

The child care worker



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NACCW

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'The smallest democracy'

On page 13 we fire a warning shot across your bows relating to 1994 as the International Year of the Family. NACCW members and readers of this journal will be challenged to make a difference for families during this coming year. We have, in *The Child Care Worker* over the past several months, included a fairly concentrated diet of material on work with families. There has been a gratifying response to last month's article on the Ethelbert Children's Home family programme. Six years ago, say people, it was an idea about which many were sceptical; today we see it as an idea which went on to have a number of undeniable successes — for children and families. How can we make it happen in our children's home?

Theme for the year

In proclaiming 1994 as the International Year of the Family, the United Nations suggested

a theme for the year: "The Family: Resources and Responsibilities in a Changing World". This represents a sensible balance between society's awareness of families' needs on the one hand, and society's expectations of families on the other. The ultimately disempowering charity is the one which asks nothing in return. Families need basic resources in order to function; when they have those resources, society expects them to function.

The word *function* is important here. It is a mistake to expect any family to be perfect — in terms of some idealised standards which our institution may cherish. The most we can expect of a family (our own included) is that it should meet, more often than not, the basic needs of its members for food, shelter and warmth (both kinds). The third of these needs can be expanded at will, but will probably be adequate if they meet

American poet Robert Frost's expectation that 'home is the one place that, when you go back there, they have to take you in'. But for too many families in South Africa, it is the first two needs that present a problem. The combination of world-wide depression compounded by sanctions and unemployment, massive urbanisation and a searing drought, has left too many families in our country without even the basic resources, and here will lie our priorities in any observance of the 'year of the family'.

Slogan

We have an International Year, we have a theme, and (see page 13) we have an official emblem. There is also a slogan for the 1994 family: "Building the smallest democracy at the heart of society". Again, this represents a sensible reminder that democracy is a grass-roots phenomenon which grows out of the attitudes and aspirations of individuals, families, streets and neighbourhoods — not something which is imposed from above. The family can be a prototype of democracy, a

place where everyone can be heard, where basic needs can be attended to, and where all can participate in the daily round.

Shaw's Alfred Doolittle suggested that it was only the rich who could afford morality. What about democracy? As we contemplate the family's role in the building of an equitable society in our country, we need, again, to ask whether democracy is also a luxury beyond the resources of those struggling to survive.

It is when the people of a country have the time to lift their heads above daily drudgery, to appraise their immediate and national environment, and to participate in its affairs and accept responsibility for its directions, that we can speak of the family as 'the smallest democracy'. And then we may have hope for the larger family, the larger democracy.

All interested in the International Year of the Family are welcome to write to the journal SA Family Mirror, or to Dr Eddie Harvey, Committee for Marriage and Family Life, Private Bag X828, Pretoria 0001

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The International Federation of Educative Communities



The International Association of Workers with Troubled Children

Regarded as a national leader in the field in the USA, **Professor Norman Alessi** has all the professional knowledge, experience, insights and creative energy to translate the mystifying medical diagnosis of childhood depression into realistic and understandable concepts and interventions for those who work with the children

Myths about depressed children and adolescents



It has been only 23 years since the publication of the first papers identifying depression in children. Since that time we have come to understand better the scope of this problem. Nevertheless childhood and adolescent depression often goes unrecognised. Even those who have daily contact with children and adolescents often either fail to recognise this serious disturbance, or mislabel the youth as having a behavioural problem. Unquestionably there are a number of reasons why there continues to be a lack of understanding about childhood and adolescent depression. Possibly the greatest source of confusion about these problems are various "myths" about childhood that, ultimately, determine our perceptions and actions. What are these myths, and what are the facts about child and adolescent depression?

Myth #1. Childhood is a happy time

Fact: Everyone experiences difficulties in childhood and

adolescence that can have life-long impact: loss, failure, an inability to live up to one's own or others' expectations. But the plight of our children and adolescents is much worse. Child abuse, poverty, and homelessness are only a few factors that make the lives of a growing portion of our children miserable at best — and chronically impaired at worst. No longer can or should we harbour the notion of childhood as being pristine, without pain and suffering.

Myth #2. Children and adolescents are unable to talk about their feelings.

Fact: Children as young as three and four have been shown to demonstrate an understanding of their feelings. The ability to identify one's feelings and communicate about them has less to do with age than with innate ability. Not surprisingly, there are some children who are far better able to discuss their feelings than are most adults. When approaching a child or

adolescent, you should assume that they can express their feelings and communicate with you.

An important source of difficulty is the potential presence of speech and language disorders among children and adolescents with psychopathology. This is not a rare phenomenon, but a rarely noted phenomenon. Studies have clearly noted that up to 75% of in-patient populations and 45% of out-patient populations have some form of communication disturbance, with the majority never being identified.

Myth #3. Prepubertal children are too young to be depressed.

Fact: Toddlers as young as four years old have been identified as being depressed, though at a rate less than among adults and adolescents. These children are not just unhappy or sad; they have major depressive disorders. This should not come as a surprise, given the early work of Spitz and his identification of "anaclitic depression" among infants. The limiting factor is not the age of the child, but the ability of the observer to identify the depression.

When depression is seen in such a young child, it is often asked, "What could a child that young have experienced that would make him or her depressed?" There are three answers: First, even extremely young children can experience severe trauma, the consequence of which is depression. Second, because of genetic disposition, some children will be more sensitive to stress than other children; and even the normal stresses of life can result in depression for these children. Third, with enough loading, these children may have a spontaneous onset of depression.

Myth #4. Depression in children and adolescents is always due to something.

Fact: This idea presupposes that a trauma or conflict in an

individual's life is the "factor" that leads to depression. The problem with this assumption is that not all children, adolescents, or for that matter even adults, will experience depression as a consequence of a "trauma". Also, there are those who will not experience relief even if a "trauma" is identified. This often is seen when patients are in psychotherapy or family therapy for protracted periods of time without progress.

Myth #5. Expressed sadness always accompanies depression.

Fact: One would assume that a depressed person should look sad or "depressed". Nothing could be further from the truth, especially in children and adolescents. A number of studies have demonstrated that "depression" in children and adolescents often is seen as anxiety (especially separation anxiety in younger children), phobias (often of school), opposition, aggression, or irritability, which then is labelled as either an oppositional disorder or a conduct disorder. These symptoms, not the depression, then become the main target for treatment. One may ask, "Isn't this masked depression?" No! If the depression is not identified, then it is an unidentified depression, not a masked depression. The mislabelling of aggression or other symptoms leads one to apply a "therapy" that does not deal specifically with the problem of depression. Given the new diagnostic procedures, there is no reason to assume that a child, regardless of his or her symptoms, cannot be diagnosed, if depression exists.

Myth #6. Depressed and sad feelings are short lived.

Fact: For some, they are. But for those with a mood disorder, they are not. Often, children and adolescents will describe having been depressed for a number of years, with extremely severe

periods and extended times of boredom, poor concentration, and irritability. Yet they are repeatedly told, "This will pass with time." It is often this statement that makes the child or adolescent feel embittered and hopeless; it can and does lead them to question the value of life and to desire that life come to an end.

Myth #7. They will out-grow the depression. It's nothing to worry about.

Fact: Several longitudinal studies have shown that if a child has a major depressive disorder, the likelihood is greater than 60% that they will have a recurrence within five years. And if a dysthymic disorder is present, the child is more than 75% likely to have a Major Depressive Disorder within 5 years. If a child or adolescent has either of these depressive conditions, they should be monitored closely for either recurrence or relapses. For some children, adolescents, and their families, depression is a way of life, not a passing phase.

Myth #8. Withdrawal is just a part of being an adolescent.

Fact: At one time, it was thought that all adolescents experienced "adolescent turmoil" and, as a consequence, were not able to be diagnosed as having a major psychiatric disorder. Whether called "adolescent turmoil" or "adolescent crazies", this undermines the ability adequately to assess adolescents, and when necessary, administer needed care. Social withdrawal is an issue of significance, and to mislabel it as a matter of normal development will unquestionably have lifelong impact. When a child becomes withdrawn, it is important to assess why. Following a traumatic event, the adolescent may have the onset of a major depressive disorder, a psychotic disorder, or a substance abuse disorder. It is important to not turn your back on them or ignore them.

Myth #9. Anger versus sadness.

Fact: Irritability is one of the most frequent symptoms seen in this population. It is most disconcerting when it is expressed as overt aggression, such as verbal outbursts, the destruction of property, or in extreme situations, physical aggression toward self or others. Children and adolescents with depressive disorders often have "conduct disorders" or "oppositional defiant disorders" as well. The presence of diagnostic disorders occurring together is referred to as "co-morbid disorders." Research has shown several disorders occurring frequently in children and adolescents with depression. In their order of frequency of co-occurrence are anxiety disorders (separation anxiety, phobias, panic attacks, and general anxiety), then disruptive behavioural disorders (attention deficit hyperactive disorders, oppositional defiant disorders, or conduct disorders). Certainly, the hallmark of the disruptive behavioural disorder is the presence of aggressive symptoms that are extremely bothersome to those professionals who interact with depressed children and youth. One of the most difficult features of this complex illness is the ability to empathise with a chronically angry person who is depressed. Therefore, the therapist, rather than providing a bridge for children and youth to return from their depression, can get caught up in the chronic anger and end up also alienating them.

Myth #10. All it takes to make a depressed child or adolescent better is kindness.

Fact: This myth may be rephrased as "love will make it all better" or, when medications are suggested, "Hugs not drugs." One should not assume that these children will respond to kindness, nor should therapists be disappointed when their kindness is not rewarded. Many of

these patients are unable to respond to the attempts of the therapist to be empathic. In fact, being with these children often can produce within their caregivers enormous feelings of pain, lethargy, and actual fatigue. Until a therapist becomes acutely aware that these conditions exist in himself, he will unconsciously withdraw from the patient, causing the patient to sense rejection. The ability to make oneself aware of these myths and their consequences is of utmost importance if one wishes to be of help to these children and adolescents. We all harbour myths. It is the

ability to rise above the myths in the pursuit of truth that determines the true worth of any profession and its professionals.

The Summer 1993 issue of the *Journal of Emotional and Behavioural Problems* (JEB-P) is devoted to the problem of depression. To whet your appetite for this excellent publication, over the next two months we will print short extracts on the subject by Professor Alessi. For information or subscriptions to JEB-P, write to National Education Service/JEB-P, P.O. Box 55, Bloomington IN47402, USA

Is your child or adolescent depressed?

One of the most frequent questions I am asked is "How can I tell if my student or child is depressed?" The following checklist is an attempt to provide a method by which you might determine if a youth is depressed. The first step in helping those with depression is its identification. The following is a checklist of general symptoms. If four or more symptoms are evident, the need for a professional assessment exists.

Difficulties experienced

Expressed sadness or "emptiness".

Expressed hopelessness or pessimism.
Expressed unnecessary "guilt".
Expressed worthlessness.
Unable to make decisions.
Loss of interest or pleasure in ordinary activities.
Increased boredom.

Physical Complaints

Complain of loss of energy — seems slowed down.
Trouble going to sleep,

staying asleep, or getting up.
Appetite problems — losing or gaining weight.
Headaches, stomach aches or backaches.
Chronic aches and pains.
Restless or irritable.

Difficulties in school

More than usual problems with school work, as well as difficulties at home.
Unable to concentrate or remember.
Wants to be alone.
Avoiding social contact with friends.
Cutting classes.

Dropping activities

Expression of irritability.
Increased shouting and screaming.
Increased intolerance of everyday events that would have been seen as nothing.
Talked about death. Talked about suicide or attempted suicide.
May be drinking or taking drugs.



'Sometimes I feel all alone'
— A 10-year-old girl in a day treatment centre in Illinois

Die HIV kind in die kinderhuis

Wanneer jy met 'n HIV kind werk, verander alles. In jou denke, in alles wat jy doen, is jy meer bewus van die higiëniese aspek, en van ongelukke wat moontlik kan gebeur. Jy moet dink aan opvoedkundige programme vir alle kinders in jou sorg. Maak seker almal weet wat om te doen in 'n krisis. Respek bloed. Werk met handskoene ten alle tye en behandel almal dieselfde asof hulle HIV is. Wie weet dat die kind HIV is? Alle kinderversorgers. Geen kinders. Met alle indiensopleiding wat ek tot dusver gekry het, voel ek dat dit nie saak maak nie dat ek moet weet 'n kind het AIDS of nie, want ek behandel alle kinders met dieselfde versigtigheid.

Mediese Aspek

Dis baie belangrik. Enige klein siekte of verkoue of pyn moet gemonitor word en die kind moet onmiddellik hospitaal toe geneem word. Moet nie wag tot môre nie. Dit kan die einde van 'n lewe beteken. Medikasie vir HIV is besonders duur. Die doel van die medikasie is om aangetasde liggaamsdele te beskerm en dien as omhulsel sodat daar geen verdere verspreiding plaasvind nie. Alle medikasie moet gereeld daaglik gegee word. Wanneer daar 'n kindersiekte voorkom is die immunstelsel baie swak. Tot dusver vorder die kind baie goed. Sy is genees van meningitis en T.B. Sy het gewig aangesit, haar eetlus is baie beter, en haar oor infeksie kom minder voor. Maar met alle positiewes wat gebeur, moet nie gerus word nie. Sy kan binne 'n week sterf — of moontlik oor 10 jaar. Probeer om HIV kinders so normaal as moontlik te behandel, en met die nodige liefde. Werk ten alle tye met handskoene. Verduidelik wat is besig om te gebeur. Gerig aan die ander kinderversorgers dat dit 'n uitdaging is — 'n goeie ondervinding. Jy leer

so baie van die liggaam sowel as siektes.

Finding host parents

Finding host parents for HIV victims is almost an impossible task. The reason for this is that the community is still painfully ignorant concerning the handling and caring of HIV people. Even though a lot of energy and time is put into informing them about the virus, they still refuse to commit themselves because they are overwhelmed by fear. Assistance was requested from ATTIC in finding host parents, but unfortunately they could not help us. We then made an ap-

peal to people in the community who were already involved and in touch with the lives of HIV victims. The community has a great compassion for HIV victims — as long as they are kept at a distance.

Die aanvaarding

Tenwyl ek my toevlug neem
Na die stilte van my kamer
Skiel 'n beeld van 'n kind
Wat deur 'n wrede daad
Haar nou voor die uurglas
Van die lewe bevind
En elke sekonde tel
Want sy weet die doodvonniss
Oor haar uitgespreek
En ek dra haar op in die lugruim



En ontmoet wie ek behalwe in Gebed nooit sou ontmoet

En my besoek aan hierdie onsigbare tempel
Laat my lippe die 'waaroms' en 'hoekom's' soek
Dit is my beskoek om die pyn
Van teerheid te ken, om verwond te word
Omdat ek liefde ken
Om gewillig en met vreugde te bloei
Omdat ek verstaan
Om te ontwaak en dankie te sê
Vir nog 'n dag van liefde
En te slaap met 'n gebed in my hart
Omdat ek verstaan en aanvaar
Gee my 'n drukkie

asseblief

Ek kan jou nie siek maak nie.

— Annie Stark Village Team

Oortollige energie

By ons kinderhuis is daar baie aktieweiteite wat ons aanpak om die ontspanning van ons kinders te kanaliseer. Vandag gaan ons egter net konsentreer op byeenkomste wat ons reël vir ons tieners. Hierdie byeenkomste geskied een keer per week op 'n Woensdagaand. Ons as personeel sien dit as deel van ons werkslading. U wonder seker waarom ons so iets aangepak het, aangesien ons alreeds oorlaai, vol spanning en angs is. Ons wil graag die "life skills" van die kind help ontwikkel bv. deur vorme van sosialisering, selfvertroue, selfaanvaarding, groepsdruk te hanteer, asook beter kommunikasie. Tweedens is dit belangrik om die kind tot geestelike bewusmaking te lei, bv. dikwels worstel die kind met baie geestelike vrae soos wie is God? Hoe pas ek in God's se plan? Dan is daar die kwessie van gemeenskaps bewustheid, bv. watter rol sal ek in die gemeenskap vervul? Sal ek kan aanpas by die druk van die gemeenskap? As kinderversorgers wat

daaglik met kinders te doen het, en wanneer daar 'n behoefte aan sukses, sekuriteit, aanvaarding of simpatie ontstaan, span ons onself in om hierdie behoefte te probeer bevredig.

Dit geskied gewoonlik in 'n ontspannende en spontane atmosfeer, bv. wanneer ons saam speel in hul kamers "family ties".

Hierdie areas wat ons identifiseer, omskep ons in programme wat pas by hul vlak. Dit sluit in skakeling met hul portuurgroepe, besoeke aan ander jeugtakke, funksies, coffee bar, ens. Hierdie skakeling gee die kind die ruimte om sosiale vaardighede aan te kweek en te verbeter. Omrede, om deel te kan vorm van die gemeenskap. Sosiale bewusmaking geskied ook deur programme soos probleme van alkoholsime. Hoe lyk die pad vorentoe vir die kind met so 'n aktiwiteit?

a) Dit ontgin die kind se leierskappe; dit hang saam met die rol wat hy moet speel in die gemeenskap.

b) Dit leer die kind 'n verantwoordelike sin aan deur aanspreeklik te wees vir sy doene en late.

c) Dit gee leiding aan morele norme en waardes.



d) Beginselvastigheid, staan vir reg en geregtigheid.

e) Selfstandigheid, besluitneming.

f) Positiewe selfbeeld (kom hier aan, dink niks van homself/hierdeur help om selfbeeld te verbeter).

As 'n kinderhuis wat Christelike waardes sterk aanhand, is ons as kinderversorgers immers in die eerste plek direk aan ons skepper verantwoordelik vir die welsyn van elke kind wat onder ons sorg geplaas word.

Indien ons sou toekyk hoe 'n hulpbehoewende kind deur die versoeking na die verderf gelei word, is hy as volwassene medeaandadig en sal hy voor God verantwoording moet doen.

— MARC JACOBS
Bruce Duncan House

Widely divergent ideas abound over the presence of street children in Rondebosch. Residents and businesses ask Should they be allowed there or not? Children's agencies ask Are shelters the way to help them. **Alan Jackson**, Director of Cape Town Child Welfare, expresses a view

The Rondebosch street children: What is the appropriate approach?

The debate on whether a shelter for street children should or should not be built in Rondebosch is an important one. However, this issue has recently been eclipsed by a broader one — one which asks the question "What should the approach to assisting street children be?"

On the one hand the argument has been put forward that night shelters do not offer long-term solutions; that the root-problem is one of family breakdown and that there is, therefore, a need for persons to be employed to work in the areas from which the children come, and to work at building a healthy social fabric in those communities so as to prevent children from leaving home and schools, and developing skills training projects.

The other argument has been that we must recognise that there are street children in the City and suburbs; that they are in need, and that they require shelter, food, clothing and warmth, while efforts are being made to reunite them with their families or place them with foster parents, preferably in the community from which they come. This approach, too, includes skills training and education as basic ingredients. The strategy which is required to tackle the street children phenomenon is a multi-faceted one. But in order to understand it, we must give attention to the socio-economic conditions from which the street child comes, and the stages of development of the street child.

Socio-Economic Conditions

We must recognise that the problem stems from general socio-economic conditions in South Africa, largely contributed to by the injustice and inequities of the past. Every organisation in South Africa must recognise this problem as requiring a great deal of attention. It is also an area to which some organisations will find

themselves more able to contribute than others, depending on focus and resources.

Becoming a Street Child

Recognition must also be given to the fact that children become street children by stages.

In the early stages the child begins to spend a lot of time on the streets in the community from which he or she comes. School-going children are usually struggling at school, and begin to truant. The child begins to spend time on the streets at night.

Due to the greater potential for begging, children begin to congregate at shopping centres in Mitchells Plain, Gatesville, Athlone Central, etc. often roaming far from home, and initially returning at night to their own homes.

As a result of the worsening situation in the home and greater familiarity with street life, and encouraged by the "pickings" in and around such centres, children begin to spend nights away from home. The older, braver and more daring children may graduate to where the economic potential, the competition (and the dangers!) are greater still — in Rondebosch, Claremont or the City. I would suggest that different approaches are most appropriate at different stages. I will describe the approaches at different ends of this development process. Obviously there are shades between these poles.

The Community Approach

The early stages offer the greatest opportunity for organisations to concentrate on the reintegration of children into families, schools and communities. Due to poor circumstances at home, parents may require physical support in the form of food, clothing, blankets, etc.

They often will require parenting skills, relationship-building

and disciplining skills to cope with their children.

Negotiations with schools are often necessary in order that they may provide temporary, smaller classes in an effort to reintegrate children into normal classes. Negotiations with local or Government authorities may be important so as to provide families and/or the community with other resources.

Community efforts towards caring for those children without homes and those who will not return to their own homes, are to be encouraged and supported. Recreational and skills opportunities must form part of this approach in preparing the child for the future.

The Shelter Approach

In the later stages, children have become accustomed to living on the streets and tending for themselves. They are familiar with crime (usually petty crime) and value the "freedom" they have achieved.

Children who have reached this stage do not lend themselves to being sent home (they refuse to do so and frequently this refusal is most appropriate, given the state of the relationships at home); nor do children who have reached this stage lend themselves to being model citizens.

A Shelter to which children refer themselves, which lays down minimal rules and allows children to leave if they so wish, is an appropriate way in which to respond to this yearning for freedom while offering the child the opportunity for a change in lifestyle, including the opportunity to return home, or to be placed in foster care. Caring relationships built with child care workers and volunteers offer the child the platform from which to rebuild his/her life. Recreational, educational and skills-training opportunities are once again central ingredients of this model.

It is true that a small minority of the children in the Southern Suburbs, Claremont and the City have not yet grown accustomed to the streets, and may have come to the big city in search of fun or money (some parents send their children into the City for this latter purpose). Only these children could be said to be attracted by a shelter, and most of these are not involved in crime.



These children must immediately be returned to their parents whenever their parents can be traced.

This approach has no guaranteed success. It is one which accepts that to transform street children is hard work and requires —

- attention to relationship-building, rather than to rules or authority;
- a willingness to accept that some of the children on the street or in the shelter will not change;
- that the shelter is located in a business/industrial area where the children will be as little disruption to the community as possible;
- emphasis on recreational, educational and skills-training opportunities;
- working towards reintegration of child with family whenever this is possible, or placement in foster care in his/her own community.

Making the Decision

The decision as to whether or not to have a shelter in Rondebosch must be made by the residents of Rondebosch, in consultation with those concerned about the children who live on the streets there.

I would suggest, however, that the choice is not between having street children in Rondebosch or not having them there. They will not simply go away. The choice we have is between becoming involved in offering the opportunity to street children to transform their lives (despite the many problems and frustrations involved) or not doing so.



Cape Town child care worker **Marlette Carstens** finds a world of difference between child care, adolescent care and ...

Toddler Care

I am a child care worker at an admissions unit. Like workers in other children's homes, I face the challenges of increased numbers of single parents, of broken and disintegrating homes, as well as of the stressful economic and political climate. This is my first year in child care, and as a rookie already it is clear to me that child care is a specialised field. I expected to be working with children from the age of eight upwards, especially adolescents. I found myself working with five toddlers between the ages of two and four. So I find myself in an even more specialised field — Toddler Care. All our admissions in the last two years have been toddlers with the exception of one ten-year-old. Is this a common trend — that the children coming into care are getting younger?

Young hurts

I experience child care as a field full of contradictions. Toddler care really rocked my boat of carefully studied theories and principles. They were not working for me as I expected them to. Yes, I try to offer the toddlers a consistent relationship and well thought-out responses, not to mention a stable and predictable environment. On the other hand there is and always will be change in the unit. I must pre-

pare both myself and the children for changes when a new toddler comes into care — and it is impossible to predict the effects of a newcomer on the children already in care.

It touches my heart as I watch toddlers struggling to deal with separation from a parent and to bond with a child care worker whom they don't know from a bar of soap — but who is the only consistently available adult for them. Also, those who are already in care are struggling with old separation issues and reliving them during the traumatic admissions procedures of other children.

The scary feelings which a new child evokes are highly contagious. Each child reacts in his own way, whether through temper tantrums, sibling rivalry, withdrawal, regression ...

With each admission I learn more, and each time I try better ways to prepare the rest. But how do I prepare a two-year-old for the sharing and the giving up which the newcomer demands? It means having to give up new-found physical and emotional space, to share the already scarce attention of the child care worker whom you are still learning to trust.

At times like these I can get home to my own flat exhausted, feeling probably just like the toddlers I care for. I sit on my

bed, a vulnerable three-year-old, feeling scared, lost, powerless. I see months of hard work appearing to go down the drain. Can I preserve the delicate balance of need and satisfaction, of predictability and threat for these children?

Learning special skills

While these feelings are challenging, I have come to understand their value too. They make me define more carefully the particular needs of each child. They direct my responses and interventions. I get to use my own reactions and feelings as I set out to help the toddlers adapt to new tasks and changes.

I have come to see the necessity for specific skills — different in many ways from those of my child care colleagues who work with older children — toddler care skills. How to listen to, to manage, to talk with and live with toddlers.

Allowing healing

Simply living at the unit as a semi-residential child care worker is one of my most powerful therapeutic tools. I am available no matter what they say or do.

The reassurance that they seek takes more than mere words. I get tested all the time, and have to prove over and over again that I am there for them, especially during any time of change and uncertainty. It takes a lot of time and effort, and I get pushed to limits I never imagined I was capable of — but there is nothing more exhilarating or fulfilling than connecting with these toddlers. Their fantasies, their reality and potential self-healing energies are a world of wonder to me.

One of my biggest challenges has been constantly to mirror their unhappy and fearful feelings to them, and at the same time to model ways of handling these. Sometimes it looks like they are locked into scripts that dictate to them a way of being. They constantly try to hook me into the only way they know how to be and relate to the world.

Much of my work is directed to breaking some of the vicious cycles that they learned in their earlier depriving circumstances at home, cycles which often repeat through successive generations.

Toddlers and teenagers

There are great differences in working with toddlers compared with teenagers. With only teenagers in the unit I was able to do night shifts and close my door. With toddlers, I can never close my door — still less my eyes and ears. I am woken up by them at all hours and have to comfort them after night terrors or wet beds, or just because the wind was blowing and the shadow of the tree is scary tonight. My job crawls into bed with me soft and warm at all times of the night. There have been more nights without sleep than with sleep. And tomorrow there is a day shift and meetings and training ...

When necessary we refer teenagers with specific problems to our social worker or consulting psychologist. In the admissions unit with the toddlers I personally go to them for guidance. This empowers me to provide a more significant input into their lives, especially in these, their most formative and impressionable years.

One learns to anticipate teenagers' problems. They seem to grow more slowly, year by year, and I do not find major developmental differences between a fifteen and a sixteen-year-old, other than the obvious individual differences which make everybody unique. Toddlers, however, grow month by month, and sometimes seem to change in their development and problems weekly. There is a huge difference between the capabilities of a two-year-old and a three-year-old at almost all levels. I have to remind myself that the three-year-old toddler in front of me who is functioning emotionally and psychologically just one year behind his chronological age, is developmentally vastly delayed in the way he is relating to his world and to the people in it.

The way we are

So rewarding and so taxing is my work with toddlers, but I know that what matters is not what I say to them but how I am with them — confirmed in this quote from Jane Pauley (*Womens Wit and Wisdom*): Kids learn more from example than from anything you say. In fact I am convinced they learn very early not to hear anything you say, but to watch what you do.

Children of all races have experienced change and/or crisis in their schools — some merely in their first experiences of non-racial education, others more dramatically in the widespread disruption as long-standing problems have come to a head in strike action and violence. In July this year, staff members at three children's homes around South Africa contributed their viewpoints and comments ...

Change and Crisis in our Schools

1. JOHANNESBURG

The children's home has definitely been affected by the 'chalk downs'. Many pupils were bunking school: they'd set off in the morning in their uniform and instead of reporting at school and getting on with their own work, they were congregating at friends' homes where no parents were in attendance and having a party — drinking, smoking, indulging in sexual activities, etc. The children's home principal had been warned by the school that failure to attend on a regular basis would result in the pupils being expelled.

Now, with the immediate difficulty past, the pupils are still finding it hard to adjust to the routine of school activities. The poor achievers are not able to cope adequately with the backlog of work, and the high achievers feel dissatisfied and unmotivated. They also feel let down by the teachers who seemed not to have their best interests at heart. "Why not protest after school hours or on weekends?" they ask. Some pupils have requested to attend the so-called Model C schools where they feel they would have a better chance of completing their education without disruption.

Ways to help

The children's home has tried to arrange a tutoring programme in evenings to help with the backlog. Staff focus on the importance of education and encourage pupils at least to complete the year's schooling. We would value any helpful ideas to encourage motivation, enthusiasm and a feeling amongst pupils that the future is in their own hands.

2. WESTERN CAPE

During the last few months of 1992 it was already clear that this year would be difficult for our education system.

Teacher bodies in the Western Cape had various crisis meetings to discuss the intended retrenchment of 5 790 teachers falling under the House of Representatives. This figure was later lowered to 3 200. It was decided to take this matter up with the then Minister of Education and Culture, the Hon. Mr. Abe Williams.

After a number of meetings with him, teacher bodies were satisfied, and on 2 November 1992 he announced that he was withdrawing early retirement offers and retrenchments.

Parents and teachers were very happy, but their happiness lasted only four days. Mr Williams was summoned to Pretoria on 6 November 1992 to see State President de Klerk, and the Ministers of Education and Finance. After their meeting, Mr de Klerk announced that "fundamental rationalisation was unavoidable". A few weeks after that we were also introduced to a new Minister of Education and Culture, Mr Saaiman.

Parents' concerns

There have been other issues of concern to teachers, but the one that affected us as parents directly is the retrenchment of our teachers. Our local senior secondary school was told by the Department to retrench 11 teachers and another nearby secondary school was told to retrench 7 teachers. The boys I spoke to were not only very unhappy that some of their best teachers would be forced out of the teaching profession, but they also could

not see the logic of this move.

The average teacher to pupil ratio is already 1:40, and the retrenchments mean this ratio will increase. One could observe their sympathy with the teachers, but also their feeling of helplessness in that they could do nothing to assist. For the first time parents observed the unity amongst teaching staff and principals. Historically we have always seen the principals as collaborators with the Department. Principals were now called upon by the parents and teachers to state exactly where they stand.

Actions proposed took the form of early morning picketing, marches to the Department and to Parliament, petitions and adverts placed in newspapers. After all these actions were exhausted, teachers had a ballot on strike action. More than 90% of teachers belonging to SADTU voted in favour of a strike action and we as parents were called upon to support it.

Keeping the boys at work

We kept our boys at the children's home during the strike action. They gathered on a daily basis in our hall where they were assisted by two teachers employed by the institution. It was a very difficult period, and needless to say the pupils' morale was very low at times.

Most of our boys had already experienced school-related problems prior to their admission. It is also significant that even after the strike, some of the boys "bunked" classes and even stayed out of school for days. Their motivation level was low after the strike. The adults were divided: some members of our staff were happy with actions such

as picketing, adverts, petitioning and meetings, but they differed on the strike. This group were very concerned about the well-being of the children during this strike. Teachers on the other hand were more concerned about the future of our education system. Our parents must understand that we want education and we want liberation. We want them to unfold together, not one before the other. Strike action is a new concept in South Africa, though it happens all over the world. Whether it is British Airways staff who are striking or French farmers in the heart of Paris, striking has been an acceptable form of expressing disapproval of certain working conditions. We at institutions will have to debate these issues, because our country is experiencing the birth to a new order. It will be difficult to move to a democratic society because we had become so used to the old undemocratic order.

Possible programmes during school disruptions

If there is going to be strike action again in future we in children's institutions could look at the following possibilities:

1. Keep our pupils at home (if they are schooling in the community).



2. Divide them into convenient groups according to their school standards.
 3. Approach the different schools with a request that they provide us with a number of teachers at least 3 times a week.
 4. Discuss pupils' schoolwork with them in groups and individually.
 5. Arrange sporting activities and maybe educational tours.
 6. Keep them informed about the situation, for example, arrange a speaker once a week from SADTU, UTASA, CTPA, etc.
 7. Inform parents about the circumstances and how we are dealing with them.
 8. Release a press statement in support of or condemning the teachers' strike.
 9. Continue to record observations for evaluation purposes.
 10. Deal with the pupils' fear of failure, anxiety over exams and their motivation level.
- (The views expressed in this contribution are my own and do not necessarily reflect the policy of my employer)*

— W. Basson

3. NATAL

The change to a non-racial system of education in the schools has not had a significant impact upon our organisation, since we had already

adopted a non-racial policy in our children's homes, and have since 1990 accommodated children of different races. We welcomed these changes as they supported our own philosophy and practice.

As the majority of Model C schools have waived our fees the changes have not significantly affected our finances, although this is a consideration when planning for the return of children to their families. A family of three children in Model C education places a heavy financial burden upon any family.

Crisis

In terms of the daily running of the organisation, the recent crises have created a substantial disruption. This has been more significant in 'House of Representatives' schools where striking, marching and demonstrating by teachers, has disrupted daily classroom activities.

Children and parents have been asked to support the 'chalk down'. Schools have closed early on a number of occasions, disrupting normal transport arrangements and placing greater responsibility on child care workers during school hours. This has proved to be disruptive to the daily routines in the children's homes.

During April, when there were several marches and public meetings following the assassination of Chris Hani, special 'safety' procedures had to be implemented. Children were fetched directly from their school as it was not safe for them to walk in the streets. These procedures had to be carefully explained to the children, so that they could be introduced if a crisis arose.

A further problem over the past six months has been a higher rate of truancy, especially amongst children in the schools affected by the 'chalk down'. Large gangs of children have left the school property together and have been reluctant to return to school, even when disciplined by the children's homes. We as an organisation have lacked support from the schools in disciplining truancy. It seems that the teachers themselves are

feeling helpless about managing the problem. Some of our child care workers have expressed the opinion that striking and absenteeism amongst the teachers has set a bad example giving rise to an atmosphere of lawlessness and a general feeling that education is not important.

Children's reactions

Regarding non-racial schools, most children welcomed the opportunity to make friendships with others of a different culture and race, and thought that this was a positive change. Some concerns were raised, especially by those children attending Afrikaans Model C schools. Many of their friends had left or were leaving as a result of the changes. They had had to say goodbye to special friends and to try to make new friends. Others complained that the Black children worked too hard and showed them up!

Pessimism

In terms of the future of education, many children expressed feelings of pessimism. Many thought they would be unlikely to complete matric due to escalating crises in the schools. They were concerned that the general standard of education would drop and that things would fall apart in the schools, with pupils of different races fighting with one another, instead of studying.

Crisis

When asked to express their feelings about crises in the schools, many children referred to the 'chalk down' and the unfair retrenchment of teachers.

Children reported feeling depressed, angry, insecure and frightened by what was happening. They were relieved when the teachers returned to the classrooms and everything was back to normal. Some emphasised that *all* children have a right to education and that the strikes had been unfair. They were angry that they had been pressurised to march in support of their teachers. Some were sad to lose their "best teacher" through retrenchments and resignations.

When asked how they believed the problems in education could be resolved, many expressed feelings of helplessness and hopelessness. Others felt that all pupils should stand together and should petition the Government regarding their educational needs. Some believed that each pupil must persevere and do his best at school and make the best of a difficult situation.

Staff feelings

Whilst staff reported feeling excited and stimulated by the changes, especially in terms of non-racial education, they experienced the crises in education as frustrating and irritating. They shared the feeling expressed by the children, namely anxiety and insecurity about the future, and realised that it became more and more difficult to adequately and realistically prepare children for the future. Do we need to prepare children for coping with unemployment, for example? With the strikes and the closing of schools, child care staff have had to plan and prepare procedures — regarding transport, staff on-duty times, activities, etc., in an effort to minimise the disruption. Children are given the opportunity to discuss their experiences and feelings, and are informed about the meaning of the latest crisis, e.g. when Chris Hani was assassinated, many children did not understand what had resulted in the angry demonstrations that were taking place. They needed clarification in simple terms of the recent events and the feelings associated with them. Our staff have found that it is helpful and necessary to work even more closely as a team and to support one another, and to discuss our anxieties and frustrations. Our child care workers have realised that they have an even greater responsibility regarding the education of the children in our care. We need to do whatever we can to keep the children busy and motivated. We need to minimise the impact of the crises by maintaining our routines so that as far as possible, life goes on 'as usual'.

— Jill Willows





"I wanted to scrub myself white." **Charlie Maynard** comes to know and accept his roots. A feature from the English magazine for young people in care, **Who Cares?**

Am I Black or White?

I was in care for seventeen years, in residential homes. I had a short time in foster care at the age of two to three and a half years. I don't remember much about it; however, about twenty three years later, by coincidence, I was able to find and meet my foster parents. It was quite an emotional time for me but it helped me to understand and put the last pieces of my life in care together.

I knew many different people during my life in care, such as residential and field social workers and teachers. Throughout my time in care, I was moved around thirteen times: this included nursery, foster home, home on trial with parents, and five residential homes. In all that time, there was not one Black worker that I could relate to or who could help me understand my parentage. It is my father who is Black and from Barbados: I only met him when I was six years old. I was living at home on trial with my mum. One day, I came home from school. As I walked towards the house, this man came towards me, and for some reason I knew it was my dad. I was a great feeling!

I never used to think there was something different about me, although I saw myself as 'half-caste' and found this difficult to understand. The first time it really hit me was one

day at school when I was aged fourteen. We were messing around in the classroom. The teacher came in: everyone went quiet. He shouted at me: "Maynard, what are you playing at — you half-breed nigger!"

This made me feel so upset that I ran out of school. However, I was not fully aware of what he had said or meant. It was hard to explain to them back at the Home what had happened.

After skipping a few of that teacher's lessons, I gradually went back into the class and we got on all right. In spite of this incident, I was still unsure of my identity. I grew up with labels such as 'coloured', 'olive-skin' and 'half-caste'. Now I realise these terms are racist and offensive, and often used in ignorance by those who are in authority.

I have also suffered from other offensive names used for Black people generally. Because my skin is light and my hair is straight, I am sometimes seen as Asian. When I was fifteen, I wanted to be 'white' and to scrub or wash myself with Ajax — I found the whole experience, of being abused and in care and called these names, so painful.

There were times when I felt alone and that no-one was listening to me. There was a time when I tried to take my anger out on a staff member. Instead I handled it by writing

it down, and this was the start of my book about life in care. I also got the staff to listen to how I felt about things.

I was helped to understand and come to terms with it all by being involved in a conference in London in 1984 called 'Black and in Care'. I also read books and newspapers such as "The Caribbean Times" and "The Voice". I met other young people in care, not only from Britain but also America and Canada.

Since I left care, I have had to work hard to get where I am today, and I feel proud of my identity. I feel I have come through it all in a positive way. I have met many young people in a similar situation to me and worked with them to come to terms with who they are, thanks to all the young people I've met and worked with (especially those from Bradford and Liverpool). They've given me a lot of strength and support.

We must all help children and young people with a Black parent to understand why they came into care, and make sure they have Black people around them to look up to. It is no good having a system which makes young people ashamed of their identity, to the point where they even do not see themselves as Black. Black is beautiful and young people like myself can say "I am proud to be Black".

1994

The International Year of the Family



IN HAPPY FAMILIES, THE MEMBERS —

- Care for each other
- Share responsibilities
- Are supportive
- Respect and tolerate individual differences
- Are closely bonded
- Share feelings
- Contain and handle conflict effectively
- Are perceptive and take time to listen to one another
- Have fun together
- Pursue individual and joint goals
- Clearly define expectations
- Respect the authority of parents and/or caregivers
- Take responsibility for themselves, their respective roles and family chores
- Acknowledge the presence of God

— Elsa de Leenn

Some interesting background on the 'housemother' position by **Vibeke Lasso**n, editor of the Danish FICE Bulletin for fifteen years, and a husholdningsleder for 24 years

The 'Husholdningsleder' in residential child care in Denmark

During the earlier periods of children's homes in Denmark, and until the late 1950's and early 1960's, the residential home director and his wife were called foster father and foster mother. The titles seemed appropriate, as the residential homes then employed few and mostly untrained staff.

The children's home was regarded as the child's home, since it often lacked any other home. Thus it was quite natural to refer to the woman of the house as "foster mother", thereby strengthening her position and indicating the nature of the role. The foster mother was mostly expected to be taking over the role of the biological mother with the rights and duties that followed from this task: the child's upbringing, inculcating good manners and tidiness, seeing to the child's daily duties and personal hygiene, or in the case of younger children their daily care.

The foster mother was often pictured as one constantly knitting for the children, since the public believed orphans were always in need of clothing.

As time changed, however, different types of children — and more troublesome children — were accepted into care, and they needed different types of support, opening the eyes of those responsible in the child care field to the necessity of a new type of special home with a trained staff, more household personnel and a director to manage it. The role of the foster mother disappeared, as it was no longer she who did the daily caring and attending to the children, and with the change of her duties the job title changed too.

In the sixties, a number of new residential homes were established which, for many reasons, were more expensive to operate than the former ones. Following a traditional approach, it was "natural" to select males to be in charge of the homes ("forstander") and "naturally" a man could not become the director of a home unless his wife was ready, at a very symbolic salary, to take on the job of housemother.

The "Forstander-Wife" as House Mother

This was the period when Danish women began entering the labour market, and thus not a few of the forstander-wives followed their husbands more through loyalty and tradition than because they felt the job was a personal calling. Moreover, the job of forstander-wife was a life-long occupation at this time, but connected to the forstander. If he died, the wife could lose her job, as well as the house or flat that came with the job on very reasonable terms.

Many young forstanders were employed in the newly-built special homes, such as treatment centres and vocational schools, causing the wives a dilemma: should they undertake the task with its many demands and expectations, thereby helping their husbands get the coveted job? Since the role was non-structured, a period had begun when the job of forstander-wife varied from home to home. Generally speaking the young forstander-wives found that their older colleagues mainly regarded their role as being hostesses, who sat knitting at meetings, arranging

flowers, giving orders, and working very individual hours, in some cases only a few each day. The younger women wanted to be acknowledged for more than this. At the newly established homes, and as they took upon themselves more visible responsibilities, the job of forstander-wife was defined alongside that of the rest of the staff.

Some of them became interested in participating in the one-year training programme which existed for new child care workers.

As the women became increasingly better educated in those social circles which provided the new directors for the residential homes, they refused to enter the job dependent on the work span of their husbands. As a result, the social care workers' union, together with the government created the new job of "husholdningsleder" (or "household manager") for the person in charge of the various household affairs in the residential home. (In many countries the "house mother" fulfils a similar role.) For the first time, the job became a normally funded individual job, the same as all others.

The Husholdningsleder

With the new terminology came new expectations. Several of the young women, many of them married to the forstander, felt a different obligation towards the job, and were ready for its greater demands and were more attached to it than their predecessors. Their working hours were no longer up to the individual, but were defined at the time of employment, or re-employment at the

home.

With the beginning of this new period, in which the entire structure of the homes changed, the job functions broadened as the husholdningsleder in many homes took over tasks formerly performed by the director. As before, the husholdningsleder was responsible for food, clothing and health matters of the children, but had a much larger staff to help her in her task. The wives of the unit leaders were responsible to her. She was still expected, however, to act as hostess when visitors came and she supervised the trained care workers in certain tasks. As the homes now accepted students from training schools for child care workers, generally she also had to instruct them on household matters.

Many of the homes were like small villages with all staff members living on the premises. Thus the husholdningsleder was responsible for the proper functioning of the entire household consisting of staff members and their families.

In some of the more advanced homes the husholdningsleder was given added responsibilities for the maintenance of the many buildings. She did long-term planning for furnishings, household equipment and for interior decorations, in some cases in consultation with the daily users or with the individual units, in others just following her own taste.

In 1976, Denmark adopted a new social code according to which the thirteen (to a certain extent self-governed) counties took over responsibility for all residential child care.

At this time the residential child care workers wanted to have primary influence in the homes. Everyone was to be equally competent at all the tasks and the care worker was supposed to be able to handle all situations better than anyone else on the staff. Since they now had a three-year training programme behind them, some care workers believed that collective rather than hierarchical leadership of the homes was to be preferred. There was no need, according to them, for



"The foster mother was often pictured as one constantly knitting for the children, since the public believed orphans were always in need of clothing."

domestic staff or husholdningsleders.

The policy makers and civil servants were hard pressed to know whether to follow the directives of the home directors or to put up with the demands of the child care workers. In many of the smaller (and even in some of the larger) homes, all the household staff, including the husholdningsleder, were dismissed and untrained assistants were hired in their place. Also, overall attention to household matters, including economic planning, disappeared and as a result of the staffing system many of the new settings became more expensive to operate. In some places the system worked well. In others it did not function at all.

On the basis of a recent questionnaire to husholdningsleders, it appears that most fulfil clearly defined but dissimilar functions, probably as a result of the individual development of the homes after the counties took over the responsibility for providing the homes which were needed.

But as the social care work-

ers' union is responsible for negotiating the salary of the husholdningsleder, there are still some agreed common areas of responsibility: co-ordinating the total household, including book-keeping, meals, laundry, cleaning, clothing repairs, personal hygiene, visits to the physician and dentist, including annual medical check-ups by a visiting physician, etc. Apart from these responsibilities, the husholdningsleder maintains many other rather varied functions as part of her job. By and large she is recognized today as an equal colleague to the rest of the staff. Her example fosters mutual respect towards the social care workers and other staff members dealing with the children.

In doing her job well she can be, like any ordinary housewife,

the person who supports the staff and children in the different hurdles of daily life. If no one else does, the husholdningsleder can be the person fostering traditions and pleasant daily routines.

Does the job call for special training?

During the past twenty years the question of whether a husholdningsleder needs special training or not has been widely discussed in Denmark. Some of the persons holding the job have social care worker training and a few are trained as grammar school teachers of home economics, but most are engaged for the job only on the basis of personal qualities.

As the job ranks among the low paid ones and is part-time, it can only attract those qualified persons who for some reason want it regardless of the income it provides. However, because of the increased expectations and demands of the husholdningsleder job, there is need for training programmes in child

care and pedagogics, and household management, including some knowledge in book-keeping and first aid. But training alone is insufficient preparation for any leading position in a children's home, so that the husholdningsleder should also have a certain amount of practical experience in this or a related field.

At present, about forty husholdningsleders are organized in the social care workers' union and there may be approximately ten additional persons in similar positions in the country. Because all jobs in Denmark are open to both sexes, there are at least two men employed as husholdningsleders, probably because among all applicants for the job they have had the best qualifications.

There is as yet no specific training requirement, perhaps

because the job is not full-time. Thus, the person's previous occupation, personality and commitment are the current criteria for selecting an applicant.

The husholdningsleder's future in the children's home

In the written answers to my questionnaire, Danish husholdningsleders showed that they were generally satisfied with their job content, believing that their contribution toward the well-being of the children and the well-functioning of the home was important.

I hope that this article will encourage further discussion in Denmark and in other FICE member countries about the role, function and training of this level of staff member, an important member of the care and administrative teams in many residential institutions.

Child & Youth Care Worker/Practitioner

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Preference will be given to persons with a minimum basic qualification in Child Care (BQCC). Matriculation and an ability to speak English and one other main language a recommendation.

Code 08 Driver's Licence essential.

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1994: The International Year of the Family



The official emblem chosen by the United Nations for the International Year of the Family was designed by Catherine Litassy-Rollier, well-known Swiss artist living in Vienna. It depicts the family at the heart of society.

States, organisations — and families themselves — have been challenged by the United Nations to observe 1994 as the International Year of the Family. This is an important hook on which child care organisations may hang some of their planning for next year. The NACCW's National Conference in July asked Director Lesley du Toit to pursue with the Association a policy which encouraged child care programmes to focus more strongly on the children's families and communities. The Vienna NGO Committee on the Family compiled checklists to guide people's planning for an effective focus year. These were directed at educational/research institutions, family organisations/social services, media/opinion leaders, national and local NGOs and other voluntary organisations, national governments — and families themselves.

Families

Many of the items on the family checklist are equally applicable to living groups in children's institutions —

- Avoid situations harmful or hurtful to the dignity of family members within and outside the family.

- Accept moral and actual obligations towards children, elderly, disabled or disadvantaged members, stressing full participation of all family members in the tasks of caring.
- Set aside at least one day per week for the whole family to share a meal — without TV!
- Take time and care to build informal trust relationships between families, neighbours and friends, for common leisure and mutual help.
- Motivate and train all family members to assume their full responsibilities in household tasks, community and public life.

Organisations

Many of the checklist recommendations to family and social service organisations reflect current thinking in the child care world —

- Provide a greater variety of family support services which strengthen the self-care ability of families and informal local networks.
- Provide support and counselling to families with problems to enable them to function (single parent families, families of migrant work-

ers, those with unemployed or disabled members, etc.)

- Consider the issues, problems and aspirations of often-neglected sectors such as child labour, street children, children exploited through prostitution, etc. in keeping with the spirit of the newly adopted UN Convention on the Rights of the Child.
- Campaign for the abandoned child's rights to a permanent substitute family and the same child's rights to his/her roots.
- Provide preventive help through volunteer counselors who, guided by experts, care for youth problems by helping them with their needs for employment, leisure activities, communication with friends, youth groups and families.
- Promote programmes to improve family well-being and family health, especially mental and non-material needs.

'No one is an island ...'

From the UN promotional material: Indeed, everyone is part of a family. At a closer look, families are a natural community which links us and frees us from the isolation of the solitary individual and the anonymity of the solitary world.

The very existence of the family shows that we are not meant to be totally alone. This 'basic unit of society' can provide a privileged environment for the nurturing, growth, well-being and freedom of its individual members — fulfilment based on mutual respect. Despite the often delicate and difficult situations of life in modern society, families continue to provide the basic life experience of responsibility and values such as loving, caring and sharing. The impact of socio-economic changes in our society has very much affected and altered the family and its function. The growing concern for the role of the family calls for new perceptions and creative reassessment of what promotes or what hinders the family, in order to ensure its continuing vital status in modern society. Families themselves need to participate in structuring socio-economic and cultural conditions which affect their well-being.

All kinds of families

Aida Cindy, former director of UNICEF, said at an International Seminar in Vienna in 1991: "Various patterns of family life exist all over the world — nuclear families, extended family systems, polygamous families, the single parent families or the families of two people, all exist to meet basic human needs. It is vital that the International Year of the Family should stress the strengthening of family resources, the reduction of poverty and destitution, the expansion of family health services, the reformulation of family law, the strengthening of literacy and adult education, improvement in the quality of family life, and the prevention of violence within the family. All these are urgent issues needed to strengthen the family as an institution."

What will you be doing?

All of us who are involved in child care are also involved in family care — and many of us are still learning about the second of these. Please feel free to use the pages of this journal to inform others of the plans you are making, and of the activities you undertake, as part of the year of the family. We could all be doing something — so that at the end of 1994 our families can really feel the difference.



"... the right to know and be cared for by his or her parents."
— UN CONVENTION ON THE RIGHTS OF THE CHILD (VII)

The two articles on these pages, very helpful for children's organisations, come from the latest issue of the highly recommended quarterly *Track Two*, published by the Centre for Intergroup Studies at UCT. In the first, journalist **Lesley Fordred** speaks to organisational development consultant **Nico McLachlan**

NGOs in Crisis: Why non-governmental organisations need to re-focus

Many NGOs seem to have been experiencing conflict within their ranks since 1990. Why?

I think the context has changed and most of them have realised that they need to go through some sort of process of redefining their reason to be.

Why the need for redefinition?

The 'market factors' have changed; there have been changes in the environment in which they operate, and changes in what their constituencies expect of them.

There's a diminishing and shrinking funding base, and more severe competition for funding.

There's a sudden realisation that in order to get the funding that they used to get in the 1980s, they need to be more specific about their mission and about having proper business plans.

How have most NGOs redefined themselves?

I think they've become far more focused.

They know what they want, they know what they should be doing, they know what their contribution to changing society is.

Those I've been involved with began with a fairly blurred definition of their activities.

Most NGOs really developed through individuals, and those individuals brought their own interpretations of what the organisations were.

They developed the organisation in terms of their own experience and skills.

Now there's the realisation that even 'we' as an NGO have a bottom line; that there's a relationship between what we do; how much it costs; where the money is going to come from.

The projects have to provide some form of return.

Have many of the NGOs you've dealt with experienced conflict?

Yes, most of it in terms of internal structure, in terms of relationships between regions and national organisation, and the relationship between the organisation and its board of trustees. There was a lot of conflict about different interpretations of what the organisation should stand for.

What sort of patterns have you noticed?

A common trend is that some individuals who were very prominent in the organisation a few years ago are causing the problems in the organisation. There's been a degree of professionalisation over the last two or three years, where new, skilled people have come in with different ideas and different experiences, and they can pose a threat to the people who were key players five or six years ago.

There's discomfort among individuals who are realising that their interpretation of what the organisation was about is not relevant any more. I've certainly seen quite a few people leaving and finding other niches for themselves.

Another problem has been very rapid growth. When you have a small group of individuals, perhaps half a dozen people, you function very democratically. Everybody, no matter who they are in the organisation, is involved in every decision. But when suddenly there are 20 or 30 people, the organisation requires some structure and some kind of hierarchy. It requires definition of jobs, key result areas, salary structures, communication structures, sorting out who goes to what meetings and that kind of thing. That's a source of a lot of internal conflict.

How do those conflicts manifest themselves?

Non-performance. The organi-

sation starts slipping into a state where it's not performing, and there's lots of internal dissatisfaction. People will start doing different things without getting proper authorisation. In terms of measurable outputs, the organisation does not perform the way it was intended to, because it gets locked into internal turf wars and battles and lengthy discussions about something before it's actually approved.

Once this happens, how does an organisation begin to resolve the conflict?

Well, the only ones that I can comment on are the ones that come to us. But my impression is that prior to that they actually just let it continue, hoping it will disappear. Here and there I've heard of organisations going on a retreat for a weekend, but the conflict is dealt with in a very 'pseudo' way, not a sincere, 'let's get down to the bottom of the problem' way. But that's not a NGO-unique problem. I think it's a typical thing in organisational behaviour — an inability to help yourself if you're really slipping into conflict and non-performance.

So the pattern of going things is the problem, rather than the content of the problem. And that is why it becomes difficult to resolve from within...

Yes. What is required is complete rejuvenation, re-focus-



ing, re-definition of why they're there. It's not just fiddling with a few structures or procedures.

What sort of advice would you give to people in NGOs experiencing these difficulties?

Strategic focusing is the key process. Typically, they'll come to us and say, "We've got serious problems with time management" or "We've got salary disparity and that's causing morale to decline in the organisation." Those are not the problems. They are just symptoms of the lack of strategic direction and focus. They really need to sit down and re-focus on what is their mission, or 'reason to be'; to figure out the core values that underlie the organisation.

That's the critical part of the process because quite often the old school, the activists, have had to come to terms with the fact that the reason why they joined the organisation and what they're trying to turn the organisation into are no longer feasible. People must really get down to what propels the organisation why is it here, and then re-focus by asking, "What is our role in the transitional society, and what *should* our role be?" Most of the organisations that I've worked with will answer that by saying they are working for a non-racist, non-sexist, democratic society. That in itself is sloganish; it's a bit of a hollow sort of vision to have, because does it really excite people? The issue they've got to define is, "What is it that we do that will bring about that sort of society?" One of the things that's given NGOs a reason for existence is bad government. But what happens if you don't have that bad a government any more? Or what if the government of the day is a more acceptable government to them? If they want to truly remain a non-government organisation and not become a government agency, they've got to basically say to themselves: we will always have a cause to fight and the cause will be government in itself and its inability to distribute equitably. And that provides the ongoing mission of most NGOs.

Organisations worldwide are inherently conflictual. During this time of transition and uncertainty, South African organisations are especially subject to stress and — if conflict is managed well — to significant growth. To survive the next few years, organisations need long-term strategic planning, involving all their people in charting their future. In this second article, **Karlin Osler** reports ...

Diagnosing organisational conflict: Key questions to ask

In the volatile times ahead, how we deal with conflict in organisations will have a direct impact on society in general. When diagnosing organisational conflict, one cannot look at the symptoms alone. The conflict should not be seen in isolation from other organisational issues such as leadership styles, the organisation's value system, what it stands for and what it wants to achieve. There is no 'quick-fix' or 'miracle cure' — each conflict requires a specific contingency solution and approach. Yet the starting point is to ask — for all in the organisation to ask — the correct questions:

Who are the main parties in the conflict, and what are their real interests? Often parties have a stake in perpetuating the conflict — some may gain recognition, for instance, whilst others hide behind the conflict. Though often difficult, one needs to try to differentiate between personal interest, and group or organisational interest.

Does the organisation have a clear sense of where it is, and where it wants to be in the future? Does it have an explicit mission/vision/purpose developed with the participation of all in the organisation? Have individual values, goals and aspirations been considered, and has there been a process of matching individual and organisational value systems? Do people within the organisation believe in these value systems and live them in their jobs?

Is the conflict around organisational resources (such as assets, money, space or material), or is it around deep human needs for acknowledgement, status, recognition and the need for development? Often the former masks the latter.

What are the roots of the conflict, or what precipitated it? Organisational conflict results not from immediate single causes, but rather from many variables impacting on each other over a longer period of time, such as a history of 'separate development'.

What is the dominant leadership and management style of everyone in the organisation — not just people at the top? Are the leaders at the various levels autocratic, or do they actively seek everyone's participation in decision making? Do leaders have a concern for the job, or do they have a co-operative style that shows concern for individuals? Do they practise what they preach?

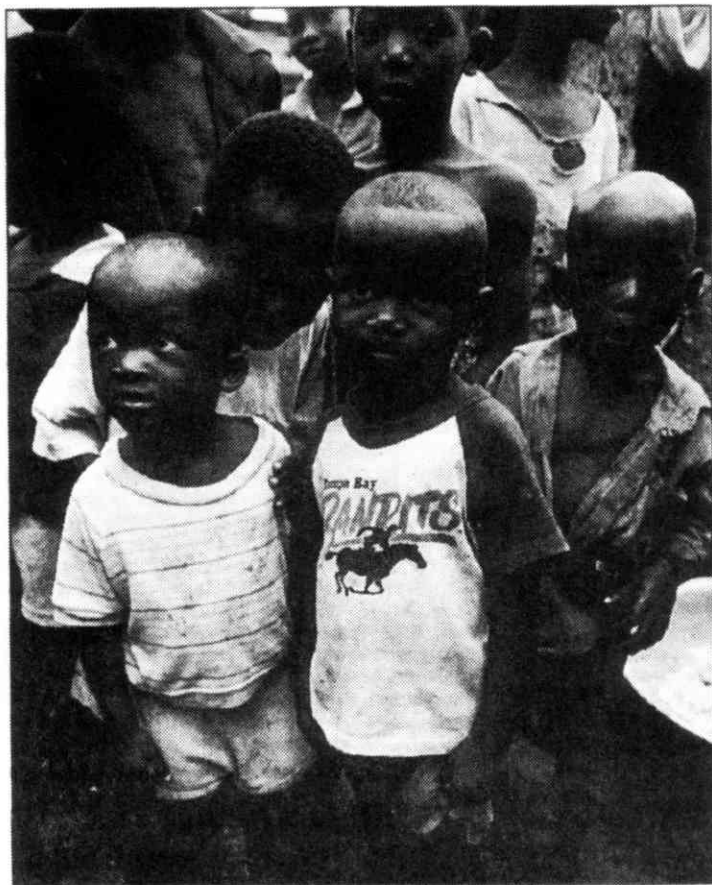
Are the organisational structures conducive to conflict? Are individuals or departments competing against each other, or 'building empires'? Signs of this could be people in different parts of the organisation not communicating, having distorted perceptions and negative stereotypes of others, not knowing what other groups are doing, or even overtly sabotaging the efforts of others.

Are organisational policies such as reward systems causing the conflict? Are people rewarded for working as individuals, or are they rewarded for working together in teams, towards a common goal?

Are lines of communication accurate, clear and open? Does the organisation have a system of regular meetings where all employees get a chance to contribute in a constructive and positive manner? Do people in the organisation actively listen to each other and reflect, before merely 'shooting from the hip'? Is there a balance between formal and informal communication channels that promote real dialogue and discussion?

Are the power or status differences between individuals or groups contributing to the conflict? Often power cannot be equalised in organisations, but one can achieve psychological equality by making all employees realise that they are interdependent, and need mutual support towards a common goal.

Are we dealing with functional or dysfunctional conflict? Is the conflict adding to or detracting from organisational performance? Many people see organisational conflict as something negative which must be resolved completely. Yet conflict is inevitable, and indeed in certain amounts extremely useful, by energising people into realising that they need to change or move forward. In organisations where there are too many 'yes-men', where there is a sense of complacency with no diversity or new ideas, it can help to stimulate conflict by altering structures or incentives, or bringing in contentious outsiders. Conflict can be used as a source of creative tension to enhance decision making, increase levels of productivity, and help the organisation move forward.



AFRICA BACKGROUND

Following on the NACCW's First All-Africa Conference, a new occasional series focusses on social and economic aspects of the continent. From **Robert Press** of *The Christian Science Monitor*:

Africa needs aid – and redirection of its own resources

Life is getting tougher for most Africans as economic growth slows and population rates continue to rise faster than anywhere else in the world, according to two major reports issued in May — one from Africa and one from Washington. And by the end of this century, it is estimated that half the deaths in the world caused by AIDS will occur in Africa, according to the World Health Organization (WHO), which met during May in Geneva. Taken together, the three reports underline the need for increased Western assistance

to Africa, as well as some shifting of African priorities, according to both Western and African analysts. "To a certain extent, Africa is being seen as a basket case," says David Whaley, resident representative here of the United Nations Development Programme (UNDP). But he added, "There has been a massive diversion of resources and attention from Africa" to other parts of the world, especially Eastern Europe and the former Soviet Union. Africa is no longer getting its fair share, which will make tackling economic and popu-

lation problems harder, he says. "There should be a marked increase of resources" to Africa from the West, Mr Whaley says. In Geneva, WHO officials complain that not enough money is being committed by the developing world to the fight against AIDS, especially in places like Africa.

Armies to education

But it is not just a matter of more money, experts say. African governments, for example, should redirect some of their own spending away from their armies to AIDS educational programmes, the African Development Bank (ADB) said on May 12 as it opened its annual meeting in Abidjan, capital of the Ivory Coast. The ADB also criticized some African governments, including Tanzania's, for trying to meet donor demands for slimmer federal budgets by chopping back educational and health services. "Key social sector services, especially to the poor, often proved to be the softest targets for cuts," ADB vice president Ferhat Lounes told reporters in Abidjan. Such cutbacks can eventually slow development, he added. A better approach, according to the bank, is to trim unproductive jobs in state companies, then retrain laid off workers. The ADB gave a gloomy economic forecast for Africa for 1993, noting that gross domestic product (GDP) had declined from 2.6 percent in 1991 to 1.9 percent in 1992. While the GDP may get back to 2.5 or 3 percent in 1993, it will not keep pace with Africa's 3.1 percent population growth rate, the bank's report notes.

Population growth fastest ever

On May 11, the Washington-based Population Reference Bureau released its annual survey showing world population growing at the fastest pace ever — almost all of it in the developing world, and sub-Saharan Africa leading growth. The report cited a 3 percent population growth rate for this region, a slightly lower figure than that used by the ADB. By comparison, Asia — not counting China — is growing at 2.1%. Including China, the rate drops to 1.7

But for Africa as a whole, with notable exceptions, there is still a lack of understanding of the gravity of the potential consequences of AIDS

percent. Latin America is growing at 1.9 percent a year, the bureau reports, adding that growth in the United States is 0.8 percent and in Europe it is virtually stagnant at 0.2 percent.

The UNDP's Whaley says that in several African countries, including Kenya and Botswana, the average family has decided to have fewer children for a variety of reasons, including major educational programmes and provision of family-planning materials. But there is a time lag between awareness of family planning methods and use of them, says Kenyan sociologist Rachel Musyoki of the University of Nairobi. "One has to be fully convinced at a personal level" of the need for smaller families, she says. But she is optimistic that Africa's development can improve. "There's no lack of ideas or technology," says Dr. Musyoki, calling on African governments to improve their development planning and use of donor funds. Whaley says the Kenyan government has recently stepped up its efforts to get the message out concerning the dangers of AIDS.

But for Africa as a whole, the ADB report says that "with noticeable exceptions, there is still a lack of understanding of the gravity of the potential consequences" of AIDS. At the WHO meeting in Geneva, delegates from the US and 37 other countries have called for WHO, the UNDP, and the United Nations Children's Fund (UNICEF) to improve their co-ordination in the battle against AIDS.

Photograph, children in Kinshasa by Robert Harrison, CSM staff