EXPLORING THE LIVED EXPERIENCES OF ABUSED OR NEGLECTED CHILDREN REMOVED FROM THEIR HOMES IN OMUSATI REGION, NAMIBIA AND PLACED IN A RESIDENTIAL CHILD-CARE FACILITY IN OSHANA REGION

A THESIS SUBMITTED IN FULFILMENT OF THE REQUIREMENTS FOR THE DEGREE OF MASTER OF ARTS IN SOCIAL WORK OF THE UNIVERSITY OF NAMIBIA

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ABSTRACT

In Namibia’s Omusati Region, it is a taboo to talk about family issues. For many families, issues such as those of violence against children are kept within the family. However, when children are abused or neglected, social workers from the MGECW in some cases remove them and place them in alternative care with an aim of protecting them and focusing on ‘the best interest of the child’.

To increase understanding of this major social issue, a phenomenological study was conducted to explore the lived experiences of eight abused or neglected children (five females, three males) removed from their homes in the Omusati Region and placed in RCCF’s in Ondangwa, Oshana Region. Non-probability purposive sampling methods were used to select participants and the primary data gathering tool were the semi-structured interviews. The study used the qualitative approach to provide person-centred information aimed at understanding the children’s lived experiences regarding their removal and placements at RCCFs. Tesch’s (8) method of data analysis was employed to analyse the data collected through the one-to-one person-centred interviews.

The findings indicate that even though there is legislation guiding the duration and placements of children in RCCF’s, children are kept longer than necessary in the RCCFs. The study revealed that children voices are unheard regarding their removal and placements. Some respondents described being lonely, separated from their siblings and families and interrupted schooling. Identity, self-blame, cultural confusion and language were some of the issues identified that have a negative impact on the children’s self-image. The most significant environments offering support resides in the mesosystem which include the staff members at the facility, the teachers at schools and nurses at the clinics. The participant’s responses captured their feelings, emotions, behaviours, and thoughts and also indirectly revealed their coping strategies.

Sharing their stories may equip the social workers with an understanding of the day to day life of this vulnerable population and recognise the children voices in decision
making. The findings may also encourage the social worker making the placement to maintain a strong network of support around the child, his or her family, and the facility which may contribute to the development of the child’s positive self-image and minimise negative outcomes.
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<td>AIDS</td>
<td>Acquired Immune Deficiency Syndrome</td>
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<tr>
<td>CCPA</td>
<td>Child Care and Protection Act</td>
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<tr>
<td>CRC</td>
<td>Convention on the Rights of Child</td>
</tr>
<tr>
<td>GBVPU</td>
<td>Gender-Based Violence Protection Units</td>
</tr>
<tr>
<td>HIV</td>
<td>Human Immune Deficiency Syndrome</td>
</tr>
<tr>
<td>MGECW</td>
<td>Ministry of Gender Equality and Child Welfare</td>
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<tr>
<td>OVC</td>
<td>Orphans and Vulnerable Children</td>
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<tr>
<td>RCCF</td>
<td>Residential Child Care Facilities</td>
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<tr>
<td>SOS</td>
<td>Societas Socialis</td>
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<tr>
<td>UN</td>
<td>United Nations</td>
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<td>UNICEF</td>
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<td>WHO</td>
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DEDICATION

This study is dedicated to the Namibian children in need of care and support.
DECLARATION

I, Elizabeth Kakinda Linda Kapata, hereby declares that this study is a true reflection of my own research and that this work or any part thereof has not been submitted for a degree in any other institution.

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Name of Student Signature Date
CHAPTER 1
OVERVIEW OF THE STUDY

1.1. Orientation to the study

Children exposed to violence are at an increased risk for adverse mental, physical, psychosocial, and behavioural outcomes (UNICEF, 2010). In Namibia, it is estimated that approximately 814 Namibian children are abused, either physically or sexually, annually, while 923 children are neglected (Nunuhe, 2014).

However, it is important to note that these statistics only account for cases that have been reported at the Gender-Based Violence Protection Units (GBVPU) throughout the country, which most likely represents a small minority of actual cases of child abuse in the country.

This widespread phenomenon of child abuse violates the rights and dignity of countless Namibian children, leaving them with both physical and emotional scars. To date, it is not uncommon for local newspapers and media outlets to report daily on these horrific crimes committed against the society’s most vulnerable children population.

The Child Care and Protection Act, Act No. 3 of 2015 defines child abuse as any form of harm or ill-treatment deliberately inflicted on a child, including assaulting a child or inflicting any form of deliberate injury to a child; exposing a child to behaviour that may harm the child psychologically or emotionally including intimidations or threats; and
child neglect referring to the failure of a parent, guardian or another caregiver to provide for a child's basic needs.

Anecdotal evidence in the Omusati Region reveals that there is a serious lack of safe homes for children who are removed from their homes due to child abuse or neglect. Generally, these children are placed in the Societas Socialis (SOS) Children’s Village in Ondangwa as a temporary place of safety, which is in a different region.

This practice leaves many questions unanswered, such as whether we are doing justice to the children or are we re-traumatizing these already traumatised children. To whose benefit is this removal of the children and is it in the best interest of the children?

In addition, these children may experience labelling effects based on their removal, as well as stigma and discriminatory treatment by other children. This arrangement may have potential to compound the negative psychosocial outcomes of abused children, thus making it more difficult for them to adjust to life outside the institution.

No known study to date has explored the lived experiences of abused and/or neglected children from the Omusati region residing in RCCFs. Thus, the aim of this study was to explore, describe, and analyse key dimensions of the lived experiences of abused and/or neglected children, specifically those in residential placement. This qualitative project tried to ensure a contribution to the knowledge of the social workers when dealing with the removal of children.
1.2. Statement of the problem

According to Creswell (2014), a research problem is a problem or issue that leads to the need for a study. It can originate from many potential sources and may come from an extensive debate that has appeared in the literature. It might also spring from an experience the researcher had in his/her personal life or workplace.

De Vos, Strydom, Fouche and Delport (2011) emphasise that the identification of a research problem is the first step in conducting a research study, therefore a problem identified must be researchable and it must demand an interpretation of the data, leading to a discovery of facts.

Recent data reveals that 162 cases of violence against children were reported in the Omusati Region during 2016/2017 (Shikwambi, 2017). These offences included rape, immoral practice, attempted murder, assault grievous bodily harm (Assault GBH), indecent assault, child neglect or ill-treatment and assault through threatening. In the majority of these reported cases, the child victims knew the perpetrator. Therefore, as a result, the children were removed from their homes and placed in alternative care including residential child care facilities.

In 2009, the Namibian Government established standards of care for RCCFs (Ministry of Gender Equality and Child Welfare (MGECW), 2009). The purpose of these places of safety is to provide temporary or long-term care for children (18 years and under) found in need of care and protection (MGECW, 2009).
Anecdotal studies in the Omusati region reveal that there are no safe homes for children who are removed from their homes due to child abuse and/or neglect.

As a result, these children are placed in the SOS Children’s Village in Ondangwa as a temporary place of safety which is ±200 kilometres away from their homes and common surroundings, which may have potential to create added negative outcomes for this population of vulnerable children. In addition, the victims seem to suffer from labelling effects, the issue of stigma, discriminatory treatment and blamed for the changed situations.

This study represented a unique opportunity based on the Namibian context to examine the lived experience of abused and/or neglected children through the lens of those placed in residential placements in a predominantly rural setting of northern Namibia.

1.3. Research questions

The main research question for this study was: What are the lived experiences of the abused and/or neglected children removed from their homes in the Omusati Region and placed in RCCF’s?

There were three sub-questions that guided the study:

- What are the study participants’ experiences and thoughts regarding removal from their homes to RCCFs?
- What are the effects of being removed from homes to RCCF’s?
- What are the effects of removal on participants’ psychosocial well-being?
1.4. Significance of the study

This study may fill the knowledge gap in understanding the everyday life of children removed from their homes and placed in residential placements due to abuse or neglect. The findings of this study may equip the social work practitioners working with child protection services with recommendations on how to address these gaps. The results of the study are important in that they might contribute to the knowledge of the social workers when dealing with the removal of children.

1.5. Delimitations of the study

The study focused on the lived experiences of abused and/or neglected children removed from their homes and placed in RCCF’s. The SOS Children's Village in Ondangwa was selected since abused and/ or neglected children removed from their homes in the Omusati Region are placed at the SOS Children's Village in Ondangwa. The facility is located in the Oshana region, the northern part of Namibia, ±200 kilometres from the Omusati region and is accessible to the social workers in the northern regions.

The scope of the study was to investigate the lived experiences of the abused and/ or neglected children removed from their homes in the Omusati region and placed in residential child care facilities. In most cases, these become a closed case for a social worker turning the residential placement into permanent homes for this vulnerable population.
1.6. Theoretical framework

This study used the Ecological Systems Theory, which focuses on the adaptation of organisms within a particular environment (White & Klein, 2014). In the context of human systems, a core assumption of Ecological Systems Theory is that humans are in close, reciprocal and interactive relationships with many systems at many levels, simultaneously. Human well-being is dependent on and responsive to these interactive system relationships.

The ecological system theory explains how everything in a child and the child’s environment affects how a child grows and develops (Hong, Algood, Chiu & Lee, 2011). More specifically, Bronfenbrenner (1979) asserts that individuals' interactions and reciprocal relationships take place on several levels, including microsystems, mesosystems, ecosystems, and macro-systems. This ecological system theory approach also allows simultaneous consideration of the different levels that should play a role in the child and the development of the child, i.e. at the child, family, the school, the residential facility, the child’s place of origin and the community (Bronfenbrenner, 1979), which provided the conceptual framework for this study.
1.7. **Outline of the study**

An outline of the chapters is presented to give the reader a preview of the contents of the thesis as a whole. **Chapter 1** is a brief introduction to the study. The chapter focuses on the orientation to the study, statement of the problem, the research questions, significance of the study, the limitations of the study as well as the delimitation of the study, the theoretical framework of the study, and finally an outline of the different chapters. **Chapter 2** covers relevant literature surrounding the removal of abused and/or neglected children as well as the outcomes of RCCF’s placement, the theoretical framework of the study, the major types of child abuse and the definition of the key terms. **Chapter 3** outlines the research methodology with regards to how the study was conducted and the procedure followed by the researcher. **Chapter 4** is the presentation of findings generated during the field work. **Chapter 5** outlines some conclusions and makes some recommendations based on the study and it is followed by a list of references and annexes.
CHAPTER 2

LITERATURE REVIEW AND THE THEORETICAL FRAMEWORK

2.1 Introduction

There is a common saying that ‘children are the future of a nation’. Consequently, the significance and the level of care, attention, and protection children receive that are placed in Residential Child Care Facilities (RCCFs) one critical to ensuring that they become healthy, productive citizens. However, globally, the lived experience of children removed from their homes and placed in RCCFs has received little attention (Li et al., 2008). Similarly, although children who have been removed from their homes who reside in the RCCFs face multiple challenges, and can be at risk for developing poor mental health outcomes (Johnson, Browne, & Hamilton-Giachritsis, 2008), little is known about their well-being (Hermenau et al., 2011). This is due to the scarcity of studies done on the phenomenon and the inconsistent results that existing studies have reported.

It is against this background that there is a continued need for research inquiry on the well-being of children placed in RCCFs. The present study, therefore, aimed at exploring the lived experiences of abused and/or neglected children removed from their home in the Omusati Region and placed in RCCF. The reviewed literature examines the research on important topics related to children removed from their home and placed in RCCFs in general and specifically as it related to the Omusati region situation. However, to the knowledge of the researcher, no study has explored the lived experiences of abused and/ neglected children residing in RCCF's from the Omusati region.
In this review, the introduction is followed by the definition of key terms used throughout this study. Thereafter, a brief discussion on RCCFs in Namibia is outlined. Particular attention is first paid to the policy and legislative framework that governs RCCFs in Namibia. Secondly, the prevalence of children placed in RCCFs is explicated. Thirdly, the impact of the removal of children from their home on the well-being of children is examined. Additionally, the impact of RCCFs on the well-being of children is highlighted. Moreover, the outcome of a residential placement is discussed. Finally, the theoretical framework of the ecological systems theory that frames this study is also discussed.

SECTION ONE

2.2 DEFINITION OF KEY TERMS

2.2.1 Child

The United Nations Convention on the Rights of the Child (CRC, 1989) Article 1, defines a child as a person below the age of 18, unless, under the law applicable to the child, the age of majority is attained earlier or later. According to the Namibian Child Care and Protection Act no. 3 of 2015, child means “a person who has not attained the age of 18 years” (p.13). “A child is a young human being below the age of full physical development” (Oxford Dictionary, p. 147, 2010). For the purpose of this study, a child is defined as any person who did not attain the age of 18 years.
2.2.2 Child in need of care

According to the South Africa Children’s Act, Act No. 33 of 1960, Section ix, to which is still applicable in Namibia, a child in need of care is a child who:

“has been abandoned or is without visible means of support or has no parent or guardian or has a parent or guardian who does or does not or is unfit to exercise proper control over that child; or the child who is in the custody of a person who has been convicted of committing upon or in connection with that child any offence mentioned in the first schedule of this Act or cannot be controlled by his parents or guardian or the person in whose custody he is; or is an habitual truant or frequents the company of any immoral or vicious person, or otherwise is living in the circumstances calculated to cause or conduce to his seduction, corruption or prostitution or begs or is in a state of physical or mental neglect”.

2.2.3 Child abuse and neglect

Child abuse and neglect are defined as any recent act or failure to act on the part of the parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation; or an act or failure to act which presents an imminent risk of harm (WHO, 2008).

According to the Global Federal Legislation (UNICEF, 2007) child abuse and neglect are defined as any recent activity on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation; or an act or failure to act which presents an imminent risk of serious harm.
However, this federal law only refers to cases of harm caused by parents or other caregivers; they generally do not include harm caused by other people (UNICEF, 2007). Although federal laws in the definitions of child abuse and neglect do not include the harm by strangers, some state laws include child's witnessing of domestic violence as a form of abuse or neglect.

Whereas in Namibia, child abuse is defined as; Any form of harm or ill-treatment deliberately inflicted on a child, including assaulting a child or inflicting any other form of deliberate injury to a child; sexually abusing a child or allowing a child to be sexually abused; bullying by another child; a labour practice that exploits a child; exposing or subjecting a child to behaviour that may harm the child psychologically or emotionally, including intimidation or threats; depriving a child of his or her rights to the basic conditions of living contemplated and exposing or subjecting a child to a social, cultural or religious practice which is detrimental to his or her well-being. (Child Care and Protection Act, Act No. 3 of 2015, [CCPA])

The definition in the Child Care and Protection Act, Act No. 3 of 2015 separates the two terms child abuse and neglect. However, the Child Care and Protection Act, Act No. 3 of 2015 definition seems to be in agreement with the federal law's definition that refers to cases of harm caused by parents or other caregivers as it refers to child neglect as the failure of a parent, guardian or another caregiver to provide for a child's basic needs. For the purpose of this study, child abuse and neglect may be defined as any form of abuse or neglect including the child witnessing domestic violence.
2.2.4 Residential child care facilities

Browne (2009) defines residential child care facilities as a group of living arrangements for more than ten children, without biological parents or surrogate parents in which care is provided by a much smaller number of paid adult carers.

2.2.5 Residential care institution

A type of residential care facility that provides services to all types of children who have been abandoned or cannot stay with their biological families or relatives in communities, and that fits the standard definition of a residential care institution as defined in the Minimum Standards for Residential Child Care Facilities in Namibia (MGECW) (2009). These generally provide care in a non-family and structured environment for a large number of children.

2.2.6 Residential care

Residential care is the care provided in any non-family-based group setting, such as places of safety for emergency care, transit centres in emergency situations, and all other short- and long-term residential care facilities, including group homes (UN Guidelines for the Alternative Care of Children, 2010). Residential care is usually referred to as a group of home, institutional care or an orphanage in which professional caregivers are entrusted to look after the daily care and welfare of these children in residential placements (Cluver & Gardner, 2007). Residential care is defined by De Valle (2013), as the place where children stay in a group setting with paid staff as the main caretakers.
2.2.7 Children’s homes

Children’s homes are defined as residences or homes maintained for the reception, protection, and care and bringing up of more than six children or pupils, apart from their parents (MGECW, 2009). A children’s home placement is a long-term but not permanent placements and the child can be integrated back into the family.

2.2.8 Lived experiences

Lived experiences are part of the lifeworld presented as feelings, happenings, and accomplishments that are lived and experienced by human beings (Pascal, 2010). Experience is the nature of events someone has undergone. Experience is what happens to people in their lives.

They are realities of life for those persons involved in different experiences (Pascal, 2010). Experience, therefore, refers to something a person has lived through. It also includes observing, encountering, and/or undergoing events as they occur in the course of time or life.

In line with the above definition, for this study lived experiences referred to several events in life associated with child removal as experienced by abused or neglected children removed from their homes and placed in RCCFs.
2.2.9 Phenomenon

The phenomenon is defined as "a fact or situation that is observed to exist or happen, its things happening to view" (Oxford Dictionary, 2010, p. 667). Commonly, a phenomenon is defined as the occurrence of something in its natural setting (Dan Zahavi, 2003) phenomena include mental activities (for example, concepts, wishes, perceptions, hypotheses, and theories) and physical activities (Spinell, 2012). Abused and/or neglected children removed from their homes in the Omusati Region and placed in RCCF’s are the major phenomenon in this study.

2.2.10 Well-being

Well-being is multi-faceted and entails different aspects of one's life. Well-being has also been described as a state characterised by health, happiness, confidence, positive coping abilities and prosperity. Well-being can encompass different dimensions such as social, psychological, emotional, physical, and spiritual dimensions (Barnett et al., 2011).

2.2.11 Psycho-social

The psycho-social approach looks at individuals in the context of the combined influence that psychological factors and the surrounding social environment have on their physical and mental wellness and their ability to function (UNICEF, 2010). The term psychosocial refers to the close relationship between the individual and the collective aspects of any social entity (Oxford Dictionary, 2010).
2.2.12 Care

Care is the provision of what is necessary for health, welfare, maintenance and protection of someone (Oxford Dictionary, 2010). It also means to have feelings of love or affection for somebody. Care is a social phenomenon that emphasises that taking care of a child has common features like affection, comfort, assistance, solving problems and the provision of food (Kalomo, Kyoung & Besthorn, 2017). Care is defined as to have feelings like concern, responsibility or love for someone or something.

2.2.1 Caregivers

The Namibian Child Care and Protection Act, Act No. 3 (2015) states that a caregiver is “any person other than a parent or guardian, who takes primary responsibility for the day- to- day care of a child and includes; a foster parent, a kinship caregiver, a primary caretaker, a person who cares for a child while the child is in a place of safety; the person who is the head of a facility where a child has been placed; and the child who is the head of a child-headed household” (p. 12).

2.2.14 Primary caretaker

“Primary caretaker” means a person other than the parent or other legal care-giver of a child, whether or not related to the child, who takes primary responsibility for the daily care of the child with the expressed or implied permission of the person who is the custodian of the child” (CCPA, p. 16. 2015).
2.2.16 Best interest of the child

A standards used by the courts to make child custody decisions, namely that the potential for the child to lead a happy and successful life should be given a greater weight than the rights of either parent or caregiver. when making decisions about a child or children’s custodial arrangements (Psychology Dictionary, 2015). Best interests or best interests of the child is a child rights principle, which derives from Article 3 of the UN Convention on the Rights of the Child, which says that “in all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interests of the child shall be a primary consideration” (UNICEF, 1998). Assessing the best interests of a child means to evaluate and balance “all the elements necessary to make a decision in a specific situation for a specific individual child or group of children” (UNICEF, 1998). According to the Namibian Child Care and Protection Act no. 3 of 2015, in determining the best interest of the child, the following factors must be taken into consideration the child’s age, maturity and stage of development, sex, background and any other relevant characteristics of the child; the child’s physical and emotional security and his or her intellectual, emotional, social and cultural development; views or opinions expressed by the child with due regard to the child’s age, maturity and stage of development; the desirability of keeping siblings together and the need for the child to maintain a connection with his or her family, extended family, culture or tradition.
2.2.17 Orphan and vulnerable children (OVC)

The Namibian definition for children under the age of 18 whose mother, father, or both parents and primary caregiver have died and /or are in need of care and protection (Ministry Gender Equality and Child Welfare, 2008).

SECTION TWO

2.3 THE MAJOR TYPES OF CHILD ABUSE AND NEGLECT

Child abuse consists of five major types which are: physical abuse, sexual abuse, emotional abuse and psychological abuse and neglect. In order to understand the impact of child abuse on children, it is imperative to gain an understanding of the dynamics or factors surrounding the different types of abuse (UNICEF, 2010).

2.3.1 Physical abuse

Physical abuse occurs when a child has experienced severe and /or persistent ill-treatment through behaviours such as beating, shaking, inappropriate administrations of alcohol and drugs, attempted suffocation or excessive discipline or physical punishment (Barnett, Miller-Perrin, & Perrin, 2011). The harm experienced by a child as a result of these behaviours needs to or is likely to be detrimental in effect and significant in nature to the child's wellbeing. The injury resulting from physical abuse is considered to be non-accidental (McClenen, 2010) ranging from minor bruises to severe fractures, even to death.

2.3.2 Sexual abuse

Sexual abuse occurs when a child has been exposed or subjected to sexual behaviours that are exploitative and or inappropriate to his or her age and developmental level.
However, consideration is given to contextual elements in determining if a situation is abusive such as parental behaviours that enable child sexual abuse to occur or the role of coercion or unequal power in a relationship (McLennen, 2010).

2.3.3 Emotional abuse

Emotional abuse is the sustained, repetitive, inappropriate, ill-treatment of a child or young person through behaviours including threatening, belittling, teasing, humiliating, bullying, confusing, ignoring and inappropriate encouragement (Barnett et al., 2011). Children who have been emotionally abused are likely to have a reduced capacity to experience a range of emotions, to express emotion appropriately and to modulate their emotional experience (McClennen, 2010). They are also likely to be fearful, withdrawn or resentful, distressed and despairing (Barnett et al., 2011).

2.3.4 Psychological abuse

Psychological abuse is the sustained, repetitive, inappropriate, ill-treatment of a child or young person through behaviours including threatening, isolating, neglected, discrediting, misleading, disregarding, ignoring and inappropriate encouragement. Psychological abuse damages a child's intellectual faculties and processes, including intelligence, memory, recognition, perception, attention, imagination and moral development (McLennen, 2010).

Children who have been psychologically abused are likely to feel worthless, flawed, unloved, unwanted, and endangered or only of value in meeting another’s needs (McLennen, 2010).
2.3.5 Neglect

Neglect is the failure by a parent, guardian or caregiver to provide for a child’s basic
needs. Neglect may be in the form of physical, medical, educational and emotional
neglects (Fulmer, Lemko, Paveza, & Brody, 2008).

SECTION THREE

2.4. Residential child care facilities

By 2017, an estimated 2.7 million children worldwide were living in residential child
care facilities (UNICEF, 2017). Countries heavily affected by human immunodeficiency
virus (HIV) and acquired immune deficiency syndrome (AIDS) have responded by the
development of RCCFs as a solution to the growing number of orphans and vulnerable
children (OVC).

The arguments for developing RCCFs vary from a lack of alternatives as the extended
family system and communities claim to be overburdened and foster care or adoption are
non-traditional forms of child care practice in some cultures, which may expose the
children to abuse and exploitation. Residential child care facilities seem to have a high
level of "donor-appeal", as donors tend to favour residential child care as it provides a
visible and tangible manifestation of donor funding. They also have a high level of
appeal to media as they are seen as easy to monitor, as opposed to a family-based
setting. They can also be preferred by social service practitioners because they are
organizationally convenient (Kalomo et al., 2017).
Children who have lost either of their parents or those who lack parental care and protection are often considered among society’s most vulnerable groups and are therefore dependent on the wider society for support (Kalomo et al., 2017). Consequently, the level of care and attention given to children is relevant and critical to understanding. Children lacking parental care are vulnerable to abuse, exploitation and further maltreatment (UNICEF, 1998). In such circumstances, the immediate intervention is to find alternative options for these children such as placing them with their extended families.

For those children who do not have family members or kin to care for them, there are often short or long-term options available such as RCCFs. The vast majority of children in Namibia are cared for by the extended family system, a social safety net that has cared for orphans and vulnerable children for generations (Kalomo et al., 2017). However, the extended family system is overburdened by poverty, as households who take in OVCs are likely to become poorer due to the huge number of children in need of care (Kalomo et al., 2017, Ministry of Women Affairs and Child Welfare, 2004). Residential child care facilities are alternative options when extended families are unable to take care of OVCs. As such, RCCFs are mandated to help children without parental care and support to grow up in a nurturing family-friendly environment (UNICEF, 2008).

International treaties advocate that, if a child is taken out of his or her home environment, it should not be longer than necessary and should serve developmental goals (Höfte, Van der Helm, & Stams, 2012).
This view is shared by the Namibian Government and other key players in the local child welfare sector which led to the development of the minimum standards of residential child care facilities in Namibia (Ministry of Gender Equality and Child Welfare, 2009).

2.5 Policy and legislative framework governing residential child care facilities

In developing a national policy and legislative framework related to children’s issues, Namibia is guided by a rights-based approach in line with the United Nations Convention on Rights of the Child and recognises the overarching principals involving the ‘best interests of the child’. This approach is reflected in several pieces of legislation, policies and protocols such as the Child Care and Protection Act No 3 of 2015, Orphans and Vulnerable Children Policy of 2004, which is embodied in the National Plan of Action for Orphans and Vulnerable Children of 2012-2016. It explicates the need for an enabling legislative and policy environment to address child vulnerability through comprehensive national social protection systems and integrated protection services (Ministry of Gender Equality and Child Welfare [MGECW], 2008). In addition, the Minimum Standards for Residential Child Care Facilities in Namibia 2009 and the Foster Care Guidelines 2010 are guidelines that are designed to ensure that the rights of children in RCCFs are promoted as well as to establish, maintain and manage high-quality care services for children in Namibia (MGECW, 2009, p. 3).

The Ministry of Gender Equality and Child Welfare (MGECW) is responsible for all issues related to the well-being of children in Namibia as articulated in the Child Care and Protection Act 2015.
The MGECW is mandated to register and regulate existing RCCFs to ensure that the guidelines and minimum standards for RCCFs are followed and implemented. Despite having policies, legislation and regulations that cater for the needs and rights of children placed in RCCFs, the number of orphans and vulnerable children without parents and/or proper parental care and in need of alternative care have contributed to the emergence of many RCCFs (Csaky, 2009). The next section explores the extent of this phenomenon.

2.6 The prevalence of children in residential child care facilities

In Sub-Saharan Africa, HIV/AIDS has dramatically altered the nature of informal caregiving as the extended family system and communities claim to be overburdened by poverty. Thus, the households who take in OVCs are likely to become poorer due to the huge number of children in need of care (Kalomo et al., 2017). Sub-Saharan region has the highest percentage of children infected and affected by the AIDS epidemic in the world (AVERT, 2015). It is evident that the highest concentration of OVC is in countries that have a high HIV prevalence rate (AVERT, 2015; United Nations Program on HIV/AIDS [UNAIDS], 2014). In this region, orphan hood through parental death is mostly caused by the scourge of AIDS (UNAIDS, 2014), whereas abandonment or child neglect occurs mostly due to poverty (Kalomo et al., 2017). Even though children lose their parents for many different reasons, the impact of HIV and AIDS is unavoidable when talking about OVC.

Recent estimates suggest that Namibia has 250,000, of whom 155,000 children had lost one or both parents.
Approximately, 96,000 children below the age of 18 who have been orphaned live under extremely poor living conditions as a direct result of the HIV/AIDS crisis (Namibia Demographic Health Survey, 2006/2007). About 18,000 children are personally living with AIDS (UNAIDS, 2014).

In Namibia, 155,000 children and adolescents are currently unable to live with their parents for various reasons (Nshimyimana, Van der Vyver, & Kloppers, 2015) problems are mostly related to problem behaviour of the child and to problems in the home situation, such as violence, abuse or neglect (Boedermaker, Van Rooijen, & Berg, 2012).

When children are abused or neglected, social workers from the MGECW sometimes remove them from their homes and place them in alternative care with the goal of providing a safer and more stable environment. In general, removal is due to children being abused and neglected by their parents or caregivers or because parents or caregivers are unwilling or unable to cope with the demands of raising children or their children’s conduct (Church, Mitchell, & Sankaran, 2017). Thus, residential care facilities shelter some of the neediest children primarily those without adult caregivers or victims of maltreatment and abandonment (Beard, 2005).

Studies and anecdotal reports reveal that there are 1008 children in residential care programmes in Namibia with a total of 686 being in registered facilities, and the remaining 322 are placed in unregistered facilities. Due to the absences of appropriate parental care, the country is experiencing a rapidly growing number of RCCFs (Musukubili, 2015).
Although the Namibian Government through the Ministry of Gender Equality and Child Welfare has developed legislation, policies, guidelines and caring standards, some of those facilities were established without consulting the relevant legislation, policies, guidelines (Nshimyimana et al., 2015) which may result in children experiencing further neglect, abuse or exploitation by uncaring caregivers.

On the other hand, residential care facilities have been found to attract children from poverty-stricken environments, be costly, dislocate them from their extended family members and communities, rendering them more vulnerable to physical and sexual abuse, and promote stigma and discrimination (Meintjies, Moses, Berry & Mampane, 2007).

Hence, the international welfare community is united in advocating that residential care is used as a temporary ‘last resort’ for children (UNICEF, 2010) when other approaches have failed. The next section highlights the impact of the removal of a child from the natural home environment on the development and well-being of children.

2.7 The impact of the removal of children from their homes on their well-being

Children who are removed from their homes and placed in alternative care experience significantly worse long-term outcomes than similarly maltreated children who remain in their homes (Barish, 2010). Theoretical research and expert opinion indicate that removing a child from the home causes serious trauma (Liebmann, 2007) many sources also acknowledge that separating a child from a parent for even a relatively short time can have a devastating emotional and physical impact on the child (Barish, 2010).
For some children, separations may be experienced as a significant rejection or loss that affects the formation of attachments (Liebmann, 2007). Children who are removed from parents often come to expect parental unavailability, which distorts adjustment to surrogate caregivers and the foster home environment (Mitchell & Leon, 2010). Thus, the disruptions in the parent-child relationship are often accompanied by rage, grief, sadness, and despair which may provoke fear and anxiety in a child and diminish his or her sense of stability and self (Liebmann, 2007). The removal undermines children’s attachments, identity, and subsequent caregiving relationships (Mitchell & Leon, 2010). For children in homes where there is domestic violence, the consequences of removal to alternative care can be more severe (Mitchell & Leon, 2010).

Therefore, it is important to note that if a child is placed in alternative care as a result of domestic violence in the home, he or she may view such removal as a traumatic act of punishment and think that something the parent or caregiver has done or failed to do has caused this separation (Barish, 2010). Thus, the removal will enhance the child’s sense of self-blame. The behavioural and emotional problems a child shows before removal are often aggravated by the move out of his or her home (Mitchell & Leon, 2010). However, it is important to note that the impact of removal from a parent also varies with age.

Despite these findings, child welfare researchers continue to disagree about whether abused and neglected children benefit more from remaining with parents or being placed in alternative care (Barish, 2010). Some researchers find that children removed to alternative care are better than those who remain in the home.
Considering these mixed results, many researchers fear that negative outcomes for children placed in alternative care could be attributed to the abuse or neglect already suffered in the home, not to the experience of removal and placement (Barish, 2010). In the view of the above, the researcher shares the same view with Liebmann (2007) that removing a child from his or her home poses its own risks despite the reasons for removal; keeping in mind that the physical and emotional connection with a parent is a basic need of children and is important for their development.

Thus, separating the parent-child bond might have implications for the child's development even though the caregiver or parent is abusive. The next discussion outlines the impact of residential child care facilities on the well-being of children removed from their common home.

### 2.8. The impact of residential child care facilities on the well-being of children

There is a growing concern that residential facilities for children are not an appropriate intervention solution to the increasing numbers of OVCs. However, a great number of children who are unable to live with their families need substitute care each year for reasons such as being abused, neglected, orphaned or abandoned (Cluver, Gardner, & Operario, 2008).

Research literature has consistently shown that RCCFs can have seriously damaging effects on children's development and well-being. Studies have shown that RCCFs may have detrimental negative outcomes to children’s mental health (Bos, Zeanah, & Fox, 2011) cause disruptive behaviour and developmental delays and have poor health (Thielman, Ostermann, Whetten, Whetten, & O’Donnell, 2012).
Other damaging effects residential child care can have on children include segregation, discrimination, isolation, the risk of institutional abuse, lack of personal care, poor stimulation and attention to specific psychological needs and the lack of sufficient opportunities to learn about adult roles (Bos et al., 2011).

Dunn, Jareg and Webb, (2003) mentioned that due to the structure and capacity of residential care facilities, the children’s social and psychological needs are unmet which may further hinder their development.

In the past decade, there has been an increasing number of community-based RCCFs. Many of these residential facilities have been established without following the protocol outlined in the legislative framework, policies, guidelines and standards of care (MGECW, 2009; Nshimyimana et al., 2015).

Research has shown that many residential facilities are often operating illegally without adequate accommodation, toilet, recreational and academic activities, insufficient medical care and high caregiver ratio (Simon & Koranteng, 2012).

Although concerns have been raised regarding the care received in residential child care facilities, very little is known about children’s perspective on their own experiences of being removed from their natural homes and residing in RCCFs. These concerns include separating children from their social networks and limiting long-term, caring relationship. Residential child care facilities are expensive, difficult to scale up and may lack governmental monitoring (Nshimyimana et al., 2015; UNICEF, 2005).

Although there has been long concern about the abuse of children in care and evidence of poor outcomes and poor practice, on the other hand, there is ample evidence of the
positive role that residential child care can play (Kendrick, 2012). Some children and young people described their positive experiences in residential care as like being in a family (Kendrick, 2012). Dobrova-Krol, Van, Bakermans-Kraneneburg, and Juffer (2010) concur and acknowledge that in some cases of extremely adverse rearing circumstances well-functioning RCCFs may offer children a better nurture environment than their own dysfunctional families.

2.9 Outcomes of residential placements

It is evident from several researchers that the residential placement can cause lifelong damage to children's emotional development because of their need for secure attachment and a sense of being cared-about and not just cared for. In general, there are consistently negative views on residential care as a place to raise young children on a long-term basis (Dozier, Zeanah, Wallin, & Shauffer, 2012).

In a study, Lee, Bright, Svoboda, Fakunmoju, and Barth (2011) conclude that the outcomes of residential care were often worse than the other alternative forms of care. Research show that children in long-term residential care are at high risk for impaired cognitive, behavioural, emotional and social development (Van Ijzendoorn, Luijk & Juffer, 2008). These scholars argue that these deficits can lead to overwhelming, enduring problems of children (e.g. peer rejections, school failure, delinquency and future unemployment) as they may fail to develop the ability to regulate their emotions and social behaviour. Further risk for children in residential care is the fact that chances for maladaptive outcomes increase when adverse conditions are continuous and/or increasing when there are few opportunities for support and hope (Cheung, Goodman, Leckie & Jenkins, 2011).
However, the child outcomes and the placement types can vary as a function of the timing and duration of placements and their movement between the types of placements (James, Landsverk, & Slymen, 2014).

Studies have also shown that childhood abuse has the potential to create severe and long-lasting trauma in children (Kristiansen, 2009) such as in the case of children in RCCFs who have experienced abuse. Prior research has identified predictors of poor outcome from residential placement (Kristiansen, 2009). In contrast, children who are more satisfied with their placement were reported to display less problematic behaviour (Cheung, Goodman, Leckie & Jenkins, 2011). A study by Whetten et al., (2014) found better physical health and emotional coping with children in residential care compared to those in family foster care.

However, children in care usually have no say in the decision-making process with regards to their placement (Unrau, 2007), hence Fox and Berrick (2007) suggest that child welfare service should include the voice of children in order to improve their quality of life. The residential care violates the principles of CRC and consequently impacts negatively on children’s development (UNICEF, UNAIDS, & PEPFAR, 2006). The majority of reports on institutional care rely on adult interviews; the voices of children have been evidently absent from the discussions. The present study reports on the eight interviews with eight (8) abuse and/ or neglected children who have been removed from their homes and placed in residential child care facilities from Omusati Region, Namibia.
An analysis of their narratives further our understanding of the experiences of abused and/or neglected children removed from their homes and placed in residential child care facilities.

**SECTION FOUR**

2.10 THE THEORETICAL FRAMEWORK OF THE STUDY

The theoretical approaches for social work are used to explain human behaviour and serves as starting points for practice models and treatment whereas system theory describes human behaviour in terms of complex systems.

The theory is a systematic explanation for the observation that relates to a particular aspect of life (Babbie, 2016). The ecological system’s theory forms the basis of the theoretical framework for this study and will be discussed next.

2.10.1 Ecological systems theory

The researcher used the ecological systems theory, which focuses on the adaptation of organisms within a particular environment (White & Klein, 2014). In the context of human systems, a core assumption of ecological systems theory is that humans are in close, reciprocal and interactive relationships with many systems at many levels, simultaneously. Human well-being is dependent on and responsive to these interactive system relationships. The ecological system theory explains how everything in a child and the child’s environment affects how a child grows and develops (Hong et al., 2011).

Hong et al. (2011) further mentioned that according to this theory, the interrelations among the five systems level affect children’s developmental outcomes: micro- (immediate settings or environment), meso- (link between two or more Microsystems),
exo- (settings not directly affecting the individual but that influence the microsystem), and macro (broader society and culture that encompasses the other system). Bronfenbrenner (1979) asserts that individuals’ interactions and reciprocal relationships take place on several levels, including microsystems, mesosystems, ecosystems, and macrosystems. It is this interactional and multi-level dimension of the ecological systems model, which provides the conceptual framework for the study. Each has particular relevance to the lived experiences of abuse and/or neglected children removed from his or her homes and placed in residential child care facilities.

The microsystem draws our attention to the direct relationship between the abuse and/or neglected child and his or her parents or guardian. The mesosystem includes the influence of relational interactions taking place between, for example, the child and the extended family. Exosystem interactions are associated with both direct and indirect influences on abuse and/or neglected child as a result of interactions with social welfare policies, government decision-making that protects children who are victims of child abuse.

Macrosystem influences are those generally encompassing broad societal attitude about child abuse, and children’s impinging upon all children in Namibia. The ecological system theory has been posited as an appropriate framework for the design of intervention approaches that address complex issues (Bronfenbrenner, 1979). Therefore, it is important to understand the interrelations between the individual and his or her environment.
2.11 Conclusion

Although residential care is the place of last resort for children who cannot receive the support and/or safety they need from their own families or who pose a danger to others, children in RCCF’s are placed outside their parents' care for many reasons.

These include physical abuse, sexual abuse, emotional or psychological abuse, various types of neglect and other circumstances which prevent parents from adequately caring for their children. Entering care is also strongly associated with poverty and deprivation including low income, parental unemployment, and relationship breakdown, and over 60% of children are in care because of abuse and/or neglect. It is evident from the existing literature that is in care during childhood is associated with adverse adult socio-economic, educational, legal and health outcomes in excess of that associated with coexisting childhood or are also more likely to experience educational, behavioural, physical and psychological problems.
CHAPTER 3

RESEARCH METHODOLOGY

3.1 Introduction

When studying human social problems, researchers strive to understand people, the meaning they attach to behaviour and their perceptions or views of what constitutes a supportive context (Creswell, 2014). This study aimed to adopt a research approach that values the knowledge and experiences of the abused and/or neglected children removed from their homes in the Omusati Region and placed in RCCFs in Oshana Region.

This chapter outlines how the research was conducted and how the data were collected, managed, and analysed. It focuses on the research design, research population, sample size as well as the research instruments used for data collection. Moreover, it also presents the procedure employed and the manner in which data were analysed. The study adopted a phenomenological approach, to explore and describe the lived experiences of the abused and/or neglected children removed from their homes and placed in RCCFs and employed a qualitative methodology.

3.2. Purpose of the study

The purpose of this study was to explore the lived experiences of abused and/or neglected children removed from their homes in Omusati Region, Namibia and placed in RCCF’s in Oshana Region.

A qualitative design employing a phenomenological approach was used to explore the dynamics that underlie the phenomenon in the study.
This approach allowed the researcher to collect rich data in the natural setting of informants without providing a predisposed framework. Further, this approach allowed the researcher to capture the lived experiences of this vulnerable population.

3.3 Research methodology

Polit and Hungler (2004) define methodology as ways of obtaining, organizing and analysing data. It is the means of doing something. Methodology decisions depend on the nature of the research. According to Burns and Grove (2009), methodology comprises of the design, settings, sample, methodological limitations, and the data collection and analysis techniques in a study. A methodology is the framework of theories and principles on which methods and procedures are based (Holloway & Galvin, 2016).

In this study, methodology refers to how the research was done and its logical sequences. The main focus of the study was the exploration and description of the lived experiences of abused and / neglected children removed from their homes and placed in residential child care facility. Therefore, the research approach was qualitative.

A methodology is a coherent group of methods that complement one another and that have the ability to fit to deliver data and findings that will reflect the research question and suit the researcher purpose. According to De Vos (2007), the qualitative methodology is dialectic and interpretive. This author further explains that the participant's world is discovered and interpreted by means of qualitative methods during the interaction between the researcher and the research participants.
In this study, the researcher employed the phenomenological methodology. According to Streubert and Carpenter (2003), phenomenology is a science whose purpose is to describe particular phenomena or the appearance of things as lived experiences. However, the phenomenological research methodology has no clearly defined steps, thus making it difficult to explain. Burns and Grove (2009) mentioned that the phenomenologist is of the opinion that the clear definition of methodology tends to limit the researcher's creativity.

3.4 Research design

Traditionally, qualitative research is often treated as a relatively minor methodology to be used at early or exploratory stages of the study. An exploratory, descriptive and contextual qualitative research approach was chosen as a research design. The researcher employed a phenomenological research design to achieve the objectives of the study.

3.5 Phenomenological approach

Phenomenology is one of the approaches in qualitative research design. Phenomenology describes and interprets various aspects of the phenomenon, including perceptions, attitudes, beliefs, feelings, and emotions experienced by people (Denscombe, 2007). It aims to describe a person’s lived experiences in an attempt to enhance lived experiences by drawing out its meaning. According to the phenomenologist what the researcher observes is not the reality but an interpreted reality (Welman, Kruger, & Mitchell 2010). Therefore, phenomenology aims at gaining a deeper understanding of the nature of the meaning of our everyday experiences.
3.5.1 Phenomenology

The word phenomenology comes from the Greek word Phainomenon, meaning appearance, something which shows itself (Oxford Dictionary, 2010). Phenomenology involves bringing something to light to make it noticeable to us through our sense organs, experiences, and explanation (Finlay, 2012).

Phenomenology is the study of the lifeworld described as a world of immediate as already there prior to critical or theoretical reflections (Adams & Manen, 2008). Phenomenology is a science of experiences to understand the whole image of the phenomenon and it explores individuals’ lived experiences to understand the whole image of the phenomenon (Creswell, Hanson, Clark, & Morales, 2007). It is used to investigate, describe and think about the phenomenon and understand meanings (Smith, Flowers, & Larkin, 2011). Phenomenology is appropriate to explore the lived experiences of different persons (Pascal, 2010). Adams and Manen (2008) conclude that every lived experience can become a topic for the phenomenological inquiry.

The phenomenological approach in this study allowed the participants, through focused, face to face, semi-structured interviews to express their own lived experiences (De Vos, 2007) of being removed from their homes and placed in residential child care facilities. The phenomenological approach was used to analyse the conversations and interactions that the researcher had with the abused and/or neglected children removed from their homes in the Omusati region and placed in RCCF’s in Oshana region. The study attempted to understand the lived experiences of this vulnerable group of the population. This approach allowed for the direct exploration of the phenomenon consciously experienced and narrated by those who lived it.
The researcher eventually reduced the experiences to a central meaning to capture the essence of the lived experiences of the participants (De Vos, 2007).

The phenomenological research approach was the best fitting for the aim of the study, as stated earlier (Creswell, 2014). It further examines the particular experiences of the unique individual in a given situation, thus exploring what is preconceived to be (Burns & Grove 2009).

### 3.5.2 Phenomenology strategy

Descriptive phenomenology involves the following four strategies: intuiting, bracketing, analysing and describing.

#### 3.5.2.1 Intuiting

According to Streubert and Carpenter (2003) “intuiting is a process of thinking through the data so that a true, comprehensive, or accurate interpretation of what is meant in a particular description is achieved” (p. 54). Intuiting results in common understanding about the phenomenon under investigation (Streubert & Carpenter, 2003).

In this study through the intuitive process, the researcher acquired an understanding of the phenomenon of lived experiences of abused and/ neglected children removed from their homes and placed in RCCF’s. During the interviews, the researcher encouraged knowledge generation by using facilitative techniques such as open-ended and clarifying questions and refrained from leading questions (Streubert & Carpenter, 2003).
3.5.1.2 Bracketing

Bracketing refers to disregarding prior knowledge, experiences, understandings, explanations, and personal views about the phenomenon (Smith, Flowers & Larkin, 2011). This means that the researchers explore their own assumptions and preconceptions in order to set them aside or keep them in suspension, rather than conceal them so that they do not interfere with the information given by the participants (Streubert & Carpenter, 2003). The bracketing process is crucial throughout the research process and it requires the researcher to remain neutral with respect to belief or disbelief in the existence of the phenomenon (Streubert & Carpenter, 2003).

In this study, the researcher first identified any preconceived ideas about abuse and/or neglected children removed from their homes and placed in RCCF's (Streubert & Carpenter, 2003). Then the researcher suspended any knowledge she might have about the lived experiences of abuse and/or neglected children removed from their homes and placed in RCCF's. This allowed the truth to show itself which will determine the trustworthiness of the results.

3.5.1.3 Analysing

According to McManus (2007) phenomenological analysing involves identifying the essence of the phenomenon under investigation based on the data obtained and how the data are presented, which allows for the identification of recurring themes and interrelationships (McManus, 2007). As the researcher listened to the descriptions of the lived experiences of abused and/or neglected children removed from their homes and placed in residential care and dealt with the data, common themes began to emerge.
3.5.1.4 Describing

Describing is the final step and the researcher must avoid attempting to describe a phenomenon prematurely. Streubert and Carpenter (2003) assert that premature descriptions are a common methodology error associated with this type of research. In this study, phenomenological describing involved classifying all critical elements of themes common to lived experiences of abused and/or neglected children removed from their homes and placed in residential child care facility and describing these themes in detail.

3.5.3 Hermeneutic phenomenology

Hermeneutic phenomenology is one of the types of phenomenology. It concentrates on interpreting the meaning in the phenomenon that is concealed and thus, not immediately revealed to direct investigation, analysis and description (Holloway & Galvin, 2016). The word hermeneutics originated from the Greek verb hermeneuein, which means to interpret, to make clear or to understand (McManus, 2007). This approach concentrates on the need to study human consciousness by focusing on the world that the study participants subjectively experience. This could indicate immediate probing during the interviews that it is difficult for researchers to separate themselves from the world and to shade accumulated knowledge and experiences since they are connected to the society and share many things that bind them together (Panerson and Williams, 2002).

Hermeneutic phenomenology focuses on the process of understanding, interpretation, and the truthfulness of human experiences, as well as taking its meanings, habits, practices, and skills, taking social, cultural, and political contexts into account (Benner, 2008; Freeman, 2008; McManus, 2007).
Hermeneutic phenomenology is consistent with the objectives of the study, the research question, and the research design. The interpretive and descriptive nature of hermeneutic phenomenology, its context-based and holistic approaches, and epistemological and into logical premises are important to explore the lived experiences of abused and/or neglected children removed from their homes and placed in residential child care facilities.

3.6 Descriptive research

The descriptive method was used in this study to understand the experiential meaning of abuse and/or neglected children removed from their homes and placed in residential care.

A descriptive approach to data collection in qualitative research gives the ability to collect accurate data on and provide a clear picture of the phenomenon under study (Mamabolo, 2009). Descriptive research has been defined as research that “has its main objective the accurate portrayal of the characteristics of persons, situations, or groups, and/or the frequency with which certain phenomena occur” (Polit & Beck, 2008), thus, descriptive research collects data and characteristics about the population or phenomenon being studied (p.752).

In this study, the descriptive approach was appropriate because an accurate and authentic description was required of the lived experiences of abused and/or neglected children removed from their homes and placed in RCCF’s.
The researcher facilitated the participant’s description of their lived experiences of being removed from their homes and placed in RCCF’s by understanding and allowing the phenomena under study to unfold without unnecessary interruptions.

3.7 Exploratory research

Researchers began exploring something new with exploratory research. Burns and Grove (2009) define exploratory research as research conducted to gain new insights, discover new ideas and/or increase knowledge of a phenomenon.

Exploratory research is described by Brink (2006, p.120) as research that is conducted aimed at exploring the person-centred knowledge and understanding of experiences and perceptions of selected population groups through asking of questions and probing again and again until data saturation occurs. Brown (2006, p. 51) states that “exploratory research provides insights into and comprehension of an issue or situation”.

In this study, the researcher selected the exploratory method to gain new insight, discover new ideas and/or increase knowledge of lived experiences of abused and/or neglected children removed from their homes in Omusati region and placed in residential child care facility. Therefore, the researcher entered the field with importance from the point of not knowing and to provide new data regarding the phenomena in the context (Creswell 2014).

3.8 Contextual research

Mamabolo (2009) points out that contextual research focuses on specific events in naturalistic settings.
Naturalistic settings are uncontrolled real-life situations occasionally referred to as field settings. The phenomenon is studied for its natural and direct contextual meaning (Mamabolo, 2009).

The contextual research helps to understand what the people do and why they do it. Research done in a natural setting is an inquiry done in a setting free from manipulation (Streubert & Carpenter, 2003).

According to Welman et al. (2010) contextual research means relating to, depended on, or using context relating to or determined by or in context based on a particular phenomenon, whilst Streubert and Carpenter (2003) write that the researcher goes to the particular setting out of concern for the context. They further indicate that the phenomena can be better understood if observed in the setting in which it occurred (Lincoln & Guba, 1985).

The current study was done where the abused and/or neglected children were placed, which is at the RCCF’s because human behaviour cannot be understood without appreciating the context in which it takes place (Welman et al., 2010). Person-centred semi-structured qualitative interviews were conducted with abuse and/or neglected children removed from their homes and placed in residential care from the Omusati region. The participants were purposely selected in accordance with the study sampling criteria.

3.9 Qualitative research design

This study adopted a qualitative approach as its principles are appropriate for describing and interpreting the lived experiences of abused and/or neglected children removed from
their homes and placed in RCCF's. Lived experiences are the subjects of qualitative research methods (Yin, 2011).

Qualitative research is interpretive in nature (Stake, 2010) which adopts a person-centred and follows a holistic approach to understand the issue in detail (Yin, 2011). Qualitative research refers to inductive, holistic, emic, subjective and process-oriented methods used to understand, interpret, describe and develop a theory of phenomena or setting. It is a systematic, subjective approach used to describe life experiences and give them meaning (Burns & Grove, 2009). Qualitative research is mostly associated with words, language and experiences rather than measurements, statistic and numerical figures.

To understand the human perspective without focusing on specific concepts. According to Holloway and Galvin (2016), the context of the experience is unique and rich knowledge and its insight produce information to present a lively picture of the participant’s reality and social context. Holloway and Galvin (2016) further emphasise that these events are important to the researcher. Qualitative research is characterised as developmental and dynamic and does not use prescribed structured instruments (Holloway & Galvin, 2016), it involves the systematic collection and analysis of subjective narrative data in an organized and intuitive technique to identify the characteristics and the significance of human experiences (Holloway & Galvin, 2016).

The researcher tries to examine the experience from the participant’s point of view in order to interpret his or her words (Holloway & Galvin, 2016). The researcher becomes involved and engaged in the phenomenon to become familiar with it. The engagement of the researcher helps to provide dense descriptions from the narrative data gathered from
the participants, to interpret and tell their experiences and to produce empathetic and experiential understanding.

However, it is important to note that engagement cannot be obtained without a researcher-participant trusting relationship. In this study, the trusting relationship was built through basic interviewing and interpersonal skills.

Qualitative research is used to assess people's attitudes, opinion, and feelings on various topics. Shank (2002) defines qualitative research as a form of systematic empirical inquiry into meaning. By systematic, she means planned, ordered and public, involving gaining insight into how people live and experience social and personal life. The researcher attempts to study the experience from the responder point of view in order to interpret his or her words.

This type of inquiry is grounded in the world of human experience and inquiry into meaning by making sense of human social experiences (Creswell, 2014). Denzin and Lincoln (2008) defined qualitative research methods as multi-methods in focus, involving an interpretive, naturalistic approach to its subject's matter. This means that qualitative researchers study things in their natural settings, attempting to make sense of or interpret phenomena in terms of the meanings people bring to them. The qualitative researchers are expected to be a good listener, friendly, flexible, honest and non-judgemental. The focus of qualitative research is on investigating personal experiences and their meanings in their natural and context-specific settings (Creswell, 2014).

The researcher employed the qualitative method utilizing the phenomenological approach in order to gain a clear understanding of the experiences, feelings, perceptions,
and beliefs of abused and/or neglected children removed from their homes and placed in RCCF's from Omusati region.

When working with the participant, the researcher did not guide them to describe how they experience being removed from their homes and placed in residential care but allowed the participants sufficient time to respond in a way they felt appropriate.

3.10 Population

Babbie (2016) defines a population as an aggregation of elements from which the sample is actually selected. It is a group of potential participants who have similar characteristics. Burns and Grove (2009) defined the population as “the particular type of individual or element, such as the abused and or neglected children removed from their homes and placed in RCCF’s, who were the focus of the research” (p. 343).

The population in this study comprises of abused and/or neglected children removed from their homes in the Omusati region and placed in SOS Children Village in Ondangwa, Oshana region ages of 15 to 18 years because a child in Namibia is a person who has not attain the age of 18 years (CCPA, 2015). In total there were 106 children placed in the SOS Children village, Ondangwa of which one third were from the Omusati Region (MGECW, 2018). The participants interviewed were nominated by the social worker at the facility based on the list selected from the regional Social Workers’ caseloads.

3.11 Sample and sampling

The purpose of sampling is to provide “various types of information of a qualitative or quantitative nature about a population by examining a few selected units” (Bless,
Higson- Smith & Sithole, 2013, p.179). The qualitative sampling aims at the identification and understanding of a complex phenomenon experienced differently by various units of the population (Bless at al., 2013).

According to Babbie (2016) “the process of selecting observations is called sampling” (p.192). He mentioned that there are two types of sampling, the probability sampling and the non-probability sampling. The non-probability sampling is defined as any technique in which samples are selected in some way not suggested by probability theory. Babbie (2016) further defines the non-probability sampling method in which the units to be observed are selected on the basis of the researcher’s judgement about which ones will be the most useful or representative as the purposive or judgmental sampling.

Strydom and Delport (2007) define a sample as the small portion of the total set of objects, events or persons that together comprise the subject or study. A sample is the what or whom being studied. The term sampling always implies the simultaneous existence of a population or universe and a sample which is a smaller section of the universe (Bless et al., 2013), and the results of the research can be generalized to the entire population.

The sampling method is defined by Burns and Grove (2009, p.349) as "the process of selecting a group of people, events, behaviours or other elements that represent the population being studied". The researcher understands sampling as a process of selecting the “best-fitting” people to provide data for a study. A purposive sampling method was employed in this study to select eight participants. This technique is applicable for
different approaches of qualitative research design including phenomenological study (Creswell, 2014).

Purposive sampling is used to select persons who have the knowledge and experience of a phenomenon to address the topic being studied (Dattalo, 2008). The purposive sampling technique was considered suitable for this study because the researcher was able to select the most eligible participants for the study (Welman et al., 2010). Thus, the selection of the participants was based on the researcher’s own knowledge of the population.

Burns and Grove (2009, p. 345) describe the inclusion sampling criteria as “those characteristics that a subject or element must be possessing to be part of the largest population”. In this study, the following inclusion criteria were used:

1) Must be children from the Omusati Region;
2) Must have experienced some kind of abuse or neglect in their homes; must be a child in the SOS Children Village in Ondangwa;
3) Must be between the ages of 15-18 years.

3.1.1 Sample size

A sample is a subset of a population selected to participate in a research study. It defines the selected groups of elements that is the individual or groups (Burns & Groves, 2009). The sample is chosen from the study population that is usually referred to as the ‘target population’ (Polit & Hungler, 2004). The participants that were selected met the eligibility criteria for this study. According to Polit & Hungler (2004), eligibility criteria are the reason or criteria for including the sample in the study.
Patton (2014) recommends four to ten participants for a qualitative study. The number of participants was fixed to eight to include individuals from different backgrounds and to produce rich accounts of their experiences.

To identify research participants, the researcher contacted the regional social workers, the manager of the facility and the social worker at the facility. They assisted in selecting the participants based on the criteria set.

3.12 Research instruments

The researcher used person-centred face-to-face semi-structured interviews as the main research tool and primary instrument. Semi-structured interviews are flexible and have a fluid structure. As such, these in-depth interviews are the key data collection method for phenomenological studies that seek to understand the participant's experiences (Denscombe, 2007).

The interactive nature of person-centred interviews allows flexibility to cover issues under discussion, probe and explore the participant’s reasons, personal issues, attitudes, intentions, emotions, feelings, opinions and beliefs (Buzgová & Ivanova, 2009). The semi-structured interviews made use of open-ended questions in order for the researcher to obtain much information as possible from the participants.

De Vos et al. (2011) assert that semi-structured interviewing technique reflects an open and accepting style of interviewing that seeks to elicit the genuine views and feelings of participants and allow the sufficient flexibility to explore participants’ response in depth (Delport & Fouche, 2007).
The researcher used open-ended questions during the interviews. The open-ended interview guides were outlines based on the literature and research questions. The aim of the interview was to gain clear lived experience, feelings, perceptions and beliefs of abused and/or neglected children removed from their homes in the Omusati region and placed in RCCFs.

The interview sessions were conducted during the month of March 2018 at the SOS Children Village boardroom in Ondangwa. The length of the interviews ranged from 35 to 45 minutes with an average of 40 minutes.

The researcher audio-recorded all the face-to-face semi-structured interviews and produced field notes during the interviews describing the physical appearance, facial expressions and emotions of the participants and transcribed them verbatim to prepare for analysis.

The researcher-built rapport prior to the interview through the gatekeepers and briefed them on the purpose of the study and the sections of the interview guide. The head of the facility and the participants expressed their written informed consent to take part in the study and a convenient place and time for the interview was fixed. The semi-structured interview guide is attached as Annexure 1.

3.13 Pilot testing

Pilot testing is defined as a small-scale study conducted prior to the main study on a limited number of subjects from the population at hand (Van Der Walt & Van Rensburg, 2006).
Its purpose is to investigate the feasibility of the proposed study and to detect possible flaws in the data collection instruments (Van Der Walt & Van Rensburg, 2006). In the current study, a pilot study was conducted with two children from the caseload of the researcher who were previously removed from their homes and placed in RCCFs and discharged after a long period of time. The pilot study assisted the researcher in determining the feasibility of the study in terms of effective response to the questions and time or duration. However, no modification was deemed necessary because the interview guide was administered at the set time and it provided the intended response.

3.14 Procedure

The researcher made appointments with the SOS manager and the social worker to identify the possible participants based on the list selected from the regional social worker's caseload.

The researcher explained the purpose and objectives of the study and that the participants should be able to express their experiences with minimum emotional distress to prevent secondary trauma.

Possible dates for interviews were given to the researcher by the head of the facility. The researcher requested the children to choose a private venue where they would feel comfortable to talk about their experiences. All of them agreed to use the SOS Children Village Boardroom.
3.14.1 Language and cultural differences

Welman, Kruger, and Mitchell (2010) mention that the aspects of language are very important therefore the language and cultural values of the respondents must be taken into consideration. It is important to note that even if the respondents are fluent in the language of the researcher, different expressions have different meanings in the different language. In certain cultures, certain topics should not be discussed at all (Welman, Kruger & Mitchell, 2010). In many Namibian rural traditions, it is a taboo to talk about family issues. For many families, issues such as those of child abuse or violence against children are kept within the family. Although the current study dealt with a sensitive topic, the participants were sensitized on the purpose of the study and the respondents were asked to choose the language that they feel comfortable with, therefore five interviews were done in Oshiwambo and three in English.

3.14.2 Preparing for the interview

The preparations for the interview starts when the researcher select the participants based on the sampling criteria. The researcher also reviewed the literature on the topic as part of the preparation for the interview. In selecting the participants for qualitative interviews, the researcher should enter the world of the interviewees (De Vos, 2007).

3.14.3 Conducting the interview

The participants were interviewed by the principal investigator in March 2018. Before the interview, the researcher had to make sure that good rapport was established by properly introducing herself to the participants and by explaining the research to the participants as well as the purpose of the research, as this would help to pave the way and lay a foundation for a good and a trusting relationship. Establishing a good rapport
with the respondent opens many doors for the researcher and may lead to the collection of valuable information (Welman et al., 2010). However, it is advisable for the researcher to take care and remain objective; therefore, the interviewer should neither approve, nor disapprove of the participant's action but be understating (Welman et al., 2010).

The researcher further explained that the interviews were semi-structured and included open-ended questions, as well as some additional probing questions which would be determined by the information given by the participants. This structure enabled the researcher to ask new questions as the interview situation suggested, thereby gaining in-depth insights and meanings about the phenomenon being studied (Creswell, 2014).

The researcher followed these procedures during the interview sessions. After completing the preliminary activities for interviews, the researcher started by collecting data on the profiles of participants. Starting the interview with background questions created smooth conditions to proceed to the rest of the interview questions. The interview sessions were conducted at the SOS Children’s Village Boardroom where there was no one around to interrupt. Interview session was conducted without utilising any of the researcher’s prior information, experience or opinion in a particular area to prevent bias. The researcher used the following probing techniques to encourage interviewees to give further explanations:
3.14.3.1 Open-ended questions

Open-ended questions provide interviewees with ample opportunity to express their feelings (De Vos, 2007). Open-ended questions allowed the participants to respond in their own words (Polit & Hungler, 2004).

3.14.3.2 Tracking

De Vos (2007) asserts that the interviewers should show interest and encourages participants to speak by closely following the content and meaning of their verbal and non-verbal conversation. This allowed the researcher to understand the progress of the conversation.

3.14.3.3 Clarification

The researcher asks for clarifications from the participants, for example, "Can you tell me more about your experience of being removed from the home to RCCF's?". This allowed the researcher to determine whether the questions have been misunderstood and clarified matters when she needed to.

3.14.3.4 Reflection summary

The researcher repeated in her own words, the ideas, opinions and feelings of the participants correctly (De Vos, 2007).

The participants were guaranteed confidentiality before signing the assent and consent forms respectively. Permission to audio record each interview was sought from each participant as well as from the manager of the facility for the participants under the age of 18 years. All interviews were recorded using the digital recorder and were transcribed and analysed which allowed the researcher to concentrate on the proceeding of the
interviews. The interviews were conducted for approximately 40 minutes with each participant, although some were shorter.

The researcher conducted each interview in the language preference of each participant. Therefore, five interviews were done in Oshiwambo and three in English. The researcher rephrased and repeated the questions to gain more information. Furthermore, the researcher repeated in her own words, the ideas, opinions and feelings of the participants correctly (De Vos, 2007). The researcher produced field notes during the interview; however, the field notes were limited to avoid interrupting the interview session (Rubin & Babbie, 2011).

Before closing the interview, the researcher asked the participants to draw a conclusion about their experiences and express their feelings about the interview. Debriefing sessions lasting approximately 20 minutes were held after each interview. The participants were thanked for devoting their time and energy to share their experiences. The researcher did not encounter any problems that hindered the progress of the data collection process.

3.14.4 Advantage of interviews

The following are the advantages of interviews as listed by De Vos (2007):

- Interviewing is a flexible technique that allows the researcher to explore a greater depth of meaning that can be obtained with other techniques.

- Interpersonal skills can be used to facilitate co-operation and elicit more information.
There is a higher response rate to interviews than questionnaires, leading to a complete description of the phenomenon under study by the participants.

Interviews allow collection of data from participants who are unable or unlikely to complete questionnaires (such as those whose reading, writing and the ability is to express themselves is minimal).

3.15 Measures to ensure trustworthiness

Research demonstrates trustworthiness when the experiences of the participants are accurately presented (Streubert & Carpenter, 2003). Streubert and Carpenter (2003) further describe trustworthiness as “establishing the validity and reliability of qualitative research”. Trustworthiness of data in method triangulation is demonstrated through the researcher attention to and confirmation of information discovery which is referred to as rigour. Streubert and Carpenter (2003) emphasised that the goal of rigour in qualitative research is to accurately represent the study participant’s experiences. Terre Blanche, Durkheim and Painter (2006) affirm that validity and reliability are two factors which any qualitative researcher should be concerned about while designing a study, analysing results and judging the quality of the study.

Neuman (2011) has suggested that trustworthiness is seen in terms of its validity and reliability and evaluated according to credibility, transferability, dependability and conformability, member checking and audit trail.
In this study, the searcher ensured the trustworthiness of the findings by exposing the study to a colleague for constructive criticism. These following concepts were used to provide evidence of the validity and reliability of the research study.

3.15.1 Credibility of the study

Credibility is an important issue in qualitative research. It is a strategy of true value criteria and it is related to the degree of believability of research findings (Shank, 2006). The researchers illustrate the value of their research projects when they explain trustworthiness (Given & Saumure, 2008), it is validated when the research participants recognise the research findings as their own experiences.

Credibility refers to a methodological procedure, sources of data, and the linkage between the views of research participants and the researcher’s interpretation (Creswell, 2014). Credibility is concerned with the feasibility of the research project, the appropriateness of the research design and methodology, the selection of research participants, and the inclusion of their views in the study (Jensen, 2008).

To increase the probability that credible findings were produced the following activities were conducted: prolonged engagement, member checking, reflexivity and peer debriefing (Creswell, 2007).

3.15.1.1 Prolonged engagement

Prolonged engagement is the investment of sufficient time to achieve certain purposes: learning the "culture"; testing for misinformation introduced by distortions either of the self or of the participants; and building trust (Daymon & Holloway, 2011). It requires that the researcher is involved with a site long enough to detect and take into account
biases that might otherwise creep into the data. The purpose of prolonged engagement is to render the researcher open to the multiple influences, mutual shapers and contextual factors that impinge upon the phenomenon being studied.

Prolonged engagement is one of the strategies that increased the credibility of this study. The researcher established credibility by prolonged engagement until the scope of the data was adequately covered.

In addition, to attain credibility in the current study, participants were encouraged to describe their lived experiences precisely and adequately. Furthermore, the researcher spent adequate time with the participants to established rapport (Daymon & Holloway, 2011). The clarity of the interview guide was examined during the pilot interviews. The methods and procedures used in the study and their interpretations and research findings are presented genuinely. Identifying and describing categories of interview response, providing a thick description of the settings, member checking and getting feedback from the research supervisors were procedures that were employed to enhance the credibility of the study.

3.1.5.1.2 Member check

Member check entails the researcher returning to the participants and checking the findings with participants to confirm their experience as true (Daymon & Holloway, 2011). The researcher did member checks with the participants’ feedback. The participants checked categories that emerged from the data, and after the themes were finalised the researcher discussed the interpretation and conclusions with them.
3.15.1.3 Reflexivity

According to Burns and Grove (2009), the researcher should explore personal feelings and experiences that might influence the study and integrate this understanding into the study to promote objectivity. He or she is part of and not divorced from the phenomenon under study. In the present study, the researcher was constantly taking the position of the main research tool. The analysis of the researcher's experience made the researcher aware of the biases and predetermined ideas. Bracketing was implemented throughout the study and each phase of the research was carefully approached using bracketing to avoid bias and approach the phenomenon with an open mind.

3.15.1.4 Peer and participant debriefing

Peer debriefing is a process of exposing oneself to unbiased peer in a manner equivalent to a reasonable session and for the purpose of exploring aspects of the enquiry that might otherwise remain unspoken in the inquirer’s mind (Polit & Hungler, 2004). Debriefing by peer and of participants increases credibility. Peer debriefing exposes the researcher to the searching questions of others who are experienced in the methods of enquiry, the phenomenon or both (Polit & Hungler, 2004). In this study, the researcher exposed the research work to a colleague for constructive criticism.

3.15.2 Transferability

Transferability refers to the probability that the study findings have meaning to others in similar situations (Streubert & Carpenter, 2003), it determines whether the findings fit in or are transferable to similar situations. It is the extent to which the findings from the data can be transferred to other settings. The possible user determines whether or not the findings are transferable (Streubert & Carpenter, 2003). However, it should be noted that
generality and applicability are irrelevant in qualitative research since the researcher wants to describe the particular phenomenon.

It is the researcher's responsibility to provide a dense description of the research context and sufficient descriptive data that the reader can assess and evaluate the applicability or transferability of the data in another context. The researcher is expected to describe the data sufficiently to allow comparison.

In the present study, transferability was ensured through the process of member checks. This would increase the possibility that the findings have the same meaning for other abused and or neglected children removed from their homes and placed in RCCFs. Furthermore, the researcher ensured the trustworthiness of the findings by exposing the study to a colleague for constructive criticism. Finally, the two experienced supervisors were responsible for scrutinising the findings, interpretations and recommendations and verifying that they are supported by the data.

3.15.3 Dependability

Dependability is another criterion used to measure trustworthiness in qualitative research (Streubert & Carpenter, 2003) it is met through securing the credibility of the findings. Dependability is the stability of data over time and is obtained with stepwise replication and inquiry audit (Polit & Hungler, 2004). It is a criterion that is met through obtaining credibility and cannot be present without credibility (Streubert & Carpenter, 2003). In this study, the supervisors were responsible for examining the data, findings, interpretations and recommendation in order to verify that they are supported by the data.
3.15.4 Confirmability

Confirmability is a neutral criterion for measuring the trustworthiness of qualitative research. If a study shows credibility and transferability, the study is also said to possess confirmability (Streubert & Carpenter, 2003). It is a criterion for evaluating data quality and refers to the neutrality or objectivity of the data by an agreement between two or more dependent persons that the data is similar (Polit & Hungler, 2004). Confirmability is a strategy to ensure neutrality (De Vos, 2007), it means that the findings are free from bias. In qualitative research, neutrality refers to data neutrality and not the researcher’s neutrality.

According to Streubert and Carpenter (2003), the purpose of confirmability is to demonstrate that the evidence and thought processes give another researcher the same conclusions as to the research context. Findings from in-depth interviews were read to the participants in order to confirm with them whether they were correct.

Furthermore, the researcher notes and the recorded information were compared in order to confirm trustworthiness.

3.16 Data analysis

Creswell (2014) asserts that data analysis is conducted to reduce, organise and give meaning to data. Data analysis is a challenging and a creative process characterised by an intimate relationship of the researcher with the participants and the data generated (De Vos, 2007). In the phenomenological research, data analysis begins as soon as the first data are collected.
The qualitative data analysis is “the assessment of observation, content analysis, in-depth interview and other qualitative research techniques with its own logic and techniques” (Babbie, 2016, p. 381). He further argues that the researcher must guard against letting their choice of theory or paradigms bias their research results. He defines a paradigm as the fundamental model or schemes that organizes our view of something whereas theories seek to provide logical explanations.

In this study, when the researcher was preparing to attend to the data her first task was a conceptual one; by clarifying own perceptions of the phenomena under study. Which is what Techs (1998, p. 92) refers to as “bracketing, suspending as much as possible the researcher meanings and interpretations and entering into the world of the individual who was interviewed”. It is the process of holding assumptions and presupposition in suspension to improve the rigour of the research (Holloway & Galvin, 2016). Thus, the researcher had to first identify any preconceived ideas about the lived experiences of abuse and/ neglected children removed from their homes and placed in RCCF’s (Streubert & Carpenter, 2003).

Then the researcher had to suspend any knowledge she might have about the experiences about the abuse and/ neglected children removed from their homes to RCCF’s to prevent this information from interfering with the recovery of a pure description of the phenomenon.
The process of data collection is concluded once the data collected becomes repetitive and a point of data saturation is reached (De Vos et al., 2011). The process of data analysis goes beyond description because data is transformed and extended (Burns & Grove, 2009).

Data of the spoken words that were obtained during the in-depth face to face interviews by digital recording and field notes were transcribed in English for the purpose of analyses (De Vos et al., 2011). The researcher carefully listened to the digital recordings interviews repeatedly and transcribed each one into English. In this process, the researcher identified themes and patterns from the data.

The researcher also read the field notes and compared them to transcripts to ensure that the participant’s verbatim transcriptions of the exact word were recorded. The researcher re-read all the transcribed texts and field notes and listened to the audio recording to fully comprehend and get closer to the data. Tesch’s 8-step method of data analysis was employed to analyse the data collected through the phenomenological person- centred one-to-one interviews with abused and/ or neglected children removed from their homes and placed in RCCFs from Omusati Region.

The Tesch’s 8 steps involved in the process of data analysis are as follows:

1. The researcher carefully read through all the verbatim transcriptions, making notes of ideas that came to mind; replay the audio after the interview to listen to voice, tone, pauses, and responses as well as to the entire content.
2. The researcher selected one interview and listened to it to try to get meaning in the information, writing down thoughts and descriptions.

3. After going through the transcripts, the researcher arranged the similar topics in groups by forming columns labelled major topics; unique topics and leftovers in terms of what the participants were telling.

4. The researcher abbreviated the topics as codes and wrote the codes next to the appropriate segment of the text. The researcher then observed the organisation of data to check if new categories or codes emerged.

5. The researcher identified most descriptive wording for the topics and converted them into common themes in accordance with people’s description of their lived experiences. The aim was to reduce the total list of categories by grouping topics together that relate to each other. Numbers (1-8) were used to identify the participants. This is what Babbie (2016) refers to as the open coding which he defines as the “initial classification and labelling of concepts in qualitative data analysis.

6. The researcher then arranged each category and coding alphabetically.

7. Data material belonging to each category was put together in one place and preliminary analysis performed. Key findings are discussed in this section under each heading and document it in terms of the paragraph.

8. Recoding of the data was done if necessary (De Vos, 2007).

The findings of the study are presented, described and interpreted exhaustively in Chapter 4.
3.16.1 Coding

Creswell (2014) states that data can be coded according to categories and subcategories identified by reading and re-reading the collected data. Coding serves as a way to label, compile and organise data.

Welman, Kruger and Mitchell (2010) define codes as "tags or labels that attached meaning to the raw data or notes collected during fieldwork. The purpose of coding is to analyse and make sense of the data that have been collected" (p. 214). The data analysis process was lengthy and on-going and continued until saturation of the themes and sub-themes were achieved.

3.17 Research ethics

It is crucial for any researcher to adhere to ethical issues throughout the research process in order to protect participants. Measures adapted from the ethical considerations discussed by Neuman (2006) and those listed by Patton (2002) were taken during the research procedures to ensure that the respondents did not suffer physical or emotional. The researcher had a moral obligation to strictly consider the rights of the participant who were expected to share their experiences (Streubert & Carpenter, 2003). According to Punch, (2016.p.23) “the researcher ethical responsibilities include the overarching principle of academic integrity and honesty and the respect of the other people”.

Ethical considerations were an important aspect of this study; due to the sensitive nature of the study, possible risks were continuously examined to increase sensitivity to the participants and not to expose them.
In this study, the researcher considered it very important to establish trust between the participants and herself and to respect the participants as self-directed individuals, thus enabling the participants to make a sound decision.

Ethical measures and ethical conduct towards participant's information's as well as honest reporting of the result are important in any research. The ethical measures in this study include permission, assent and consent, confidentiality and anonymity, privacy, right to withdraw from the study, right to protection from exploitation and harm, the involvement of the researcher and dissemination of results.

3.17.1. Permission

The research proposal was submitted to the University of Namibia’s Postgraduate Studies Committee and approval was granted to conduct the study. Written permission to conduct the research study was obtained from the University of Namibia’s Research and Ethics Committee, SOS Children Village country director, and the Permanent Secretary of the MGECW.

3.17.2 Assent and consent

Voluntary, informed and written assent form was signed by participants under 18 years and consent form from the head of the facility was sought. Informed consent generally means that the participants should be free to choose to take part or refuse having been given the fullest information concerning the nature and purpose of the research including any risk to which they personally would be exposed to (Nigel, 2009). Thus, the purpose of the study was explained to the participants before the interviews.
The respondents were informed that their names were not to be recorded or mentioned anywhere in the study. The 18 years old participant signed the consent forms.

Permission to audio-record each interview was sought from each participant as well as from the head of the facility for the participant under 18 years. Participants under the age of 18 years signed assent forms to digital-record each interview and the head of the facility signed the consent to digitally record voices of the children under 18 years. The 18-year-old participants signed the consent forms to digital-record each interview.

3.17.3 Confidentiality and anonymity

Babbie, (2016, p. 59) argues that "confidentiality is guaranteed when the researcher can identify a given person's response but promises not to do so publicly". Unwanted intrusion into the participant’s privacy was minimised by getting a private room, far from staff members and other children. Pilot and Hungler (2004) stated that “confidentiality means that no information that the participants divulge is made public or available to other” (p.143). The participants were not asked to provide their names on the study to ensure anonymity. Transcriptions of interviews were done according to numbers to conceal the identities of participants. Furthermore, the researcher ensured that the place where the interviews were conducted was private and child-friendly. Confidentiality is guaranteed by ensuring that data obtained are used in such a way that no one other than the researcher knows the source (Burns & Grove, 2009).

3.17.4 Privacy

Privacy refers to agreements between persons that limit the access of others to private information (De Vos, 2007).
It is the freedom an individual has to determine the time, extent and general circumstances under which private information will be shared (Burns & Grove, 2009). In this study, the researcher ensured that when participants described their lived experiences of being removed from their homes and placed in RCCFs, the information given was not disclosed. Participants were informed that their identity remained anonymous. Furthermore, in this study, privacy was maintained by not attaching participants’ names to the information.

3.17.5 Right to withdraw from the study

Participants were encouraged to indicate any discomfort or unwillingness to answer a specific question(s). The participants were informed that they could skip the question(s) or withdraw from the interview at any time if they wished to without any negative consequences. This right is part of the assent and consent forms.

3.17.6 Right to protection from exploitation and harm

The participants can be psychologically harmed therefore the researcher took note of the sublets danger and guard against them (Rubin & Babbie, 2011). Caution was practised with regards to respect for the person, sensitivity to specific needs and permission. The participants were informed that they were protected against physical and emotional harm (Welman, Kruger, &Mitchell, 2010).

Debriefing sessions lasting 20 minutes were held after each interview to ensure that the participants were fine. Although the researcher had prepared a referral sheet to refer the participants to MGECW social workers at Ondangwa office for counselling if the need arose, it was not used as no participants required referrals.
The caregivers were also sensitised to observe the participants for a few days after the interviews to see if they were well. Thus if the caregivers had seen any emotional symptoms with the participants, they had to call for help from MGECW social workers at Ondangwa office. The extent and nature of the researcher's role were clarified from the onset to avoid unrealistic expectations from the participants.

3.17.7 Involvement of the researcher

Welman et al. (2010), state that the researcher should guard against manipulating respondents. Therefore, he or she should treat the responded as individual human beings and not as objects. According to these authors, the researcher should not use unethical tactics and techniques of interviewing. The role of the researcher during the interviews was to facilitate the process in a permissive and non-threatening environment. The researcher showed sensitivity to the uniqueness of each participant throughout the interview. Furthermore, the researcher probed deeper to encourage the participants to express their experiences and perceptions and took field notes to back up the audio recordings. The topic and interview could re-open the wounds of the participant’s experiences, and thus the researcher approached with an empathetic understanding (Holloway & Galvin, 2016). The researcher adhered to this measure by applying her experience as a social worker and extensive understanding of her role.

3.17.8 Dissemination of results

Results are disseminated in the form of a research report. The report should stimulate readers to want to study it and also determine its feasibility for implementation (De Vos, 2007). The report should not expose the secrets or weaknesses of the institution to the readers but should recommend improvements of the service.
In this study, the participants were informed that a copy of the findings would be handed to the MGECW as well as at the RCCF where the study was conducted. Anonymity is assured because the results do not mention the participants’ names.

3.18 Conclusion

The researcher used a qualitative, explorative and descriptive design. The primary data collection method used in this study was one-on-one in-depth semi-structured interviews. The sample characteristics included eight participants who have experienced some kind of abuse or neglect in their homes; who are residing in the SOS Children village in Ondangwa; who are from Omusati region, and who are between the ages of 15-18 years. Written permission to conduct the research study was obtained from the University of Namibia’s Research and Ethics Committee, SOS Children Village country director and the Permanent Secretary of the MGECW. Written assent form was signed by participants under 18 years and consent form was obtained from the manager of the facility for children under the 18 years.

Consent was also obtained from the 18 years old participants themselves. Anonymity, self-determination, and confidentiality were ensured during the administration of the interview guides and report writing. The interview guides were administered by the researcher herself to ensure validity. Reliability and validity were further increased by pre-testing the interview guides. This chapter also described the research methodology, including the population, sampling strategy, sample size, data collection instruments as well as strategies used to ensure the ethical standards, reliability, and validity of the study.
CHAPTER 4
FINDINGS AND DISCUSSIONS

4.1 Introduction

In this chapter, the findings of the study are presented based on the four major themes identified as categories with supporting literature. The focus was on the lived experiences of abused and/or neglected children removed from their homes in the Omusati region, Namibia and placed in RCCFs in Oshana region. The data analysis provided meaningful insights into the experiences and presentations on the emerging themes found in the raw data.

The following themes or categories emerged: lived experiences of participants who have been removed from their homes, childhood experiences and thoughts regarding removal, effects and impact of removal on psychosocial well-being of children, and how children expressed their goals after RCCFs placements.

4.2 Brief overview of the participants’ demographic information

The study focused on children that were identified from the caseload of the social workers in the Omusati Region. Eight (8) participants who have been abused and/ or neglected and who have been removed from their homes and placed in the SOS children village in Ondangwa and who were willing and emotionally ready to participate were interviewed.

Table 4.1 offers basic demographic information for each participant. Numbers 1-8 are used to maintain participants’ anonymity, sex, age, current grade, region and how long
the participants have lived in RCCF. Finally, the researcher included whether the participants were prior informed about their removal or not.

Table 4. 1 Respondents’ demographics

<table>
<thead>
<tr>
<th>Participant number</th>
<th>Sex</th>
<th>Age</th>
<th>Current grade</th>
<th>Status of biological mother</th>
<th>Status of biological father</th>
<th>Number of years lived in RCCF</th>
<th>Prior informed about the removal</th>
<th>Region</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>F</td>
<td>15</td>
<td>7</td>
<td>Deceased</td>
<td>Deceased</td>
<td>I don’t know</td>
<td>No</td>
<td>Omusati</td>
</tr>
<tr>
<td>2</td>
<td>F</td>
<td>16</td>
<td>8</td>
<td>Alive</td>
<td>Alive</td>
<td>8 years</td>
<td>Yes</td>
<td>Omusati</td>
</tr>
<tr>
<td>3</td>
<td>F</td>
<td>17</td>
<td>5</td>
<td>Deceased</td>
<td>I don’t know</td>
<td>I don’t know</td>
<td>No</td>
<td>Omusati</td>
</tr>
<tr>
<td>4</td>
<td>M</td>
<td>17</td>
<td>9</td>
<td>Alive</td>
<td>Deceased</td>
<td>8 years</td>
<td>No</td>
<td>Omusati</td>
</tr>
<tr>
<td>5</td>
<td>M</td>
<td>15</td>
<td>5</td>
<td>I don’t know</td>
<td>I don’t know</td>
<td>I don’t know</td>
<td>No</td>
<td>Omusati</td>
</tr>
<tr>
<td>6</td>
<td>F</td>
<td>18</td>
<td>9</td>
<td>Deceased</td>
<td>I don’t know</td>
<td>7 years</td>
<td>No</td>
<td>Omusati</td>
</tr>
<tr>
<td>7</td>
<td>F</td>
<td>18</td>
<td>11</td>
<td>Deceased</td>
<td>Alive</td>
<td>8 years</td>
<td>Yes</td>
<td>Omusati</td>
</tr>
<tr>
<td>8</td>
<td>M</td>
<td>18</td>
<td>9</td>
<td>Alive</td>
<td>Alive</td>
<td>7 years</td>
<td>Yes</td>
<td>Omusati</td>
</tr>
</tbody>
</table>
4.2.1. Gender of the participants

Participants were asked to indicate their gender by selecting the relevant option provided (male or female), and all 8 participants responded. Out of the 8 participants interviewed, 5 were females and 3 were males. It is evident that the majority of the respondents were females, and this can be attributed to the fact that the ‘male child’ is unlikely to report the abuse compared to the female child, thus the incidents leading to child removal are typically under-reported. In total there are 106 children placed in the SOS Children village, Ondangwa of which fifty-two (52) are males and fifty-four are females (MGECW, 2018).

This is supported by a report by Shikwambi (2017) which revealed that 162 cases of violence against children were reported in the Omusati Region during 2016/2017. The dramatically increased number of reported child abuse and neglect cases has created a national outrage against perpetrators of child abuse in Namibia. This widespread phenomenon of child abuse violates the rights and dignity of thousands of Namibian children leaving them with both physical and emotional scars. To date, it is not uncommon for local newspapers and media outlets to report daily on these horrific crimes against society’s most vulnerable population.

However, it is important to note that these statistics only account for cases that have been reported at the GBVPU, which most likely represents a small minority of actual cases of child abuse in the region.
4.2.2. Age

According to the demographic information, the age range of participants was between 15 and 18 years. A child in Namibia is defined as a person who has not attained the age of 18 years (CCPA, 2015). The figures above indicate that the majority of the respondents fell within the 17-18 years’ age group. This shows that the respondents were within the age group of the most vulnerable group of the population who are vulnerable to abuse, and thus, justifies the reasons for them to be removed from their homes as a measure of “the best interest of the child”.

4.2.3. Participants level of education

All eight participants were enrolled in school. The participant’s level of education was between grade 5 and grade 9 with one participant in grade 11. The participants mentioned that they experienced learning difficulties such as having trouble reading, studying and concentrating. Although the reasons were not established, this is an indication of the poor performance of children in RCCFs because in Namibia at least by the age of 18 years one is expected to be in grade 12.

Dozier et al. (2012) are in agreement with this finding since they stated that there are consistently negative views on RCCFs as a place to raise children on a long-term basis even though the child outcomes can vary as a function of timing and the duration of placements.
4.2.4. Status of biological parents

Out of the 8 participants interviewed, 4 indicated that one or both biological parents are deceased, 2 stated that their biological parents were alive, and 1 did not know the status of the biological parents. This has reference to the prevalence of children in RCCFs which tend to attract children from poverty-stricken environments and orphans. RCCFs are mandated to help children without parental care and support to grow up in a nurturing family-friendly environment (UNICEF, 2008).

4.2.5. Number of years lived in RCCF

The majority of the respondents lived in SOS Children Village most of their lives as they indicated that they have lived in SOS Children Village from 7 to 8 years and the minority could not remember.

“I have been staying here at SOS children village for 8 years” (Participant 2, age 16)

“I have been here since 2010 is almost 8 years, that I have been staying here” (Participant 7, age 18)

“I was placed in 2011 not sure of the month and has been here for 7 years now” (Participant 6, age 18)

"When I first come here I was in grade 3 but I don't know the year. Currently, I am in grade 7 but I repeated some grades” (Participant 1, age 15).

“I do not know but I come here while in kinder garden and start the preschool the following year” (Participant 5, age 15).
This can be anticipated to the fact that the children are placed in RCCFs with no care plans and when the social worker placed the children in the RCCF’s, it is a close case with no follow-ups. This finding can be linked to the study by Nshimyimana, et al. (2015) which emphasized the care plans for each child in RCCF’s and re-integrating the child into to the family of origin or extended family.

On the other hand, the International treaties also advocate that, if a child is taken out of his or her home environment, it should not be longer than necessary and should serve developmental goals (Höfte et al., 2012).

This view is shared by the Namibian government and other key players in the local child welfare sector which led to the development of the minimum standards of residential child care facilities in Namibia (Ministry of Gender Equality and Child Welfare, 2009). In addition, the Minimum Standards for Residential Child Care Facilities in Namibia 2009 and the Foster Care Guidelines 2010 are guidelines that are designed to ensure that the rights of children in RCCFs are promoted as well as to establish, maintain and manage high-quality care services for children in Namibia (MGECW, 2009, p. 3). Therefore, MGECW is mandated to register and regulate existing RCCFs to ensure that the guidelines and minimum standards for RCCFs are followed and implemented.

Findings from the study also revealed that some of the respondents could not remember for how long they have been living in the SOS Children Village. This can be attributed to the fact that when the responded were removed from their homes they were very young therefore it is difficult for the participant to remember. Despite having policies, legislation and regulations that cater to the needs and rights of children placed in RCCFs, the children are kept longer than necessary in the RCCFs.
Thus, a detailed care plan may reduce the duration of placement and focused on the child developmental goals. This finding is in agreement with Kendrick (2012) who mentions that it is not good practice for a child to be in residential care for five years or more. In order to achieve optimal outcomes for children in care, the age of entry and the speed of action to return the child home are very critical (Kendrick, 2012).

The information in Table 4.1 also shows that all the respondents interviewed were from the Omusati Region. This shows that the children are not only removed from their homes but they are also taken far away from their familiar environment as well as their region of origin. Furthermore, the study also revealed that the participants are enrolled at the new school in the middle of the terms.

4.2.6. Informed prior to the removal

The majority of the respondents were not informed prior to their removal.

“No I don’t know and no one ever informs me” (Participant 5 age, 15)

“No one ever told me why I needed to be removed but it was done after I told my teacher that my uncle had sexual intercourse with me. Maybe I shouldn’t have told him” (Participant 3, age 17).

This can be attributed by the fact that children are usually not informed about the intentions and are not consulted for decision-making.

Children in care usually have no say in the decision-making process with regards to their placement (Unrau, 2007), specifically, the rationale for placement is usually based on
adult assessment of children’s risk factors and needs and these reasons may not be adequately explained to the children (Khoo, Shoog & Dalin, 2012).

Fox and Berrick (2007) suggest that child welfare service should include the voice of children in order to improve their quality of life. Children’s opinions toward care are important as it may be related to their development and well-being (Fox & Berrick, 2007).

4.3 PRESENTATION OF FINDINGS

To report on the research findings, the researcher presents transcribed quotations about the lived experiences of abused and/or neglected children removed from their homes and placed in SOS Children Village from the interview. The contents of the quotations guided the researcher towards the results inferred from the data and established the credibility of the themes by ensuring that the illustrative quotations reflect the participants meaning and feelings. The researcher’s interpretation and analysis are integrated with literature, which serves as evidence of the themes and sub-themes. The collected data from the semi-structured individual interviews, the process of data analysis by the researcher as well as the discussion, resulted in Themes supported by Sub-themes which are presented in Table 4.2.

4.3.1 Themes and sub-themes
Table 4. 2 Themes and sub-themes

<table>
<thead>
<tr>
<th>Themes</th>
<th>Sub-themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lived experiences of participants who have been removed from their homes</td>
<td>Sub-theme 1.1 Relationship</td>
</tr>
<tr>
<td></td>
<td>Sub-theme 1. 2 School</td>
</tr>
<tr>
<td></td>
<td>Sub-theme 1. 3 Life at RCCF’s</td>
</tr>
<tr>
<td>Children experiences and thoughts regarding the removal</td>
<td>Sub-theme 2.1 Reasons for removal</td>
</tr>
<tr>
<td></td>
<td>Sub-theme 2.2 Family contact after removal</td>
</tr>
<tr>
<td></td>
<td>Sub-theme 2.3 External support or support networks</td>
</tr>
<tr>
<td>Effects of removal on psychosocial well-being of children</td>
<td>Sub-theme 3.1: Inner- strength</td>
</tr>
<tr>
<td></td>
<td>Sub-theme 3.2: Emotional support</td>
</tr>
<tr>
<td>How children expressed their goals after RCCF’s placement</td>
<td></td>
</tr>
</tbody>
</table>

4.4. Theme 1. Lived experiences of participants who have been removed from their homes

The lived experience of children removed from their homes and placed in RCCFs has received little attention (Li et al., 2008). Similarly, although children who have been removed from their homes who reside in the RCCFs face multiple challenges, and can be at risk for developing poor mental health outcomes (Johnson, Browne, & Hamilton-Giachritsis, 2008), little is known about their well-being (Hermrnau et al., 2011). This is due to the scarcity of studies done on the phenomenon and the inconsistent results that existing studies have reported.

The study probed the lived experienced abused and/or neglected children removed from their homes and placed in RCCFs from the Omusati Region, Namibia.
Therefore, participants were assessed on their experiences. There was a general perception that the voices of children who are removed from their homes and placed in RCCFs are not heard. When the children attempted to describe removal, their understanding of removal was linked with self-blame.

Participants indicated that removal occurred because of them.

“If I kept quiet about what happened, I believe that today I will still be at home with my family.” (Participant 3, age 17)

“Because of me my uncle ended up in jail and my grandmother died because of that.” (Participant 1, age 15)

“I think I am responsible for all the changes in my life.” (Participant 5, age 15)

The study revealed that the majority of participants interviewed blamed themselves for the removal and some participants mentioned that they were being punished for speaking out. The findings about self-blame concur with the work done by Barish (2010) that found that if a child is placed in alternative care as a result of domestic violence in the home, he or she may view such removal as a traumatic act of punishment and think that something the parent or caregiver has done or failed to do has caused this separation.

Thus, the removal will enhance the child’s sense of self-blame.

4.4.1. Sub-theme: Relationships

The study revealed that most of the participants did not have any relationship with their siblings. Some participants also mentioned that they did not know their biological parents.
This can be attributed to the fact that most children are abandoned by their biological parents and are left in the care of the extended family members who in return are unable to meet the children’s day to day needs.

“I used to stay with my maternal grandmother. When I left I was very young I do not remember anything. I was told that I have four siblings but I do not know them.” (Participant 6, age 18).

“I used to stay with my maternal grandmother and I have never met my biological parent. I am not sure if I have any siblings maybe is just me.” (Participant 1, age 15).

“I have five siblings and four are older and one is younger than me. We have a good relationship and we share a lot especially the three who are also here at SOS. My parents are good and we laugh a lot when we are together” (Participant 8, age 18).

The study also revealed that most of the participants’ relationships have been disrupted and were separated from their siblings.

“I have been staying with nonfamily members and I had no contact with my family and I also do not know if I have any siblings” (Participant 7, age 18).

“I do not know any family member and I had no relationship with them.” (Participant 5, age 15).

“I have one sister and a brother but we are not close. At times I feel like I do not know them. I never met my biological parents” (Participant 3, age 17).
This finding is in line with the study done by Liebmann (2007) which revealed that for some children, separations may be experienced as a significant rejection or loss that affects the formation of attachments.

4.4.2 Sub-theme: School

The participants felt that their education has been disrupted in one way or another. They expressed that during their placements they have to change schools and try to adapt to the new environment. The study revealed that the removal of children happened in different sessions thus they have to be enrolled at new schools in the middle of the terms which might have a negative impact on their progress.

All children in the research group experienced learning difficulties and six mentioned plainly that they were teased at school.

“I was in grade three when I first come to stay here and repeated the grade.” (Participant 1, age 15)

"I repeated too many grades until my formal school decides to send me to a special school." (Participant 3, 17)

The participants also mentioned that they were considered differently by other children.

"I am being bullied by other children at school and called orphans. At times I am beaten up." (Participant 6, age 18)

“At school is not good because you are called names by other children such as ‘poverty’ since we are living here at SOS. This makes me feel bad because at times I feel worthless.” (Participant 7, age 18)
This may point to the stigmatisation of and discrimination against children in RCCFs among other learners at schools. This is in line with the study done by Meintjies et al. (2007) which revealed that residential care facilities attract children from poverty-stricken environments, dislocate them from their extended family members and communities, rendering them more vulnerable to physical and sexual abuse, and promote stigma and discrimination.

4.4.3 Sub-theme: Life at RCCFs

The participants felt that living at RCCF is not the same as being at home.

“I hate it when the teacher says that you SOS children do not have ears because my entire classmate will laugh at me.” (Participant 2, age 16). Participants mentioned that it took them time to adapt and adjust to the new life.

“At times I feel very sad and cry a lot because other children at facility use to insult me” (Participant 13, age 15)

“First, it was very difficult, I was scared and reserved and I did not talk to anyone. At school, we are constantly called names such as the poor, orphans just because we are living at SOS.” (Participant 7, age 18)

The participants also mentioned that most of the time they felt lonely and sad. Constantly at school, they were being bullied by their peers and are often labelled as poor and orphans.

“I do not like it here because I am not safe here, I was raped while at this place and some children here are calling me names such as positive or nakusha (deceased) and I hate it.” (Participant 3, age 17)
Another participant said that “I feel like I am alone with no one else and thus make me very sad and it took me long to adjust to this life.” (Participant 5, age 15)

The study also revealed that the participant lacks personal care.

“At times I missed home, playing with my siblings and then I think of the reason why I am here.” (Participant 4, age 17)

“I wished that I could be living with my parent and would like to learn from them things like working in the mahangu field, how to pound mahangu and so.” (Participant 8, age 18)

This finding is in line with the study by Bos, Zeanah and Fox (2011) which concluded that loneliness, discrimination, isolation, risk of institutional abuse, lack of personal care, poor stimulation and attention to specific psychological needs and the lack of sufficient opportunities to learn about adult roles are other damaging effects that residential child care can have on children.

The participants’ responses captured their feelings, emotions, behaviours, and thoughts and also indirectly revealed their coping strategies. The Minimum Standard for RCCFs’ in Namibia (2009) guide against placing the signs about the RCCF on the buildings and vehicles and it also emphasizes that the children’s homes are built in a home set up and should not be isolated from the rest of the town which can minimise stigma and discrimination.
4.5. Theme 2: Children’s experiences and thoughts regarding the removal

The second major theme that emerged was categorised as children experiences and thoughts regarding removal. Content within this theme are the experiences and thoughts as experienced by the participants. The data in this theme were divided into three sub-themes.

The first sub-theme is the reasons for removal. This sub-theme includes a discussion on the knowledge regarding the reasons for removal and whether the participants were prior informed about the decision made to remove them from their homes.

The second sub-theme is the views of children regarding their family after removal. This sub-theme contains data on how the children view their family after removal and it also looks at their relationship.

The third sub-theme is the involvement of external professionals. This sub-theme contains data on the assistance the children received from external professionals and their involvement after placements.

4.5.1 Sub-theme: Reasons for removal

The majority of the participants interviewed revealed that they were never informed as to why they were going to be removed, which is definitely not "the best interest of the child". The children are not involved in the decision- making regarding the process of the placement.

However, a minority indicated that the reason for removal was not indicated but they were informed about the reasons for placements. The reasons mentioned by the participants ranged from education, protection, and a better future.
“I was informed that I will be going to a certain place where I will be having access to a better life such as having my own bed and watching TV.” (Participant 2, age 16).

“Seriously I was only told that we are going and I know nothing about the reasons why we have to go but here I am” (Participant 6, age 18).

The study also revealed that removal of children is done due to different reasons.

“They said that is for my own good, that I need to go and be cared for by the government.” (Participant 5, age 15)

“She said that if I go to Ondangwa I will be protected and no one will ever hurt me again” (Participant 1, age 15)

“I was told that I will be going to a better school and life” (Participant 8, age 18).

This was also found by the study done by Church et al. (2017) which reveals that removal is due to children being abused and neglected by their parents or caregivers or because parents or caregivers are unwilling or unable to cope with the demands of raising children or their children’s conduct.

4.5.2 Sub-theme: Participant’s views regarding family after removal

Most of the participants interviewed had similar responses in terms of how they view their family after removal. Participants indicated that they believe that they were not that involved with their family as they used to be.

“When I go for holidays is always difficult somehow because now I speak ‘Oshindonga’ and my parents speak ‘oshimbaantu’ is very strange.” (Participant 2, age 17)
Although the majority of the participants usually go for school holidays to visit their family, they still felt that they were not close to them as they used to be, and they do not relate to them in many aspects of life. This finding concurs with the study findings by Mitchell and Leon (2010) which concluded that children who are removed from parents often come to expect parental unavailability, which distorts adjustment to surrogate caregivers and the foster home environment. The removal undermines children’s attachments, identity, and subsequent caregiving relationships. For children in homes where there is domestic violence, the consequences of removal to alternative care can be more severe (Mitchell & Leon, 2010).

Many sources also acknowledge that separating a child from a parent for even a relatively short time can have a devastating emotional and physical impact on the child (Barish, 2010).

“I do not think of my family because I am always busy, I only think of them when the holiday is approaching.” (Participant 8, age 18)

“I wished I could have someone in this world, I am just alone so I hardly think about a family because I do not have one. At times I go for holidays with the housemother that’s the only family I have.” (Participant 5, age 15)

The study also revealed that few participants do not go for school holidays thus they have limited interaction with their communities, which might have a negative impact on the child self-image.

“Wow that’s a good question but how one could imagine something you do not have, is not possible. I do not go for school holidays I remain at the facility since I do not have anyone who can take me.” (Participant 1, age 15)
Interaction with children in the community can help those living in a facility to develop their social skills, make friends, and improve their knowledge and understanding of life outside of a facility. Furthermore, it can help reduce stigma and discrimination against children in residential care facilities through regular interaction with communities.

4.5.3 Sub-theme: External support and support network

Six of the participants mentioned that they never saw the social worker that placed them at the facility again. This might be attributed by the fact that when the social workers placed the children at the facility, they opt to leave it in the hands of the facility to take over.

For children in the study, the most significant support is offered by the staff members at the facility, some mentioned the teachers and two also mentioned the nurse.

“When I am teased at school, I always inform mom (referring to the house mother).” (Participant 6, age 18)

“The youth leaders are helpful, they assist with our homework; help you to feel good and many more” (Participant 7, age 18)

“I do not know the social worker that placed me at the facility or maybe I just cannot remember who placed me.” (Participant 1, age 15)

The study revealed that the most significant environment offering support to the children interviewed seemed to reside in the mesosystem (SOS, schools, and clinics).
4.6. Theme 3: Effects of removal on the psychosocial well-being of children

The third major theme that emerged was categorised as the effects of removal on the psychosocial well-being of children. Content within this theme are the feelings and emotions as experienced by the participants. The data in this theme were divided into two sub-themes.

The first sub-theme is the inner strength. This sub-theme includes a discussion on the concept of self, identity and the sense of belonging. The second sub-theme is the emotional support. This sub-theme contains data on how the children cope with personal matters and whom they confide in.

Studies have shown that RCCFs may have some detrimental negative outcomes to children’s mental health (Bos et al., 2011) cause disruptive behaviour and developmental delays and have poor health (Thielman et al., 2012).

In residential care, such as institutions or orphanages, children who are already vulnerable due to family separation are at increased risk of violence, abuse and long-term damage to their cognitive, social and emotional development (UNICEF, 2017). The priority is to keep children out of residential care and with their families, especially in the early years.

The study explored the feelings and emotions of this most vulnerable group of the population regarding their own personal experiences.
4.6.1 Sub-theme: Inner strengths

In terms of inner strength, the participants expressed their different views based on self-concept, physical and emotional, behavioural and social. The participants had mixed feelings regarding their identity and their sense of belonging.

“I do not think I can do better.” (Participant 3, age 17)

“I am not that good but just trying.” (Participant 7, age 18)

“I am not sure of what I can do better or to say what I need but I keep on trying” (Participant 6, age 18).

The study revealed that children who were removed due to domestic violence tend to have low self-esteem and perceive themselves as weak. Although the participants have an identity crisis, the same respondent shared emotional management through their ability to recognise feelings and control undesirable feelings which is a coping strategy.

4.6.2 Sub-theme: Emotional support

The participants indicated that concerning their personal and private matters, they turn to the housemothers and the youth leaders at the facility for comfort and support. The participants also mentioned that at times they feel like they should keep their emotions to themselves. Some participants indicated that they were close to their previous caregivers. When asked whom they confided in, the children had different responses.

“I talk to my grandmother back at home. I don’t talk to anyone here.” (Participant 1, age 15)

“No one I just keep quiet and cry in silence.” (Participant 5, age 15)
“I speak to my brother who is also here with me, it’s better that way.” (Participant 2, age 16)

The study revealed that there is emotional distress among the participants.

“I do not tell anyone because what is the use of telling someone if they do not believe me, I rather keep my sadness to myself than sharing with someone who does not believe me.” (Participant 3, age 17)

It is evident that even though there is a social worker at the facility, the housemothers were the primary caregivers and they lacked proper training in counselling.

“I used to talk to the housemother but now I realize that it’s better to be silent because even when you tell someone the situation would not change.” (Participant 6, age 18)

“I usually talk to mother (referring to the housemother) or the youth leader.” (Participant 7, age 18)

This might contribute to the emotional distress and lack of a trusting relationship.

Residential placement can cause lifelong damage to children's emotional development because of their need for secure attachment and a sense of being cared about and not just cared for. Therefore, ensuring children maintain contact with their biological parents, relatives or friends is important for children’s well-being and the family members will provide children with connections in the community at large.

There are consistently negative views on residential care as a place to raise young children on a long-term basis (Dozier, Zeanah, Wallin, & Shauffe, 2012).
Liebmann (2007) argues that removing a child from his or her home poses its own risk despite the reasons for removal. Therefore, it is important to note that physical and emotional connection with a parent is a basic need of children and is important for their development. Thus, separating the parent-child bond might have implications for the child's development even though the caregiver or parent is abusive.

4.7 Theme 4: How children expressed their goals after RCCF placement

The last theme that emerged was categorised as to how children expressed their goals after RCCF's placement. Content within this theme are the feelings and thoughts as experienced by the participants. When the participants attempted to describe their future plans or goals, their explanations were linked to the fear of the unknown world waiting for them.

The participants indicated uncertainty of life outside the facility. The respondents felt that they would struggle to adjust back into their families and community.

Some participants had a different response as they did not have contact with any family members.

“*We usually take some foodstuff along when we go for a holiday, so if I have to leave will SOS provide food and cosmetics to take along that’s my concern.*” (Participant 8, age 18)

“I never went for a holiday and have been staying here for many years now, I cannot imagine what would happen or how does it feel to be outside SOS”. (Participant 5, age 15)
"I think if the times come I have to learn again how to speak my mother tongue because when at home I feel like an outsider." (Participant 6, age 18)

"I don’t know what will happen if I have to go, only time will tell.” (Participant 7, age 18)

The study revealed that the participant has an identity crisis, language, sense of belonging and adaptation issues which might have a negative impact on their personalities and self-image. This finding concurs with the study by Nshimyimana et al (2015) which conclude that cultural identity is a component of care; therefore, children should be encouraged to speak mother tongue or local language so that they develop a positive image. The study also revealed that the children were not sure of what will happen once they leave the facility. This uncertainty of the unknown might have a negative impact on their development and future success.

4.8 Conclusion

In summary, the result of the face-to-face in-depth semi-structured interview on the lived experiences of abused and/ or neglected children removed from their homes and placed in RCCFs were presented in this chapter. The participants’ responses captured their feelings, emotions, and thoughts and also indirectly revealed their coping strategies.

The study revealed that the children’s relationship with their parents/ caregiver and siblings has been disrupted. Moreover, participants also revealed that they were not involved in the decision-making regarding their removal nor were they prior informed about the reasons for their removal.
Additionally, the study also revealed that the children are kept in the RCCFs for a longer period than expected. Identity, self-blame, cultural confusion and language were some of the issues identified which have a negative impact on the children self-image.

Furthermore, the participants mentioned that they were considered differently by other children at school which point to the stigmatisation and discriminations against children in RCCFs among other learners at schools.

In addition, the study also revealed that concerning their personal and private matters, the participants turn to the housemothers and the youth leaders at the facility for comfort and support. Lastly, for the children in the study, the most significant environments offering support resides in the mesosystem which include the staff members at the facility, the teachers at schools and nurses at the clinics.
CHAPTER 5

RECOMMENDATIONS AND CONCLUSIONS

5.1. Introduction

The aim of this study was to explore, describe, and analyse key dimensions of the lived experiences of abuse and/or neglected children removed from their homes, specifically those in residential placement. A phenomenological approach was used with abused and/or neglected children removed from their homes and placed in RCCFs as the focus. Themes and sub-themes emerged as the data were analysed.

In this chapter, conclusions are drawn and recommendations made based on the research, discussions and literature review of previous chapters. Recommendations are made on the areas that were identified by the research, limitations of the study, further research proposals, and contributions of the study to the body of knowledge are presented.

5.2 Study purpose review

The purpose of this study was to explore the lived experiences of abuse and/or neglected children removed from their homes and placed in RCCFs from the Omusati Region. This study examined the lived experience of abuse and/or neglected children through the lens of those placed in residential placements in a predominantly rural setting of northern Namibia.

The central problem researched was to explore the lived experiences of abuse and/or neglected children removed from their homes and placed in residential child care facilities.
In-depth semi-structured interview schedules were used as a research instrument to realise the purpose of the study. This chapter validates the study in terms of its purpose and research questions in relation to the lived experiences of the abuse and/or neglected children removed from their homes and placed in RCCFs and it provides recommendations regarding research findings.

The study’s general research question was: What are the lived experiences of the abuse and/or neglected children removed from their homes and placed in RCCFs from the Omusati Region? There were 2 sub-questions that guided the interviews:

- What are the participants’ experiences and thoughts regarding removal from their homes to RCCFs?
- What are the negative effects of being removed from homes to RCCFs and how do these impact participants’ psychosocial well-being?

5.3 Recommendations

The findings of the study have recommendations for policy implementation, social work practice and future research.

5.3.1 Recommendations in terms of policy implementations

The MGECW is responsible for all issues related to the well-being of children in Namibia as articulate in the Child Care and Protection Act, Act No. 3 of 2015.

Although the Ministry of Gender Equality and Child Welfare (MGECW) has developed standards for RCCF’s, the routines and rituals of institutions often serve the institutions rather than the children, making it more difficult for former residents to adjust to life outside the institution.
Furthermore, the MGECW is mandated to register and regulate existing RCCFs to ensure that the guidelines and minimum standards for RCCFs are followed and implemented. Therefore, the MGECW should ensure that the ministry social workers are accountable for the care plans which need to be reviewed on a regular basis. There is a need for the ministry social workers to advocate and promote child participation in the decision-making process of child removal to improve adaptation and their quality of life. It is also recommended that the MGECW should come up with strategies and strict measures to ensure that the duration of placement is kept as short as possible.

There is a need for the MGECW to trace the unknown family members and reunite the concerned child with his or her family to promote the positive self-image and provide a sense of belonging. Therefore, it is important to note that the ministry can only ensure effective implementation of the Standards for RCCF in Namibia if all standards are met by both the RCCF’s and the social workers making the placement.

5.3.2 Recommendations related to social work practice

5.3.2.1 Removal/decision makings

The findings indicated that the children in the research group were not consulted regarding the decision to remove them. Children in care usually have no say in the decision-making process with regards to their placement (Unrau, 2007).

All participants recommended that at least they should be informed and consulted throughout the placement process. This research made it known that without the children’s voices, it is impossible to improve their quality of life.
Involving the children in decision making in matters affecting their well-being is the starting point in ensuring the best interest of the child. The children should be encouraged to view their concern regarding the decision to remove them from their homes, when they are old enough.

It is therefore important for the social worker making the placement to maintain contact with the child after placement and ensure that the child is part of the decision-making process pertaining to his or her wellbeing.

5.3.2.2 External support or network

The study revealed that the children in the research group receive support from the mesosystem which include the staff members at the facility, the teachers at school and the nurses at clinics. It was noted that the social workers making the placements are not involved with the children and there is no working relationship with the children which has a negative effect on the children. Therefore, it is recommended that the social worker making the placement should develop detailed care plans and discuss it with the concerned child. The care plans should clearly state the purpose of placement, specific goals, and details of special care if required and the duration of placement.

From the study, the researcher learned that the social workers do no terminate their working relationship with the children and as a result, the children are left with feelings of doubt and uncertainty. Therefore, it is recommended that social workers making the placement should terminate their working relationship when necessary.

A strong network support, particularly with the social worker making the placement and family members, will contribute to the development of the child’s positive self-image.
5.3.2.3 *Family contacts*

In terms of family contact, most participants claimed that they had limited contact or no contact with their own families. It is important to maintain family relations, therefore, frequent contact with families should be allowed, and promoted.

Where the family members are unknown, it is recommended that the social worker making the placement should trace the family and reunite the concerned child to promote the positive self-image and provide a sense of belonging. The researcher also learned that a few participants did not know their biological parents, which has a negative effect on their identity and sense of belonging. It is therefore recommended that the social worker making the placement, should include the tracing of parents in the care plans.

Social workers should call on the police and regional councillors in the Omusati region to make special efforts to trace parents and extended family members to facilitate possible contact, support and placement after release of children in placement;

Enlist the assistance of ministers of religion and cultural chiefs who have influence in that area, to undertake reconstruction services in the families whose children had to be removed, albeit under the supervision of a social worker.

When a child is eligible for release, the social worker must have the responsibility to assess the home circumstances which led to the removal, and intervene to assist the family with forming new bonds and with the adaptation to the return of the child, who spent time outside the family circle, sometimes for long periods.
Released children need ongoing and practical assistance with further education and skills training to be able to enter into the labour market and become independent men/women with healthy social functioning. The responsible ministry needs to budget for and develop such programs.

Nurses at clinics in that area should also be alerted about such releases, and requested to guide such teenagers about safe sex practices, and dangers of transferrable diseases like HIV, gonorrhoea, etc.

5.4. Future research

This study indicates potential areas for future research. In the Omusati Region, future research studies on the abused and/or neglected children removed from their homes and placed in residential care should consider focusing on the children who are discharged from residential care. Research findings reveal that the children are scared of the unknown world after placement.

Thus, exploring the available supports and challenges they face in adjusting in the community after residential placement is needed to understand the perception of children in residential placement especially after long placements periods.

Further research by the MGECW on the implementation and effectiveness of the minimum standard for residential care facilities is needed. It is important to gain a greater understanding and assess whether the Minimum Standards are effectively implemented and analyse the gap within the system. Furthermore, it is important to understand why social workers making the placement are not involved with the children after placement.
Furthermore, the study may need to assess and evaluate the care plans of children in residential care to get insight and understanding of the phenomenon. Finally, a research to determine why male children do not tend to report the abuse is needed.

5.5 Contribution to the body of professional knowledge

The results of the study might contribute to the knowledge among social workers and RCCF’s staff the outcomes of removal and residential placements in the Namibian context. The research findings may add value to the knowledge gap in Namibia in understanding the lived experiences of abused and/or neglected children removed from their parental homes and placed in residential care. The literature review provides a broad understanding of the overview of removal and residential care placements. Thus, the study might enrich existing literature on the lived experiences of abused and/or neglected children removed from their homes, placed in residential care and the outcomes of residential care in the Namibian context.

5.6 Limitations of the study

Although this study addressed the research questions, it had several limitations. The entire data were collected relying on views of abused and/or neglected children removed from their homes and placed in RCCF. Their views were not crosschecked taking other ideas into consideration.

These study results may not be generalised. This is because of the small sample size and the participants being selected purposively, thus they do not represent the entire abused and/or neglected children removed from their homes and placed in RCCF.
In fact, drawing generalisations on the lived experiences of abused and/or neglected children removed from their homes and placed in RCCF was never part of the research questions for this study.

Practically, the study focused on describing and understanding the phenomenon on the lived experiences of abused and/or neglected children removed from their homes in the Omusati region and placed in residential care.

Another limitation was the inexperience on the part of the researcher as this was the first independent research project, nonetheless, the researcher overcame this limitation by getting regular feedback and guidance from the research supervisors.

Meanwhile, this does not compromise the credibility of the data. In order to capture the lived experiences of study participants, attempts have been made to encourage them to describe their experiences broadly and honestly. In spite of certain limitations, the phenomenological study was suitable to describe and understand the phenomenon.

5.7 Conclusions

The following conclusions were drawn based on the set of research questions and according to themes that emerged in the study. On the basis of these findings, it is possible to conclude that child removal is an ongoing issue of importance in the Omusati Region. The participants shared their lived experiences (positive and negative) of being removed from their homes, familiar environment and being placed in RCCF’s. The study probed the lived experienced of abused and/or neglected children removed from their homes in the Omusati region, Namibia and placed in RCCFs.
Therefore, participants were assessed on their experiences. There was a general perception that the voices of children who are removed from their homes and placed in RCCFs are not heard.

The lived experiences of the participants were conveyed through the emerging themes and sub-themes. The study confirms that the children were not prior to removal informed about their removal, nor were they informed about the reasons why they needed to be removed, which is definitely not in the best interest of the child. Although the Ministry of Gender Equality and Child Welfare (MGECW) has developed standards for RCCF’s, the routines and rituals of institutions often serve the institutions rather than the children, making it more difficult for former residence to adjust to life outside the institution. It is therefore important for the MGECW to reinforce strict measures on the implementation of the minimum standards for residential care facilities to ensure ‘the best interest of the child’.

The participants’ responses captured their feelings, emotions, and thoughts and they also indirectly revealed their coping strategies. Documentation of the lived experiences of abuse and/ or neglected children removed from their homes in the Omusati region and placed in RCCFs and sharing their stories, might equip the social workers working with child protection services with an understanding of the day to day lives of this vulnerable group and recognise the children’s voices in decision making. Since the findings of the present study are generally consistent with results of past studies on outcomes of residential placements.
REFERENCES


APPENDICES

Appendix 1: Semi structured interview

Appendix 2: Request for permission to conduct research with children

Appendix 3: Request for permission to conduct research in SOS Children village

Appendix 4: Consent form for the 18 years

Appendix 5: Assent form

Appendix 6: Institutional Head consent form

Appendix 7: Caregivers consent form

Appendix 8: Permission letter (MGECW)

Appendix 9: Permission letter (SOS)

Appendix 10: Ethical Clearance Certificate
Appendix 1

Exploring the lived experiences of abused or neglected children removed from their homes in Omusati Region, Namibia and placed in a residential child-care facility in Oshana Region

SEMI STRUCTURED INTERVIEW GUIDE

Section A: Demographic Information of the child

1. I am from .......region?

2. Age

3. Gender

4. Are you in school?

5. What is the level of your education?

6. What is the status of your biological mother?

7. What is the status of your biological father?

8. How long have you lived in SOS children village?

9. Where you informed about your removal?

Section B: Key questions

1. Tell me about yourself and your family?

2. Can you tell me why you were placed in the SOS Children’s Village in Ondangwa?
3. What are your views of the changes in your family with your parents/caregiver and or siblings?

4. Are there any concern for you now? Elaborate

5. What have been your feelings toward your parents since you have been living here at the SOS Children’s Village.

6. What is like to be living here at the SOS Children’s Village?

7. Who has been helpful to you since you have been living in the SOS Children’s Village?

8. Is there anything else you think is important for me to know about your situations?

**Conclusion and debriefing**

The researcher will thank the respondent for their time and valuable contribution.
Dear Mrs. Uiras

RE: REQUEST FOR PERMISSION TO CONDUCT RESEARCH WITH
CHILDREN RESIDING IN SOS CHILDREN’S VILLAGE, ONDNAGWA

I am a chief social worker in the Ministry of Gender Equality and Child Welfare, Omusati Region and a post graduate student at the University of Namibia pursuing my Master Degree in Social Work.

A research project is one of the major requirements for the fulfilment of a degree of masters in Social Work. A research project titled “

*Exploring the lived experiences of abused or neglected children removed from their homes in Omusati Region, Namibia and placed in a residential child-care facility in*
Oshana Region was approved by the Post Graduate Studies Committee within the University.

The purpose of this study is to explore, describe, and analyse key dimensions of the lived experience of survivors of child abuse or neglect and explore the stories of abused or neglected children; specifically, children who are placed in the SOS Children’s Village in Ondangwa from Omusati region.

This letter serves to seek your good office permission to conduct a qualitative research interviews with children residing in RCCF’s, specifically those residing in SOS Children’s Village in Ondangwa Northern Namibia from Omusati region. For the purpose of this study eight (8) children aged 15 to 18 years will be recruited. This study will fill the knowledge gap on understanding the everyday life of children removed from their common homes and placed in residential placements due to abuse or neglect. The findings of this study will equip the social work practitioners working with child protective services with recommendations on how to address these gaps.

It is against this back ground that I would kindly like your office to grant me permission to conduct the above mentioned study at the registered SOS Children’s Village in Ondangwa. See attached letter from my study supervisor Professor John D. Matthews and the ethical clearance.

Thank you for your consideration and understanding.

Respectfully,

Ms. Kakinda Kapata

Student
Dear Mrs. Mulamata

RE: REQUEST FOR PERMISSION TO CONDUCT RESEARCH WITH CHILDREN RESIDING IN SOS CHILDREN’S VILLAGE, ONDNAGWA

I am a chief social worker in the Ministry of Gender Equality and Child Welfare, Omusati Region and a post graduate student at the University of Namibia pursuing my Master Degree in Social Work. A research project is one of the major requirements for the fulfilment of a degree of masters in Social Work.

A research project titled “Exploring the lived experiences of abused or neglected children removed from their homes in Omusati Region, Namibia and placed in a residential child-care facility in Oshana Region” was approved by the Post Graduate Studies Committee within the University.
The purpose of this study is to explore, describe, and analyse key dimensions of the lived experience of survivors of child abuse or neglect and explore the stories of abused or neglected children; specifically, children who are placed in the SOS Children’s Village in Ondangwa from Omusati region.

This letter serves to seek your good office collaboration and permission to conduct a qualitative research interviews with children residing in RCCF’s, specifically those residing in SOS Children’s Village in Ondangwa Northern Namibia from Omusati region. For the purpose of this study eight (8) children aged 15 to 18 years will be recruited. This study will fill the knowledge gap on understanding the everyday life of children removed from their common homes and placed in residential placements due to abuse or neglect. The findings of this study will shared with all stakeholders.

It is against this back ground that I would kindly like your office to grant me permission to conduct the above mentioned study at the registered SOS Children’s Village in Ondangwa. See attached letter from my study supervisor Professor John D. Matthews and the ethical clearance.

Thank you for your consideration and understanding.

Respectfully,

Ms. Kakinda Kapata

Student
Appendix 4

Consent Letter

My name is Kakinda Kapata a registered student at the University of Namibia, studying my Master’s Degree in Social Work. The thesis topic selected is “Exploring the lived experiences of abused or neglected children removed from their homes in Omusati Region, Namibia and placed in a residential child-care facility in Oshana Region”

The purpose of this study is “Is to explore the lived experiences of the abused or neglected children removed from their homes and placed in RCCF’s from Omusati region.” The findings of this study will equip the social workers working with child protective services to deliver effective services when dealing with child removal.

An interview of approximately 40 minutes’ duration would form an essential part of the research. The responses to the interview questions will be recorded using a digital recorder.

Participation in this study is strictly voluntary and you may skip the question (s) or withdraw from the interview at any time, without any negative consequences.

Digital recording

As a research participant your permission is required to record your voice. The voice recording will allow the researcher to review topics and responses later so that I will not miss any details. Recording is not essential; notes will be taken instead, if you do not agree to be voice recorded. The recordings will be kept safely in a lockable cabinet in the researcher’s office and will be deleted and destroyed as soon as the study is finalised.

.......................... ..........................
Participant Signature  Date
**Risks and Benefits**

The potential risks to participating in this study are some level of discomfort at answering personal questions. As a participant you may experience re-traumatisation through telling your story, the researcher will prepare and offer a referral sheet to refer you to MGECW social workers at Ondangwa office for counselling. No direct benefit is due to you for participating in this research however your views and recommendations on child removal will be published and this may create awareness and children voices will be held.

In the event that you have any questions about the study, please do not hesitate to contact:

1. Kakinda Kapata at Cell number +264(0) 812447310 or via email at kkakindah@yahoo.com

2. Professor John Matthews at John.Matthews264@gmail.com

3. Mr. Ndumba Kamwanyah at Cell number +264(0) 816616861 or via email at nkamwanyah@unam.na

**If you are willing to take part in this study, please sign:**

Participant Name: ____________________________________________

Signature: ____________________________________________

Date: ______________________
Appendix 5

Consent Assent form

My name is Kakinda Kapata a registered student at the University of Namibia, studying my Master’s Degree in Social Work. The thesis topic selected is “Exploring the lived experiences of abused or neglected children removed from their homes in Omusati Region, Namibia and placed in a residential child-care facility in Oshana Region.”

The purpose of this study is “Is to explore the lived experiences of the abused or neglected children removed from their homes and placed in RCCF’s from Omusati region.” The findings of this study will equip the social workers working with child protective services to deliver effective services when dealing with child removal.

An interview of approximately 40 minutes’ duration would form an essential part of the research. The responses to the interview questions will be recorded using a digital recorder.

Participation in this study is strictly voluntary and you may skip the question(s) or withdraw from the interview at any time, without any negative consequences.

Digital recording

As a research participant your permission is required to record your voice. The voice recording will allow the researcher to review topics and responses later so that I will not miss any details. Recording is not essential; notes will be taken instead, if you do not agree to be voice recorded. The recordings will be kept safely in a lockable cabinet in the researcher’s office and will be deleted and destroyed as soon as the study is finalised.
Risks and Benefits
The potential risks to participating in this study are some level of discomfort at answering personal questions. As a participant you may experience re-traumatisation through telling your story, the researcher will prepare and offer a referral sheet to refer you to MGECW social workers at Ondangwa office for counselling. No direct benefit is due to you for participating in this research however your views and recommendations on child removal will be published and this may create awareness and children voices will be held.

In the event that you have any questions about the study, please do not hesitate to contact:

1. Kakinda Kapata at Cell number +264(0) 812447310 or via email at kkakindah@yahoo.com
2. Professor John Matthews at John.Matthews264@gmail.com
3. Mr. Ndumba Kamwanyah at Cell number +264(0) 816616861 or via email at nkamwanyah@unam.na

If you are willing to take part in this study, please sign:

Participant Name: ______________________________
Signature: ______________________________
Date: ______________________________
Appendix 6

Institutional Head Consent letter

My name is Kakinda Kapata a registered student at the University of Namibia, studying my Master’s Degree in Social Work. The thesis topic selected is “Exploring the lived experiences of abused or neglected children removed from their homes in Omusati Region, Namibia and placed in a residential child-care facility in Oshana Region”

The purpose of this study is “Is to explore the lived experiences of the abused or neglected children removed from their homes and placed in RCCF’s from Omusati region.” The findings of this study will equip the social workers working with child protective services to deliver effective services when dealing with child removal.

An interview of approximately 40 minutes’ duration would form an essential part of the research. The responses to the interview questions will be recorded using a digital recorder.

Participation in this study is strictly voluntary and you may skip the question (s) or withdraw from the interview at any time, without any negative consequences.

Risks and Benefits

The potential risks to participating in this study are some level of discomfort at answering personal questions. The participant may experience re-traumatisation through telling their story; the researcher will prepare and offer a referral sheet to refer the participants to MGECW social workers at Ondangwa office for counselling. No direct benefit is due to the participants for participating in this research however their views
and recommendations on child removal will be published and this may create awareness and children voices will be held.

**Digital recording**

As the head of the institution your permission is required to record the children’s voice. The voice recording will allow the researcher to review topics and responses later so that I will not miss any details. The recordings will be kept safely in a lockable cabinet in the researcher’s office and will be deleted and destroyed as soon as the study is finalised.

………………………………………

Institutional Head Date

In the event that you have any questions about the study, please do not hesitate to contact:

1. Kakinda Kapata at Cell number +264(0) 812447310 or via email at kkakindah@yahoo.com

2. Professor John Matthews at John.Matthews264@gmail.com

3. Mr. Ndumba Kamwanyah at Cell number +264(0) 816616861 or via email at nkamwanyah@unam.na

If you are willing to allow the children to take part in this study, please complete the section below:
I ............................................the manager of SOS Children village, Ondangwa herewith give consent that the children can participate in the research study titled: “An exploratory study into the lived experiences of abused or neglected children removed from their homes and placed in residential child care facilities from Omusati Region, Namibia”

Signature: __________________________

Date: __________________________
Appendix 7

Caregivers Consent letter

My name is Kakinda Kapata a registered student at the University of Namibia, studying my Master’s Degree in Social Work. The thesis topic selected is “Exploring the lived experiences of abused or neglected children removed from their homes in Omusati Region, Namibia and placed in a residential child-care facility in Oshana Region.”

The purpose of this study is “Is to explore the lived experiences of the abused or neglected children removed from their common homes and placed in RCCF’s from Omusati region.” The findings of this study will equip the social workers working with child protective services to deliver effective services when dealing with child removal.

An interview of approximately 40 minutes’ duration would form an essential part of the research. The responses to the interview questions will be recorded using a digital recorder.

Participation in this study is strictly voluntary and you may skip the question (s) or withdraw from the interview at any time, without any negative consequences.

Risks and Benefits

The potential risks to participating in this study are some level of discomfort at answering personal questions. The participant may experience re-traumatisation through telling their story; the researcher will prepare and offer a referral sheet to refer you to MGECW social workers at Ondangwa office for counselling.
No direct benefit is due to the participants for participating in this research however your views and recommendations on child removal will be published and this may create awareness and children voices will be held.

**Digital recording**

As a caregiver your permission is required to record the children’s voice. The voice recording will allow the researcher to review topics and responses later so that I will not miss any details. Recording is not essential; notes will be taken instead, if you do not agree to be voice recorded. The recordings will be kept safely in a lockable cabinet in the researcher’s office and will be deleted and destroyed as soon as the study is finalised.

........................................ ........................................
Caregiver Date

In the event that you have any questions about the study, please do not hesitate to contact:

1. Kakinda Kapata at Cell number +264(0) 812447310 or via email at kkakindah@yahoo.com
2. Professor John Matthews at John.Matthews264@gmail.com
3. Mr. Ndumba Kamwanyah at Cell number +264(0) 816616861 or via email at nkamwanyah@unam.na
If you are willing to allow the child to take part in this study, please complete the section below:

I ...........................................the primary caregivers herewith give consent that my child can participate in the research study titled: “An exploratory study into the lived experiences of abused or neglected children removed from their homes and placed in residential child care facilities from Omusati Region, Namibia”

Signature:  

Date:  


Appendix 8

Ms. Kakinda Kapata
PO Box 1155
Ovitapi

Dear Ms. Kapata

RE: PERMISSION TO CONDUCT RESEARCH WITH CHILDREN RESIDING IN SOS ONDANGWA

The Ministry of Gender Equality and Child Welfare (MGECW) would like to acknowledge the receipt of your letter dated 12th December 2017, in which you request permission to conduct research on a project titled: An Exploratory study into life experiences of abused or neglected children removed from their common homes and placed in SOS from Omusati region.

The ministry has a pleasure to inform you that you request has been approved and another approval letter needs to be obtained from the Manager of SOS Children’s Village who are entrusted to take care of those children by the court of law.

The ministry appreciates your concern to assist in identifying the gap in rendering services to abused orphans and vulnerable children more specifically those placed in RCCF.

A copy of your final findings should be availed to the MGECW. This information will assist the ministry in improving the quality of service and support to orphans and vulnerable children placed in Residential Child Care Facilities (RCCF) in different regions.

Yours Sincerely

[Signature]

Wilhencia Urians (Mrs)
PERMANENT SECRETARY

All official correspondence must be addressed to the Permanent Secretary.
Appendix 9

08 June 2018

Ms. Kakinda Kapata
University of Namibia
Windhoek
Namibia

RE: REQUEST TO CONDUCT RESEARCH AT SOS CV ONDANGWA

Dear Kakinda,

Please be informed that permission is herewith granted for you to continue with the survey. Please note however, that we will still give you feedback on the tools as guided by our internal Child Safeguarding policy. Kindly liaise with Ms. Julietta Ferreira, the village manager of Onhunduwa and Diana Goboza for confirmation of dates and preparation of respondents.

Kind regards

Christine Esperanza Acchemus
National Child Safeguarding Manager
SOS Children’s Villages Namibia
31 Helinitzburg Str
Klein Windhoek
P.O Box 23134
Windhoek / Namibia
Tel.: +264 61 222 457
Fax: +264 61 224 085
Cell: +264 81 247 907
Christine.Acchemus@sos-namibia.org
www.sos-childrensvillages.org

How do you know your mom or dad deeply cares for you?

NO CHILD SHOULD GROW UP ALONE

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Appendix 10

16 November 2017

The Research Supervisor: Prof J Matthews
Department of Social Work
Faculty of Humanities and Social Sciences
University of Namibia
Windhoek

Dear Prof Matthews

Re: Ethical Clearance for Research Project of MA Student Kakinda Kapata (9961127)

It is with great pleasure that the Faculty of Humanities and Social Sciences' Research and Publications Committee wants to inform you that your student’s ethical clearance for the research project titled “An exploratory study into the lived experiences of abused or neglected children removed from their common homes and placed in residential child care facilities from Omusati region, Namibia” has been granted by the Faculty.

The details of this study that Ms Kakinda Kapata intends to do have been reviewed during an ethics meeting on 13 October 2017.

The FHSS FRPC wishes you and Ms Kapata all the best with this noble project.

Kindly,

[Signature]

Dr M Janik
Chairperson: FHSS FRPC
University of Namibia
mjanik@unam.na