



South African social workers' knowledge of attachment theory and their perceptions of attachment relationships in foster care supervision



E. Lesch*, M. Deist, L. Booyesen, E. Edwards

Department of Psychology, Stellenbosch University, PB X1, Matieland 7602, South Africa

ARTICLE INFO

Article history:

Received 30 September 2012
Received in revised form 20 February 2013
Accepted 28 April 2013
Available online 11 May 2013

Keywords:

South African
Social workers
Foster care
Attachment theory

ABSTRACT

Despite the prominence of attachment theory in international foster care literature and the importance of attachment relationships in successful foster care, attachment theory and practices do not feature prominently in South African foster care research. Against this backdrop, we interviewed twenty South African social workers about their knowledge of attachment theory and their perceptions of attachment relationships in their own foster care work. Thematic analysis was used to analyse the interviews. We found that the social workers had limited knowledge of attachment theory and interventions; experienced most biological parents as unmotivated to improve their circumstances and attachment relationships with children; indicated that family reunifications were rare occurrences; reported foster parents were mostly kin; and experienced constraining contextual factors that hindered optimal consideration of attachment relationships in foster care supervision.

© 2013 Elsevier Ltd. All rights reserved.

1. Introduction

The South African Social Security Agency (2011) indicated that 510 760 social grants were paid to foster parents in South Africa during the 2010/2011 financial year, a growth of 7.6% from 2008/2009. High levels of poverty, unemployment, unwanted teenage pregnancies, AIDS deaths, and the rapid increase of alcohol and drug abuse are offered as possible explanations for increasing foster placements in South Africa (South African Social Security Agency, 2009).

Social workers are at the coalface of the foster care process in South Africa and their duties include removing children from neglectful or abusive parents as well as placement of children in foster homes and the follow-up system (Swanepoel, 2009). They are tasked with achieving the objective of foster care: “to protect and nurture children by providing a safe, healthy environment with positive support; and promote the goals of permanent planning, first towards the family reunification, or by connecting children to other safe and nurturing family relationship intended to last a life time” (South African Children's Amendment Act, 2007, p. 175–176).

There are concerns about the quality of relationships within the South African foster care environment, and whether children receive positive support over and above the expected biological and financial needs (Kganyago, 2008). Children placed in foster care are at a high risk to develop attachment disorders (Gauthier, Fortin, & Jeliu, 2004) that may affect their ability to form attachments in later life. It may

also impact the way they deal with stress and perceived threats (Mikulincer & Shaver, 2006). They usually need special attention and care; non-judgemental and accepting attitudes from foster parents and social workers; and trusting and supportive relationships (Linares, Montalto, Li & Oza, 2007; Rakitla, 2003). It is important, therefore, that these children form bonds with their foster parents in order to experience greater well-being (Linares, Montalto, Li, & Oza, 2006).

In countries like America, Canada and the United Kingdom, attachment theory is often used as a theoretical framework in foster care practices to understand foster children's behaviour, to guide foster parents, and to implement effective interventions (e.g. Gauthier et al., 2004; Mennen & O'Keefe, 2005). However, despite the importance of attachment relationships between foster parents and children, and foster children and biological parents, and the prominence of attachment theory in international foster care literature and practices, our review of South African foster care research indicates that attachment theory does not feature prominently in these studies. Foster care studies tend to be either atheoretical or situated within broader ecological/systemic approaches. They focus on structural, practical and policy issues regarding the plight of AIDS orphans (Munakata & Onuoha, 2010; Nyasani, Sterberg, & Smith, 2009; Petersen et al., 2010), foster care grants (Budlender, Giese, Johnson, & Meintjes, 2005; Hearle & Ruwanpura, 2009); risk and causal factors in foster care failure (Booyesen, 2006; Kganyago, 2008); experiences of foster parents and foster children in the South African foster care system (Rakitla, 2003; Reed, 2005; Van Rensburg, 2008); and play therapy interventions with foster children (Louw, 2006). Khoza (2011) investigated social workers' use of the Development Assessment Tool that is based on the ecosystemic, strength-based Circle of Courage Youth Empowerment model and developed by

* Corresponding author.

E-mail address: el5@sun.ac.za (E. Lesch).

the South African Inter Ministerial Commission to assess the circumstances of children, youth and families involved in statutory services, and to manage at-risk youth. Studies that focused on the provision of training and support for foster parents and children (Durand, 2007; Schreve, 2007; Swanepoel, 2009) briefly mention the importance of attachment in foster placements, but did not explore social workers' use of attachment theory. In fact, our literature review indicated that the theoretical foundations that inform South African social workers' foster care supervision practices have not been the focus of investigation in South Africa.

In the light of the prominence of attachment relationships in international foster care and the apparent lack of utilisation of attachment theory in South African foster care research, the aim of this study was to explore a group of Western Cape (one of the provinces in South Africa) social workers' knowledge of attachment theory and their perceptions of attachment relationships in their own foster care work. At the time when we conceptualised and conducted our study, we were not aware that Botes and Ryke (2011) had conducted a telephone survey study with a similar research objective with eighteen South African social workers in a different province. They investigated "the extent of social workers' knowledge and practical application regarding foundational concepts of attachment theory, and what they perceived their knowledge and use in practice to be in the context of foster care supervision" (Botes & Ryke, 2011, p.31). Their participants reported that they were not sufficiently equipped regarding the application of attachment theory and had limited knowledge about this theory. The researchers concluded that, due to social workers' limited knowledge, it was likely that the attachment needs of their clients were not addressed adequately. They recommended that social workers' knowledge and application of attachment theory principles in other organisations and other parts of the country should be investigated to see if their findings could be generalised (Botes & Ryke, 2011). Our study therefore links with these authors and will provide knowledge about Western Cape social workers' knowledge and use of attachment theory in their foster care work.

2. The importance of attachment theory in foster care

Here we present a brief overview of attachment theory and its relevance for foster care practices. This is not an exhaustive overview, nor does it claim to reflect all the nuances and complexities of current attachment theory knowledge.

Attachment theory can be described as the scheme of behaviours that allow infants and their primary caregivers to maintain close proximity which will enhance the chances of survival for the infant (Bowlby, 1982). Bowlby (as cited in Mikulincer & Shaver, 2006, p.251) defined attachment as an "innate psychological system that motivates human beings of all ages to seek proximity to a significant other (attachment figures) in times of need as a means of protecting oneself from threats and alleviating distress" An attachment figure can be any primary caregiver who spends a large amount of time with the developing child.

Ainsworth (as cited in Mennen & O'Keefe, 2005) identified three major styles of attachment: *secure attachment*, *ambivalent-insecure attachment* and *avoidant-insecure attachment*. Ainsworth proposed that the attachment system is activated when a child encounters a potential threat. Once the attachment system is activated, the child questions the availability and responsiveness of the attachment figure to the needs presented in the situation. The mental representation of attachment security and consolidation of security-based strategies of affect regulation within the individual will be reinforced if the attachment figure is sufficiently available and responsive. Security-based strategies consist of *declarative* and *procedural knowledge*. Declarative knowledge entails optimistic beliefs about distress management, optimistic and trusting beliefs about others' goodwill, and a sense of self-efficacy about dealing with threats. Procedural knowledge, on the other hand, is structured around three main coping strategies:

acknowledgement and display of distress, support seeking, and instrumental problem solving. These security-based strategies of affect regulations are meant to alleviate distress, form comfortable, supportive intimate relationships, and increase personal adjustment. Security-based strategies are characteristically utilized by individuals who score relatively low on attachment anxiety and avoidance (Mikulincer & Shaver, 2006). These individuals feel secure and able to depend on their attachment figures. They know their attachment figures will provide comfort and reassurance, so they are comfortable seeking them out in times of need (Mennen & O'Keefe, 2005).

In the ambivalent-insecure attachment style, individuals usually make use of *hyperactivating strategies* when faced with threats. When attachment figures are not reliably available and supportive when the attachment system is activated, a sense of security was not attained. This results in attachment insecurity and negative working models of the self and others. *Hyperactivating strategies* intensify negative emotional responses to threatening events and remuneration on threat-related concerns. Hyperactivating strategies foster hypervigilant attention to attachment figures and rapid recognition of possible signs of disapproval, waning interest, or impending abandonment. As a result, the attachment system is persistently activated, reinforcing the anxious attachment style (Mikulincer & Shaver, 2006).

If attachment figures continuously fail to provide the necessary support to alleviate distress, secondary approaches to affect regulation are implemented in threatening situations and avoidant attachment style manifest. These individuals inhibit the search for support and attempt to cope with the stress on their own. They tend to deny their attachment needs as well as avoid closeness, intimacy, and dependence in close relationships. These individuals also tend to, maximise cognitive, emotional and physical distance from others. The strategies of avoidance that they often employ are called *deactivating strategies*. Their primary goal is to keep the attachment system deactivated from further distress and frustration caused by attachment figure unavailability (Mikulincer & Shaver, 2006).

Main and Solomon (1986) identified a fourth attachment style known as *disorganised-insecure attachment*. Children with a disorganised-insecure attachment style show a lack of clear attachment behaviour. They struggle to recognise which behaviours gained favourable attention from caregivers, resulting in a mix of behaviours towards caregivers, including avoidance or resistance. These children are described as confused or uneasy in the presence of a caregiver (Mennen & O'Keefe, 2005).

The importance of secure caregiver child relationships in children's well-being is widely acknowledged (WHO, 2004). Secure attachment is not only important for healthy development of younger children (Mennen & O'Keefe, 2005), but several studies have also confirmed *the positive impact of parental attachment on adolescents' school connectedness*, (Shochet, Smyth, & Homel, 2007); *adolescents' mental health, higher self-esteem and social support*, (Park, 2009); as well as *adolescents' resilience towards high-risk behaviours*, (Ungar, 2004). Secure attachment relationships are purported to enable cooperation regarding management and monitoring issues between a caregiver and a child. Children are found to be more likely to cooperate with caregivers' monitoring if they experience the caregiver as a secure base and safe haven (Kerns, Aspelmeier, Gentzler, & Grabill, 2001). According to Dickstein, Seifer, and Albus (2009), a secure attachment relationship is also important because it influences a child's self-control, self-esteem and the nature of relationships he/she has with others. It directs a child's future relationships, the way he/she will function in them. The nature of a child's attachment relationship will also affect the way a child will come to view himself and the world, the nature of the child's standards, as well as his quality of life (Barone, Weitz, & Witt, 2005). If a secure attachment relationship is formed, a child will learn that others can be relied upon for emotional and social support and that he/she is worthy and lovable. Such a relationship will likely lead to the development of empathy

متن کامل مقاله

دریافت فوری ←

ISIArticles

مرجع مقالات تخصصی ایران

- ✓ امکان دانلود نسخه تمام متن مقالات انگلیسی
- ✓ امکان دانلود نسخه ترجمه شده مقالات
- ✓ پذیرش سفارش ترجمه تخصصی
- ✓ امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
- ✓ امکان دانلود رایگان ۲ صفحه اول هر مقاله
- ✓ امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
- ✓ دانلود فوری مقاله پس از پرداخت آنلاین
- ✓ پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات