes, 2017).

Social support or relying on neighbours and church members helped families to cope with stressors within their environment. According to the participants, sharing problems with their pastor, church elders or friends allowed them to get varied opinions regarding a matter at hand and explore alternatives and find a solution. Gelbrich (2010) stated that social support reduces a sense of helplessness and encourages the utilisation of adaptive coping mechanisms. It also reinforces a sense of control over a situation, as one is able to feel empowered and supported when overwhelmed (Ekas, Lickenbrock, & Whitman, 2010). One of the participants indicated that sharing problems with those that one trusts instils the feeling that they

are not alone in adversity, which is important as most families in Diepsloot do not have immediate family present to assist them. Therefore their support structures also serve as second families.

5.4 WHAT ARE SOME OF THE BELIEFS THAT FAMILIES ASCRIBE TO WHEN FACED WITH ADVERSITY?

When speaking about resilience in families, Walsh (2012) highlighted that belief systems play a vital role in resilience. During the analysis it became evident that the families ascribed to the various components that Walsh identified as indicators of Belief Systems. These will be discussed below and, based on the families' experiences, they facilitate resilience.

5.4.1 MEANING MAKING

Meaning making according to Park and Folkman (1997 as cited in Park, 2010) can be seen as a process that involves attempting to make sense of a stressful situation and using adaptive coping mechanisms to reduce the level of distress brought about by the event. The participants in the present study appeared to engage in meaning making as a way of trying to understand the lesson behind each negative incident. This in a way reduced their levels of distress as each problem is then perceived as a lesson as opposed to a devastating occurrence. The perceiving problems as a necessity for growth facilitated positive adjustment to stressful events within the unit. Therefore, meaning making facilitates adaptive coping strategies and encourages a shift from asking questions but rather seeking lessons underlying the stressful event (Neimeyer, 2012).

Problems based on the participants' reports are an opportunity to learn and grow. Therefore, as families they search for underlying lessons in each situation for they believe that everything happens for a reason. The families attempt to seek meaning which then helps them gain mastery over the situation (Ryff, 2014). Meaning making therefore reduces the distress evoked by a negative situation because it enabled the individuals to understand, appraise a situation and gain a sense of control over it (Park, 2010). This was an evident theme among the participants. Each problem they tackled was viewed as significant, meaning that it was either a sign from God or served a purpose. Therefore, the participants shifted their focus from the severity of the problem to an attempt to interpret and find the purpose behind stressful events. This approach appeared to reduce the intensity of stress provoking situations and encouraged active seeking of adaptive coping strategies. Meaning making also

appeared to normalise experiences that the participants in the present study experience in life. By viewing each event as necessary for growth the families appeared to be more receptive and adjusted with ease to the changes that happened in the unit.

5.4.2 SPIRITUALITY

Gnanaprakash (2013) defined spirituality as, a personal search for meaning in life and a connection towards a supreme being. This assures people that their existence is of some importance and therefore they aspire to find their purpose in life (Stewart & Yuen, 2011). Not only does it instil a sense of purpose but it also assures people that there is a higher power that is in control of their life that is available during their times of need.

Based on the findings reported in Chapter 4, it appears that spirituality is a source of resilience during times of distress. Walsh (2011) stated that spirituality contributes towards resilience as it not only gives people hope but also instils a sense of control, despite chaos. The participants indicated that their faith in God helps them cope with adverse situations, in their opinion, believing that God is their help during times of need, facilitated their ability to cope and have hope that the situation will improve. Reading the Bible also helped to strengthen their belief in God and also reinforced a sense of hope and positive outlook on life, the verses they read from the Bible reassured them that God is capable of meeting their needs.

Prayer also appeared to play a role in maintaining a sense of control and sanity during difficult times. One of the participants indicated that prayer served as a means of communicating their grievances and needs to God with the hope that He would come to their rescue. Hence, prayer does not only serve as a means of communication but also instils a sense of hope and faith when faced with difficulty. It also provides assurance that God is able to redeem people during times of despair (Gunnestad & Thwala, 2011), which then cultivates a sense of peace and confidence that help is available. A study by Greeff and Loubser (2008) revealed that prayer is an adaptive coping mechanism that people rely on during times of distress, it is also a source of comfort during times of immense pain or loss (Raftopoulos & Bates, 2011). The participants in the present study confirmed the role of prayer in facilitating positive emotions and better coping mechanisms within their families.

Belief in God and His sovereignty also was a factor among the families that fostered sense of resilience. Perceiving God as all powerful and having knowledge of what the

future holds (Raftopoulos & Bates, 2011), seemed to put the participants at ease and also strengthen their ability to cope with stressors more adaptively. Most of the participants appeared to rely on God and fellow brethren to assist boost their faith during times of despair. This enabled them to feel heard and supported. The predominant belief that God is undefeated among the participants helped them rest assured that they will not be overwhelmed by their problems; this gave them hope that all things would normalise because God will restore them.

5.4.3 POSITIVE OUTLOOK

Mak et al. (2011) defined Positive Outlook as, the ability people have to view life in a positive way, perceiving opportunities despite adversity and find solutions from the problems. This stance in life allowed people to view difficult situations as temporary, as opposed to permanent, and therefore they aimed to gain mastery of situations as opposed to being a victim of circumstances. Based on the data analysis, the participants appeared to be proactive in solving problems and tended to have a firm belief that the future holds more pleasurable experiences and enjoyable memories.

The majority of the participants indicated that being able to solve problems helped them gain a more positive perspective on life. According to Mak et al. (2011), people who had good problem solving skills tended to accept challenges more easily and perceive them as building blocks towards personal growth and agency. The participants in the present study highlighted that despite the harsh environment in which they reside, they have faith that the future held good things. One of the participants reported that by working together as a community they could bring change to Diepsloot and ensure that their children had a better future. This statement not only indicates a sense of hope for the future, but it portrays that the community does have a unified vision to improve their environment despite the lack of resources that is predominant. Shastri (2013) verifies that having a sense of togetherness in a group and sharing goals or desired outcomes about a situation fosters resilience and this trait was evident in the participants of the current study. Each family aspired to see change in Diepsloot and was willing to invest in working for the change.

Leary and DeRosier (2012) stated that a positive outlook facilitates resilience. Adopting a positive mind-set allowed individuals to adapt easily to changes and negative circumstances that provoke some level of anxiety or distress. Shastri (2013) stressed the importance of being flexible in order for one to remain positive. This trait was evident in most of the participants, who tended to adapt and adjust their thinking

according to situations as they occurred. This therefore prompted them to see situations as learning curves instead of catastrophising them. Hence, this makes situations manageable and not permanent. The participants in the present study did not report negative statements about the future; they spoke about a better future and could identify various resources that helped them stay positive despite their current situation, which suggested they have a positive outlook on life. This ability for individuals to maintain a positive perspective on life strengthens their resilience and positive wellbeing. This increases some sense of control despite not knowing what the future holds and hope that all shall fall into place in due time.

The participants' responses indicated that they do rely on various facets of belief systems to attain resilience. These helped them buffer the stress brought about by the risk factors that are within Diepsloot.

5.5 LITERATURE CONTROL

Theme One identified the various risk factors that are predominant in families that reside in Diepsloot, those internal and external to the family unit.

Collinson (2010) highlighted that rural areas in South Africa are riddled with high rates of unemployment, which results in many people migrating to urban areas in search of job opportunities. The findings by Collinson (2010) coincide with those of the current study, many of the participants reported that they left their family of origin in search for a better life and Diepsloot is the most affordable settlement where they can find reasonable accommodation while seeking employment. However, due to the fact that some of the participants lacked exposure to formal education they struggle to find decent and sustainable employment.

The high rates of unemployment within Diepsloot, according to the participants, led to a high rate of crime within the community. The participants were of the opinion that the increasing gang violence in the form of house breakings and robbing people could be a result of the lack of job opportunities within the community. Breetzke (2010) confirmed this view that unemployment rates can be linked to high crime rates, by highlighting that the growing crime rate in South Africa could be a result of the poverty which is a result of unemployment. Therefore, crime is used as a form of survival in a society where there is high need for jobs but not many available spots that cater for the working age population (Charman & Piper, 2012).

Diepsloot, which is a settlement on the outskirts of Johannesburg, is viewed as a disadvantaged settlement based on the ratio of the population when compared to the available resources. As mentioned earlier, many people migrate to urban areas in search of employment. Therefore, given that Diepsloot is seen as a low cost residential place by the migrating families, overcrowding is a problem in the community. Cashdan (2002) highlighted that problems such as poor sanitation and housing, poor service delivery and lack of basic amenities were common factors in such communities. These challenges were confirmed by the participants' responses as they indicated that the shacks they live in are in poor condition and the supply of basic services such as water, electricity, good sanitation inadequate.

Although the analysis identified various risk factors within the Diepsloot community, the families indicated various protective factors which they relied on in order to cope with their challenges. This supports the findings by Becvar (2013), G. L. Bowen, Martin, and Mancini (2013) and Walsh (2012) that families are able to adapt and function despite the negative circumstances they face by drawing on internal and external resources that help the unit to adaptively cope with any adverse situation.

Using the theoretical framework of the present study as a reference point, it was evident that the participants relied on spirituality, positive outlook, and meaning making as coping mechanisms during stressful periods. This therefore coincides with Walsh's (2012) findings that the belief system of a family can foster a sense of resilience within the family unit.

5.6 LIMITATIONS OF THE STUDY

One of the limitations identified for this study was the availability of the participants for attending both the Positive Parenting Workshops. Their attendance was inconsistent and this had a negative effect on the data collection process, given that some participants that were present during the information session did not attend the Positive Parenting Workshops.

Language was another limitation, although based on the report there were students from the University of Pretoria who could translate from Northern-Sotho and Zulu to English, it may have been challenging when the students had one-to-one interactions with the families. Hence, some valuable information may have not been fully explored or elaborated on.

Lastly, given that I, as the researcher, did not have control as to how the information was gathered, there is a possibility that vital information may have been omitted from the findings.

5.7 POSSIBLE CONTRIBUTIONS

This study could possibly add on to the existing literature with regards to how belief systems foster resilience in high risk areas. Not only can this study facilitate in-depth understanding of what families regard as valuable belief systems but can lead to the appreciation of how these buffer stress during adversity.

Although this study led to the identification and understanding of various belief systems, I would recommend that more studies be conducted within the South African context to gain in-depth understanding as to how families in disadvantaged environments adapt and continue to flourish despite adversity.

5.8 CONCLUSION

In conclusion, the present study demonstrated the role that belief systems play in families that live in Diepsloot. Many of their beliefs appeared to reflect some of the factors that Walsh highlighted as necessary for a family to have in order to be deemed resilient. Although this research indicated the value of belief systems within a disadvantaged context, further research in the area could add to the existing literature within the South African context.

---ooOoo---

References

- Afifi, T. O., & MacMillan, H. L. (2011). Resilience following child maltreatment: A review of protective factors. *The Canadian Journal of Psychiatry, 56*, 266–272. doi:10.1177/070674371105600505
- Agrawal, A. (2014). Indigenous and scientific knowledge: Some critical comments. *Antropologi Indonesia*. doi:10.7454/ai.v0i55.3331
- Ahlert, I. A., & Greeff, A. P. (2012). Resilience factors associated with adaptation in families with deaf and hard of hearing children. *American Annals of the Deaf, 157*, 391–404.
- Akter, S., & Mallick, B. (2013). The poverty–vulnerability–resilience nexus: Evidence from Bangladesh. *Ecological Economics, 96*, 114–124. doi:10.1016/j.ecolecon.2013.10.008
- Alawiyah, T., Bell, H., Pyles, L., & Runnels, R. C. (2011). Spirituality and faith-based interventions: Pathways to disaster resilience for African American Hurricane Katrina survivors. *Journal of Religion and Spirituality in Social Work: Social Thought, 30*, 294–319. doi:10.1080/15426432.2011.587388
- Alhojailan, M. I. (2012). Thematic analysis: A critical review of its process and evaluation. *West East Journal of Social Sciences, 1*(1), 39–47. Retrieved from https://s3.amazonaws.com/academia.edu.documents/53978242/THEMATIC_ANALYSIS.pdf?AWSAccessKeyId=AKIAIWOWYYGZ2Y53UL3A&Expires=1522060867&Signature=yTZQzkJ%2BgZueim8DEabbYWyDWLg%3D&response-content-disposition=inline%3B%20filename%3DTHEMATIC_ANALYSIS_A_CRITICAL_REVIEW_OF_I.pdf
- Allen, B., & Tussey, C. (2012). Can projective drawings detect if a child experienced sexual or physical abuse? A systematic review of the controlled research. *Trauma, Violence, & Abuse, 13*, 97–111. doi:10.1177/1524838012440339
- Avgoulas, M. I., & Fanany, R. (2012). Religion as a source of resilience for elderly Greeks in Melbourne, Australia. In *Atiner's Conference Paper Series PSY2012-0089* (pp. 5–15). Athens, Greece: Athens Institute for Education and Research. Retrieved from <https://www.atiner.gr/papers/PSY2012-0089.pdf>

- Bachi, K., Terkel, J., & Teichman, M. (2012). Equine-facilitated psychotherapy for at-risk adolescents: The influence on self-image, self-control and trust. *Clinical Child Psychology and Psychiatry*, *17*, 298–312.
doi:10.1177/1359104511404177
- Baker, G. T., & Lewis, S. P. (2013). Responses to online photographs of non-suicidal self-injury: A thematic analysis. *Archives of Suicide Research*, *17*, 223–235.
doi:10.1080/13811118.2013.805642
- Baloyi, M. E. (2014). Distance no impediment for funerals: Death as a uniting ritual for African people - A pastoral study. *Verbum et Ecclesia*, *35*(1), Art. #1248, 7 pages. doi:10.4102/ve.v35i1.1248
- Barbarin, O. A., & Khomo, N. (1997). Indicators of economic status and social capital in South African townships: What do they reveal about the material and social conditions in families of poor children? *Childhood*, *4*, 193–222.
doi:10.1177/0907568297004002005
- Barbarin, O. A., & Richter, L. (2001). Economic status, community danger and psychological problems among South African children. *Childhood*, *8*(1), 115–133. doi:10.1177/0907568201008001007
- Bearman, M., & Dawson, P. (2013). Qualitative synthesis and systematic review in health professions education. *Medical Education*, *47*, 252–260.
doi:10.1111/medu.12092
- Becvar, D. S. (Ed.). (2013). *Handbook of family resilience*. New York, NY: Springer.
- Beit-Hallahmi, B., & Argyle, M. (2004). *The psychology of religious behaviour, belief and experience*. London, England: Routledge.
- Bell, J. M. (2009). Family systems nursing: Re-examined. *Journal of Family Nursing*, *15*, 123–129. doi:10.1177/1074840709335533
- Berkes, F. (2012). *Sacred ecology* (3rd ed.). New York, NY: Routledge.
- Bhana, A., & Bachoo, S. (2011). The determinants of family resilience among families in low- and middle-income contexts: A systematic literature review. *South African Journal of Psychology*, *41*(2), 131–139.
doi:10.1177/008124631104100202
- Binder, J. F., Roberts, S. G. B., & Sutcliffe, A. G. (2012). Closeness, loneliness, support: Core ties and significant ties in personal communities. *Social Networks*, *34*, 206–214. doi:10.1016/j.socnet.2011.12.001

- Black, K., & Lobo, M. (2008). A conceptual review of family resilience factors. *Journal of Family Nursing*, 14(1), 33–55. doi:10.1177/1074840707312237
- Bogopa, D. (2010). Health and ancestors: The case of South Africa and beyond. *Indo-Pacific Journal of Phenomenology*, 10(1), 1–7. Retrieved from http://journals.co.za/docserver/fulltext/ipjp/10/1/ipjp_v10_n1_a3.pdf?expires=1521968722&id=id&accname=guest&checksum=5D6DF0697BAF809B7AFB0EC6FE49508E
- Bonanno, G. A. (2013). Meaning making, adversity, and regulatory flexibility. *Memory*, 21(1), 150–156. doi:10.1080/09658211.2012.745572
- Bornstein, M. H. (2012). Cultural approaches to parenting. *Parenting*, 12(2-3), 212–221. doi:10.1080/15295192.2012.683359
- Bottrell, D. (2009). Understanding ‘marginal’ perspectives: Towards a social theory of resilience. *Qualitative Social Work*, 8, 321–339. doi:10.1177/1473325009337840
- Boudry, M., & Braeckman, J. (2012). How convenient! The epistemic rationale of self-validating belief systems. *Philosophical Psychology*, 25, 341–364. doi:10.1080/09515089.2011.579420
- Bowen, G. A. (2008). Naturalistic inquiry and the saturation concept: A research note. *Qualitative Research*, 8(1), 137–152. doi:10.1177/1468794107085301
- Bowen, G. L., Martin, J. A., & Mancini, J. A. (2013). The resilience of military families: Theoretical perspectives. In M. A. Fine & F. D. Fincham (Eds.), *Handbook of family theories: A content-based approach* (pp. 417–436). New York, NY: Routledge.
- Bowen, P. A., Edwards, P. J., & Cattell, K. (2012). Corruption in the South African construction industry: A thematic analysis of verbatim comments from survey participants. *Construction Management and Economics*, 30, 885–901. doi:10.1080/01446193.2012.711909
- Bradbury, T. N., & Karney, B. R. (2004). Understanding and altering the longitudinal course of intimate partnerships. *Social Policy Journal of New Zealand*, 23, 1–30. Retrieved from <http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.615.9618&rep=rep1&type=pdf>

- Brakewood, B., & Poldrack, R. A. (2013). The ethics of secondary data analysis: Considering the application of Belmont principles to the sharing of neuroimaging data. *NeuroImage*, 82, 671–676. doi:10.1016/j.neuroimage.2013.02.040
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77–101.
- Braun, V., & Clarke, V. (2014). What can “thematic analysis” offer health and wellbeing researchers? *International Journal of Qualitative Studies on Health and Wellbeing*, 9, 26152. doi:10.3402/qhw.v9.26152
- Breetzke, G. D. (2010). A socio-structural analysis of crime in the city of Tshwane, South Africa. *South African Journal of Science*, 106(11/12), Art. #223, 7 pages. doi:10.4102/sajs.v106i11/12.223
- Bremner, R. H., Koole, S. L., & Bushman, B. J. (2011). “Pray for those who mistreat you”: Effects of prayer on anger and aggression. *Personality and Social Psychology Bulletin*, 37, 830–837. doi:10.1177/0146167211402215
- Brittian, A. S., Lewin, N., & Norris, S. A. (2013). “You must know where you come from”: South African youths’ perceptions of religion in time of social change. *Journal of Adolescent Research*, 28, 642–663. doi:10.1177/0743558413480834
- Brokenleg, M. (2012). Transforming cultural trauma into resilience. *Reclaiming Children and Youth*, 21, 9–13.
- Bronfenbrenner, U. (1999). Environments in developmental perspective: Theoretical and operational models. In S. L. Friedman & T. D. Wachs (Eds.), *Measuring environment across the life span: Emerging methods and concepts* (pp. 3–28). Washington, DC: American Psychological Association. doi:10.1037/10317-001
- Brooke, M. (2013). Which research paradigm for TESOL. *Theory and Practice in Language Studies*, 3, 430–436. doi:10.4304/tpls.3.3.430-436
- Burton, H. L. (2011). ‘Queen of the world’: Experiences of ‘at-risk’ young people participating in equine-assisted learning/therapy. *Journal of Social Work Practice*, 25, 165–183. doi:10.1080/02650533.2011.561304
- Butler-Kisber, L. (2008). Collage as inquiry. In J. G. Knowles & A. L. Cole (Eds.), *Handbook of the arts in qualitative research* (pp. 265–276). Thousand Oaks, CA: Sage.
- Butler-Kisber, L., & Poldma, T. (2010). The power of visual approaches in qualitative inquiry: The use of collage making and concept mapping in experiential

research. *Journal of Research Practice*, 6(2), Article M18. Retrieved from <http://jrp.icaap.org/index.php/jrp/article/view/197/232>

Cacioppo, J. T., Reis, H. T., & Zautra, A. J. (2011). Social resilience: The value of social fitness with an application to the military. *American Psychologist*, 66(1), 43–51. doi:10.1037/a0021419

Cameron, F., & Brownie, S. (2010). Enhancing resilience in registered aged care nurses. *Australasian Journal on Ageing*, 29, 66–71. doi:10.1111/j.1741-6612.2009.00416.x

Carter, S. L. (1999). Religious freedom as if religion matters: A tribute to Justice Brennan. *California Law Review*, 87, 1059.

Cashdan, B. (2002). Local government and poverty in South Africa. In S. Parnell, E. Pieterse, M. Swilling, & D. Woolridge (Eds.), *Democratising local government: The South African experiment* (pp. 159–180). Landsdowne, South Africa: University of Cape Town Press.

Chandler, C. K. (2017). *Animal-assisted therapy in counselling* (3rd ed.). New York, NY: Routledge.

Charman, A., & Piper, L. (2012). Xenophobia, criminality and violent entrepreneurship: Violence against Somali shopkeepers in Delft South, Cape Town, South Africa. *South African Review of Sociology*, 43(3), 81–105. doi:10.1080/21528586.2012.727550

Chatters, L. M., Taylor, R. J., Woodward, A. T., & Nicklett, E. J. (2015). Social support from church and family members and depressive symptoms among older African Americans. *The American Journal of Geriatric Psychiatry*, 23, 559–567. doi:10.1016/j.jagp.2014.04.008

Chigeza, S., & Roos, V. (2011). The resilience of illegal African migrants in South Africa: A relational perspective. *The Australian Community Psychologist*, 23, 121–134. Retrieved from <https://groups.psychology.org.au/Assets/Files/Chigeza%20ACP%202%2011.pdf>

Clarke, V., & Braun, V. (2013). Teaching thematic analysis: Over-coming challenges and developing strategies for effective learning. *The Psychologist*, 26, 120–123. Retrieved from <http://eprints.uwe.ac.uk/21155/3/Teaching%20thematic%20analysis%20Research%20Repository%20version.pdf>

- Cohen, L., Manion, L., & Morrison, K. (2011). *Research methods in education* (7th ed.). New York, NY: Routledge.
- Collinson, M. A. (2010). Striving against adversity: The dynamics of migration, health and poverty in rural South Africa. *Global Health Action*, 3(1), 5080. doi:10.3402/gha.v3i0.5080
- Conger, R. D., Rueter, M. A., & Elder, G. H., Jr. (1999). Couple resilience to economic pressure. *Journal of Personality and Social Psychology*, 76(1), 54–71.
- Cross, C. (2014). Qualitative assessment of the Diepsloot economy. In S. Mahajan (Ed.), *Economics of South African townships: Special focus on Diepsloot* (pp. 143–178). Washington, DC: The World Bank.
- Cumes, D. (2013). South African indigenous healing: How it works. *Explore: The Journal of Science and Healing*, 9(1), 58–65. doi:10.1016/j.explore.2012.11.007
- Dass-Brailsford, P. (2005). Exploring resiliency: Academic achievement among disadvantaged black youth in South Africa. *South African Journal of Psychology*, 35, 574–591.
- Davies, R., & Thurlow, J. (2010). Formal-informal economy linkages and unemployment in South Africa. *South African Journal of Economics*, 78, 437–459. doi:10.1111/j.1813-6982.2010.01250.x
- Davies, R., & Van Seventer, D. (2014). A social accounting matrix for the economy of Diepsloot. In S. Mahajan (Ed.), *Economics of South African townships: Special focus on Diepsloot* (pp. 245–270). Washington, DC: The World Bank.
- DeCuir-Gunby, J. T., Marshall, P. L., & McCulloch, A. W. (2011). Developing and using a codebook for the analysis of interview data: An example from a professional development research project. *Field Methods*, 23(2), 136–155. doi:10.1177/1525822X10388468
- Delamont, S. (Ed.). (2012). *Handbook of qualitative research in education*. Cheltenham, England: Edward Elgar.
- Denis, P. (2007). Prayers and rituals to the ancestors as vehicles of resilience: Coping with political violence in Nxamalala, Pietermaritzburg (1987-1991). *Journal of Theology for Southern Africa*, 128, 37–52. Retrieved from https://www.researchgate.net/profile/Philippe_Denis4/publication/275830056_Prayers_and_Rituals_to_the_Ancestors_as_Vehicles_of_Resilience_Coping_with_Political_Violence_in_Nxamalala_1887-

1991/links/5547a2a30cf2b0cf7ace2bd7/Prayers-and-Rituals-to-the-Ancestors-as-Vehicles-of-Resilience-Coping-with-Political-Violence-in-Nxamalala-1887-1991.pdf

Denscombe, M. (2010). *The good research guide: For small-scale social research projects* (4th ed.). Berkshire, England: Open University Press.

DeWitte, H., Rothmann, S., & Jackson, L. T. B. (2012). The psychological consequences of unemployment in South Africa. *South African Journal of Economic and Management Sciences*, *15*, 235–252. Retrieved from <http://www.scielo.org.za/pdf/sajems/v15n3/01.pdf>

Diepsloot, Johannesburg, South Africa: Sanitation. (n.d.). Retrieved from <http://www.hho-s.com/south-africa/>

Drumm, R., Popescu, M., Cooper, L., Trecartin, S., Seifert, M., Foster, T., & Kilcher, C. (2014). “God just brought me through it”: Spiritual coping strategies for resilience among intimate partner violence survivors. *Clinical Social Work Journal*, *42*, 385–394. doi:10.1007/s10615-013-0449-y

Duckett, R. J. (2009). *Black adolescent mothers and their families: A phenomenological study of resilience* (Doctoral dissertation, Seton Hall University). Retrieved from <http://scholarship.shu.edu/cgi/viewcontent.cgi?article=1309&context=dissertations>

Ebersöhn, L. (2010). Resilience and career counselling: Describing the utility of quadrant mapping. *Journal of Psychology in Africa*, *20*, 385–393.

Edwin, L. (2013). *Projective psychology - Clinical approaches to the total personality*. New York, NY: Grove Press.

Ekas, N. V., Lickenbrock, D. M., & Whitman, T. L. (2010). Optimism, social support, and wellbeing in mothers of children with autism spectrum disorder. *Journal of Autism and Developmental Disorders*, *40*, 1274–1284. doi:10.1007/s10803-010-0986-y

Emler, C. A., Tozay, S., & Raveis, V. H. (2011). “I’m not going to die from the AIDS”: Resilience in aging with HIV disease. *The Gerontologist*, *51*(1), 101–111. doi:10.1093/geront/gnq060

Faigin, C. A., & Pargament, K. I. (2011). Strengthened by the spirit: Religion, spirituality, and resilience through adulthood and aging. In B. Resnick, L. P.

Gwyther, & K. Roberto (Eds.), *Resilience in aging* (pp. 163–180). New York, NY: Springer. doi:10.1007/978-1-4419-0232-0

Fine, A. H. (Ed.). (2015). *Handbook on animal-assisted therapy: Foundations and guidelines for animal-assisted interventions* (4th ed.). London, England: Academic Press.

Fives, H., & Buehl, M. M. (2012). Spring cleaning for the “messy” construct of teachers’ beliefs: What are they? Which have been examined? What can they tell us. In K. R. Harris, S. Graham, & T. Urdan (Eds.), *APA Educational psychology handbook* (Vol. 2, pp. 471–499). Washington, DC: American Psychological Association.

Frankl, V. (2006). *Man’s search for meaning*. Boston, MA: Beacon Press.

Franklin, T. B., Saab, B. J., & Mansuy, I. M. (2012). Neural mechanisms of stress resilience and vulnerability. *Neuron*, *75*, 747–761. doi:10.1016/j.neuron.2012.08.016

French, C., & Narayanasamy, A. (2011). To pray or not to pray: A question of ethics. *British Journal of Nursing*, *20*, 1198–1204. doi:10.12968/bjon.2011.20.18.1198

Friedman, B. D., & Allen, K. N. (2011). Systems theory. In J. R. Brandell (Ed.), *Theory and practice in clinical social work* (2nd ed., pp. 3–20). Thousand Oaks, CA: Sage.

Fullan, M. (2004). *Leading in a culture of change: Personal action guide and workbook*. San Francisco, CA: Jossey-Bass.

Fusch, P. I., & Ness, L. R. (2015). Are we there yet? Data saturation in qualitative research. *The Qualitative Report*, *20*, 1408–1416.

Garmestani, A. S., & Benson, M. H. (2013). A framework for resilience-based governance of social-ecological systems. *Ecology and Society*, *18*(1), 9. doi:10.5751/ES-05180-180109

Gaylord-Harden, N. K., Cunningham, J. A., & Zelencik, B. (2011). Effects of exposure to community violence on internalizing symptoms: Does desensitization to violence occur in African American youth? *Journal of Abnormal Child Psychology*, *39*, 711–719. doi:10.1007/s10802-011-9510-x

Gelbrich, K. (2010). Anger, frustration, and helplessness after service failure: Coping strategies and effective informational support. *Journal of the Academy of Marketing Science*, *38*, 567–585. doi:10.1007/s11747-009-0169-6

- Gerstenblatt, P. (2013). Collage portraits as a method of analysis in qualitative research. *International Journal of Qualitative Methods*, 12(1), 294–309. doi:10.1177/160940691301200114
- Ghani, F. A., Ibrahim, F. A., Aziz, A. A., & Mahfar, M. (2015). Relationship between the belief system and emotional wellbeing of single mothers. *Asian Social Science*, 11(27), 28–42. doi:10.5539/ass.v11n27p28
- Gibson, D. (2013). Perceptions of traditional health practitioners on violence in the Helderberg municipal area, Western Cape. *Health SA Gesondheid*, 18(1), Art. #673, 9 pages. doi:10.4102/hsag.v18i1.673
- Gilbert, M. & Pilchman, D. (2014). Belief, acceptance, and what happens in groups: Some methodological considerations. In J. Lackey (Ed.), *Essays in collective epistemology* (pp. 189–212). Oxford, England: Oxford University Press.
- Gnanaprakash, C. (2013). Spirituality and resilience among post-graduate university students. *Journal of Health Management*, 15, 383–396. doi:10.1177/0972063413492046
- Goldstein, S., & Brooks, R. B. (2013). Why study resilience? In S. Goldstein & R. B. Brooks. (Eds.), *Handbook of resilience in children* (2nd ed., pp. 3–14). New York, NY: Springer. doi:10.1007/978-1-4614-3661-4
- Graham, N., Gwyther, L., Tiso, T., & Harding, R. (2013). Traditional healers' views of the required processes for a “good death” among Xhosa patients pre- and post-death. *Journal of Pain and Symptom Management*, 46, 386–394. doi:10.1016/j.jpainsymman.2012.08.005
- Greeff, A. P., & Loubser, K. (2008). Spirituality as a resiliency quality in Xhosa-speaking families in South Africa. *Journal of Religion and Health*, 47, 288–301. doi:10.1007/s10943-007-9157-7
- Greeff, A. P., & Thiel, C. (2012). Resilience in families of husbands with prostate cancer. *Educational Gerontology*, 38, 179–189. doi:10.1080/03601277.2010.532068
- Greenhoot, A. F., & Dowsett, C. J. (2012). Secondary data analysis: An important tool for addressing developmental questions. *Journal of Cognition and Development*, 13(1), 2–18. doi:10.1080/15248372.2012.646613
- Gross, M. (2016). Vigilante violence and “forward panic” in Johannesburg’s townships. *Theory and Society*, 45, 239–263. doi:10.1007/s11186-016-9271-1

- Grusec, J. E. (2006). The development of moral behavior and conscience from a socialization perspective. In M. Killen & J. Smetana (Eds.), *Handbook of moral development* (pp. 243–265). Mahwah, NJ: Lawrence Erlbaum Associates.
- Gunnestad, A., & Thwala, S. (2011). Resilience and religion in children and youth in Southern Africa. *International Journal of Children's Spirituality*, 16, 169–185. doi:10.1080/1364436X.2011.580726
- Harber, A. (2011). *Diepsloot: A place at the side of the road*. Johannesburg, South Africa: Jonathan Ball.
- Harding, J. (2013). *Qualitative data analysis: From start to finish*. London, England: Sage.
- Harper, D. (2005). What's new visually? In N. K. Denzin & Y. S. Lincoln (Eds.), *The Sage handbook of qualitative research* (3rd ed., pp. 747–762). Thousand Oaks, CA: Sage.
- Harper, M., & Cole, P. (2012). Member checking: Can benefits be gained similar to group therapy? *The Qualitative Report*, 17(2), 510–517. Retrieved from <https://nsuworks.nova.edu/tqr/vol17/iss2/1/>
- Hartel, J., & Thomson, L. (2011). Visual approaches and photography for the study of immediate information space. *Journal of the Association for Information Science and Technology*, 62, 2214–2224. doi:10.1002/asi.21618
- Hasanović, M., & Pajević, I. (2010). Religious moral beliefs as mental health protective factor of war veterans suffering from PTSD, depressiveness, anxiety, tobacco and alcohol abuse in comorbidity. *Psychiatria Danubina*, 22, 203–210. Retrieved from https://hrcak.srce.hr/index.php?show=clanak&id_clanak_jezik=84619
- Heale, R., & Forbes, D. (2013). Understanding triangulation in research. *Evidence Based Nursing*, 16(4), 98–99. doi:10.1136/eb-2013-101494
- Heaton, J. (2008). Secondary analysis of qualitative data: An overview. *Historical Social Research*, 33(3), 33–45.
- Heltberg, R., Hossain, N., Reva, A., & Turk, C. (2013). Coping and resilience during the food, fuel, and financial crises. *The Journal of Development Studies*, 49, 705–718. doi:10.1080/00220388.2012.746668

- Hernández, P. (2002). Resilience in families and communities: Latin American contributions from the psychology of liberation. *The Family Journal*, 10, 334–343. doi:10.1177/10680702010003011
- Holton, M. J. (2010). “Our hope comes from God”: Faith narratives and resilience in Southern Sudan. *Journal of Pastoral Theology*, 20(1), 67–84. doi:10.1179/jpt.2010.20.1.005
- Hungwe, C. (2012). Contagion or calculated rationality: Rethinking crowd behaviour in the xenophobic killing of Farai Kurijichita in Diepsloot Township, Johannesburg, South Africa (January 2011). *The Dyke*, 6(3), 197–214. Retrieved from <http://ir.msu.ac.zw:8080/xmlui/bitstream/handle/11408/751/Contagion.pdf?sequence=1&isAllowed=y>
- Jewkes, R., Gibbs, A., Jama-Shai, N., Willan, S., Misselhorn, A., Mushinga, M., ... Skiweyiya, Y. (2014). Stepping stones and creating futures intervention: Shortened interrupted time series evaluation of a behavioural and structural health promotion and violence prevention intervention for young people in informal settlements in Durban, South Africa. *BMC Public Health*, 14, 1325. doi:10.1186/1471-2458-14-1325
- Johnston, M. P. (2017). Secondary data analysis: A method of which the time has come. *Qualitative and Quantitative Methods in Libraries*, 3, 619–626. Retrieved from <http://www.qqml-journal.net/index.php/qqml/article/view/169/170>
- Kamper, G., & Badenhorst, J. (2010). Facing the future: The perceptions of black adolescents on their prospects in South Africa. *Journal of Asian and African Studies*, 45, 243–257. doi:10.1177/0021909610364774
- Kapoulas, A., & Mitic, M. (2012). Understanding challenges of qualitative research: Rhetorical issues and reality traps. *Qualitative Market Research: An International Journal*, 15(4), 354–368. doi:10.1108/13522751211257051
- Kasen, S., Wickramaratne, P., Gameraff, M. J., & Weissman, M. M. (2012). Religiosity and resilience in persons at high risk for major depression. *Psychological Medicine*, 42, 509–519. doi:10.1017/S0033291711001516
- Keyton, J. (2011). *Communication and organizational culture: A key to understanding work experiences* (2nd ed.). Thousand Oaks, CA: Sage.
- Khan, J. A. (2011). *Research methodology*. New Delhi, India: APH.

- Kilonzo, G. P., & Hogan, N. M. (1999). Traditional African mourning practices are abridged in response to the AIDS epidemic: Implications for mental health. *Transcultural Psychiatry*, *36*, 259–283. doi:10.1177/136346159903600303
- Kim, S., & Esquivel, G. B. (2011). Adolescent spirituality and resilience: Theory, research, and educational practices. *Psychology in the Schools*, *48*, 755–765. doi:10.1002/pits.20582
- Kotzé, E., Els, L., & Rajuili-Masilo, N. (2012). “Women ... mourn and men carry on”: African women storying mourning practices: A South African example. *Death Studies*, *36*, 742–766. doi:10.1080/07481187.2011.604463
- Kouadio, I. K., Aljunid, S., Kamigaki, T., Hammad, K., & Oshitani, H. (2012). Infectious diseases following natural disasters: prevention and control measures. *Expert Review of Anti-infective therapy*, *10*(1), 95–104. doi:10.1586/eri.11.155
- Kraft, P. W., Lodge, M., & Taber, C. S. (2015). Why people “don’t trust the evidence”: Motivated reasoning and scientific beliefs. *The ANNALS of the American Academy of Political and Social Science*, *658*(1), 121–133. doi:10.1177/0002716214554758
- Krause, N., & Hayward, R. D. (2012). Religion, meaning in life, and change in physical functioning during late adulthood. *Journal of Adult Development*, *19*, 158–169. doi:10.1007/s10804-012-9143-5
- Krüger, F., Bankoff, G., Cannon, T., Orłowski, B., & Schipper, E. L. F. (Eds.). (2015). *Cultures and disasters: Understanding cultural framings in disaster risk reduction*. New York, NY: Routledge.
- Landau, J. (2007). Enhancing resilience: Families and communities as agents for change. *Family Process*, *46*, 351–365. doi:10.1111/j.1545-5300.2007.00216.x
- Larner, B., & Blow, A. (2011). A model of meaning-making coping and growth in combat veterans. *Review of General Psychology*, *15*, 187–197. doi:10.1037/a0024810
- Leary, K. A., & DeRosier, M. E. (2012). Factors promoting positive adaptation and resilience during the transition to college. *Psychology*, *3*, 1215–1222. doi:10.4236/psych.2012.312A180
- Lee, T. Y., Cheung, C. K., & Kwong, W. M. (2012). Resilience as a positive youth development construct: A conceptual review. *The Scientific World Journal*, *2012*, Article ID 390450, 9 pages. doi:10.1100/2012/390450

- Lerner, R. M., Lerner, J. V., Almerigi, J. B., Theokas, C., Phelps, E., Gestsdottir, S., ... Von Eye, A. (2005). Positive youth development, participation in community youth development programs, and community contributions of fifth-grade adolescents: Findings from the first wave of the 4-H study of positive youth development. *The Journal of Early Adolescence, 25*(1), 17–71. doi:10.1177/0272431604272461
- Levers, M. J. D. (2013). Philosophical paradigms, grounded theory, and perspectives on emergence. *Sage Open, 3*(4). doi:10.1177/2158244013517243
- Li, M. Y., Yang, Y. L., Liu, L., & Wang, L. (2016). Effects of social support, hope and resilience on quality of life among Chinese bladder cancer patients: A cross-sectional study. *Health and Quality of Life Outcomes, 14*, 73. doi:10.1186/s12955-016-0481-z
- Lichtenthal, W. G., Currier, J. M., Neimeyer, R. A., & Keesee, N. J. (2010). Sense and significance: A mixed methods examination of meaning making after the loss of one's child. *Journal of Clinical Psychology, 66*, 791–812. doi:10.1002/jclp.20700
- Lightfoot, C., & Valsiner, J. (1992). Parental belief systems under the influence: Social guidance of the construction of personal cultures. In I. E. Sigel, A. V. McGillicuddy-DeLisi, & J. J. Goodnow (Eds.), *Parental belief systems: The psychological consequences for children* (pp. 393–414). Hillsdale, NJ: Lawrence Erlbaum Associates.
- Lila, M., Gracia, E., & Murgui, S. (2013). Psychological adjustment and victim-blaming among intimate partner violence offenders: The role of social support and stressful life events. *The European Journal of Psychology Applied to Legal Context, 5*(2), 147–153. doi:10.5093/ejpalc2013a4
- Linley, P. A., & Joseph, S. (2011). Meaning in life and posttraumatic growth. *Journal of Loss and Trauma, 16*, 150–159. doi:10.1080/15325024.2010.519287
- Lobar, S. L., Youngblut, J. M., & Brooten, D. (2006). Cross-cultural beliefs, ceremonies, and rituals surrounding death of a loved one. *Paediatric Nursing, 32*(1), 44–50.
- Lowe, S. R., Sampson, L., Gruebner, O., & Galea, S. (2015). Psychological resilience after Hurricane Sandy: The influence of individual- and community-level factors on mental health after a large-scale natural disaster. *PLoS ONE, 10*(5), e0125761. doi:10.1371/journal.pone.0125761

- Mack, L. (2010). The philosophical underpinnings of educational research. *Polyglossia*, 19, 1–11.
- MacLean, B. (2011). Equine-assisted therapy. *Journal of Rehabilitation Research and Development*, 48, ix–xii.
- Madienyane, D. (2013). *The effects of vigilantism on the community of Diepsloot* (Master's thesis, University of Witwatersrand, Johannesburg, South Africa). Retrieved from <http://wiredspace.wits.ac.za/bitstream/handle/10539/13113/Vigilantism%20in%20Diepsloot-Edited-Final%20submission%202.pdf?sequence=1&isAllowed=y>
- Magesa, L. (2014). *African religion: The moral traditions of abundant life*. New York, NY: Orbis Books.
- Mahajan, S. (Ed.). (2014). *Economics of South African townships: Special focus on Diepsloot*. Washington, DC: World Bank.
- Mak, W. W., Ng, I. S., & Wong, C. C. Y. (2011). Resilience: Enhancing wellbeing through the positive cognitive triad. *Journal of Counseling Psychology*, 58(4), 610–617.
- Malindi, M. J. (2014). Exploring the roots of resilience among female street-involved children in South Africa. *Journal of Psychology*, 5(1), 35–45. doi:10.1080/09764224.2014.11885503
- Malindi, M. J., & Theron, L. C. (2010). The hidden resilience of street youth. *South African Journal of Psychology*, 40, 318–326.
- Manase, I. (2014). Everyday experiences and aspirations in selected lower class townships of Johannesburg. *Journal of Human Ecology*, 47(1), 65–72. doi:10.1080/09709274.2014.11906739
- Maree, J. G. (2012). *Complete your thesis or dissertation successfully: Practical guidelines*. Cape Town, South Africa: Juta.
- Mattis, J. S. (2002). Religion and spirituality in the meaning-making and coping experiences of African American women: A qualitative analysis. *Psychology of Women Quarterly*, 26, 309–321. doi:10.1111/1471-6402.t01-2-00070
- Mazzocchi, F. (2006). Western science and traditional knowledge. *EMBO reports*, 7, 463–466. doi:10.1038/sj.embor.7400693

- McAllister, M. (2013). Resilience: A personal attribute, social process and key professional resource for the enhancement of the nursing role. *Professioni Infermieristiche*, 66(1), 55–62. doi:10.7429/pi.2013.661055
- Meiring, P. (Ed.). (1996). *A world of religions: A South African perspective*. Pretoria, South Africa: Kagiso.
- Mero-Jaffe, I. (2011). 'Is that what I said?' Interview transcript approval by participants: An aspect of ethics in qualitative research. *International Journal of Qualitative Methods*, 10(3), 231–247. doi:10.1177/160940691101000304
- Mhaka, E. (2014). Rituals and taboos related to death as repositories of traditional African philosophical ideas: Evidence from the Karanga of Zimbabwe. *Academic Research International*, 5(4), 371–385. Retrieved from [http://www.savap.org.pk/journals/ARInt./Vol.5\(4\)/2014\(5.4-38\).pdf](http://www.savap.org.pk/journals/ARInt./Vol.5(4)/2014(5.4-38).pdf)
- Miller, T., Birch, M., Mauthner, M., & Jessop, J. (Eds.). (2012). *Ethics in qualitative research* (2nd ed.). London, England: Sage.
- Mokgobo, M. S. (2015). *Educational leadership and sustainable learner academic performance at schools in the Lejweleputswa education district* (Master's thesis, Central University of Technology, Welkom, South Africa). Retrieved from <http://ir.cut.ac.za/bitstream/handle/11462/1165/Mokgobo%2c%20Mosweu%20Sam.pdf?sequence=1&isAllowed=y>
- Morgan, B., & Sklar, R. H. (2012). Sampling and research paradigms. In J. G. Maree. (Ed.), *Complete your thesis or dissertation successfully: Practical guidelines* (pp. 69–80). Cape Town, South Africa: Juta.
- Mulhall, A. (2003). In the field: Notes on observation in qualitative research. *Journal of Advanced Nursing*, 41, 306–313. doi:10.1046/j.1365-2648.2003.02514.x
- Munt, S. R. (2012). Journeys of resilience: The emotional geographies of refugee women. *Gender, Place and Culture*, 19, 555–577. doi:10.1080/0966369X.2011.610098
- Murphey, D. A. (1992). Constructing the child: Relations between parents' beliefs and child outcomes. *Developmental Review*, 12, 199–232. doi:10.1016/0273-2297(92)90009-Q
- Nadeau, J. W. (2001). *Family construction of meaning*. In R. A. Neimeyer (Ed.), *Meaning reconstruction and the experience of loss* (pp. 95–111). Washington, DC: American Psychological Association.

- Naidoo, R. (2011). Rethinking development: Higher education and the new imperialism. In R. King, S. Marginson, & R. Naidoo (Eds.), *Handbook on globalization and higher education* (pp. 40–58). Cheltenham, England: Edward Elgar.
- Neal, J. W., & Neal, Z. P. (2013). Nested or networked: Future directions for ecological systems theory. *Social Development, 22*, 722–737. doi:10.1111/sode.12018
- Neimeyer, R. A. (Ed.). (2012). *Techniques of grief therapy: Creative practices for counseling the bereaved*. New York, NY: Routledge.
- Nescolarde-Selva, J. A., & Usó-Doménech, J. L. (2013). Topological structures of complex belief systems. *Complexity, 19*(1), 46–62. doi:10.1002/cplx.21455
- Ngomane, S., & Mulaudzi, F. M. (2012). Indigenous beliefs and practices that influence the delayed attendance of antenatal clinics by women in the Bohlabelo District in Limpopo, South Africa. *Midwifery, 28*(1), 30–38. doi:10.1016/j.midw.2010.11.002
- Ngwenya, C. (2015). *Female poverty in Diepsloot in South Africa* (Master's dissertation, University of South Africa, Pretoria, South Africa). Retrieved from http://uir.unisa.ac.za/bitstream/handle/10500/19176/dissertation_ngwenya_c.pdf?sequence=1&isAllowed=y
- Nienaber, L. (2017). *Perceptions of risk and resilience of girl youths during an equine-assisted intervention* (Master's dissertation, University of Pretoria, Pretoria, South Africa). Retrieved from https://repository.up.ac.za/bitstream/handle/2263/62896/Nienaber_Perceptions_2017.pdf?sequence=1&isAllowed=y
- Ní Raghallaigh, M., & Gilligan, R. (2010). Active survival in the lives of unaccompanied minors: Coping strategies, resilience, and the relevance of religion. *Child and Family Social Work, 15*, 226–237. doi:10.1111/j.1365-2206.2009.00663.x
- Palmer, M., Larkin, M., De Visser, R., & Fadden, G. (2010). Developing an interpretative phenomenological approach to focus group data. *Qualitative Research in Psychology, 7*(2), 99–121. doi:10.1080/14780880802513194
- Pargament, K. I. (1997). *The psychology of religion and coping: Theory, research, practice*. New York, NY: The Guilford Press.

- Pargament, K. I. (2011). *Spiritually integrated psychotherapy: Understanding and addressing the sacred*. New York, NY: The Guilford Press.
- Pargament, K. I., & Cummings, J. (2010). Anchored by faith: Religion as a resilience factor. In J. W. Reich, A. Zautra, & J. S. Hall (Eds.), *Handbook of adult resilience* (pp. 193–210). New York, NY: The Guilford Press.
- Park, C. L. (2010). Making sense of the meaning literature: An integrative review of meaning making and its effects on adjustment to stressful life events. *Psychological Bulletin*, *136*, 257–301.
- Parrinder, G. (2014). *West African religion: A study of the beliefs and practices of Akan, Ewe, Yoruba, Ibo, and kindred peoples*. Eugene, OR: Wipf and Stock.
- Patterson, J. M. (2002). Integrating family resilience and family stress theory. *Journal of Marriage and Family*, *64*, 349–360. doi:10.1111/j.1741-3737.2002.00349.x
- Patterson, J. M., & Garwick, A. W. (1998). *Theoretical linkages: Family meanings and sense of coherence*. In H. McCubbin, E. A. Thompson, A. I. Thompson, & J. E. Fromer (Eds.), *Stress, coping, and health in families: Sense of coherence and resiliency* (pp. 71–90). Thousand Oaks, CA: Sage.
- Peer, J. W., & Hillman, S. B. (2014). Stress and resilience for parents of children with intellectual and developmental disabilities: A review of key factors and recommendations for practitioners. *Journal of Policy and Practice in Intellectual Disabilities*, *11*(2), 92–98. doi:10.1111/jppi.12072
- Petty, A. R. (2016). Religion, conscience, and belief in the European Court of Human Rights. *George Washington International Law Review*, *48*, 807–851. Retrieved from https://www.gwilr.org/wordpress/wp-content/uploads/2017/02/ILR-Vol-48.4_Aaron-Petty.pdf
- Petty, N. J., Thomson, O. P., & Stew, G. (2012). Ready for a paradigm shift? Part 2: Introducing qualitative research methodologies and methods. *Manual Therapy*, *17*, 378–384. doi:10.1016/j.math.2012.03.004
- Platt, L. F., & Skowron, E. A. (2013). The family genogram interview: Reliability and validity of a new interview protocol. *The Family Journal*, *21*(1), 35–45. doi:10.1177/1066480712456817
- Plumb, J. C. (2011). *The impact of social support and family resilience on parental stress in families with a child diagnosed with an autism spectrum disorder* (Doctoral dissertation, University of Pennsylvania). Retrieved from

https://repository.upenn.edu/cgi/viewcontent.cgi?article=1015&context=edissertations_sp2

- Poot, F., Antoine, E., Gravelier, M., Hirtt, J., Alfani, S., Forchetti, G., ... Sampogna, F. (2011). A case-control study on family dysfunction in patients with alopecia areata, psoriasis and atopic dermatitis. *Acta Dermato-Venereologica*, *91*, 415–421. doi:10.2340/00015555-1074
- Prosser, J., & Loxley, A. (2008). *Introducing visual methods*. Discussion Paper. NCRM. (Unpublished). Retrieved from <http://eprints.ncrm.ac.uk/420/1/MethodsReviewPaperNCRM-010.pdf>
- Raftopoulos, M., & Bates, G. (2011). 'It's that knowing that you are not alone': The role of spirituality in adolescent resilience. *International Journal of Children's Spirituality*, *16*, 151–167. doi:10.1080/1364436X.2011.580729
- Rager, K. B. (2005). Self-care and the qualitative researcher: When collecting data can break your heart. *Educational Researcher*, *34*(4), 23–27. doi:10.3102/0013189X034004023
- Ratele, K. (2006). Ruling masculinity and sexuality. *Feminist Africa*, *6*(6), 48–64.
- Reis, L. A., & Menezes, T. M. (2017). Religiosity and spirituality as resilience strategies among long-living older adults in their daily lives. *Revista Brasileira de Enfermagem*, *70*, 761–766. doi:10.1590/0034-7167-2016-0630
- Rubin, K. H., & Chung, O. B. (Eds.). (2006). *Parenting beliefs, behaviors, and parent-child relations: A cross-cultural perspective*. New York, NY: Psychology Press.
- Rutter, M. (1999). Resilience concepts and findings: Implications for family therapy. *Journal of Family Therapy*, *21*, 119–144. doi:10.1111/1467-6427.00108
- Rutter, M. (2001). Psychosocial adversity: Risk, resilience and recovery. In J. M. Richman & M. W. Fraser (Eds.), *The context of youth violence: Resilience, risk, and protection* (pp. 13–41). Westport, CT: Praeger.
- Rutter, M. (2012). Resilience as a dynamic concept. *Development and Psychopathology*, *24*, 335–344. doi:10.1017/S0954579412000028
- Ryan, C. E., Epstein, N. B., Keitner, G. I., Miller, I. W., & Bishop, D. S. (2005). *Evaluating and treating families: The McMaster approach*. New York, NY: Routledge.

- Ryff, C. D. (2014). Self-realisation and meaning making in the face of adversity: A eudaimonic approach to human resilience. *Journal of Psychology in Africa*, 24(1), 1–12.
- Salami, S. O. (2010). Moderating effects of resilience, self-esteem and social support on adolescents' reactions to violence. *Asian Social Science*, 6(12), 101–110. doi:10.5539/ass.v6n12p101
- Sapienza, J. K., & Masten, A. S. (2011). Understanding and promoting resilience in children and youth. *Current Opinion in Psychiatry*, 24, 267–273. doi:10.1097/YCO.0b013e32834776a8
- Schatz, E., & Gilbert, L. (2011). "My heart is very painful": Physical, mental and social wellbeing of older women at the times of HIV/AIDS in rural South Africa. *Journal of Aging Studies*, 26(1), 16–25. doi:10.1016/j.jaging.2011.05.003
- Scotland, J. (2012). Exploring the philosophical underpinnings of research: Relating ontology and epistemology to the methodology and methods of the scientific, interpretive, and critical research paradigms. *English Language Teaching*, 5(9), 9–16. doi:10.5539/elt.v5n9p9
- Seabi, J. (2012). Research designs and data collection techniques. In J. G. Maree. (Ed.), *Complete your thesis or dissertation successfully: Practical guidelines* (pp. 81–95). Cape Town, South Africa: Juta.
- Seale, C. (2012). *Researching society and culture* (3rd ed.). London, England: Sage.
- Segrin, C., & Passalacqua, S. A. (2010). Functions of loneliness, social support, health behaviors, and stress in association with poor health. *Health Communication*, 25, 312–322. doi:10.1080/10410231003773334
- Sektnan, M., McClelland, M. M., Acock, A., & Morrison, F. J. (2010). Relations between early family risk, children's behavioral regulation, and academic achievement. *Early Childhood Research Quarterly*, 25, 464–479. doi:10.1016/j.ecresq.2010.02.005
- Setsiba, T. H. S. (2012). *Mourning rituals and practices in contemporary South African townships: A phenomenological study* (Doctoral dissertation, University of Zululand, Richards Bay, South Africa). Retrieved from <http://uzspace.uzulu.ac.za/bitstream/handle/10530/1055/MOURNING%20RITUALS%20AND%20PRACTICES%20IN%20CONTEMPORARY%20SOUTH%20AFRICAN%20TOWNSHIPS.pdf?sequence=1>

- Shastri, P. C. (2013). Resilience: Building immunity in psychiatry. *Indian Journal of Psychiatry*, 55, 224–234. doi:10.4103/0019-5545.117134
- Shermer, M. (2011). The believing brain: Why science is the only way out of the trap of belief-dependent realism. *Scientific American*, 305, 85. Retrieved from <http://www.ask-force.org/web/Ethics/Shermer-Believing-Brain-SA-2011.pdf>
- Sigel, I. E., McGillicuddy-DeLisi, A. V., & Goodnow, J. J. (Eds.). (2014). *Parental belief systems: The psychological consequences for children* (2nd ed.). New York, NY: Psychology Press.
- Silverman, D. (Ed.). (2016). *Qualitative research* (4th ed.). London, England: Sage.
- Simon, J. B., Murphy, J. J., & Smith, S. M. (2005). Understanding and fostering family resilience. *Family Journal*, 13, 427–436. doi:10.1177/1066480705278724
- Skinner, E. A., & Pitzer, J. R. (2012). Developmental dynamics of student engagement, coping, and everyday resilience. In S. L. Christenson, A. L. Reschly, & C. Wylie (Eds.), *Handbook of research on student engagement* (pp. 21–44). New York, NY: Springer. doi:10.1007/978-1-4614-2018-7
- Skinner, N. (2012). *Ecological systems theory*.
- Smith, J. A., & Osborn, M. (2008). Interpretative phenomenological analysis. In J. A. Smith (Ed.), *Qualitative psychology: A practical guide to research methods* (2nd ed., pp. 53–80). London, England: Sage.
- South African Police Service. (2017). *Crime Statistics 2016/2017*. Retrieved from <https://www.saps.gov.za/services/crimestats.php>
- Spaull, N. (2013). Poverty and privilege: Primary school inequality in South Africa. *International Journal of Educational Development*, 33, 436–447. doi:10.1016/j.ijedudev.2012.09.009
- Spencer-Oatey, H. (2012). *What is culture: A compilation of quotations*. Coventry, England: GlobalPAD/University of Warwick.
- Statistics South Africa (2013). *Men, women and children: Findings of the Living Conditions Survey 2008/2009* (Report No. 03-10-02). Pretoria, South Africa: Author. Retrieved from <http://www.statssa.gov.za/publications/Report-03-10-02/Report-03-10-022009.pdf>
- Steger, M. F. (2012). Experiencing meaning in life: Optimal functioning at the nexus of wellbeing, psychopathology, and spirituality. In P. T. P. Wong (Ed.), *The*

human quest for meaning: Theories, research, and applications (2nd ed., pp. 165–184). New York, NY: Routledge.

Stewart, D. E., & Yuen, T. (2011). A systematic review of resilience in the physically ill. *Psychosomatics*, *52*, 199–209. doi:10.1016/j.psych.2011.01.036

Stokols, D., Lejano, R. P., & Hipp, J. (2013). Enhancing the resilience of human environment systems: A social-ecological perspective. *Ecology and Society*, *18*(1), 7. doi:10.5751/ES-05301-180107

St. Pierre, E. A., & Jackson, A. Y. (2014). Qualitative data analysis after coding. *Qualitative Inquiry*, *20*, 715–719. doi:10.1177/1077800414532435

Switzer, L. A. (2016). *What are the benefits of EAGALA and PATH Intl. for TR?* Poster session presented at the University Presentation Showcase Event. 34. Retrieved from <https://encompass.eku.edu/swps/2016/undergraduate/34/>

Taringa, N. (2006). How environmental is African traditional religion? *Exchange*, *35*, 191–214. doi:10.1163/157254306776525672

Tavernier, R., & Willoughby, T. (2012). Adolescent turning points: The association between meaning-making and psychological wellbeing. *Developmental Psychology*, *48*, 1058–1068.

Theron, L., Cameron, C. A., Didkowsky, N., Lau, C., Liebenberg, L., & Ungar, M. (2011). A “day in the lives” of four resilient youths: Cultural roots of resilience. *Youth and Society*, *43*, 799–818. doi:10.1177/0044118X11402853

Theron, L. C. (2012). Resilience research with South African youth: Caveats and ethical complexities. *South African Journal of Psychology*, *42*, 333–345.

Theron, L. C. (2013). Black students’ recollections of pathways to resilience: Lessons for school psychologists. *School Psychology International*, *34*, 527–539. doi:10.1177/0143034312472762

Theron, L. C., & Theron, A. (2013). Positive adjustment to poverty: How family communities encourage resilience in traditional African contexts. *Culture and Psychology*, *19*, 391–413. doi:10.1177/1354067X13489318

Thobejane, T. D. (2015). Factors contributing to teenage pregnancy in South Africa: The case of Matjijileng village. *Journal of Sociology and Social Anthropology*, *6*, 273–277. doi:10.1080/09766634.2015.11885667

- Thoits, P. A. (2011). Mechanisms linking social ties and support to physical and mental health. *Journal of Health and Social Behaviour*, 52, 145–161. doi:10.1177/0022146510395592
- Thomas, D. R. (2006). A general inductive approach for analysing qualitative evaluation data. *American Journal of Evaluation*, 27, 237–246. doi:10.1177/1098214005283748
- Thornton, T. F., & Scheer, A. M. (2012). Collaborative engagement of local and traditional knowledge and science in marine environments: A review. *Ecology and Society*, 17(3), 8. doi:10.5751/ES-04714-170308
- Tindle, H. (2013). *Up: How positive outlook can transform our health and aging*. New York, NY: Hudson Street Press.
- Trotter, K. S. (2012). *Harnessing the power of equine assisted counseling: Adding animal assisted therapy to your practice*. New York, NY: Routledge.
- Tubey, R. J., Rotich, J. K., & Bengat, J. K. (2015). Research paradigms: Theory and practice. *Research on Humanities and Social Sciences*, 5(5), 224–228. Retrieved from <http://iiste.org/Journals/index.php/RHSS/article/view/21155/21434>
- Tuli, F. (2010). The basis of distinction between qualitative and quantitative research in social science: Reflection on ontological, epistemological and methodological perspectives. *Ethiopian Journal of Education and Sciences*, 6(1), 97–108. doi:10.4314/ejesc.v6i1.65384
- Ungar, M. (2012). Social ecologies and their contribution to resilience. In M. Ungar (Ed.), *The social ecology of resilience: A handbook of theory and practice* (pp. 13–31). New York, NY: Springer. doi:10.1007/978-1-4614-0586-3
- Ungar, M. (2013). Resilience, trauma, context, and culture. *Trauma, Violence, and Abuse*, 14, 255–266. doi:10.1177/1524838013487805
- Uso-Domenech, J. L., & Nescolarde-Selva, J. A. (2012). *Mathematic and semiotic theory of ideological systems: A systemic vision of the beliefs*. Saarbrücken, Germany: Lap Lambert.
- Van der Waal, W. A. (2010). *Evaluation of the effectiveness of the Resilient Educators support programme among HIV and AIDS affected educators in Gauteng* (Master's dissertation, University of Pretoria, Pretoria, South Africa). Retrieved from <https://repository.up.ac.za/handle/2263/28256>

- Van Maanen, J. (2006). Ethnography then and now. *Qualitative Research in Organizations and Management: An International Journal*, 1(1), 13–21. doi:10.1108/17465640610666615
- Vartanian, T. P. (2011). *Secondary data analysis*. New York, NY: Oxford University Press.
- Vearey, J. (2013). Migration, urban health and inequality in Johannesburg. In T. Bastia (Ed.), *Migration and inequality* (pp. 121–144). Abingdon, England: Routledge.
- Vellem, V. S. (2014). Life-giving assets at a Johannesburg informal settlement: Black faith and the false gods of multiculturalism in the twenty-first century. In R. D. Smith, W. Ackah, & A. G. Reddie (Eds.), *Churches, blackness, and contested multiculturalism* (pp. 207–215). New York, NY: Palgrave Macmillan.
- Walker, J. L. (2012). The use of saturation in qualitative research. *Canadian Journal of Cardiovascular Nursing*, 22(2), 37–41.
- Walsh, F. (2003). Family resilience: Strengths forged through adversity. In F. Walsh (Ed.), *Normal family processes* (3rd ed., 399–423). New York, NY: The Guilford Press.
- Walsh, F. (2007). Traumatic loss and major disasters: Strengthening family and community resilience. *Family Process*, 46, 207–227. doi:10.1111/j.1545-5300.2007.00205.x
- Walsh, F. (2011). Family resilience: A collaborative approach in response to stressful life challenges. In S. M. Southwick, B. T. Litz, D. Charney, & M. J. Friedman (Eds.), *Resilience and mental health: Challenges across the lifespan* (pp. 149–161). Cambridge, England: Cambridge University Press.
- Walsh, F. (Ed.). (2012). *Normal family processes: Growing diversity and complexity* (4th ed.). New York, NY: The Guilford Press.
- Walsh, F. (2015). *Strengthening family resilience* (3rd ed.). New York, NY: The Guilford Press.
- Walthery, P., & Plewis, I. (2015). *Following families over time and across studies: Towards a generic definition of family composition for use in longitudinal analysis of children's development*. London, England: CLOSER. Retrieved from <https://www.closer.ac.uk/wp-content/uploads/Following-families-over-time-and-across-studies.pdf>

- Weber, S. R., & Pargament, K. I. (2014). The role of religion and spirituality in mental health. *Current Opinion in Psychiatry*, 27(5), 358–363. doi:10.1097/YCO.0000000000000080
- Werner, E. E. (2013). What can we learn about resilience from large-scale longitudinal studies? In S. Goldstein & R. B. Brooks (Eds.), *Handbook of resilience in children* (2nd ed., pp. 87–102). Dordrecht, The Netherlands: Springer.
- Wilks, S. E., & Spivey, C. A. (2010). Resilience in undergraduate social work students: Social support and adjustment to academic stress. *Social Work Education*, 29(3), 276–288. doi:10.1080/02615470902912243
- Williams, T., & Hardison, P. (2013). Culture, law, risk and governance: Contexts of traditional knowledge in climate change adaptation. *Climatic Change*, 120, 531–544. doi:10.1007/s10584-013-0850-0
- Willoughby, B. J., Hall, S. S., & Luczak, H. P. (2015). Marital paradigms: A conceptual framework for marital attitudes, values, and beliefs. *Journal of Family Issues*, 36, 188–211. doi:10.1177/0192513X13487677
- Wong, P. T. P. (Ed.). (2012). *The human quest for meaning: Theories, research, and applications* (2nd ed.). New York, NY: Routledge.
- Worthington, E. L., Hook, J. N., Davis, D. E., & McDaniel, M. A. (2011). Religion and spirituality. *Journal of Clinical Psychology*, 67(2), 204–214. doi:10.1002/jclp.20760
- Wright, L. M., & Bell, J. M. (2009). *Beliefs and illness: A model for healing*. Calgary, Canada: Fourth Floor Press.
- Wu, L. Y. (2012). Parental beliefs and partnerships in provision of educational services for young children. *Review of Global Management and Service Science*, 2, 15–26. Retrieved from <http://ir.ncue.edu.tw/ir/bitstream/987654321/14480/1/2060200210003.pdf>
- Yin, R. (2012). *Applications of case study research* (3rd ed.). Thousand Oaks, CA: Sage.
- Yoshikawa, H., Aber, J. L., & Beardslee, W. R. (2012). The effects of poverty on the mental, emotional, and behavioral health of children and youth: Implications for prevention. *American Psychologist*, 67, 272–284. doi:10.1037/a0028015

APPENDICES

Appendix A:
Assessment Tool Used

Appendix B:
Template Used for Analysis

Appendix C:
Transcription of Arena Discussions

Appendix D:
Transcription of Group Discussion

Appendix E:
Identification of Codes in Client Documents

Appendix F:
Identification and Summary of Themes

Appendix G:
Overview of the Positive Parenting Workshops

Appendix H:
Positive Parent Community-Based Equine Assisted
Intervention

Appendix I:
Information Letter for the Positive Parenting Workshops

Appendix J:
Positive Parenting Workshop Activity – A Box of
Problems

Appendix K:
Participants' Responses from Various Documents

Appendix L:
Code List

Appendix A: Assessment Tool Used

Assessment tool used								
	Collage	McMaster questionnaire	Process and observation notes	Family Genogram	Social Ecology Map diagram	Family drawings & Interview	Asset mapping Exercise	Clinical Report
Family								✓
S01	✓	✓	✓	✓		✓	✓	✓
S02		✓	✓					✓
S03	✓	✓	✓					✓
S04		✓	✓					✓
S05		✓	✓		✓	✓	✓	✓
S06		✓	✓	✓		✓		✓
S07	✓	✓	✓	✓		✓		✓
S08		✓	✓	✓		✓		✓
S09		✓	✓					✓
S10		✓	✓				✓	✓
S11		✓	✓					✓
S12	✓	✓	✓		✓			✓
S13		✓	✓					✓
S14	✓	✓	✓	✓		✓		✓

Appendix B: Template Used for Analysis

map 04, 03

Family Demographics	Risk factors	Protective factors (Beliefs)
① LM 1 27, male Unemployed	* lack of safety in the community	* school * church * Community Centre * Equality * Tolerant * Hope * Strength * Sparing ideas * Self talk * prayer * Social Interactions * Ubuntu * Collectivism * Faith
② LP Mother (50yrs) has children Zimbabwe Married husband + last born Unemployed husband part time Education till Grade 6	* lack of safety * Xenophobic attack fears * Gangs * Killing in parks, bridges, taxi ranks * High rates of burglary * lack of financial service	* Respect * Acceptance of stressful situations * Positive outlook * Attending church * Praying to God for strength.

	Family	Risk	Protective
3	MM Mother #2 Unemployed son 5 yrs children 5 Married	* family conflicts * financial difficulty + dangerous living conditions / Environment	* Cultural beliefs * faith in God * Community + Positive outlook * Optimistic + Working together
4	SB Mother 3 children divorced temporarily Employed	* financial Challenges + Crime rates	* Spirituality * Church support * Sharing problems * praying * faith
5	Mops mother children Unemployed * Mother + toddler + dropped out of school	* financial strain * violence * Gangs * lack of basic services * Unemployment	* Neighbors supporting family to address issues * prayer * Church attendance * Ubuntu mind set
6	TR Male (30) + Vocational Educator 1 child Single	* Unemployment + Drugs * Crime rate + financial difficulty + adverse living conditions + Gangs	* God * Prayer * Church

	Family	Risk Factors	Protective factors
7	K.S 27 Female Married = Grade 4 Children 1 3yrs (male)	* Crime * Unstable Shacks * Power Cuts * Unemployment	* attending church regularly * Spirituality * Making & finding meaning & purpose in adversity * Social support.
8	S.M. (male) 36 Unemployed -1 sibling	* Concerns about Security * High unemployment rate * financial challenges	* make meaning * Optimistic * Spirituality * Trust & faith in God * Social support
9	H.S (9th) Male Unemployed 3 children Grade 3 level education	* lack of financial security * Unemployment * lack of housing	* Community support * faith * Meaning * Positive outlook * Spirituality
10	M.M (49) female self employed	* Crime * Drugs * Unemployment	* Prayer * christian belief * Support from church. * Positive view on life
11	M.W 40 female Unemployed 2 daughters	* abuse * financial struggles * Crime * Drugs	* positive outlook * attending church.

12 SB
Mother
52
Single
2 children
* finances
* Support from community
prayer

13 PN 35
female
2 kids
Unemployed
dropped out of school
7
domestic worker
* Crime
* Housing
* Social Support
* faith
* Church

14 SK (39)
O. 8
Widow
Unemployed
* financial struggle
* unemployment
* Crime
* Violence
* strong belief in God
* spirituality
Transcendence.

Identified Risks

- * Lack of Safety
- * Gangs
- * High Crime-rates
- * High unemployment rates
- * Lack of proper housing
- * Lack of basic services
- * Financial challenges
- * Drugs
- * High rate of violent activities

Protective factors

- * Faith in God
- * Positive outlook
- * Social Support
- * Prayer
- * Attending Church
- * Optimistic
- * Finding meaning
- * Christianity
- * Strong belief in God

Summary

Risk Factors

- ① Crime
- ② Unemployment
- ③ Poor Sanitation
- ④ Drugs
- ⑤ poor housing

Protective factor

- * church
- * Community Cen
- * Friends (close relat

Emotions aroused

- ① fear
- ② Uncertainty
- ③ lack of Security
- ④ Stress

what helps them

- * prayer
- * talking
- * attending church
- * hope
- * faith in God
- * Acceptance
- * affiliation with church
- * Spirituality

Appendix C:
Transcription of Arena Discussions

01 AUGUST 2016

IN THE HOUSE ARENA

MVI 1361

Client (Question): (Demonstration) My question is about this boundary. I know that houses they like jumping. What keeps these houses inside because if they want to go outside they can just go because they like jumping?

What keeps these houses inside because if they want to go outside they can just go? I want to know about the fence (pointing to the white fence) because if you can see the height of the white fence

Client 2: Which one, this one (pointing to the white fence) explained that they were trained so that they do not go and jump?

Pumlani: Did you all hear, right? OK. He has a question that houses are tall and the fence is short what makes them not to jump over the fence?

Client 3: into eyenza lamahashi angatsibi kungokuba afundisiwe hayi ukuthi ayahluleka kodwa afundisie hayi ukuthi uma elapha ukujumpa awakwazi okany ayohluleka kodwa afundisiwe.

Pumlani: They were just taught not to do something wrong like jumping so otherwise they would jump if they were like others. They were taught not to do it.

MVI 1362

Client: (It was not audible) so that the only way we can live better.

Client: (Translating) it means that together we can make life easier. So we are supposed to be together and share views.

Pumlani: Kutsho ukuthi ngokukokwakhe sifanele sihlalisane kahle sikwazi ukuthi oku kukhona sikwenze ngohlanganyelana (to share) oko sinako sikwenze ngoku silekelelane ukuze sikwazi uqhubeleleka phambili sonke kungabikho osalela emva sihlale ngoku thula ngothando nge peace silekelelane. Endingakwazi ukwenza mina omnye andilekelelele.

Translation: This means that as people we must learn to live in harmony and share together what we have as people, so that we move on together supporting each other. When one person does not have something, we can help one another so that we live in peace, love and looking after one another; so that what I cannot do one person may assist me.

Shereno: While we talking I hear all talking about (cut)

MVI 1363

Sheron

Client: I think there is power in agreement. Yha, if you can agree in one thing and can hold hand one another there is power in agreement. if you can be in one mind with the common mind to achieve something. So I think these horses have agreed and they have listened if they have been told something don't do this and they don't go the opposite of it. The power of agreement and they agreed to one another.

Sheron: When you talk about agreement, is it something like commitment?

Client: Yha, something like commitment.

Sheron: In your community or your family how does it look like to have such a commitment?

Client: I think we have different views of things. If someone speak about one thing another one opposes it. We do not come together in and agree in one thing and I think that's a problem.

Sheron: Ok.

Phumlani: (translated the discussion in Zulu) Uthi kunamandla ekuvumelaneni. Kunokuvumelana okukhona apha kule arena ukuthi amahashi azohlala la anenjongo eyodwa anokucabanga kunye, ayavu ngendlela azohlala ngayo la ngaphakathi ukuze ngubikho odontsela lenomnye adontyele le ngenxa yesosizathui ke ahleli ngokuvumelana ukuthi nalowo akwazi ngale sinye isikhathi ukuba enze oko akwazi ukukwenza kungamxaki, kungamphathi kakubi omnye. Anamandla ekuvumelaneni nokwenzeni into eyodwa benenjongo eyodwa, same goal, together they can share bayakwazi ukuxoxa bebobabini ukuthi senza loku asikwenzi loku, ingako bekwazi uhlala ndawonye abanye bengashiyi arena babaleke ngenxa ye ndawo. I think koloko okubalulekile.

Sheron: It sounds like on the other side there is agreement and shared goals but on the other side it can be something uncomfortable. So what can be those things that can be uncomfortable that could be uncomfortable that can make you go over the fence to the other places?

Pumlani: U Siphosho utshilo ukuthi kungenzeka ukuthi kubekho ukungahlalisani kahle. Kokuphi okngenza amahashi angahlalisani kahle agcine ephumela ngaphandle kwe fence?

MVI 1364

Client: kungenzeka ukuba kungabikho ukunakekela kahle may be kukhona nto ezingayitholi mhlambi ngitsho nokudla or something. Kuyafana nomntu ngekhe uhlale endaweni engakunakekeli ngoba lento ingakwenza ukuba ucapuke n gibe angry acinge ukuba uba unga jumpa uzoba right ngoba langikhona andiphiliswa kahle.

Translation: (Client) things that can make one jump over the fence could be the lack of food or may be lack of peace thinking that by going over the fence will get something better.

Pumlani: Most of the things he mentioned are about the physical needs that can force someone to move from the arena, hunger and basic needs, not sharing things together may be and no agreement in things they do together, more particularly physical or basic needs that can force one to go out of the arena.

MVI 1420

It was said that

Client: It was very nice. Tea time and lunch very nice and everything was very nice. It was my first time today. Thank you.

MVI 1422

Lindelwa: Thina sixe ukuzomamela kuni ukuze kwixesha elizayo singeza namacebiso ukuthi unga face kanjani into as an individual. Yintoni thina esinoyenza size students to bring information ngoba abanye abayazi ukuba baqalephi uku funa ijobs. Thina size ukuba simamele ukuba.

Translation: We came not to give answers but to give an ear. In our next meeting we will them engage further having better understanding about you and life in Diepsloot.

Salome: Can we open up the discussion?

Client: (she was giving clarity) When you were translating you were translating wrong. What she wanted to know was what was the workshop all about and why are we here? She wanted her facilitator to explain to her but she did not explain everything to her that is why she is asking the question.

Salome: So maybe let's ask from others why do they think they are here. So let's open and see if we can get to some common understanding of what we are doing here today. May be on your side, for you why you are here?

Client: For me I came here because there are somethings that are troubling me that I cannot tell any other people. So I came to gain knowledge, to grasp some knowledge from other people and to share some knowledge with others. I came to learn about myself. From the horses I learned a lot. Horses are living in harmony, not fighting but living in peace

Another client: I want to know the name of the workshop?

Salome: The name of the workshop is the positive parenting workshop.

Salome: Explained the purpose of the workshop.

MVI 1422

Student were giving their view of what they have learned.

Appendix D: Transcription of Group Discussion

20 July 2016

Transcription for Video number 1421 Sepedi to English: Translation in blue.

The question was what is this workshop about. Prof. Human-Vogel asked what do you think you are doing when you work in collaboration with us?

Client: The answer is not satisfactory.

Client: A ke kwišiši, a ke tlhaloganye gobaneng ge o mpotsisa question.
I don't understand, I do not understand why I am being questioned.

Client: Akere motlhomong re discussa ka difacilitators tsa rena ne di re botsisa dipotsiso mo go rona.
Say maybe we are discussing with our facilitators who were asking us questions.

Client: Akere tshwanetse ga ke mmotsisa potsiso a mphe ... ke gore ge ne ke tlhakana le situation ya mofuta o, ke tshwanetse gore ke e fenye ka gore, wa e kwišiša?
It was supposed to be like this; when I ask the facilitator a question about situations I come across, he/she should tell me how can I overcome such a situation, do you understand it?

Client: Mara ka mokgwa o facilitator e ne e facilitator ka gona, ke be ke mmotsa tsa ka, a sa mpotse gore ga ke tlhakana le situation e e riling ke tshwanetse gore ke diye eng.
But the manner in which the facilitator was facilitating, I was telling him/her my answers to the questions. The facilitator did not tell me what to do when I am facing a certain situation or challenge.

Leah: She wants the facilitator to give the answer to questions she has.

Client: Ehee! Exactly
Yes. Exactly

Prof. Human-Vogel: So it is very interesting the question of where solutions lie? Do solutions lie with other people who give us solutions or do solutions lie with ourselves and how we want to think about what we want to do ourselves? So it seems like there are different expectations about who must solve a problem. Let us hear from everybody where do we think solutions lie?

Phumlani:

Client: Ooh! Go tšho gore lena be le tlile ka diquestions, ga se le tle ka dianswer, bile ga se letle ka disolution,
So it means you came with questions to ask us and not answers, also not solutions

Sharon: It's interesting about questions, answers and solutions. Ok! These are three different things. And then questions, answers and solutions. How or in what way can

these three different things bring us here? What are the things that brings us here, around questions, solutions and answers.

Client: ooh! Ke tše le tlileng ka tsona?
Oh! Is this what brings you here?

Client: Rona re batla go itse gore ntho e, yo fella e le eng ko bofelong ba yona.
We want to know how this thing will end up at the end.

Client: Le re botšisitse dipotso, mara lena ga le re fe dikarabo. Motho wa tsamaya ga a tloga mo o ipotsisagore why ne aile kwa.
You asked us questions, but you are not providing answers to ours. When a person leaves here, he/she will ask themselves why did they attend?

Client: Ee!, Yes.
Yes

Client: E tlo fella e le eng?
What is the end of this workshop?

Client: Ee! O tlo diyaang?
Yes. We came to do what?

Le tšwa workshopong mara ke eng? E mabapi le eng?
We are from a workshop, but for what? What was the workshop all about?

Client: Ga re tlhaloganye bobotlhe – Ga re tlhaloganye ka go tshwana
Not all of us do understand. Our level of understanding is not the same/we do not process information in the same manner/way.

Client: E ka nne ya nna myself, mara “myself” Napile di answera tsa myself ke eng?
The workshop may be about myself, but what about myself? Eventually what are the answers about myself?

Client: Wa bona ga le sa fe batho dikarabo next time batho batlo tshaba ga le ba bitsa, batho ba tlo ja fatshe akere,ga le ba fe dikarabo.
You see if you do not give answers to people, next time people would not want to come when you call them, people would run away because you do not want to give them answers.

Lindelwa: This workshop is about self awareness and knowing what you can do best so that the area is strengthened and the assets be used to help people reach their goals in life.

20 July 2016

Transcription for Video number 1421 Sepedi to English.

The question was what is this workshop about. Prof. Human-Vogel asked what do you think you are doing when you work in collaboration with us?

Client: The answer is not satisfactory.

I don't understand, I do not understand why I am being questioned.

Say maybe we are discussing with our facilitators who were asking us questions.

It was supposed to be like this; when I ask the facilitator a question about situations I come across, he/she should tell me how can I overcome such a situation, do you understand it?

But the manner in which the facilitator was facilitating, I was telling him/her my answers to the questions. The facilitator did not tell me what to do when I am facing a certain situation or challenge.

Leah: She wants the facilitator to give the answer to questions she has.

Yes. Exactly.

Prof. Human-Vogel: So it is very interesting the question of where solutions lie? Do solutions lie with other people who give us solutions or do solutions lie with ourselves and how we want to think about what we want to do ourselves? So it seems like there are different expectations about who must solve a problem. Let us hear from everybody where do we think solutions lie?

Phumlani: This workshop is about learning through looking inside ourselves and finding ways of approaching the challenges we might face. We may think that solutions lie elsewhere but solutions are within ourselves. Solutions are at our reach.

So it means you came with questions to ask us and not answers, also not solutions.

Sharon: It's interesting about questions, answers and solutions. Ok! These are three different things. And then questions, answers and solutions. How or in what way can these three different things bring us here? What are the things that brings us here, around questions, solutions and answers?

Oh! Is this what brings you here?

We want to know how this thing will end up at the end.

You asked us questions, but you are not providing answers to ours. When a person leaves here, he/she will ask themselves why did they attend?

Yes.

What is the end of this workshop?

Yes. We came to do what?

We are from a workshop, but for what? What was the workshop all about?

Not all of us do understand. Our level of understanding is not the same/we do not process information in the same manner/way.

The workshop may be about myself, but what about myself? Eventually what are the answers about myself?

You see if you do not give answers to people, next time people would not want to come when you call them, people would run away because you do not want to give them answers.

Lindelwa: This workshop is about self awareness and knowing what you can do best so that the area is strengthened and the assets be used to help people reach their goals in life.

Appendix E: Identification of Codes in Client Documents

Pg 1

Family	Tool Used	collage	McMaster Questionnaire	Notes	Genogram	Mapping exercise	Drawings	Clinical Report
S01		HH HB	PR HH HB TG GC	PF CH FU DZ UE SP				UE HH HB WS PH GA FU GC PR TG SP
S02			PR HB LE	PF CH FU DZ UE SP	LE UE		UE ES PF	HH GC PR
S03		HH HB DI TF	DI TF	PF CH FU DZ UE SP				GH TG TF DI HB UE DI PR TG
S04				PF CH FU DZ UE SP WS GA PH				

Pg 2

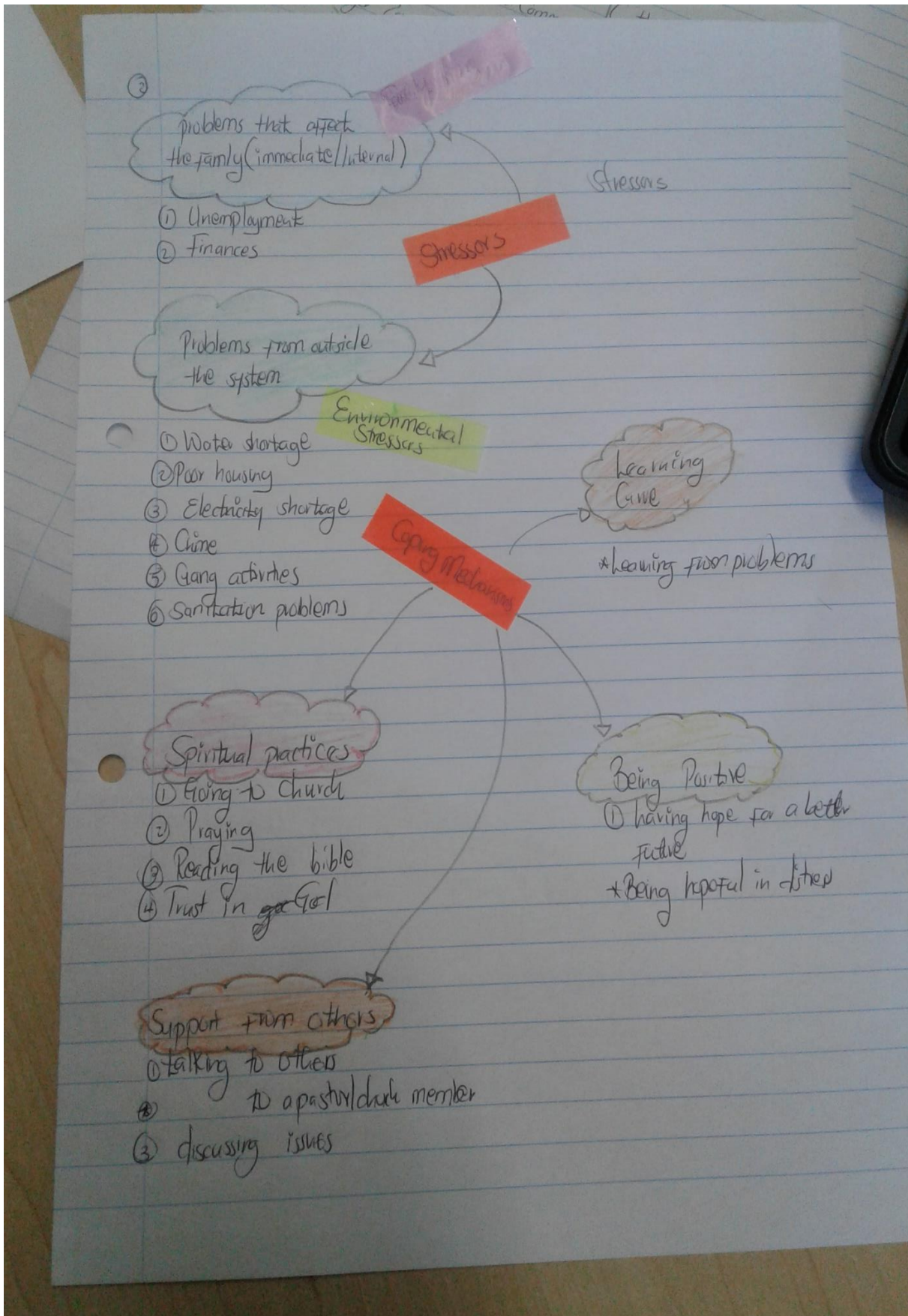
S05					DI TF GC LE HH	PF CH FU DZ UE SP		EU SP DZ SP	DI TF HH	DI TF GC LE HH PF FU SP
S06				DI	PR DI HH TG GC	PF CH FU DZ UE SP			UE PH DZ WS FU	PR UE PH DZ WS FU DI HH TG GC
S07			RB LE DI	LE DI TF	DI LE UE PH PF CH	PF CH FU DZ UE SP				DI LE LE DI UE PH PF CH
S08				UE	UE PF FP DZ WS	PF CH FU DZ UE SP		UE FP WS PR RB LE DI	UE FP WS PR RB LE DI	UE WS LE RB DI DZ
S09					HB DI	PF CH FU			DI PR HB	GA SP DI



S10					DZ UE SP GA						LE DI TPC SP		PR RB TG GC
S11					PF CH FU DZ UE SP	UE PF GA FU SP ES DZ				PR RB TG GC			PR RB TG GC PH GA PF WS PS
S12					PF CH FU DZ UE SP	UE PH GA PF WS PS				DI PR TF TPC TG			DI PR TF TPC TG PF CH FU DZ UE
S13					PF CH FU	UE FP WS				DI TF LE			DI TF LE

S14				DZ UE SP				TG TPC	TG TPC	
	UE CH GA WS		SP WS ES PF DZ	PF CH FU DZ UE SP	UE				UE PR RB HB HH GC	PR RB GC PH TPC

Appendix F: Identification and Summary of Themes



Appendix G:

Overview of the Positive Parenting Workshops

Overview

Emphasis in assessment and intervention must focus on exploration of family functioning using the six dimensions of the Mc-Mastermodel (communication, problem-solving, roles, affective responsiveness, affective involvement, behavior control) as specific operationalisation of key family resilience processes, namely belief systems (communication; making meaning of adversity, transcendence), organisational patterns (roles, behaviour control, affective responsiveness and involvement), and communication/problem-solving (communication, problem-solving).

Guiding questions

1. What is family-life like in Diepsloot?
2. What life challenges do families in Diepsloot experience?
3. What makes it possible for families to resile in Diepsloot?
4. What are parents' future aspirations for their family in Diepsloot?
5. What would a family-supportive environment look like in Diepsloot?

Assessment outcomes

1. Identifying details of the family
2. Brief history (individual development; family life cycle; type of family; context; living arrangements; financial situation; employment, etc).
3. Family context (focus group of all families)
4. Family observation (throughout the day)
5. Family-oriented assessment outcomes

Schedule for the day 14 May 2016

1. Depart from Hatfield (07h30)
2. Registration and informed consent (08h00 - 09h00)
3. Welcome and orientation (09h00 - 09h30)
4. Focus group under the trees - (09h30 - 10h00)
5. Arena activity 1 - with the horses (10h00 - 11h00)
6. Lawn assessment - (family groups) (11h00 - 12h00)
7. Arena activity 2 - with the horses (12h00 - 13h00)
8. Focus group reflection under the trees (13h00 - 13h30)
9. Closing
10. Lunch (14h00 - 14h45)
11. Post workshop - group reflection (14h45 - 15h00)
12. Arrive at UP Hatfield (15h45)

Appendix H: Positive Parent Community-Based Equine Assisted Intervention

Positive Parent Community-based equine assisted intervention 20 August 2016

Conceptual Framework

Emphasis in assessment and intervention focus on exploration of family functioning using the six dimensions of the McMastermodel (communication, problem-solving, roles, affective responsiveness, affective involvement, behavior control) as specific operationalisation of key family resilience processes, namely belief systems (communication; making meaning of adversity, transcendence), organisational patterns (Roles, behavior control, affective responsiveness and involvement), and communication/problem-solving)communication and problem-solving).

Appreciative inquiry using the 4-D approach

Positive Parent workshop 15 May focused on

- Discover (how are things now, what has been successful about how things are)
- Dream (how do we want things to be in the future)

Positive Parent Workshop 20 August will focus on

- Design (shifting from reflection to action; how can we move closer to the dream?)
- Destiny (implementing plans)

Programme planning

Checking in (08h30 - 09h30)

- Meet with your client and find a spot to consult with them
- Use your time to make your file as complete as possible. If you have not yet done so, use the time to
 - inform them of the purpose of the visit
 - if you have a genogram, show it to them, discuss it with them and gain more detail of emotional relationships between people on the genogram, as well as birth dates, ages and names.
 - Ensure you have demographic detail about people's age, their gender, whether they are employed / unemployed, housing; and who they rely on for financial and emotional support
- Ensure you are able to speak informatively about their family and kin connections, especially belief systems (see family resilience framework).
- Especially of interest is gaining an understanding of any wisdom they have gained from others / parents / grandparents / ancestors about what it means to be a good parent / family member

Learning with the horses 1 (09h30 - 10h00)

Facilitators: Sharon and Ruric

Research question: *What skills do families need to support their children to be resilient in the context of chronic stress?*

Objective: *Parents participate in an activity with the horses where they are required to use skills to get the horses to do something and they will be guided to reflect on what they needed to know / do to be able to support one another as a group to achieve a success.*

Your role: Observer and note-taker. EVERYONE takes responsibility for their own notes that will be based on their own observations. One person cannot observe and note everything.

Problem-solving skills (10h15 - 11h30)

Facilitators: Students

Research question: *What skills do families need to support their children to be resilient in the context of chronic stress?*

Objective: (i) *Parents will learn about the importance of solving problems that arise in families or between people in a household effectively, (ii) parent will learn that some problems are within one's circle of influence and some are outside, (iii) parents will learn the difference between instrumental and affective problems, (iv) and they will reflect on what they do to solve problems effectively.*

Structure the time more or less as follows:

- 15 minutes to ask people to organise themselves into three groups, and to introduce the **purpose** of the session
- 15 minutes to explore with parents and summarise on a **large sheet of paper** the different kinds of problems that they have mentioned and would like to add and to understand that some problems are societal, others related to the systems they function in (such as school, church, ngo's) and others are related to their family as a micro-system. If you see they are not mentioning certain issues, you may prompt them and ask them if they ever had experience with specific kinds of issues in their relationships with others
- 30 minutes to facilitate the box of problems. You can introduce this exercise along the following lines: *We are now going to do an exercise where we are going to learn a little about how we think about problems/challenges / issues and try to address them. We are now going to give your group a problem, and we would like the group to deal with this problem.*
- Remember that the group will probably not know what the end conclusion of the exercise is, and depending on their participation you may have to do lots of prompting and guiding. This prompting can include
 - encouraging them to think about what kind of problem the box would represent for them
 - describing the box and describing their problem
 - using their actions to prompt them about effective and ineffective ways of dealing with problems

Ensure that whoever is not facilitating, is taking notes/recordings of participant's responses.

15 minutes to give feedback to the rest of the group on the following:

- What is important to solve problems effectively in a family or with members of a household?

Reflection (11h30 - 11h45)

Facilitators: Salome and Ruth

Research question: *How will parents and families take action to ensure adaptive responses to chronic stress in a resource-constrained community?*

Objective: Help parents to make the shift from talking about how to deal with problems effectively to thinking about what actions they can take to be more effective with the way in which they address problems.

Learning with the horses 2 (11h45 - 12h30)

Facilitators: Sharon and Ruric

Research question: *How will parents and families take action to ensure adaptive responses to chronic stress in a resource-constrained community?*

Objective: *To provide an opportunity for parents to practice some of the actions they want to take to solve problems more effectively by solving a problem in the arena.*

Your role: Observer and note-taker.

Reflection (12h30 - 13h00)

Facilitators: Sharon and Ruric

Objective: *Help parents to transfer their learning with the students and the horses to their own lives.*

Appendix I: Information Letter for the Positive Parenting Workshops



UNIVERSITEIT VAN PRETORIA
UNIVERSITY OF PRETORIA
YUNIBESITHI YA PRETORIA

Fakulteit Opvoedkunde

11 March 2016

M.Ed (Educational Psychology) students
Department of Educational Psychology
University of Pretoria
PRETORIA

Dear students

INFORMATION SESSION IN PREPARATION FOR POSITIVE PARENT WORKSHOP AT
SHUMBASHABA ON 14 MARCH 2016

I am writing to inform you that Mrs Sharon Boyce (Director: Shumbashaba Trust) and I visited the parents who will participate on Saturday's workshop yesterday (10 March 2016). The purpose of this letter is to inform you of the content of the information session.

We met with several mothers and a few fathers from 12h00 – 13h00. The objective of the information session was to introduce ourselves to the parents, and to obtain informed consent for (i) their participation in the workshop at Shumbashaba, and (ii) for their permission to share what we learn on Saturday with others in the form of reports, dissertations and conferences. To this end, the parents were provided with the following information:

1. Mrs Boyce provided information about the community projects of the Shumbashaba Trust and the equine-assisted growth and learning activities that they offer to children, and now parents in the Diepsloot community. They were given information about the format of the workshop (being around and interacting with horses, talking to students individually, and talking to the workshop presenters in a group).
2. I provided information on your role in Saturday's workshop. Parents were told that they will be working with students who are studying to become educational psychologists. They were told that part of the training of students is to learn how to engage with and work with parents and families in a community, and how to learn about them (assess) and support them (intervention). They were told that a student would be working with them and their child/children that day as well.
3. Parents know that the first workshop is about (i) where they are and (ii) where they want to be as parents/families, and the second workshop will be about (i) how to get there and (ii) what skills they need as parents to get there.
4. Some parents had questions about whether they will obtain a certificate after the workshop, or whether they will be able to get a job. We informed them that the workshop is not about work skills, and would not enable them to offer skills to an employer, but that the workshop was about personal development, and about them learning about themselves and their family. We also informed them that we cannot offer them any work or money.
5. We informed them that the students who would work with them would also ask for their

Room 2-56, All Purpose Building
University of Pretoria, Private Bag X20
Hatfield 0028, South Africa
Tel +27 (0)12 420 2770
Fax +27 (0)12 420 5511
Email salome.humanvogel@up.ac.za
www.up.ac.za

Faculty of Education
Fakulteit Opvoedkunde
Lefapha la Thuto

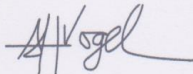
consent to participate in the professional activities you involve them with.

6. After questions about confidentiality, we outlined that the information they share with students are confidential, and will only be discussed with the supervisors (Prof. Human-Vogel and Dr Ruth Mampane), and when it is shared publicly, it will be anonymised. They were also informed that some discussions will take place in a group and they can choose what they wish to share. They were also made aware of the limits of confidentiality.
7. After the information session, parents had the opportunity to sign (i) a consent form from Shumbashaba to participate, and (ii) a UP consent form that their data may be used for research purposes. In line with ongoing negotiation of consent, participants will have an opportunity after conclusion of the workshop to confirm or withdraw their participation for research purposes.

I attach an example of the consent form for research purposes that participants signed so you may have better insight into the information that was discussed with them. Please note that you, as a student-educational psychologist, are expected to also obtain informed consent for your activities with the parents as you would for any other client, and that such informed consent must be kept on record in the client's file.

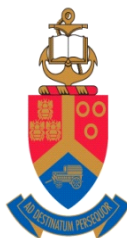
I trust that the above is in order.

Yours sincerely



PROF. SALOME HUMAN-VOGEL
SUPERVISOR
PS00061441

Appendix J: Positive Parenting Workshop Activity – A Box of Problems



UNIVERSITEIT VAN PRETORIA
UNIVERSITY OF PRETORIA
YUNIBESITHI YA PRETORIA
Faculty of Education

Date: 13/08/2016

Positive Parenting Workshop Activity – A box of problems

Introduction

Facilitator says - Every family experiences problems through life, some problems may be affective meaning those that relate to emotions and some instrumental that is those relating to daily needs of the family such as food, payment of bills and basic. How a family resolves problems tends to affect the way it functions and adjust to any change brought about by the problem. This activity is aimed at allowing families to demonstrate how they resolve problems and reflect on how their resolution style may influence their functioning.

Important Note: For Facilitator's use only

1. Background of importance of the activity

Problem solving is an important in the family, because families make decision on daily basis, therefore being able to successfully resolve problems that arise within the unit, leads to the effective functioning of the family. Understanding the steps for effective problem solving can enable families to solve problems efficiently; this can also help families to evaluate their current style of solving problems and how it may be affecting the family.

2. Relevance to family resilience and McMaster model

Problems solving is essential for the effective functioning of a family and being able to follow the right steps for problem solving can enable families to evaluate areas where they struggle when resolving matters within the family. In addition, in order for the family to be resilient, they need to be able to successfully resolve problems using the resources available to them.

Objective- To present a family or group of people with a problem that must be resolved.

Brief description of activity

Facilitator says: In this activity each box symbolise the type of problems that a family may face; for example the box with thorns may relate for example to problems that tend to bring about physical pain and may also relate to other thing to the family; the same applies to the box with sand, the box the shards and the empty box that has a little gift in it. All these boxes illustrate the types of problem families may have and how these can bring about different experiences and evoke various reactions in a family. By unpacking these boxes families will be able to go through the process of solving problems which will facilitate active reflection on how one can affectively solve problems. Regardless of the nature of the problem, the aim is for the group to successfully solve these problems collectively and be able to explain how they went about solving them.

Metaphor - The box is a problem that hurts the family and that no-one presumable will want to accept or deal with. Whoever has the box, has the problem. How will they transform it into a family problem? By putting it down in the circle. How will they deal with it and discover its gift.

Process for carrying out activity

Materials

4 boxes

- 1 covered in thorns
- 1 filled with sand
- 1 empty with a small box containing a small gift.
- 1 filled with shards

Facilitator says: Please get into 3 groups; make sure that you form a group with people that are no part of your family. Now here is your box of problems, let's think about how we can solve this problem, bearing in mind that with every problem we face lies a gift.

Step 1. Identification of the problem

Facilitator: Here with me are small cards with some problems written on them, I am going to put these cards down on the table and you are to each select a card that represents a problem that you feel you have encountered at some point in life. If you feel there is a problem that you have which hasn't been reflected on the cards, I want you to take a blank card and write that problem on it.

Step 2. Communicate with appropriate person

On a blank piece of paper that is in front of you, trace and draw your hand (check if the hand has been drawn, all the 5 fingers must be included). On your thumb write the first person you normally talk to when you have problems, on your index finger write the second and so forth until you get to you little finger.

Step 3. Develop alternatives

Step 4. Decide on alternative

Step 5. Act on decision

Step 6. Monitor the action

Step 7. Evaluate effectiveness.

Reflection Section of activity

Brief discussion about what happened? - 5 minutes

Facilitator asks all questions

1. When that problem arose, what did you think was going on?
2. What did you think of doing about the problem at that point?
3. How did you decide what to do?
4. When you decided on your choice of action, did you follow through?
5. How do you think you did with that problem?

Structured reflection - 25 minutes

1. What are some of the problems that as a family you experience?
2. Are you able to solve all of these problems? Explain how you go about doing so?
3. What are some of the causes that you attribute the problems to?
4. What are some of the strategies you use to resolve problems?
5. Do you think some problems are easier to solve than other, and why?

Workbook activity - 15 minutes

- Write/draw some typical problems you experience with people and/or members of your family.

Appendix K:

Participants' Responses from Various Documents

Risk factors identified

K: Jobs in Diepsloot are scares, I dropped out of school due to teenage pregnancy therefore I could not find any good paying job. I sell sweets and small packets of chips on the street to get income for my family, which is not always enough.

D: Finding a job is difficult in in this community, most of us men we work in industrial companies as labourers to earn a living and they pay very little. The problem is a lot of job opportunities are in Johannesburg and not everyone can afford to live there, therefore we end up here trying to hustle.

E: I am a stay at home mother, my husband is the only one who works to provide for our family and my job is to care for the children. We struggle to get everything that we need therefore we are just grateful when there is food to eat.

A: Although Diepsloot is a nice place to stay because we do not pay rent, but the high crime rates are a concern. Sometimes you can hear gunshots at night when you are in the house or you hear reports from neighbours that a house has been broken into.

K: People live in fear and hide in their houses, the streets are not safe. A lot of boys are in gangs and these target everyone even children that are coming from school get attacked. These gangs steal purses or other valuables and sell them to get money or drugs. I think the lack of jobs also makes young boys be rebellious and steal.

C: Crime in our community is a problem, I always make sure I am home before it gets dark and even pick my children from school to avoid them being attacked. I do not feel safe walking alone so sometimes I ask a neighbour or friend to walk with me.

B: Our shacks are not safe at night, thieves can easily break the doors and come in to take whatever they want. At times, they burn muti that makes us sleep and not hear them come into steal, next thing you wake up in the morning and the house is empty.

H: Sometimes at night you can hear you neighbours being attacked and screaming for help, but you just stay in your shack because you fear that if you help you may get attacked too or even shot because these thieves carry weapons. Sometimes you do not help because you get scared that the thieves might come to your house as well so you just stay in bed.

D: The gang activity in Diepsloot is high, they break into houses and take whatever they want. You do not feel safe at night and it makes you wonder if you will make it to the next day alive. As a result of this dangerous night life, it is like every day I am re-born because going to sleep does not guarantee that you will wake up the next day.

H: I live with my family in a single room, we sleep, bath and cook in it; it is a challenge because there is no privacy. Electricity is a challenge you find that many of

the houses rely on illegal cable connections which can be hazardous especially in winter when power supply is in high demand. Sometimes the illegal connections cause fires which can then spread to other households because our shacks are too close to each other.

A: We live in shacks that are not really in good conditions. Water supply is a problem at times, sometimes there are pipe leakages that are unattended by the municipality. The sewage pipes at times also break and remain unfixed for a long time and then there is a bad smell in the area.

K: Water and electricity is a problem in Diepsloot but we do not get any help because there is little attention given to us by the municipality. There is little development in our community therefore we survive on what is available.

A: I left my family in Limpopo and I came here seeking a better life. I live alone, I made friends with the neighbours that I stay with and I have a close friend who is like family. I have little contact with my family and I barely go home because I do not have money.

K: I am a widow my husband passed away and my family is in Zimbabwe. I perceive my church as my family because here in Diepsloot I have no blood relatives, therefore apart from my children my church is my family.

Protective factors identified

L: Faith helps me cope. I believe that God is always present and He is able to help me when I am in need. My faith in His ability to change my situation helps me believe that I will be okay.

C: We trust in God for support and help when we are in trouble we believe that He can save us. By trusting in God's power we believe that nothing is hard for Him and that he will carry us through hard times.

H: We believe in God, our Saviour. He is all knowing and very powerful. He can fix our problems and protect our children from danger.

B: God can change situations, when you have faith in Him. You just face life knowing that your father is with you and He is always watching over you and can fix things that may be wrong in your life.

K: Sometimes things happen in life that can be painful but if it is God's will then He alone can be a source of help. God knows everything even before it happens. He knows that he will save us from anything that is bad.

K: Being a strong Christian and attending church helps me cope. Going to church and listening to the pastor preach gives me hope that God is alive and He care about me and my family. This makes me feel better and the songs that are sung also help me believe that God is there for me in hard times.

C: Attending church on a weekly basis brings about comfort and hope that things will work out for the best. Being around other Christians and in God's house gives me

strength and hope that all things will work out. When we worship God together I feel heard by God and feel close to Him.

L: We base our life on the Bible. The bible in our family helps us to know how to behave and what we should do to please God. We read verses that help us to grow in our faith and that remind us who God is. We follow the 10 commandments because they help us know what to do as Christians.

N: We love the Lord; we sing and pray everyday in our family because this brings us closer to God. Prayer helps us communicate with God and tell him your problems so that He can help us.

K: Using prayer to gain hope during challenging times helps us face situations better. When we tell God what is going on He can give us a solution, He listens to our prayers at all times and He alone can find protect us from trouble.

E: Prayer gives hope when we are faced with challenges. It helps us to feel heard by God who is our helper, we tell Him what is troubling us and we stay hopeful that the challenges will pass and we will be fine even if it takes time.

K: My pastor and church act as source of support through prayer. When I face challenges, I seek guidance from my pastors or church elders they help by praying with me and this gives me hope that I am not alone; I have people that can pray for me which strengthens my faith.

A: Given that we have no family members in Diepsloot, our church is like family. When we are faced with troubles we consult with elders in our church members to get advice and spiritual guidance, they share ideas with us and provide us with other alternatives to our problems.

E: My daughter is being taken care of by my church and this has helped reduce the financial burden on the family. She attends school and then church helps with money and toiletry, it is a boarding school so we only see her when she has closed schools.

C: I work in the church garden and I get paid with food baskets, which help me feed my family. This job is only temporary until I find something that can give me better pay.

C: I accept life challenges as they come and I choose to adopt have positive outlook. I believe that there is always something good that is coming my way, so I don't let bad things discourage me.

A: Sometimes identifying positive things in one's surrounding and making use of them is helpful during stressful times. This helps me to stay hopeful and focused on what is going good as opposed to bad, this reduces the stress and frustration.

E: I have learnt to not look at what I do not have but instead grateful for what I have. This helps me to avoid being sad over what I have and rather enjoy what God has blessed me with.

H: We are positive things will change in our community. We are hopeful that our children we will have a better future compared to us.

K: Trying to be strong in the midst of challenges is good because it keeps us positive that we will get through any problem. Being strong also helps us to stay away from stress and work on solving the problem.

J: Problems provide us with meaning, they help us learn about life. When we find solutions we get valuable lessons that we can apply to similar situations in life.

B: Everything happens for a reason, that is the approach I have on life. When something happens I know that it is meant to happen therefore I don't stress because there is a reason for it.

G: Problems are necessary for learning and growth and at the end of every solved problem lies a gift that brings joy to the family. When we face problems in our family we use them to learn something new and when we solve them we are happy because we did it as a family, the victory is shared.

F: Having someone to help you makes it easier and reduces the heaviness of the problem. That means you have someone to talk to who can provide support and advice you. I talk to my friends when I am faced with a problem and she helps me to look at possible alternatives.

A: Through conversations and giving advice people change. When you share your problems with people it is easy for you to get more options and make better decisions and one can decide which one is the best.

L: Supporting one other is essential during times of difficulty because we share ideas and this leads to the discovery of possible alternatives to a stressful situation and it reduces the strain on the family that is going through stress.

**Appendix L:
Code List**

①

Code list

	Code
① Unemployment	UE
② Electricity Shortage	ES
③ Water Shortage	WS
④ Sanitation Problem	SP
⑤ Poor housing	PH
⑥ Problems with Finances	PF
⑦ Crime (high rates)	CH
⑧ Gang activities in the Community	G.A
⑨ Feeling unsafe	F.U
⑩ Danger Zones	D.Z
① Going to church	G.C
② Talking to a friend	TF
③ " to a pastor/church member	TPC
④ Praying	Pr
⑤ Having hope when in distress	H.H
⑥ Hoping for the better	HB
⑦ Reading the bible	RB
⑧ Learning from experience	LE
⑨ discussing issues	DI
⑩ Trusting in God	TA