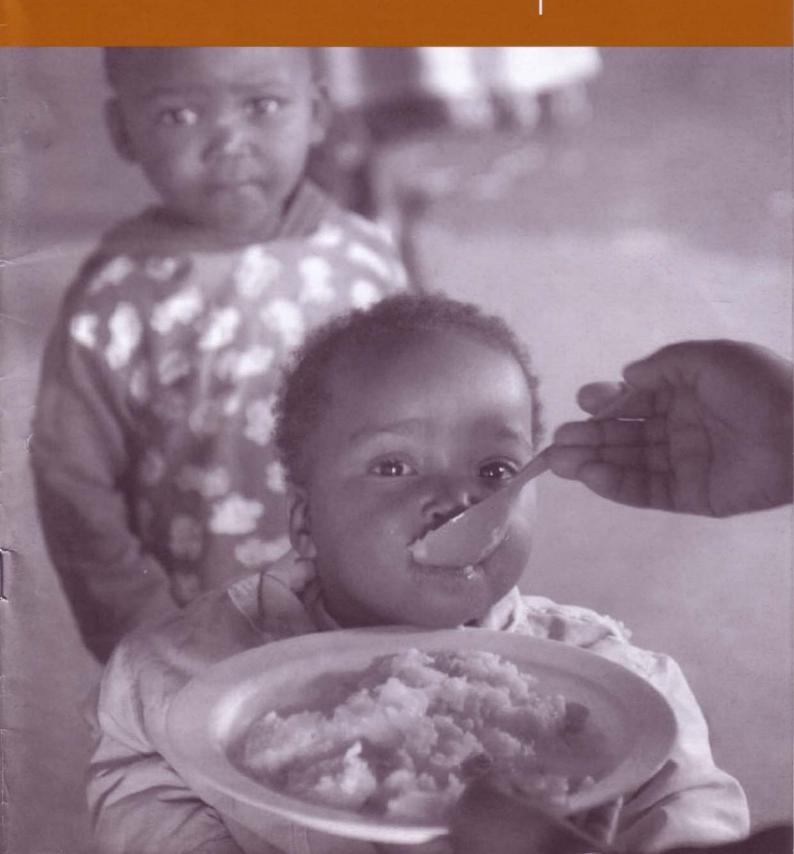
## child and youth care

A Journal for those who work with children and youth at risk

ISSN 0258-8927

VOLUME 21 NO. 5 MAY 2003



**EDITORIAL** 

## There's a storm brewing — can't you read the signs of the time?

here was a conversation between Jesus and his disciples in which he rebukes them - something like this: What's up with you guys? You can tell if it's going to rain or storm and you do something about it, but you don't seem to be able to read the signs of the times right now!

Most Child and Youth Care Workers are quite good at predicting what will happen. They learn to read the signs embedded in events, dynamics and incidents. When they integrate their observations, knowledge, experience of past similar events and their 'what is really going on here?' analyses, they can usually act, there and then, before its too late and before children or youth get hurt.

So why has there not been a more appropriate full, here and now, response to the signs of our times in the field of Child and Youth Care? With some few notable exceptions there is little movement among large numbers of Child Care Agencies throughout the country to transform their systems, attitudes or programs to meet the looming crises in the lives of children and youth in this country. Some agencies blame Government for slowing down a movement to align services with the real needs of children and youth. It all has to do with funding they will sav.

Of course it has to do with funding and there is no doubt that many of our services are threatened with closure or trimming down because of the inordinate time that it has taken State to get on board with really appropriate funding systems. Clearly some agencies are genuinely trapped. They want to spend money on transforming their services and respond to the signs of the times, but are afraid of putting their agency at risk. Many really good responses to the real child and youth care needs of the time have taken those risks and have tried to transform their services for the sake of children and youth. Some, may be unwilling, or unable. to do so. Some may be hiding in easy old comfort areas and themselves contributing to the slowness of the transformation.

There is no longer any excuse that a child and youth care agency can make for ignoring the critical signs of our times in the lives of huge numbers of children, youth and families devastated by HIV and AIDS and living precariously where they belong - in communities. How can agencies say that they can't put energy into the ravages of poverty in its effect on children and families? Do agencies really not see the small children of parents running inner-city sidewalk stalls loitering themselves into risk?

How can agencies support their often well-intentioned services to children who don't really need them - simply because they are better off in the Children's Home, whilst we

know that numbers of youth and children are in jails; in refugee camps; in circles of prostitution and twilight gangs?

There is no longer any excuse for dinosaurs of the child care system last seen 20 years ago to flourish and indeed proliferate with 25 to 1 staff ratios and residential populations of anywhere between 200 and 700 children and or youth. In 1982/3 the de Meyer Commission Report recommended that programs to children and youth should be provided in services of manageable size with staff to child ratios that ensure quality individualised service to children and youth.

The idea of profit and loss based on playing the number game in child care was ruled out in favour of working toward another balance sheet. The de Meyer Report of 1982/3 clearly advocated for funding to be used for real gains in the lives of children and youth, not for a cost against quantity service. Yet some services to children and youth still continue to sacrifice effective services for large cumbersome residential programs. The frightening feature of this is that State are buying into such systems and funding them whilst other transformed. better quality, more relevant services are struggling to avoid closure.

The transformation of the Child and Youth Care System policy was designed to meet the needs arising from the South African situation. It eclipses the de Meyer Commission recommendations. It correctly assumes that residential facilities should be slim, trim and effective. Child and Youth Care expertise is directed also where it is most needed - in preventative, early intervention, community-based programs. In this way the traumatic move of children and youth into residential facilities should be avoided. State and the Child and Youth Care sector have to play their part in making this happen. Any delay is just too costly in the lives of the children. The point is that State has been slow in implementing appropriate funding systems for Child and Youth Care facilities to ensure the transformation of the system. That is inexcusable. But the point is also that there is no excuse for any Child and Youth Care facility to drag its heels along with State. Many Child and Youth Care agencies by now should have moved in some way into the transformation paradigm because it is the right response to the signs of the times. It is the right thing to do for Children and Youth.

We all have to respond to the signs of the times; to move the transformation process forward before more children and youth are hurt.

**Barrie Lodge** 

## NACCW

The National Association of Child Care Workers is an independent, non-profit organisation in South Africa which provides the professional training and infrastructure to promote healthy child and youth development and to improve standards of care and treatment for troubled children and youth at risk in family, community and residential group care settings.

National Executive Chairman
The Revd Barrie Lodge, BA, UEO, Bed
P.O, Box 75:1013, Garden View 2047
Tel (011) 614-0212 Fax (011) 484-2928
Celi: 082 561-0927
email: valbar@ilafrica.com

## Treasurer Mrs Maryna Falck

Regional Chairpersons Mandy Goble, Syvion Diamini, Marian Murray, Ivy Madolo, Pat Heyman, Mark Taylor, Harold Slabbert, Mvuyo Manyungwana, Francisco Cornelius

## **Professional Staff**

Director: Merie Allsopp BA. HDE, NHCRCC, P.O. Box 36407, Glosderry 7702 Tel: 021-762-6076 / 762-3142 / 762-4702 Fax: (021) 762-5352

P.O. Box 17279, Congelia 4013, Tel: 031-201-7707/7712 Fax 031-201-7754

Consultants: Sbonglie Manyathi B.Soc.Sc. (Hons). P.O. Box 17279, Congella 4013. Tel: 031-201-7707/7712 Fax 031-201-7754 e-mail: naccwdt@iisfrica.com

Kathy Scott B.Soc.Sc (Social Work) PO Box 36407, Glosderry 7702 Tel: 021-762-6076 Fax: 021-762-5352

Gauteng Claude Vergie 2 Botes Street, Florida Park 1709 Tel: 011-484-1512 Cell: 082-513-8242

## Dearrice Cross PO Box 482, King Williams Town 5600 Tel: 043-842-1932 Cell: 083-998-4793

083-532-4163

emba Faleni, Stepping Stones Koetaan Street Extens Port Elizabeth Tel. 041-481-2147

Northern Cape Margaret Van Wyk P O Box 985 Kimberley 8300 Tel. 053- 872-1010

Free State Feziwe Bacela, Tshireletsong Place of Safety & Children's Home. Private Bag x20536, Bloemfontein 9300 Tel: 083-990-6427

Noni Xengana, Mzomtsha Children's Ho Tel: 047-568-0049 Cell: 082-749-2928

Fund Raising Organisation 088004480002 Web site: www.pretext.co.za/naccw e-mail: headoffice@naccw.org.za





Child & Youth Care ISSN 0258-8927 is a non-commercial and private subscription journal, formerly published in Volumes 1 through 13 (1983 to 1995) as The Child Care Worker. Copyright © The National Association of Child Care Workers. Editorial: PO Box 36407, Glosderry 7702 South Africa. e-mail: naccwct@iafrica.com Telephone: (021) 762-6076 Fax: (021) 762-5352.

Child & Youth Care is published on the 25th of each month except December. Copy deadline for all material is the 10th of each month. Subscriptions: Individual Membership of NACCW is R50.00 p.a. which includes a free copy of the journal. Non-members, agency or library journal subscriptions: R50.00 p.a. post free. Commercial advertising: R312 per page pro rata. Situations Vacant/Wanted advertisements for child and youth care posts are free to Corporate and Individual Members. All enquiries, articles, letters and new subscriptions may be sent to the above address.

## contents

ISSN 0258-8927 • VOLUME 21 No.5 • MAY 2003

| 4         | The Humor Connection                                  |
|-----------|---|
|           | Joyce M. Saltman                                      |
| 6         | The Stockholm Declaration                             |
| 7         | The Child Justice Bill                                |
|           | — frequently asked questions                          |
| 9         | Learning Areas for Residential Program<br>Supervisors |
|           | Dr. Thom Garfat                                       |
| 10        | Personality Profile — Elwin Gallant                   |
| 11        | Too little,too late?                                  |
|           | Julia Sloth-Nielsen                                   |
| 13        | Behaviour Management                                  |
|           | A continuation of our monthly focus                   |
| 15        | Life, for Everyone                                    |
|           | Deborah Ewing   |
| 17        | <b>Building Courage Through Creativity</b>            |
|           | Gert O. Hansen, Grethe Sandholm                       |
|           | and Thomas Kruse                                      |
| 19        | Spotlight on Students — Truthfulness and              |
|           | <b>Honesty: Essential Components of Ethical</b>       |
|           | Child and Youth Care Practice                         |
|           | Jackie Winfield                                       |
| 21        | Conference 2003                                       |
| <b>可能</b> | Draft Programme Overview                              |

## Dates to Remember

**July 2003** 

## MENTAL ILLNESS AWARENESS MONTH

- 16 National Hepatitis Day
- 19 First Women's Rights Convention - 1884
- 27 2 August GANSA Week

# Please note The NACCW Head Office has a new e-mail address. In future, please direct all e-mail to: headoffice@naccw.org.za

Cover picture: @ Benni Gool

## umor invites others in, breaks down the barriers between people, encourages them to take risks for a closeness that may be impossible to create by any other means. The humor connection is a powerful bond that unites us at our most human level. and sharing that bond can be an adult's greatest gift to a child. As Victor Borge said, "Laughter is the shortest distance between two people." Nowhere is this more true than in the field of special education, where children are often afraid of closeness in any form. Humor can bridge that gap without being threatening. I supervise a practicum with socially and emotionally disturbed youngsters from a residential treatment centre. Our children are badly damaged, sometimes as a result of sexual abuse, sometimes from physical abuse, and sometimes from blatant neglect. Very few of our students come from two-parent families, and many have never known a father at all. Those fathers who have surfaced are frequently the abusers. To put it mildly, our kids do not live in a happy world. Sarah was one of our students. She was 10 years old, and rarely have I encountered a more resistant child. We began the first session with an ice-breaker asking the children for their names and what they like to do. Sarah would not participate, claimed to have no name and no family, and remained outside the circle. When finally pressed for something she wanted to be called, she replied, "Cockroach," In her sessions with a single tutor, she refused to do any work at all, ripping any papers given to her and throwing them on the classroom floor. Each day during the group, she attempted to sabotage the activity by scribbling in black crayon across her classmates' pictures and through a variety of other anti-social behaviours. Her tutor and all the other teachers working with her group were at their wits' end.

## THE HUMOR CONNECTION

Joyce M Saltman Southern Connecticut University

Sarah seemed unmotivated to learn, play, or relate on any level to any of the children or adults in the room.

I came to visit Sarah's class regularly, always making funny

Humor invites others in, breaks down the barriers between people, encourages them to take risks for a closeness that may be impossible to create by any other means.

comments to Sarah. On my third visit, Sarah said, "You would like my father; he's funny too. Would you like to hear a joke he told me?" This was a child who had denied parents at all, and now she had a joke from her father! Needless to say, I listened intently to the joke and expressed appreciation for her father's sense of humor. By the fourth day. Sarah saved the chair next to her. When I casually touched her arm, she abruptly drew her entire body away, then smiled and touched my arm in the same tentative way. This was clearly the beginning of a friendship. By the end of the month, Sarah

was participating in group activities, doing her academic work with her tutor. She had agreed to let her picture be taken, as long as I was next to her, and she spent my entire birthday wrapping her art projects in wallpaper samples to give to me as presents. The most outstanding gift she gave me was a hug. On the last day, the students were asked to draw a picture of a creative invention. Sarah and Juan, the second-most-difficult child in the class, drew a plane together. The plane was dropping bombs. I asked Sarah what they were killing, and she simply replied, "They're killing cockroaches. I don't need them anymore."

Sarah's incredible transformation took place in just four weeks, with only one and a half hours of contact time each day. While I believe that many other components came into play, there is no question that humor opened the door.

Karen Christian believes that fun is the ingredient that raises a child's motivation to learn. If we target motivation, both responsibility and persistence will improve, and the environment will become nurturing, rather than punitive. An atmosphere of mutual respect will thrive there. Kids want to be in such a place. Karen says, "If you've told a child something 10 times and he still doesn't have it, who's the slow learner?" Experiential learning, in

which students experience success in their daily regimens, often involves humor. In my own research, two of the analytic categories for examining the impact of humor on learning were "breaking down barriers between learner and facilitator" and "improving group cohesiveness." In both areas. humor was shown as an enhancement. Students are able to see a teacher who employs humorous techniques as being more human, caring more about them as individuals, attempting to entertain while teaching, and being less critical. In addition, in an environment where students laugh together, there is a sense of community that leads to less resistance to taking positive risks. Kids will take chances when the climate is one of fun and acceptance. They are willing to make mistakes in front of their peers, without fear of being judged. Humor is truly liberating. particularly with uptight students who have frequently experienced failure and ridicule in the past. Why use humor with kids who have problems? It works! ■

Joyce M Saltman is a full-time professor of special education at Southern Connecticut State University in New Haven and a Gestalt therapist with a private practice in Cheshire. Her innovative teaching style has led to the development of a graduate course in "The **Enbancement of Learning** through Humor" as well as a summer institute called "Healing, Education, Laughter and Play" (HELP). In ber previous life, ber spirit of adventure led ber to appear as a stand-up comedienne for dozens of organizations and clubs, including Dangerfield's and Good Times in New York City. Her experiences in the areas of education, therapy, and comedy bave provided and outstanding background for ber research on "The Therapeutic Value of Laughter." She can be contacted at 384 Country Club Road, Cheshire, CT 06410.

## POSITIVE VERSUS NEGATIVE HUMOR

Research indicates that while positive humor lessons stress, it helps promote group cohesiveness, facilitates a warm social atmosphere, and aids in the retention of material. Negative humor has the opposite effect.

According to Christian Hageseth (1988) in his book, *A Laughing Place: The Art and Psychology of Positive Humor in Love and Adversity*, there are nine criteria for determining whether a particular verbal and/or behavioural incident is perceived as an example of positive or negative humor.

- 1. Positive humor reduces anxiety, while negative humor has an unwilling victim as in the case of teasing or ethnic jokes.
- Positive humor brings people closer together both physically and psychologically; the opposite occurs when negative humor is present.
- **3**. Positive humor enhances communication; when people are laughing together, they start talking with all the people near them, even when they don't know each other. With negative humor, people turn away.
- 4. Positive humor helps people accept new ideas and information, which is why humor is so often employed in selling, teaching, and debate. Negative humor uses sarcasm, humiliation, and teasing, and gets laughs at the victim's expense.
- 5. Positive humor surprises the listener with a new perspective, thus breaking down prejudices and causing previously unacknowledged truths to become obvious, while negative humor depends on stereotypes and prejudice.
- 6. Positive humor depends on permission. Jokes require a target, whether it is an idea, an institution or a person. If you are the target of some kidding or the butt of some joke, such joking can be positive, providing you accept that position willingly. When victims are unwilling, they get hurt, and the humor is negative.
- 7. Positive humor invites people in. The circle of laughter always enlarges to include those on the periphery. Negative humor excludes people, and private jokes put barriers between individuals.
- **8**. Positive humor moves you in the direction of good health, while humor results in stress.
- 9. Positive humor is free and friendly.

## **Stockholm Declaration**

he second international conference on Children and Residential Care held in Stockholm 12-15 May, 2003, sponsored by the Swedish Foreign Ministry and the Swedish International Development and Co-operation Agency (Sida), has discussed the situation of children in long term residential care. There is indisputable evidence that institutional care has negative consequences for both individual children and for society at large. These negative consequences could be prevented through the adaptation of national strategies to support families and children, by exploring the benefits of various types of community based care, by reducing the use of institutions, by setting standards for public care and monitoring of the remaining institutions. The participants at the conference - more than 600 individuals from the governments, civil society and the research community from 80 countries - have agreed on the following:

## **Principles**

Governments, which have ratified the CRC, have certain binding obligations, including a direct primary responsibility for children deprived of family care. These obligations also extend to others in society whose actions can make a difference in the realisation of child rights. In the case of children deprived of family care, these obligations include:

- Preventing children from being deprived of family care in the first case by fighting discrimination and by supporting appropriate family services.
- Resorting to institutional care only as a last resort and as a temporary response.
- Developing, financing, implementing and monitoring alternative systems of care based on the principles of providing children with a family environment.
- Regulating and monitoring any remaining institutions for children in public care in line with agreed international and national standards and the CRC.
- In all actions reflect the voice of youth and secure participation from children and families affected.

## **Actions**

In order to translate these principles into actions we urge governments to:

- Restructure the system of public care in order to diminish the use of institutions, develop alternative care approaches and strengthen effective community based preventive and protective social services.
- Strengthen the legislative framework, in line with the CRC, to ensure that the rights of all children deprived of family care, including those in prison, are fulfilled.

- Fight discrimination that brings children in to public care – including sex, disability, ethnicity and HIV status of children or their family members.
- Adopt standards for public care and develop good monitoring procedures.
- Reallocate funds to prioritise preventive and alternative care services.

## We urge civil society to:

- Assist in the developments of strategies to deinstitutionalize children and create alternatives.
- Promote the principle of non-discrimination, especially with regard to HIV-status, ethnicity and disability, among families, communities, care and service prividers and governments.
- Mobilize communities to support families to prevent children being deprived of family care.
- Push governments to fulfill their commitments under the CRC to children in public care.
- Transfer skills and experience to local partners and document and disseminate good practices.
- Create opportunities for child, youth and family participation in decision-making.

## We urge the research community to:

- Assist in creating systems for documentation and monitoring of children in public care.
- Find a system of common indicators for child placements.
- Carry out long-term studies on the consequences of different forms of public care for children as well as their economic and social cost.

We urge national and international funding partners to:

- Allocate funds based on the principles and actions in this document.
- Support the development of preventive initiatives and alternative care systems through experience and capacity building.
- Encourage close co-operation between government and civil society in supporting children deprive of family care.

## We urge practitioners to:

- Further develop community-based approaches and advocate for their implementation.
- Ensure that the approaches to children in public care are rights-based.
- Secure participation of children and families in programme design and in decision that directly affect them.

We, the participants of the Stockholm Conference on Children and Residential Care, declare ourselves committed to work towards these principles and actions. ■



## THE CHILD JUSTICE BILL

## FREQUENTLY ASKED QUESTIONS

## Which "children" does the Child Justice Bill deal with?

The Child Justice Bill deals with children under the age of 18 years who are accused of committing crimes. The South African Constitution provides that every person under the age of 18 years is a child. Under the current law, children as young as seven can be tried in a court, although this is very rarely done. The Child Justice Bill says that children below the age of 10 years should not be prosecuted, and those between the ages of 10 and 14 are presumed to lack criminal capacity, but the prosecution can bring evidence to show that a particular child has criminal capacity. 10 years is still considered to be a low age according to world standards, but the presumption of lack of capacity will help to protect children who are immature.

## Why should we deal with children who are accused of crimes differently from the way we deal adults?

The Bill takes cogniscance of the fact that when we are dealing with child offenders we are dealing with human beings that are not yet fully developed. It also starts from the understanding that adolescence is a time for testing limits, and that although many children will commit offences during their teens, most will grow up to be law abiding citizens. The Child Justice Bill aims to give such children a chance to put right what they have done through diversion, which means that they do not get criminal records. Even when children commit serious crimes, their age is a mitigating factor when it comes to sentence, and there is a need for a wide range of sentencing options.

## Why do we need a separate law relating to child offenders?

At the moment the law relating to children in the criminal justice system is spread over four different

statues, administered by three different departments. This means that people working in this field have to read four different laws to work out what must happen to children. This is particularly difficult for non-lawyers working in the system. A decision was taken by the government to create a more cohesive workable system, and it was found to be necessary to put the provisions in one new law.

In addition to these practical reasons, South Africa has ratified the United Nations Convention on the Rights of the Child and the African Charter on the Rights and Welfare of the Child, both of which require member states to develop separate laws and procedures for children in the criminal justice system

## If we lower the minimum age for prosecution won't more children be used by adult criminals?

The fact that children below the age of 10 cannot be prosecuted gives rise to the fear that children will be used by adults to commit crime. The fact is however, that we cannot blame the children for this – it is the adults that should be prosecuted and punished for using children in the commission of crimes. The Bill does deal with this in the section on offences and penalties. The Bill says that any court that convicts an adult of inciting, conspiring with or being an accomplice to a child committing a crime must find that to be an aggravating factor when sentencing that adult for the crime concerned.

## What is Diversion?

Diversion is a way of getting children to take responsibility for what they have done without taking them through courts and prisons. They are instead set specific tasks, or required to attend a programme or in some way made to put right what they have done wrong. This helps them to understand the consequences of their behaviour and therefore to change that behaviour.

## What about the responsibility of parents? It is true that some parents don't care

Children who commit crimes are often victims when

## Child Justice

their children are in trouble and refuse to take responsibility, but most are upset and confused, and express an inability to deal with their children once they reach adolescence when peer pressure becomes a strong influencing factor in the child's life. The Bill requires and supports increased responsibility from parents. A child who is arrested should be assisted by a parent or other appropriate adult as soon as possible, and the child should be accompanied at all hearings by this person. The diversion of children, particularly level one diversions, is very much focused on the involvement of families. The magistrate can issue "orders" which actually help parents to control and manage the behaviour of their children - with back-up support from the court. Examples are "good behaviour orders" and "family time orders". This means that parents retain the primary responsibility for guiding their children and managing their behaviour, but they are empowered to do things that on their own they may find difficult, such as keeping children away from places and people that lead them into crime.

## How does the Bill approach the issue of children who commit property crimes because they are living in extreme poverty?

The Bill has been drafted in such as way as to take into consideration the fact that there are more and more children committing crimes because of poverty. South Africa can look forward to an increasing number of orphans, and although being poor and being an orphan should not automatically label children as being "potential offenders" the fact is that their circumstances make them very vulnerable. The Bill has a special provision that says that when a child is accused of committing minor crimes in order to meet his or her basic need for food and warmth, then that child should referred for a children's court inquiry, and be dealt with as a child in need of care rather than as a child offender.

## Situations Offered: Child Care Workers for Residential Facilities

## Situations Offered

Krugersdorp and Randfontein respectively, West Rand, Gauteng, South Africa

## Posts offered:

Two Childcare Workers for residential facilities

## Qualifications

Recognised Child & Youthcare Qualification

## Salary

Negotiable based on qualification & experience

## Contact

Sterna Venter, Program Manager email: gertj@intekom.co.za Telephone: (011) 660 2763



**Personality Profile** 

## Elwin Gallant

Iwin was born in Willowdene, Port Elizabeth and attended the school in the city. He went to the University of the Western Cape where he completed a B.A. in Social Work in 1982. His career in Social Work has seen him move through the fields of family work, probation work, school social work and residential social work.

Elwin completed a Master's Degree in Social Work in 1992 at U.P.E. and also completed the National Diploma in Child and Youth Care in 2002 (Technikon SA).

Elwin has been Principal of the Eastern Province Child and Youth Care Centre in Port Elizabeth since 1999. Before this period he was a residential social worker at Erica House Place of Safety, Manager at Outeniekwa House in George and Control Youth Officer at the Dept of Sport Arts and Culture in the Eastern Cape.

His experiences with young people have taken him through various learning opportunities. One highlight was attending the Commonwealth Meeting during October 1997 in Edinburgh, Scotland, with a group of young people from the Eastern Cape.

Caring for young people, being with them and engaging with them on various levels is the core business of Child and Youth Care Work. Elwin feels that child and youth care workers must strive and seek for opportunities to engage with young people, to make them happy and enjoy life - creating moments they will treasure.

Elwin has been actively involved with the NACCW since 1991. He has been chairperson of the Southern Cape Sub-Region and the Eastern Cape Region and is presently Vice Chairperson and Training Co-ordinator in the Eastern Cape. He completed the extended Training Course in Creative Methods in Child and Youth Care Work which was presented by the Peter Sabroe Institute of Social Education, Denmark. Thus Elwin's latest excitement is about games and movement. He feels strongly that Child and Youth Care Workers should be trained to be creative in the field and hopes to contribute to this process.

Thom Garfat provides a checklist divided into 7 areas on

## Learning Areas for Residential Program Supervisors

Child and Youth Care has adapted these into a checklist and invites you to test your knowledge, skill and self-awareness and plan your development!

## **Program and Development**

- Do I know the characteristics of effective residential programs and what ingredients make an environment 'therapeutic'?
- Do I understand the place of residential care programs within the continuum of services to youth and families?
- Am I able to articulate and develop a philosophical and theoretical framework for the program?
- Do I possess specific knowledge about my own program model and the information necessary to make it function effectively?
- Am I able to facilitate and maintain program change, and program flexibility?
- Do I know when it is necessary to involve external professionals?
- Am I able to define how care and treatment will be interpreted and provided in the facility?

## **About Intervention Planning**

- Am I able to develop, utilize and maintain a framework for effective case management?
- Am I able to develop effective intervention plans for youth and families?

- Am I able to translate general psychological knowledge into specific youth care coping strategies?
- Do I have a framework for developing relevant assessments of youth and families?
- Do I operate from a systemic framework for helping?

## About Child and Youth Care Practice

- Do I have a detailed knowledge of child and youth care practice (i.e., to know what e workers do, and can do)?
- Do I know the elements of context and process for effective youth care interventions?
- Am I able to define the youth care approach to working with youth and families?
- Am I able to model effective youth care interventions and relationships with youth and families?
- Am I able to translate individual and family information into daily life interventions?

## About Child and Youth Care Workers

Do I understand the

- developmental stages of care workers as professionals?
- Am I able to identify when youth care staff are looking to the children/youth or treatment environment for their own personal healing?
- Am I able to identify staff who manifest unresolved issues from their personal lives that may be interfering with treatment?
- Do I know the characteristics of effective youth care workers?
- Do I understand the role and potential of child and youth care workers in the treatment process for troubled youth and families?
- Am I able to understand the specific issues that get stirred up in child and youth care staff when working in a treatment setting (e.g. transference issues, power and control issues, dependency issues, ambivalence toward clients and the job)?

## About Children Youth and Families

- Do I know the characteristics of normative youth and family development?
- Do I have a framework for the analysis of family health, functioning and difficulties?
- Do I know how to facilitate involvement of families in programs?
- Do I know how to facilitate involvement of staff with families?
- Do I know how to engage youth and families in the treatment and care process?

## **About Supervision**

- Do I have a practice definition of, and a framework for, supervision (versus management or therapy) and support?
- Do I understand the dynamics of issues such as power, culture and gender in the supervisory relationship?
- Do I understand the concept of

## Practice

- bi-directional parallel process in youth care supervision?
- Am I able to contextualize the immediate issue into the broader context?
- Am I able to hold staff accountable for implementing program values and philosophies; and for attitudes which manifest in unacceptable interventions?
- Am I able to translate and monitor those areas where staff can and should exercise personal autonomy, and when they should conform to team consistency?
- Am I able to manage effectively the difficult terrain in supervisory relationships when supervision and "therapy" needs of staff overlap and meld?
- Am I able to translate how one's "personal" self becomes part of ones "professional" behavior/performance?
- Do I understand the boundaries of the supervisory relationship?
- Do I possess the ability to provide constructive feedback to staff about performance?
- Do I have the ability to coach staff on a daily basic for performance improvement?
- Am I be able to motivate staff during difficult times, and to understand the necessary ingredients for staff morale?
- Do I understand the principles of adult learning?
- Am I able to facilitate staff learning and development and be able to individualize the learning process for different staff?
- Am I able to discern between acceptable and unacceptable risks to youth and families when staff are learning?
- Am I able to support staff during times of crisis, to be able to conduct effective, goal oriented learning evaluations for staff?
- Am I able to identify staff and program development needs and facilitate a learning process to meet those needs?

## **About Self**

- Do I possess an active self-awareness?
- Am I committed to my own professional growth?
- Do I value integrity, honesty and relationship-based work with staff, youth and families?
- Do I have direct experience in youth care practice?
- Am I able and willing to deal with my own personal issues when they arise?
- Am I able to work effectively with external systems and persons?
- Am I committed to a child and youth care approach to working with troubled youth and families?
- Am I able to deal with the 'unknown' when it arises?
- Am I committed to transformational learning?
- Do I have a commitment to, and respect for, child and youth care workers as professional treatment personnel?

## Temptations of the self

Today, as we step into our program, group, ward, class, team, club ... wherever we work ... the greatest temptation we face is to feel proud and self-satisfied when someone thanks us, acknowledges us, defers to us, admires us, appreciates us.

We probably feel that we worked hard to get to the point where we are trusted to be a counsellor, child and youth worker, teacher, mentor, mental health professional, whatever, and it feels good when someone looks up to us, honours us or relies on us.

Red warning signal. As much as we might deserve the trust of our clients, students or colleagues, we know that it is in their interests that we do the job we do. The doctor asks "Tell me where it hurts" in order to identify possible routes to follow to restore the well-being and good function of the patient – not in order to be recognised as a good doctor!

Our main responsibility for self-awareness is related to knowing our skills, knowing our sensitivities, knowing our biases and blind spots. Nothing to do with self-satisfaction and self-congratulation. Our professional successes are when others manage their lives and relationships more successfully.

Our self-awareness is not selfconsciousness; rather, it frees us to be other-conscious and other-aware.

So, today, when someone tells us how wonderful we are and we are tempted to bask, we recognise the warning that we have failed to pass on the light. It is, rather inappropriately, shining on us.

> — from CYC-Net http://www.cyc-net.org



## Too little, too late?

Julia Sloth-Nielsen, Professor of Law, UWC

## Provisioning for child-headed households

Projections indicate that the number of AIDS orphans in South Africa will double to 800 000 by the year 2005. Indications are that the majority of children orphaned by AIDS at present are not being accommodated through formal placements in alternative care structures. The African kinship care system that would once have absorbed children with our parents into communal life can no longer be relied upon to fulfill that function. Current figures suggest that that foster parents are looking after 35% of orphaned children and only 0.1% are being adopted.

A significant percentage of children orphaned by AIDS will find themselves headed by children.

Recent community-based research into approaches to caring for children orphaned by HIV/AIDS details seven typical models currently in use for these vulnerable children. These include:

- Independent orphaned households in which children have no formal assistance in looking after on another;
- Orphaned households where informal care is offered by community members to children in their area (also called indigenous care);

- Government or NGO-run programs that seek to identify and support children, for example, through income-generation and awareness-raising programs;
- Home-based care offered both to critically ill adults, and their dependent children;
- Non-statutory residential care, operating from private homes without them being registered as places of care or children's homes; and
- Recognised formal placements of orphans with other families

## A Right to family life

Although international treaties affecting children do not adequately deal with the position of States facing large-scale orphan-hood, these treaties clearly endorse a policy that orphaned children should not be institutionalized, but should, where at all possible, grow up in some form of family environment. In the Grootboom judgement the Constitutional Court held that the socio-economic rights of children to basic nutrition, shelter, basic health care services and social services (s 28 (1)(c)) should be understood in the context of the child's right to family care or parental care, or appropriate alternative carers 28 (1)(b)}. Parents and other family care-givers thus have the primary duty to provide children with the

socio-economic necessities set out in s28. But when abandoned and thus find themselves without families, the responsibility for fulfilling their socio-economic rights rests squarely on the State.

## Ensuring the survival and development of children

The State consequently has two distinct constitutional duties:

- 1. It has a duty to ensure that children in child-headed households are linked with some form of parental, familial or institutional care.
- 2. It has a duty to provide the resources necessary and development of the children.

The latter duty in s 28(1)(c) of the Constitution is not subject to the qualification of available resources. This means that ultimately the State has a constitutional duty, as the surrogate 'parent' of such children, to ensure that their basic needs are met. Given the especially vulnerable position of children in child-headed households, it can be argued that the State has a primary obligation to provide immediate and direct assistance to such children to ensure their continued survival and development. The State could fulfill these obligations through the payment of grants,

## HIV/AIDS

the direct provision of food and clothing, providing relief from payment of school fees and the like.

## Too little, too late?

The government has begun to take steps to fulfill its constitutional obligations with regard to child-headed households with the adoption of a National Integrated Plan for Children and Youth Infected and Affected with HIV/AIDS (NIP). This plan endorses a community and home-based care model, which has reportedly been most successful in other African countries. These models are based on a children's rights approach and accepts that children orphaned by AIDS face special challenges. Such children face threats to their survival. threats to their security, and have special needs for self-actualization, palliative care and bereavement counseling. These needs, it is said, are often best met in supportive community settings. Community and home-based care models mostly use volunteers as the backbone of a care-giving strategy. However, given the fact that the State bears the primary responsibility for the welfare of orphaned children. such home-based care must include some form of material assistance to ensure the survival and development of orphaned children.

The NIP does not only provide community and home-based care but also for voluntary counselling and testing for HIV, life skills and community outreach programmes. Currently the preponderance of the annual NIP budget has been allocated to the life-skills and education component of the programme, and is thus spent on HIV prevention programmes in schools. Only a relatively small proportion of the overall budget is dedicated to the community and home-based care programme, although this proportion

increases over time. Even then, the budget allows for an amount of R120 million to be spent on community and home-based care programmes in the 2004-2005 fiscal year, which given the huge demand, seems like a very small amount indeed.

Although the state's chosen policy response towards children living in child-headed households can be regarded as a reasonable one, the programme falls short of the criteria spelt out in the Grootboom case because of the low priority given to the care of AIDS orphans within the fiscal allocations. In addition, the programme does not make adequate provision for emergency

relief for those in desperate need. Seen together with the difficulties that are presently experienced at grassroots level in accessing material support and social security, there are substantial barriers to the socio-economic rights of the children living in child-headed households. Although this is a difficult and complex issue, the failure on the part of the State to allocate adequate resources to address the very serious needs of one of the most vulnerable groups in society cannot be judged as reasonable.

Taken from ESR Review Vol 3 No 1

## Butting out Fines

f we have a group of six or sixteen young people in our group, then every minute is precious, and when we are on duty, we are on duty!

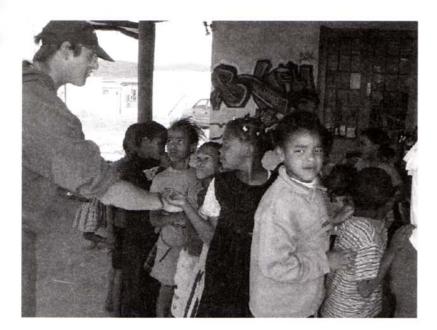
Trouble is that in our work there are so often the crises, the tense moments, the dramas. There is always someone aggressively staking out his domain or high as a kite or too sick to go to school or barricaded into her room or terrifyingly depressed... When we have spent time with these situations and the intensity has (for the moment, at least) passed, we are tempted to make some tea and wait for the next episode. We call this the "putting out fires" mode of Child and Youth Carework. And the worker who only puts out fires is damned forever to only put out fires.

Today, instead of asking ourselves what horrors need to be fought, ask what assets and strengths need to be added to the lives on our kids. Ten minutes listening to one child's opinion adds ten minutes to her sense of self and can buy ten minutes of better frustration tolerance for her tomorrow; ten minutes of empathy with one child today adds ten minutes of understanding and tolerance for him today and a ten minutes longer fuse on his need for resentment and revenge tomorrow.

We know that when there is no stress and rage, kids are more receptive to what we have to offer. So grab the good times when you can. When we have attended to the drama we have time, not for relaxation, but for some of our best work. ■

## Continuing our monthly focus on

## Behaviour Management



e focus attention on a particular cluster of challenging behaviours, common effects of these behaviours possible interventions and frequent mistakes made in attempting to manage them.

## The Cluster of Challenging Behaviours and Attitudes

- Refuses to try new tasks.
- May start, then stop almost immediately.
- Fearful.
- Will only attempt tasks that appeal to him/her.
- Often appears busy, but ends up not completing tasks.
- Usually argumentative.
- Always makes excuses for what he/she did or didn't do.
- May "dare" you to make him/her do anything.
- Appears very hostile to adults.

## Common Effects may be

- Child care worker is frustrated.
- Child care worker spends disproportionate amount of time trying to deal with this student.
- Peers are often influenced by this negative attitude. When they see it working for a classmate, they will try it themselves.
- A lot of child care workers time is required outside class.
- Many times the confrontation causes a win/lose situation between child care workers and youth.
- Youth are very aware of how child care workers deals with the "I won't do it" youth. Child care workers may lose control of him/herself.

## Alternative Considerations and Actions

- Revenge: This youth is pulling away from all adult figures and striking out at authority.
- Power: Open dissent is a form of power.
- Escape from Pain: This youth could be trying to escape the pain of various concerns at home or in school. Efforts should be made to explore possibilities of underachievement in school or difficulties outside school.
- Secondary needs being revealed
- Status: This youth might be attempting to "be somebody" by saying, "No" or "I won't do it" to child care workers or any kind of authority.
- Aggression: This acting out may be a negative form of aggression, and effort should be made to direct this behavior in some positive manner. This youth could be allowed leadership roles in the classroom, or given responsibilities on the playground or in out-of-classroom activities.
- Power: This is a need that many youth do not know how to handle in a positive manner. Youth refuse child care workers as a show of power. Every effort should be made to demonstrate to the youth that such behavior causes him/her to lose power.
- Achievement: Personal as well as academic success is important to this youth.

## Possible interventions include

- Make your expectations for this youth very clear. State the choices that are available to the youth now or later.
- Be sure that you and the youth are clear regarding what the specific results will be of behavioural choices.
- Help the youth to realize that your expectations are fair and reasonable. Then, follow through with the stated consequences.

## Practice

- Set reasonable goals for this youth.
- Don't expect the youth to alter his/her behavior all at once.
- Remain calm. Don't react personally. Stay professional.
- Be consistent in the way you deal with this youth. Don't show favoritism one way or the other from day to day.
- When correcting the youth, preface a negative comment with positive comments. For instance, say, "This behavior isn't typical of you; what happened?" or "You usually get along with everyone. What made you fight today?" It's easier for this youth to accept teacher guidance when it's clear that you see his/her good points as well as his/her faults. Regard every correction situation as an opportunity to build relationships with the youth not to destroy them.



- Look for small improvements in the behavior of the youth. Your ability to see the small positive changes will affect how you work with the youth.
- Celebrate with this youth small victories and improvements in behavior. Use such comments as "You should be proud of yourself for such a positive effort on this assignment," or "Isn't it neat that this was the result of your efforts on the assignment?"

## Common misjudgments and errors in managing the youth which may perpetuate or intensify the problem

- Listening too much to excuses.
- Letting this youth miss activities rather than pushing him/her.
- Taking this youth behavior personally, or allowing him/her to upset us.
- Feeling that we have to lower standards for this youth.
- Misjudging this youth's real ability.
- Thinking this behavior is an act of defiance.
- Losing control and physically trying to force this youth to meet our demands.

CYC-NET is specially for you. It combines a discussion group of more than fourteen hundred people world-wide with a web site updated every day for its daily 1500+ visitors. It promotes the journals and the literature of the field and is currently indexing its own growing on-site library of thousands of articles. It is a forum for writing and publishes a monthly e-magazine of archived and contemporary material.

Best of all, CYC-NET is absolutely **free** for the asking at **www.cyc-net.org** — although it depends entirely on voluntary membership subscriptions and donations for its survival.

Visit soon. Visit often.



THE INTERNATIONAL CHILD AND YOUTH CARE NETWORK

"Is it over? Is it really over?".

asked Sbongile's father as he walked out of Courtroom B at the Pietermaritzburg High Court. Yes, it was over. Four years and four months of waiting and fighting for justice to be done. Sipho Gift Khanyile was sentenced to life imprisonment for raping Sihle and Sibongile, both turning 12, after he found them picking mulberries on their way home from school in September 1998.

After confirming the conviction, Justice Herbert Msimang heard argument about Khanyile's age. His mother claimed he was 15 at the time of the rapes; he claimed he was 17, x-rays showed he was "at least 18' two

months after his arrest. Pertinent cross-examination of the mother by the Prosecutor, Adv David Bailey, had revealed her evidence to be

unreliable at best. But the case had suffered a final adjournment from

December 2002 to January, to give her chance to provide

proof of her son's age. The year on the torn pink hospital card that was reluctantly entered into the record as Exhibit C was hardly legible. The judge concluded that the accused must have been one or two months short of 18 at the time of the offence. Justice Msimang also heard argument about what would be an appropriate sentence. Adv Bailey referred to the judgement in the case of Davis R and State v Jansen, which said that "the rape of a child is an appalling and perverse abuse of male power that strikes a blow at the core of our claim to be civilized society...and that a community has the right to demand protection and not live in fear of 'terror inadequately punished'."

He argued that the circumstances

of the rapes were so aggravating that Khanvile should go to prison for life despite his age. Justice Msimang concurred that Khanyile's age alone was no reason to impose a lesser sentence than life: "The accused had decided in advance that one day he would commit these offences because they couldn't have been committed on the spur of the moment. He not only raped the girls but ordered them to perform lewd and obscene acts, and caused each complainant to witness the sexual intercourse he had with the other. It is hardly

The case of two schoolgirls raped in Msinga, KwaZulu Natal, came to a close on 22 January 2003, after more than four years.

## LIFE, FOR EVERYONE

**Deborah Ewing reports** 

surprising that one of the complainants had to vomit and that when she did he assaulted her... "These offences were not, therefore, only serious but they also fill one with a revulsion. It is difficult to understand why a human being can behave in this fashion to another human being. As a matter of fact, to call you an animal would be an insult to the animal kingdom. The systematic way in which you committed these offences suggest that you were older than the 17 years you claimed. You did not display conduct one would expect of a 17 year old. I am satisfied that the sentence of life imprisonment would be an appropriate one. You are therefore sentenced to a term of life."

Khanyile turned slowly to face the public gallery, looking for his

mother and looking for some reaction from the people gathered there. Perhaps he expected signs of jubilation from the family and supporters of his victims. There was the father of Sihle, whom Khanyile had threatened to 'come for first' when he got out. There was Squbudu Sithole, whose evidence had helped convict him. There was MaMbatha and 'those whites' (Creina Alcock and myself), whom Khanyile's mother blamed wholly for his arrest and conviction - though MaMbatha

> kept reminding her that she had never raped anyone. But no one was gloating. The courtroom was poorly lit - an ironic cost-saving measure if it was one after the R100 000's that this case has cost. Everyone looked back sadly at Khanyile and then stared at each other in the gloom, as if wondering whether there shouldn't be some more momentous finale to

this miserable saga. Shouldn't he cry out? Shouldn't his mother wail? Shouldn't we all raise our fists in the air and chant our victory? But the two fathers looked almost as if it was their son being led from the dock to start his life in prison. Outside, they explained how they felt. Everyone was relieved it was over; drained too. They were glad that the children would be protected from their rapist; Khanyile had done a terrible thing and must be locked up for a long time. If the sentence has been 15 years, we would all probably have let out howls of outrage. But at the same time, there was something depressing about having a hand in sending a young man forever to a place where there was no hope of rehabilitation and a high risk

## Criminal Justice Systems

from HIV/AIDS. "Thirty years would be all right. But life, life is too long!" said Sihle's father, shaking his head. He cheered up on hearing that life probably meant 25 years with good behaviour.

Discussion turned to what the outcome of the case would mean for the community. It was agreed the impact would be very positive. Men would know you cannot come to Msinga and assault children. They would know that if they try, they will be caught, that Inspector Shadrack Fiselwa Madondo and his police colleagues at Weenen will make a good case against them and that the courts will send them to prison until they are old. Children would know they have the right to protection and that if they speak out if someone abuses them, they will be supported. The community would know that a case like this can be won if everyone stands together. All these messages have reached every hillside and valley throughout Msinga. Although the chief Induna of the Mchunu traditional authority, Mr Petros Magedi did not live long enough to hear sentence pronounced (he died after a stroke after sentencing was supposed to have taken place, last August), the chief Simakathi Mchunu requested updates from every hearing to inform the tribal council of the developments. In the settlements on the sides of the Tugela River, in homes an hour's walk from the road, in all the schools, on all the farms, people have been discussing the case. "Ah, yes, the Khanyile case. What is happening? That is how it should be." The prosecutor from Estcourt, on

hearing the sentence, expressed her relief and her joy for Sihle and Sibongile. She said, "It was a privilege to be with them in court. When I saw how brave they were, I knew we all had to be brave for them."

The children and their families are relieved. They say the support they had has helped them cope with the ordeal and the outcome is what they wanted. 'Life'

imprisonment is not a concept of

time that means much to them. The case has been long but their childhoods have flashed past them. Sibongile is now in school; Sihle is labouring on a farm since her father's job came to an end. No one knows if their recovery will ever be complete. Sibongile can't face red meat since the rape and Sihle still becomes nauseous at the sight of soup. For Sibongile at least there is a clear sign of healing; she has become engaged. The wedding could be several years off, for the young man must still find work and the means to pay ilobolo (bride price). But an easier wait, than the wait for justice.

The Msinga rape case highlights many of the things that routinely go wrong from the moment a child discloses that she or he has been raped. To secure a conviction and a life sentence in this case it took the combined efforts of a whole team of people working unpaid alongside a few committed professionals within the police and justice system. It should have been settled in a matter of months; instead the children were exposed to secondary abuse at every step. While everyone involved feels great relief the Sihle and Sibongile's ordeal is over, there is also despair, that the system intended to protect children, lets them down so badly, in so many ways, so often. For every case of child rape that eventually ends in a prison sentence, hundreds end with charges being withdrawn and children remaining at risk. A dossier on the case is being finalized, with recommendations on improving the treatment of children in the criminal justice system.

Article from Children First February/March 2003

## Limpopo on the Road to a NACCW Region

The 11th April 2003 started just like any other day to the people of the Limpopo Province but it was an historic day to the Child and Youth Care Workers in what is to be known to be a region soon. Over 70 CYCW from as far as Venda, Polokwane and the Giyani area flocked to the Multi-Purpose Centre at Giyani to witness this event. To bless the occasion was the NACCW National Chairperson, the Rev. Barrie Lodge and the Gauteng Regional Chairperson Mr Syvion Dlamini.

The occasion that started with a feeling of uncertainty turned out to be a joyous kind of celebration when Linky Rikhotso led us with a traditional Shangaan song.

A detailed background and the history of the NACCW was shared by the National Chairperson as well as achievements and challenges the CYC field is experiencing in the day to day basis. Then it was the main purpose of the day. The following people were voted to the Steering Committee, which will drive the Region to be, until the day of the conference when a proposal will be staged for Limpopo to become a Region.

## **Steering Committee members**

Chairperson: Donald Nghonyama Dep. Chairperson: Edith Gumede Secretary: Bridget Ramaite Dep. Secretary: Ryle Lowan Members: Evens Rikhotso, Robert Chuma, Richard Legege, Peter Mabotja, Patric Mashimbyi, Eddy Makhubele, Victoria Mabunda, Raymond Mabunda

The National Chairperson welcomed the Steering Committee and urged them to face the new challenge in the region. These words were also supported by Mr Syvion Dlamini who assured everyone present that hard work will be the name of the game in order to succeed. The gathering was completed in the same tone of celebration. After refreshments the first meeting of the Steering Committee was held. We hope that this is the beginning of the one of the powerful regions in the history of the NACCW.

Report by Donald Nghonyama



The final part of a creative training program and co-operation between NACCW and Peter Sabroe Seminaret in Denmark.

## Building Courage Through Creativity

Gert O. Hansen, Grethe Sandholm and Thomas Kruse

eaders of this journal will be familiar with the co-operation program that was introduced at the NACCW Biennial Conference in Port Elizabeth in 2001. Over the two years of its duration, the project has developed, "spreading" the message in all provinces of South Africa. The project was designed to encourage child and youth care workers to initiate creative activities together with youth in a range of settings. In our partnership with the NACCW we focused on the project title: "Building Courage Through Creativity". This provided guidelines for how we had to develop the project and its ideas into a program. How could we create a program that showed that creativity is important in the development of the children, and that it is an absolute necessity in the communication between care workers and youth and children? In order to learn creativity, you must have a creative experience.! A wonderful experience in this project was the mutual trust we met, and the enthusiasm, energy and willingness to travel this road together. "Building Courage Through Creativity" is a challenge and a call that could not have been taken up and answered without the commitment in our partnership.

## **Basic Aims and Principles**

Every person and every child is a unique resourceful person with skills and potential. It is up to you as a trainer or child and youth care worker to let this potential blossom, in playing, jumping, acting, painting and singing. Many everyday life skills can be practiced without greater financial demands or special demands for equipment and space. 'Working in the moment' and 'taking the scene' and working according to the conditions and at eye-level with the children, were other key concepts were introduced in the training courses. In the final phase of the project

eleven experienced child and youth care workers prepared material for final presentation and examination. The second year of the program focused on developing trainers. Written assignments were submitted describing their training experiences of projects in their workplaces. Subjects as 'Creativity in Children Homes', 'Creativity and the Circle of Courage' were covered in these assignments. The 11 participants were organised into groups of 2-3 persons to prepare a demonstration of their advanced teaching skills using a group of students invited from Durban Institute of Technology. Dr Frida Rundell, Head of the Durban IT



was the external examiner. We three Danes led the examination.

## Outlines of a Curriculum for Creative Methods

The Peter Sabroe Seminariet and NACCW have during the course of the project developed the outline for training courses in creative methods at three levels. Only now, after having completed the program are we able to describe the curriculum because it has been worked out in an open plan experiential process. It is as follows:

## **Orientation Course**

This consists of one day of inspiration and introduction to the fields of creative activities and their importance in working with the children. The course demonstrates how activities stemming from sports, theatre, art and music can be transferred into the context of the daily life of

## **Partnerships**



a child and youth care worker. Hopefully this inspiration will produce ideas for use in daily practice and the demand for more training.

## **Basic Course**

This consists of two to three days where trainees are exposed to at least two creative subjects i.e.: Drama, play and movement, art, (music is a must in the future curriculum!). Each participant chooses one subject and works further on this.

## **Advanced Course**

This consists of three modules. Besides developing skills in one or two creative areas it also focuses on the teaching methodology. The first module is a continuation of the basic course adding the experience of being in the trainer's position. The module ends with deciding on a personal project for each participant to implement back home at the work place, training children and/or staff. The



second module ends with a written assignment. This assignment forms the basis for the 3rd Module. The participants then present the essence of their work in a training session with Child and Youth Care students.

## **Working Together in the Future**

The partnership between Peter Sabroe Seminaret culminated in eleven trainers from South Africa showing what they had learned by using creative methods in facilitating child and youth care workers. We three Danes were proud when the participants were congratulated with speeches and certificates were handed over, knowing that in the future, these eleven trainers will be able to implement the creative approach in their training in South Africa. Alongside the training curriculum, several hundred Child and Youth Care Workers have been introduced to creative methods during the project. The concept of Safe Parks for Children has been developed and two have been initiated and more are in the planning stages. During these 2 years we have learned so much! Success? Well, the Danida funding gave us the opportunity to meet friends in South Africa. We are sure that our friendship will last, and we hope there will be other opportunities for continuing the co-operation.

## A letter from a Child and Youth Care Worker

eing a Child and Youth Care worker is the finest thing you could be in this world. I am what I am today because of my work as a child and youth care worker. I have grown from this work, personally, mentally, socially and my cultural competence has developed. That is why today I can work with any child who's life is at risk and problematic because to me they are just like any kids.

This message is directly special to those who are not aware of the holistic work that we are doing. I invite you to come and see and experience the interesting work we are doing. You will not regret it.

Phyllis Mamaloka Hleza

## The Influence of Self

The KSS model helps us to understand some of the complexity of effective work performance in the profession of child and youth care. It shows us that the interaction between a worker's knowledge, skills and self indicates the standard of work demonstrated in any situation. In this article, I would like to focus on "self", the self of the worker, who the worker is in terms of values, beliefs, ethics, thoughts, feelings and actions. More specifically, why are truthfulness and honesty essential aspects of self? How are they connected to the outcomes we achieve with children? These questions will be considered in relation to the following clause from the code of ethics: "I will avoid misrepresentation of my professional skills, qualifications and affiliations."

## **Twisting the Truth**

To misrepresent something is to represent it wrongly or to give false account of it. It may include exaggeration, understatement, leaving out important information, fraud ("the use of false representations to gain unjust advantage" - Oxford Dictionary, 1982) and plain lying. Many child and youth care workers experience feelings of intense frustration and anger when young people misrepresent the facts ("How dare you lie to me!") and yet, too often, we hear of workers who do precisely the same thing. A couple of examples:

- A woman fails her BQCC 2000 module. She borrows her friend's certificate, makes a copy, carefully erases the original name and adds in her own name. She takes her certificate with her when she goes for a job interview. The advertisement for the job indicated that applicants must have qualifications in child and youth care.
- A child and youth care worker

A continuation of the series on the Code of Ethics

## Truthfulness and Honesty: Essential Components of Ethical Child and Youth Care Practice

**Jackie Winfield** 



tells friends and acquaintances that he is a social worker. At work, there is confusion at switchboard when people telephone for him but ask to speak to "the social worker".

## Some Implications of Misrepresentation

Let us consider first the situation of the fraudulent certificate. Remember that fraud refers to false representation to gain unjust advantage. The woman who made her own certificate was attempting to gain an unfair advantage. She was trying to get the advertised job by lying about her qualifications. She is

attempting to deceive the potential employer by saying she has knowledge and skills which she does not actually have. Now, let's imagine that she gets the job. Her new employer believes that she has certain capabilities and competencies. On the basis of this, the woman is given a position in which she is expected to perform particular tasks and functions. However, she is unable to carry out these tasks and functions because she does not have the necessary competence in these areas. This may have consequences for a range of different people: The employer is likely to become frustrated about

## Spotlight on Students

the employee's inability to cope. This may result in the woman losing her job and struggling to gain future employment without a good reference from the employer. The woman has set herself up to fail. In addition, there may be concerns that the training provided was inadequate or inappropriate ("If this is the quality of a graduate, then why bother with the training"). This reflects badly on the organisation which facilitated the training programme.

The team with whom the woman works at the organisation will be weakened by her lack of competence. A chain is only as strong as its weakest link. Other team members may have to carry out aspects of her duties so that service delivery is adequate. This will probably break down team spirit as colleagues become more irritated with the situation. The profession of child and youth care is adversely affected by unprofessional or incompetent performance by any individual claiming to be or employed as a child and youth care worker. Most importantly, children, youth and families at risk cannot receive the services they need from people lacking the necessary knowledge and skills. If a person is employed with the expectation that she/he can, for example, provide basic care and behaviour management to young people, but this person is not able to do so, this means that our clients are not getting what they need. They will not receive appropriate basic care and behaviour management. Probably, the employee will "do her own thing" which more often than not, is based on her own needs and not the best interests of the child. Giving false information about qualifications in order to get a job may have dire consequences for the young people with whom we work.

Now, let's look at the second situation, the child and youth care worker telling people that he is actually a social worker. This is perhaps a more subtle form of misrepresentation and the implications may be less obvious. Of concern here is that this worker clearly does not value the profession of child and youth care work. He values social work more highly or perhaps, values the esteem of his friends more highly. If we undervalue or do not value our work as child and youth care workers, this may mean that we undervalue or do not value children and youth. How can a child and youth care worker perform effectively if she/he does not value the work and the children? Surely the work has little meaning for such an individual and she/he will lack motivation and energy, essential components of professional child and youth care practice. Do you want either of these workers on your team?

... child and youth care workers ... should not claim to have competencies which we do not have, as the consequences of this may be far-reaching.

## **Avoiding Misrepresentation**

As child and youth care workers, we need to be self-aware. We must be conscious of our strengths and limitations, our abilities and inabilities, and then, be honest with ourselves and others about these. We should not claim to have competencies which we do not have, as the consequences of this may be far-reaching. Young people may end up more damaged. We need to engage in a process of life-long learning in which we develop ourselves and address our areas

of incompetence. There are numerous opportunities for training and we need to pursue those which are relevant to the needs of our clients.

## We need to remember that we are role-models to young people.

Each one of us needs to check our own values and motivation levels. Do I really value child and youth care work? Do I really understand what child and youth care work is? Can I see it as a separate but equal profession in relation to other professions such as social work or psychology? Am I one of those people who complain about how others undervalue child and youth care work, the lack of status and recognition, and yet, contribute to this perception by denying the profession and failing to educate myself and others about the complexity and importance of this work? We need to remember that we are role-models to young people. We expect them to tell the truth, to feel safe enough to be honest with themselves and others about who they are and what they have done. We need to teach this through our own behaviour, to be shining examples of integrity. Any form of misrepresentation undermines this. Ethical conduct is not an optional

Ethical conduct is not an optional extra for child and youth care workers. For too long, people have been able to engage in this work without the necessary training and supervision. With the recent establishment of the professional board, such individuals will be challenged to think again about what they do and how they do it. Let us all play our part in this process and represent ourselves and our profession truthfully and honestly.



14TH BIENNIAL CONFERENCE KIMBERLEY SOUTH AFRICA

8-10 JULY 2003

## Draft Programme Overview

| DAY 1         | TUESDAY 8 JULY 2003   |
|---------------|---|
| 07h30 - 09h00 | Registration  |
| 09h00 - 11h00 | Biennial General Meeting  |
| 11h00 - 11h30 | Теа   |
| 11h30 - 12h00 | Opening Ceremony  |
| 12h00 - 12h30 | <b>Opening Address</b> Session Chairperson - <i>Francisco Cornelius</i>   |
| 12h30 - 13h30 | Lunch   |
| 13h30 - 14h30 | Keynote Address: "The Circle of Courage" - Dr Martin Brokenleg<br>Session Chairperson - Sbongile Manyathi   |
| 14h30 - 15h00 | Tea   |
| 15h00 - 16h00 | <ol> <li>Steakaway</li> <li>What to do when you don't know what to do: An array of Behavioural Interventions - Prof Nick Smiar</li> <li>Creating Safe Professional Spaces: Regulation of Child and Youth Care - Dr Berto Lombard</li> <li>Creating a Safe Residential Space for Children:         Transforming a Children's Home into a Therapeutic Residential Care Centre - Himla Makhan</li> <li>Building a "Container" to Hold and Grow a Young Person's Experience - Justine Jowell</li> <li>Youth Mentorship - Renee Botha</li> <li>Circles of Care - A Community Strategy and Program for Vulnerable Children and Youth and their Households - Jacqui Michael</li> <li>Community Child and Youth Care in a Rural Area - Donald Nghonyama</li> <li>Workshop on the Children's Bill - Jackie Gallinetti</li> </ol> |
| 16h15 - 16h45 | Plenary: A Moment of "Silence" - Rev. Vivien Harber<br>Session Chairperson - Merle Allsopp<br>The Rev Vivien Harber, child and youth care elder and Anglican<br>priest leads the field through story and ritual in a time of<br>reflection, in the context of the HIV/AIDS crisis.  |



14TH BIENNIAL CONFERENCE KIMBERLEY SOUTH AFRICA

8-10 JULY 2003

## DAY 2 WEDNESDAY 9 JULY 2003

08h00 - 09h00 09h00 - 09h15

09h00 - 09h15 09h15 - 10h15

Registration Announcements

Plenary: Mr. Ashley Theron

Session Chairperson: Zeni Thumbadoo

## 10h15 - 10h45 Te

10h45 -12h30 2nd Breakaway

- Children Create their Own Safe Spaces: Child Participation as a Fundamental Right to Development - André Viviers
- I have a right to .... Treatment Demands and Children's Rights - Prof Nick Smiar
- Healing Children's Pain in Child and Youth Care
   Prof Jim Anglin
- Narrative Reflective Practice: Creating Conversational Spaces - Dr Frieda Rundell
- Making the Stories: Two Elders and an Initiate Tell Stories of Creating Safe Spaces for Children

   Rev Barrie Lodge, Dr Martin Brokenleg & Ms Yogeshree Govender
- Building Courage through Creativity

   Sbongile Manyathi, Pat Heyman &
   Francisco Cornelius
- Cross-Cultural Experiences for Youth: A Circle of Courage Project - Frank Mulhern, The Circle of Courage Kids & Co
- Wild Girls: Criminal Girls and Girls in Danger of Prostitution - Ida-Marie Nielson

## 12h30 - 13h30 Lunch

13h30 - 14h30 3rd Breakaway

- Isibindi: Creating Circles of Care
   Zeni Thumbadoo & Team
- 2. Implementing Policy in a Changing Era
   Makhosi Ndlovu & Team
- 3. The Safety of Wild Places Justine Jowell
- The Life-World of a Child Care Worker Viewed from the Circle of Courage - Thembi Modungwa
- The Transformation of a Secure Care Centre: Vision, Mission and Challenges - Bonny Tshabangu & Team
- Stories and Ceremonies A Container for Growth and Transformation - Mark Gamble
- The Treatment Book Mvuyo Manyungwana & Alfred Rens
- 8. The National Life Centre Forum Donald Nghonyama & Team

## 14h30 - 15h00 Tea

15h00 - 16h00 Plenary: Youth Panel - Input on Creating Safe Spaces

Chairperson: Elwin Gallant

16h00 – 16h30 Closure - Day Two Session Chairperson: Mark Taylor

19h00 Cocktail Party



14TH BIENNIAL CONFERENCE **KIMBERLEY** SOUTH AFRICA

8-10 JULY 2003

## DAY 3 **THURSDAY 10 JULY 2003**

08h00 - 08h45 Registration 08h45 - 09h00

09h00 - 10h15

**Announcements** 

Plenary: Creating a Safe Legislative Framework: New Laws for Children and the People who Work with Them

- Adv. Ann Skelton

Session Chairperson - Merle Allsopp

10h15 - 11h15 4th **Breakaway** 

- Working with Teenagers mean Meeting with 1. Teenagers: Introducing the Common Third - Ida-Marie Nielson
- Restorative Conferencing Reneé Botha 2.
- Arts Development Project: The Role of Indigenous Arts 3. Practices in Child and Youth Care
  - Freddy Arendse & Team
- Turning the Tide: A Therapeutic, Developmental Child 4. Care Program - Eve Bryant & Team
- Safe Spaces through Health Promotion 5. - Achmat Adams & Team
- The Professional Foster Care Program Pat Magina 6.
- Promoting Safe, Protective and Caring Environments for 7. Children - Buyi Mbambo
- The Impact of Training on the Creation of Safe Spaces for 8. Children - Elwin Gallant & Team

## 11h15 - 11h45 Tea

11h45 - 12h45 5th **Breakaway** 

- Working with Teenagers mean Meeting Teenagers: 1. Introducing the "Common Third" (Continued) - Ida-Marie Nielsen
- 2. Restorative Conferencing (Continued) - Reneé Botha
- Arts Development Project: The Role of Indigenous Arts Practices in Child and Youth Care (Continued)
  - Freddy Arendse & Team
- Making a Plan: The Challenge of Transformation in the 4. Context of Limited Resources - Lungilwe Mthwethwe & Patricia Anderson
- Creating Safe Spaces Through a Culture of Human Rights: 5. Child and Youth Development as Care and Advocacy - Jackie Winfield
- A Practical Integrated Model for Institutions Lorraine Cock 6.
- Sinothando Alternative Care for Children Infected and 7. Affected by HIV/AIDS - Mrs M Groenewald
- 8. Assessment of Funded Organizations: Western Cape Pilot Project - Koleka Lubelwana

| 12h45 - 13h45 | Lunch  |
|---------------|--|
| 13h45 - 14h45 | Plenary: Dr. Martin Brokenleg                                |
|               | Session Chairperson: Francisco Cornelius                     |
| 14h45 - 15h15 | Conference Resolutions                                       |
|               | Session Chairpersons: Rev Barrie Lodge & Francisco Cornelius |
| 15h15 - 15h45 | Closing Ceremony   |
| 15h45 - 16h15 | Tea  |



We are made to be open and interactive with each other.

Just look at my hands or my eyes or ears.

As human life evolved on the planet we became more vulnerable to the world.

What we are made for is to connect.

Just as the cells and the nerves in our bodies are made to connect with each other and spin complex systems, so are we.

We are made for interaction.