



**UNIVERSITY of the  
WESTERN CAPE**

**An investigation into the correlates of family resilience in an impoverished rural  
community in the Western Cape.**

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**A mini-thesis submitted in partial fulfilment for the degree of**

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**Keywords:** Family, family resilience, family functioning, age, gender, employment status,  
level of education, multiple regression

## Declaration

I declare that the study entitled ‘an investigation into the correlates of family resilience in an impoverished rural community in the Western Cape’ at the University of the Western Cape is my own work. That it has not been submitted previously for any degree or any other university, and that all the sources have used or quoted have been indicated and acknowledged as complete references.

Kezia Ruth October

2018

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## Acknowledgements

*“Everything will be fine, no matter how far you fall or even how hard, you can’t fall further than the ground, and if you try hard enough you’ll see you can get up again. No one said it will be easy, but it’s not impossible either. Come let’s go....”* –The rise and fall of Alex the Great, by Marelize Malherbe

In loving memory of my dear friend Marelize Malherbe. I am forever grateful to you, my friend, for always showing a keen interest in my thesis and continuously cheering me on when I’ve needed it the most. For all those late nights and early morning conversations and for all the inspiration, I thank you sincerely. May your soul rest in peace.

To the most high and glorifying Father, without You, I would not have made it as far as I have. I am confident today because my confidence is rooted and grounded in You. Lord, Your presence have guided me through the good times and the bad. I thank You greatly!

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*Our greatest glory is not in never falling, but in rising every time we fall.* –Confucius

## Abstract

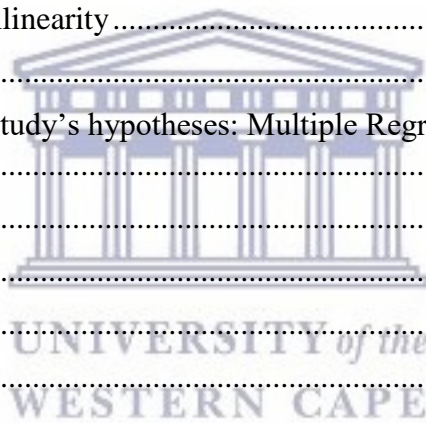
Families in South Africa are faced with manifold hardships that negatively impact the family as a unit. However, there are a variety of protective factors that have been identified as meaningful resources that facilitates healing and growth within a family unit. The study aims to investigate whether age, gender, employment status and level of education significantly predicts family resilience. The study utilised secondary data compromised of (N=656) participants from a low socio-economic rural community in South Africa. Family resilience views the family as a functional system of which provides positive adaption to family members who have experienced stressful events. Walsh's key processes in family resilience is outlined, highlighting a multi-level developmental systems orientation. The study utilised a multiple regression analysis consisting of four predictor variables namely, age, gender, employment status and level of education to assess whether these variables predict high levels of family resilience. The model found that amongst the four predictor variable, only employment status significantly predicted family resilience.



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## CHAPTER 1

### Conceptualising Family Resilience

#### 1.1. Introduction

Families in South Africa are faced with manifold hardships that negatively impact the family as a unit (Amoateng & Richter, 2007; White Paper on Families in South Africa, 2012). Factors such as violence, social inequality, poverty and illness severely effects the health and well-being of these families (Bhana & Bachoo, 2011; Umberson, Williams, Thomas, Liu, & Thomeer, 2014). Many children in South Africa are reared in diverse and complex family compositions which have been influenced by factors such as poverty, divorce, violence, unemployment, death and diseases (Poggenpoel, Jacobs, Myburgh & Temane, 2017). However, research studies no longer only focus on problem-oriented perspective on what upholds families, Greeff (2013) put forward that there has been a shift in paradigm and many family mental health researchers believe a strengths based perspective is important. The strength-based perspective focuses on how the families can succeed through utilising positive goals and options applicable towards a family's values and situation (Walsh, 2016b). Focusing on family's strengths enhances the ways that families function and can thus serve to positively improve the lives of families as a unit (Walsh, 2016b).

Although families are seen as a unit and are widely viewed as one of the foundational social institutions in all societies, the concept of family is seen as a complex system. The White paper on Families (2012) defines families as members of societal group who are members related by blood (kinship), adoption, foster care or ties of marriage (extended families), including civil, customary, or religious marriages, or communal union, and further extends beyond mutual physical residence. These variations suggests that the concept of family may differ from region to region. More specifically, within South Africa however it is essential to note that household and family are not necessarily synonymous (Belsey, 2005). Similarly, the South African Institute of Race Relations' that studied the state of South African families and youth (2011) reported that the "typical" child is raised by his/her mother in a single-parent household (Holborn & Eddy, 2011:1). However, dating back to past generations, children mainly grew up in traditional families which included two married biological or adoptive parents. Notably the multicultural nature of South African society puts forward that no single definition of 'family' is broad enough to include the diverse nature of families in the country (White Paper on Families in South Africa, 2012). The White Paper on

Families in South Africa (2012) further classified the various types of families found in South African households, more specifically according to racial group which showed that:

“Africans had the highest proportion of three-generation, absent-spouse, single parent, child-headed and siblings’ families. Coloureds had the highest proportion of single parent (unmarried families) and married couple with adopted children, while among Indians the most common type was the nuclear family. Whites had the highest proportion of elder-only and married couple-only families” (p. 17).

South African historic traits such as the apartheid system, has deterred the family from playing its various roles in society and made it difficult for its members to meet their needs. These historic traits as by poverty and inequality reflects apartheid settlement patterns and essentially, all poor households (White Paper on Families in South Africa, 2012). The structure of South African economy largely influences the extent to which members of society can participate in labour markets and earn a salary to improve families’ standards of living. As a result, family members living in rural areas in South Africa, would often separate from their families to earn an income in urban areas as a means to provide for the family. Levels of education and low employment opportunities further compounded the problems experienced by individuals in rural areas (Nthane, 2015). Older generations and females are particularly sensitive to these enduring effects (Whitmarsh & Wentwork, 2012). However, the ability of South African families to thrive despite these challenges suggests that they are flexible in some manners and that their flexibility is aided by how families function (Brown, Schalock & Brown, 2009; Davids, Ryan, Yassin, Hendrickse, & Roman, 2016).

Although these families are diverse in structure, the White Paper on Families in South Africa (2012) posits that the absence of a stable and nurturing family environment significantly impacts on the individuals, resulting in dysfunctional behaviour. This is consequently detrimental to society. Essentially, the family broadly influences the way society is structured, organised and functions and is considered to be a vital system responsible for individual development in several ways (Bhana & Bachoo, 2011).

Research further stipulates that cognitive and socio-emotional skills developed during child rearing are essential predictors of life course outcomes such as health, educational attainment and labour market performance (Lee & Mclanahan, 2015). This suggests that



stable families displays high levels of resilience and plays a role in contributing to successful functioning of society and social cohesion (White Paper on Families in South Africa, 2012). In contrast, Lee and colleagues (2004) found that when families are faced with challenging situations such as illness or economic hardships, cognitive, emotional or social imbalances can occur. However, in the face of adversity wherein families experience undesirable outcomes that disrupts family functioning, child and family studies became more concerned with why some families continue to strive through undesirable circumstances while others do not (Noltemeyer & Bush, 2013). As a result, the concept of resilience has been well researched and theorised in several authors' work to elucidate positive adaptation under adverse circumstances (Benzies & Mychasiuk, 2008; Black & Lobo, 2011; Luthar, Cicchetti & Becker, 2000; Masten, 2001; Patterson, 2002; Simon, Murphy & Smith, 2005).

In addition, Walsh (2012a) postulates that the underlying factor as to whether some families thrive in adversities and others not, relates to the difference in levels of resilience within the family. Walsh (2012a) defines resilience as the ability to overcome challenging life events, which reflects a positive response to risk factors or a competent performance under adversity. Greenspan (2002) further emphasised that resilience is not an attribute of a child alone, but rather a product of the relationship the child has with the family and how each relationship contributes towards the child's development. This implies that resilience is a process involving the participation of others in order for the individual to overcome challenging situations influenced by family and the social environment. This process becomes integral when considering the fostering of resilience in children. Additionally limited access to financial, education and social resources denotes higher levels of stress and family dysfunction, directly influencing child development and the well-being of families as a whole (Davis, 2005; Matthews & Gallo, 2011). In a well-functioning family, parents take control of the family environment through encouraging good communication patterns that creates a sense of family cohesion and adaptability (Noltemeyer & Bush, 2013) which serves as a protective factor for children and adolescence.

Sixbey (2005) recommends exploring variables such as: age, gender and, level of education in light of the six resilience dimensions, arguing that a better understanding of these variables can enhance family functioning. Both Walsh (2012a) and Sixbey (2005) agree that age, gender and level of education can influence family functioning, including employment status (Walsh, 2012a; Sixbey, 2005; Statistics South Africa, 2012). Age has an impact on how families cope with adversity, as perceptions on individual characteristics and protective factors changes with age

(Sun & Stewart, 2007) including the transition to the next decade in life holds significant meaning (Walsh, 2016b). Wells (2010) argued that as people age they are likely to encounter challenging circumstances such as development of chronic illness or emotional stress as a result from loss of a loved one. However, studies further suggests that older adults are able to adjust to difficult circumstances with less disruption to their lives thus displaying higher levels of resilience than people from younger age groups.

In addition, gender may affect family roles and functioning through gender-specific characteristic behaviour (Sun & Stewart, 2007; Walsh, 2016b). Over the centuries and to date, marriage has been viewed in its general terms relative to matches being made on the foundation of economic and social position (Walsh, 2016b). As women's educational attainment has grown, new female gender roles incorporated dimensions of economic independence and support responsibilities that belonged to men. The promotion of equal distribution of responsibilities in the financial domain has changed traditional gender role views (Walsh, 2016b).

In traditional patriarchal cultures men were considered the breadwinners and organised key decisions and resources within the family. However, within rural communities, integration of family and work life endorsed equal sharing of labour (Walsh, 2016b). Women are investing less time in domestic duties, given their involvement to earn a working salary, conversely, men's contribution in household duties and child care at home has increased (Oláh, Richter & Kotowska, 2014). This further puts forward the significance of gender related functioning of resilience within the family.

Adequate employment further plays a significant role in promoting general well-being. It also contributes to self-esteem and identity, thus providing a sense of fulfilment and opportunities for a source of income and social networks (Black & Lobo, 2008; Lleras, 2008). Employment is seen as the foundation of financial stability, increasing family welfare and access to resources such as shelter, food, water and electricity (Lleras, 2008; Walsh, 2016b). Essentially, education as well as employment status can help in better self-perceived mental and physical status, forming of strong social networks for example friends that was found to increase resilience levels (Wells, 2010). Moreover, level of education and employment status are significant concerns in South Africa, specifically in rural areas. According to Statistics South Africa (2012) older individuals are more likely to have lower levels of education than younger individuals and the unemployment rates among women (34.6%) are higher than those among men (25.6%). Research further found that rural areas are more likely to have limited access to resources such as

healthcare and educational institutions, this has also contributed to younger family members who have to move to urban areas (Wells, 2010). These statistics contribute to potential difficulties that can influence constructive family functioning, highlighting the importance of recognising existing strengths in families in order to foster resilience.

There is a scarcity of research pertaining to the South African population and its contribution to the understanding of family resilience and resilience factors that can aid families to rebound from adversity (der Kinderen & Greef, 2003). Rather, there has been considerable interest in resilience traits in resilient family members. Additionally, limited family resilience studies have been conducted within rural areas and on the West Coast of South Africa. Bhana and Bachoo (2011) emphasised that there is a lack of studies of family resilience that focus on families living in impoverished communities. However, by further unpacking the relationship between family resilience in context of gender, age, level of education and employment status, the researcher may contribute in developing ways to address coping strategies, not only at the familial level, but also on an individual and community level (Walsh, 2012a; Davis, 2005). This will provide families with the ability to increase family coping capabilities and resources which essentially aids in making meaning out of stressful and de-stabilising experiences as well as adopting protective beliefs that preserves a family's agency (Saltzman, Pynoos, Lester, Layne & Beardslee, 2013).

## **1.2. Problem Statement**

South Africa is characterised by varying levels of inequality, and those situated in under-resourced areas are continuously exposed to adverse circumstances (Rawatlal, Pillay & Kliever, 2015). Walsh (2016b) further argues that “the need for family resilience has never been more urgent, as families today are challenged with global economic, social, political and environmental upheavals” (p. xii). Moreover, the legacy of South Africa's political history continues to impact on the socio-economic conditions of families wherein adverse socio-economic factors affect standards of living (Rawatlal et al., 2015). However, not all individuals suffer from the adverse circumstances that often times produces negative outcomes for families. The ability to utilise available socio and economic resources optimally, as well as having good family communication and problem solving skills are essential to enhance family functioning and improve family well-being (Sixbey, 2005; Walsh, 2012a). Individual families essentially differ in how they experience family strengths, challenges and perceived severity of risk (Black & Lobo, 2008). Research on resilience further indicates that resilience is strengthened within

families by adapting the way we think about challenges or adversities (Masten & Coatsworth, 1998; Schneider, 2001). Therefore, effective family processes that contributes to resilience can aid in successful adapting and new found protective factors. This suggests through establishment of protective factors lifelong resiliency can be nurtured in the family (Walsh, 2012a).

### **1.3. Aims and Objectives**

The aim of the study is to explore the correlates of family resilience in an impoverished rural community in the Western Cape. The following objectives have been developed to guide the study:

To determine the relationship between gender and family resilience

To determine the relationship between age and family resilience

To determine the relationship between employment and family resilience

To determine the relationship between level of education and family resilience

### **1.4. Thesis Chapter Overview**

#### **Chapter 1**

Chapter one introduces key concepts that will frame the study. It further provides the relevance of research within the context of families in South Africa, which highlights the motivation for the study.

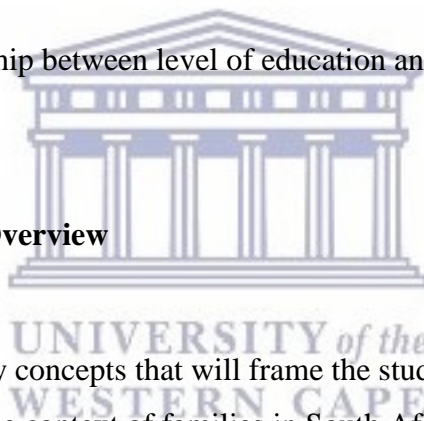
#### **Chapter 2**

The scope of chapter two outlines the theoretical foundation in which the study is grounded. It centres on the evolution of family theories, family resilience theory and its application to the study.

#### **Chapter 3**

This chapter provides a review of the various studies that explores family resilience research. Which is in line with the study's research question and objectives.

#### **Chapter 4**



Chapter four is concerned with the methodology that was used in the study. It offers insight into the study's instrument and statistical techniques utilised to answer the research question.

## **Chapter 5**

Chapter five describes the descriptive statistics and findings of the statistical analysis aimed to answer to research question and objectives. Therefore, it presents the results of the multiple regression analysis in chapter 4.

## **Chapter 6**

This chapter presents the findings of the results found in chapter 5. It discuss each of the study's objectives and the key findings found in the results with reference to the literature and theoretical frame.

## **Chapter 7**

Chapter seven identifies the study's limitations and recommendations for future research. It further offers concluding remarks for the study.

### **1.5. Chapter Conclusion**

This chapter introduced and defined the key concepts that will be the focus of the study. It further provided context to families in South Africa and the need to explore variables such as age, gender, employment status and level of education in relation to family resilience. A chapter overview has further been provided to guide discussions. The next section, chapter 2, aims to introduce the conceptual framework that will guide the study.

## CHAPTER 2

### Theoretical Framework

#### 2.1. Introduction

This chapter provides an overview of the theoretical aspects concerning resilience in families. It explores the evolution of family resilience models through several studies of scholars. The theoretical frameworks below will thus shape the family resilience framework of the study.

#### 2.2. Family Resilience

All families experience crisis and daily challenges (Walsh, 2012b). The outcome of families functioning successfully despite facing challenging circumstances further posits the question as to how researchers and practitioners can best identify what accounts for strong families? More specifically, what are the key components of a family's positive outcomes that enables them to flourish with warmth, support and cohesion under unexpected circumstances? McCubbin and McCubbin (1988) define family resilience as the "characteristics, dimensions, and properties which help families to be resistant to disruption in the face of change and adaptive in the face of crisis situations" (p. 247). Luthar et al. (2000) further defined family resilience as "a dynamic process encompassing positive adaptation within the context of significant adversity" (p. 543).

These definitions focused on different aspects of family resilience and further supports the notion family resilience is a protective resource and pathway a family can enforce both in the present and over time. Patterson (2002) suggests that family resilience looks at the product of family relationships. Luthar and colleagues (2000) however argued that the dynamic process of resilience is best examined through a broader context and interrelation frameworks. A family resilience perspective should therefore be seen as a strength-based approach that views the family's difficult circumstances not as damaging but rather as a prospect for fostering healing and growth (Walsh, 2003). Furthermore, a risk factor or stressor is seen as a construction to effective functioning, while a protective factor is viewed as a resource that serves as a mechanism that safeguards the family to effectively functioning in face of adversity (Patterson, 2002). Walsh (1996) puts forwards that there is no "blueprint for any singular model of the resilient family" (p. 269). This denotes that each family is unique to their stressor and vary in their interactions of risk and protective factors. These factors is therefore dependent on socio-cultural and developmental context.

### 2.3. Family Resilience Constructs

Historically, studies on resilience centred on the attributes of children related to positive adaptation under adverse circumstances that were able to succeed in life (Becvar, 2015; Patterson, 2002; Sixbey, 2005). These children were more likely to have an inner locus of control—having an optimistic attitude towards difficult circumstances. These attributes then aided children to develop competence and hope of a better life through their own strengths and forged relationships (Walsh, 2006). However, research focusing on the family resilience perspective, shifted away from identifying individual personality factors (such as understanding risk, vulnerability or susceptibility and disorder) and rather on factors that influence positive relationships (such as protective factors that reinforce children’s resources and their resilience) within a family (Benzies & Mychasiuk, 2008; Patterson, 2002; Walsh, 1998; Walsh, 2006). This has driven researchers to understand how some children or families facing challenging circumstances are able to overcome it and lead productive lives and acquire a stronger bond as a unit than before (Walsh, 2006). As such, strength-based family therapists refocused theory and practice from deficit-based to more strength-based orientation in family functioning (Walsh, 2006).

Antonovsky (1979) further termed this a “salutogenic orientation” (p.2). The salutogenesis approach is concerned about discovering factors or strengths that contributes to healthy functioning as opposed to studying deficits. In light of this, the salutogenesis approach was developed as a response to pathogenesis, which focused on developments of diseases (Korotkov, 1998). As the salutogenesis stressed how and why people stay healthy, Antonovsky designed the salutogenic model as a means to enhance understanding of the relationship between stressors, coping and health. A key construct in which the author identified as being essential to individuals ability to cope with stress is having ‘a sense of coherence’ which further comprised of three components: meaningfulness, manageability and comprehensibility all of which can be enhanced through social support, cultural stability and wealth (Antonovsky, 1987). Essentially, as sense of coherence improves people’s ability to function, the salutogenic model therefore highlights that optimal functioning includes having social stability, satisfying employment and freedom from stress and anxiety. Similarly to the Salutogenic model, a number of researchers aimed to identify and understand factors that promotes healthy functioning in individuals, the family and the communities that can aid in thriving under adverse circumstances. From a family stress perspective, several researchers

proposed models and frameworks of family resilience in an attempt to identify the factors and processes involved in family functioning (Becvar, 2015; McCubbin & McCubbin, 1996; Patterson, 2002, Walsh, 1996). The following section below will further discuss these theoretical models of family resilience.

## **2.4. Overview of Family Theories**

As research in the field evolved, the studies of individual resilience shifted towards the family as a unit. Various theoretical works on individual resilience has been applied to families (Bhana & Bachoo, 2011; Black & Lobo, 2008; Patterson, 2002; Walsh, 2006) and regarded resilience not only as an individual process, but also a family process (Sixbey, 2005). Evidently, over decades of research, the family has been recognised as both a potential risk and protective factor (Rutter, 1987) in turn researchers explored factors that contributes to healthy family functioning. This section further aims to discuss the theoretical frameworks concerning family functioning namely: the family systems theory, the family adjustment and adaptation response model (FAAR) and Walsh's family resilience framework.

### **2.4.1. Family Systems Theory**

Bowen's family systems theory is a broad view of human behaviour that attempts to describe a structure to relationships (Crossno, 2011). The family systems theory is seen as a descriptive natural systems theory concerning the emotional process of people; as such it provides insight to how people respond emotionally to the world in which they live (Bregman & White, 2011). Although Bowen's family systems theory originated from general systems theory which was developed by Ludwig von Bertalanffy (Smith-Acuna, 2011), Bowen's theory diverges from general systems theory as in builds on facts supported through direct observation of the family (Papero, 1990). However, general systems theory aimed to utilise mathematical models to behavioural, social and physical sciences (Bowen, 1978). The family systems theory requires therapists or researchers to accurately observe and understand people's behaviour and their emotional functioning in the relationship systems to which people belong (Bregman & White, 2011). This further encompasses having a systems frame of reference for interpreting observations made of those systems (Bregman & White, 2011). According to Bowen, a systems frame of reference works best when it value the needs of both the group and the individual, this further includes when the system have group norms that offer communication regarding their needs (Bowen, 1978). Bowen's theory



encompasses a multiple perspective and contributes in the way functional families are seen as open systems (Smith-Acuna, 2011).

As the aim of the family systems theory is to aid individuals and families to understand and acknowledge both the individual and the family contributions to emotional functioning, Walsh (1996) suggests that an examination of resilience from a family systems perspective is necessary to aid understanding of resilience in families. Bowen (1978) further defined the family as “a system in that a change in one part of the system is followed by compensatory change in other parts of the system” (p. 155). This includes viewing the family as a systems with subsystems. An understanding of the concept of systems plays a major role in Bowen’s theory (Papero, 1990). Bowen refers to the term systems as “the automatic predictable behaviour between family members” (Bowen, 1978, p. 417). More specifically, a systems—thinking process aids in the understanding to the *how*, *what*, *when* and *where* of what humans do while excluding the subjective reasoning of why people behave the way they do (Crossno, 2011). Crossno (2011) emphasises that “systems thinking involves the process of interdependent functioning from one system to a larger system that encompasses it, such as a cell to an organ, an organ to a human and a human to a planet” (p. 41). Similarly, the family systems theory facilitates observation of people’s behaviour and functioning in the context of the relationship system in which they belong, this includes the members in the relationship to each other and the systems as a whole (Bregman & White, 2011). Additionally, this broadens the therapist or researcher’s focus on the behaviour and functioning of people’s relationship systems as a whole, including their members in reference to the context of the relationship forces that are internal and external of the systems in an ongoing and active manner (Bregman & White, 2011). This view thus aided Bowen in defining the family as a complex unit of systems and subsystems functioning under a similar order of the aforementioned systems (Crossno, 2011).

Bowen (1978) further stressed that the core of the family systems theory is reflected in the way people are able to differentiate between the feeling process and the intellectual process. This encompasses the interrelationship of multiple systems such as: a) the emotional system—which is defined by evolutionary and instinctual functioning; b) the intellectual system—referred to as people’s thinking capabilities, reasoning and reflection and c) the feeling system—which ascribes meaning to emotional reactions (Bowen, 1978). Therapists or researchers can utilise the family systems theory on families who experience issues such as

marital issues, anxiety or depression through learning to recognise emotional relationship patterns and identifying how these issues occurred and was dealt with in order to develop strategies to construct new behaviours (Crossno, 2011).

Furthermore, as family systems studies identified factors accounting for the differences in adaption following challenging situation, this can be similarly found in family resilience research. Resilience is generally influence by three external factors that are identified as interacting and contributing to resilience: 1) the characteristics of the individual 2) and of families as well as 3) the influences from the social environments (Walsh, 2012a). In addition to what has been discussed above, the shift from a deficit approach to a strength-based approach is evident in that theories now include studying the complex process of developing and using resources to resist and adjust the impact of various challenges within individuals, families and communities (Becvar, 2015).

#### **2.4.2. Family Stress Theory**

The family stress theory is seen as a developmental theory, established from the field of family science. This theory is mainly concerned about how some family systems adapt and flourish in the event of situational stressors or transitional events, while other family units collapse under harsh conditions (Robinson, 1997). Reuben Hill (1949 as cited in Robinson, 1997) developed the family stress theory after observing families who experienced separation and reunion due to war-induced situations. Hill's model of family stress therefore explores how families who are faced with challenging stressors, reacts and respond differently (Robinson, 1997). As families progress through active strategies that may improve family functioning when adjusting to a crisis, Hill further developed the ABCX Model that contributes the ways a family respond to a particular crisis. der Kinderen and Greef (2003) outlined Hill's ABCX Model as follows: "a stressor event (A) interacts with the family's resources and strengths for dealing with the stressor (B), and shows how the family defines or perceives the event (C), producing stress or crisis (X)" (p. 87). The model is understood as factors which are the family's resources and involves the balance between their perceptions and the stressors (Robinson, 1997).

Essentially, the application of the family stress theory is centred on two general objectives that guided studies of family resilience. The first objective is that when families who are resilient experience a stressor, the family will make use of instrumental and expressive resources as a source of strengthening the family and promote family adjustment. The

second objective proposes that some families, who are faced with a stressor, will further utilise the aforementioned resources to protect them from family dysfunction and enhance family adjustment (McCubbin & McCubbin, 1993). Scholars such as McCubbin and Patterson (1983) further developed their Double ABCX Model of family adaptation upon Hill's (1949) ABCX Model. The Double ABCX Model established by McCubbin and Patterson (1983) extends on variables that impacts on family adaption. This comprises "the pile up of additional stressors (AA), new and existing resources (BB); and family perceptions of the situation and coping strategies (CC)" (Robinson, 1997, p. 17) that affects adaption. This puts forward that family stress theory and theories concerning family resilience are linked; as family strengths, resources and coping strategies are vital factors that are explored in both theories. Moreover, the Double ABCX Model has been expanded on by McCubbin and McCubbin (1996) Resiliency Model of Family Stress, Adjustment and Adaptation.

#### **2.4.3. The Family Adjustment and Adaptation Response Model (FAAR)**

As discussed above, the Resiliency Model of Family Adjustment and Adaptation (FAAR) evolved from three main theories that concerns the family stress theory. First, the ABCX Model by (Hill, 1949), second, the Double ABCX Model (McCubbin & Patterson, 1983) and lastly, the Typology Model of Family Adjustment and Adaptation (McCubbin & McCubbin, 1987). The Family Adjustment and Adaptation Response Model is thus seen as an extension of the aforementioned theories, which further expands on discovering and testing resiliency factors present in families (McCubbin & McCubbin, 1996).

The FAAR Model mainly aims to provide researchers and families a method to "balance *family demands* (i.e. normative and non-normative stressors, ongoing family strains or daily obstacles) with *family capabilities* (i.e. tangible and psychological resources or coping behaviours) as these interact with family meanings to arrive at a level of family adjustment or adaption" (Patterson, 2002, p. 350). This suggests that these families engage in resourceful activities that aids to protect the family in the face of adversity (Robinson, 1997). As the FAAR Model is ecological and extensive in nature, the family demands and family capabilities comprises of three different levels of the ecosystem: a) the individual family members, b) the family unit, and c) from diverse family community contexts (Patterson, 2002). The FAAR Model therefore attempts to identify and describe which factors and processes are involved in positive outcomes of families who experience a crisis. Patterson (2002) further stipulated that the FAAR Model assists in understanding how the resilience

process unfolds in families through three levels of family meanings namely: i) the definitions of families' demands and capabilities, ii) the family's identity and iii) the family's worldview in relation to systems external of the family. These three levels outlines the risk experienced by a family and influences the protective nature of the family who experience a crisis. Although notably, some families have the ability to adapt to adversity than others, McCubbin and McCubbin's (1996) FAAR Model distinguished between two phases involved in families' recovery of adversity namely: the adjustment phase (pre-crisis) and the adaption phase (post-crisis) (see *Figure 1*).

### **2.3.3.1. The Adjustment Phase**

The adjustment phase is the first phase of the Resiliency Model. Van Breda (2001) defines family adjustment as “the outcome of a family's efforts to deal with a specific and relatively minor stressor” (p. 112). This suggests that families copes with a stressor through means of maintaining family functioning and family strengths in order to promote balance and harmony (Robinson, 1997; Weber, 2011). The adjustment phase consists of various interacting components that influence whether the family's adjustment is successful or unsuccessful. These consists of variables of the stressor, vulnerability, patterns of functioning, family resources, stressor appraisal as well as problem solving, coping and the outcome of adjustment (Weber, 2011). The following elements will explore the factors involved in the process of the adjustment phase.

The first process to consider is the stressor experienced by the family. McCubbin and McCubbin (1996) refers to the *Stressor (A)* as a “demand placed on the family that produces or has the potential of producing change in the family system” (p.17). A stressor is further identified as the level of severity to which it threatens the family's stability or family functioning and exhausts the family's resources (Weber, 2011). Family stress can be understand under two categories: normative (which consist of stressors expected throughout the family's life span such as becoming a parent) and non-normative (which encompasses stressors that are unexpected stressors such as illnesses) (Patterson, 2002). Normative stressors within the family generally do not contribute to major hardships, however a normative stressor is dependent upon the family's level of functioning and coping skills to expected obstacles that may arise. This could include working additional hours to earn a higher income (Boylu, Çopur & Öztop, 2013). Although normative stressors may not put the family at risk, non-normative stressors which are unexpected stressors can significantly

endanger the family's ability to function successfully. Non-normative stressors consist of traumatic events such as an injury or disability of a family member that negatively impacts the family's ability to adapt from their daily functioning. However, the family's ability to perceive the stressors further forms the way they will cope with the problem they are faced with. Shared meanings of a stressor further assists in understanding ways to problem and generating solutions to deal with it (Power et al., 2016) which in turn increases the families level of resilience and creating patterns of functioning under difficult situations (Patterson, 2002)

A second process in the adjustment phase is *the Family Vulnerability (V)* and is understood as “the interpersonal and organisational condition of the family system” (McCubbin & McCubbin, 1996, p. 17). The stressor (A) interacts with the Family Vulnerability (V) as it entails the pileup of stressors, strains and transitions experienced by the family and the demands that ultimately shapes the family's vulnerability (Weber, 2011). The family's vulnerability ranges on a continuum from high to low and thus varies across the family's life cycle (Van Breda, 2001). As such, this process can affect the family under different stages within the family's timeline.

The next processes to consider is the *Family Typology of Established Patterns of Functioning (T)*. In contrast to the Family Vulnerability (V) process, this process relates to how a family typically behave within their environment. McCubbin and McCubbin (1996) defines this process as “a set of attributes or clusters of behaviours that explain how the family system typically operates or behaves” (p. 18). The four family typologies that have been identified are namely: regenerative, resilient, rhythmic and traditionalistic typologies (Weber, 2011). Van Breda (2001) noted that the term ‘resilient’ families have been replaced with the term ‘versatile families’ as a means to provide a more diverse grouping of typologies. Additionally, ‘regenerative family’ typology was analysed according to the term hardiness and coherence, while ‘versatile family’ was compared to using terms such as ‘family flexibility’ and ‘bonding’. The ‘rhythmic family’ term was accessed in terms of family time and routines and the ‘traditionalist family’ was viewed as the family traditions (Marsh et al., 1996). These typologies within the family can further be assessed as it having high or low levels or both high and low levels.

A fourth process includes the *Family Resources (B)*. It can be understood as “a family's ability and capabilities to address and manage the stressor” (McCubbin & McCubbin, 1996,

p. 19). The resources the family utilise to strengthen their established patterns of functioning essentially aids the family to adjust according to the demands arising from the stressor. Resources can vary over a family's life cycle as well as their culture. These resources are further situated within the individual, family or community levels and can provide the family a means to avoid a crisis and establish solutions to address each problem that may arise in the future respectively (Weber, 2011).

A fifth process within the adjustment phase involves the *Stressor Appraisal (S)*. This process refers to how the family defines the seriousness of the stressor and its related hardships and whether it is perceived as a setback or a catastrophe (Weber, 2011). The subjective meaning of the stressor similarly plays a major role concerning how the family responds to the stressor (McCubbin & McCubbin, 1996).

A sixth process explores the family's *Problem Solving and Coping (PSC)*. Problem solving encompasses the family's ability to identify the stressor and provide possible solutions to resolve the problem (McCubbin & McCubbin, 1996). Coping according to the family entails their behaviour and strategies to maintain the family level of functioning through use of resources available and family coherence (Weber, 2011).

The family *Bonadjustment and Maladjustment and Crises (X)* is the last process to consider in the adjustment phase. As the adjustment is regarded as the outcome phase, it considers two factors namely: the bonadjustment (which promotes balance and harmony in the family) or maladjustment/crisis (which entails imbalance and disharmony in the family) (McCubbin & McCubbin, 1996; Van Breda, 2001). Families are in the adjustment phase and are regarded as such only until a maladjustment/crisis arise. When a family is faced with a crisis, the family then progress into the adaptation phase (Weber, 2011).

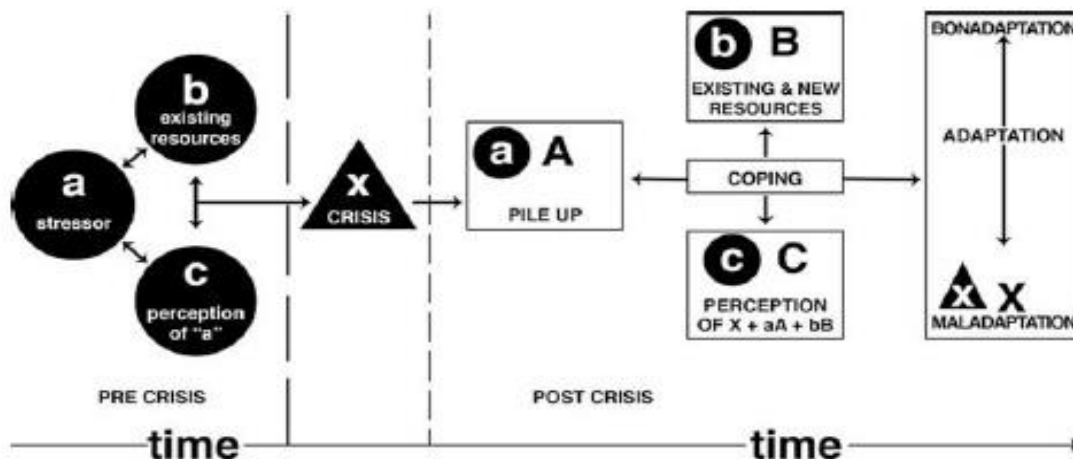


Figure 1: McCubbin, Cauble., & Patterson's Double ABC-X Model from McCubbin, Cauble and Patterson, family stress, coping and social support (1982)

### 2.3.3.2. The Adaptation Phase

As noted above in the adjustment phase, the adaptation phase takes place once the family experiences a crisis. Lavee, McCubbin and Patterson (1985) defines the family adaptation phase as the “outcome of the family’s processes in response to the crisis and pile-up of demands” (p. 813). The adaptation phase is regarded as the family’s ability to ‘bounce back’ and successfully adapt to their daily functioning after experiencing a crisis. This phase is processed on a continuum, ranging from maladaptation (healthy adaption: which restores harmony to the family system) to bonadaptation (unhealthy adaption: which causes disharmony and deterioration to the family system) (Weber, 2011). The adaptation phase of the Resiliency Model of Family Stress, Adjustment and Adaption further includes pile-up of demands (AA), new pattern of functioning (TT), family resources (BB), family support systems (BBB), family situations (CC) and family schemas (CCC) (Weber, 2011).

The adjustment and adaptation phase can be expressed as follows: when a family experiences a crisis (X), such as a family member who was injured or diagnosed with an illness including other stressful situation further effects the maladjustment of the family system (Weber, 2011). As a result, the family encounters a pile-up of demands (AA) comprising of a build-up of normative and non-normative stressors, which increases the family vulnerability (V). The family then rebounds from a crisis in order to achieve a level of adaptation (XX) which restores balance and harmony within the family system (McCubbin & McCubbin, 1996). As some families are faced with a crisis within the various family

typology of established patterns of functioning (T), the maladaptation or bonadaptation phase of a family is consequently dependent upon the family's new established patterns of functioning (TT). This in turn involves the changes or modification of an old pattern, maintenance or revitalisation of pre-established patterns of functioning the family employs within the family system as a means to strengthen how the family functions (Patterson, 2002). The family utilises their resources (B), this is further extended in the adaptation phase as family resources (BB) from individual family members to the family as a unit, and the family support systems (BBB) provided as external sources such as friends, church or other communities. The stressor appraisal (S) then allows the family to make sense of the crisis and is further extended in the adaptation process through considering the family situations (CC) as well as the family schemas (CCC) and ultimately their problem solving and coping abilities (PSC). However, when the family's adjustment and adaptation phases are unsuccessful, the family is then regressed to the maladaptation stage that increases family dysfunction and as a result causes the family to revert to the initial stages of the adaptation phase (McCubbin & McCubbin, 1996).

Although the FAAR Model made use of various resilience factors that assists families to adapt and buffer from adversity, Walsh (2003) further developed a family resilience framework that incorporates characteristics that contributes to family resilience. These factors are understood as resilience resources and includes similar aspects of the Resiliency Model of Family Stress, Adjustment and Adaptation by McCubbin and McCubbin (1996).

#### **2.4.4. Walsh's Family Resilience Framework**

Walsh's (1996, 1998, 2006, 2012a) family resilience framework recognises the family as a functional unit (or having the potential to be more functional) as opposed to individual members as potential sources of resilience and centres on the risk and protective factors in the family as a whole. This framework represents a conceptual map for practitioners to ascertain 'key family processes' that aims to overcome adversities, reduce stress and foster healing (Walsh, 2012a). The family resilience theory has been approached systematically by Walsh through the concept of relational resilience (Simon et al., 2005). Relational resilience is understood by Walsh as the family processes that ascribes meanings to the families' varied adversity they experience (Walsh, 2006). The family resilience framework is embedded in the ecological and developmental theories as it provides a means to observe family functioning relative to its broader socio-cultural



context and the multigenerational stages (Becvar, 2015). The family resilience framework functions as a theoretical map that outlines key family processes that reduce vulnerability and stress. It further affords ways that allow room for family empowerment through the process of healing and growth (Walsh, 2003).

As such, Walsh's framework of family resilience relates to previous research which defined family resilience in general terms using three distinct and interrelated factors such as: the individual, family and community (Benzies & Mychasiuk, 2009; Coyle et al., 2009; Greeff, Vansteenwegen & Ide, 2006; Kalil, 2003). Research on the individual level of protective factors relates to traits of individuals in families, which includes coping skills and a sense of optimism (Black & Lobo, 2008; Patterson, 2002). Family research that takes protective factors of the family into account, highlights mutual support within the family and family cohesion as well as having a strong relationship between the parent and child (Greeff et al., 2006). The community is seen as another protective factor for people as it can aid them in access to resources and support as well as having a sense of belonging, forming strong social networks with others (Greeff et al., 2006; Kalil, 2003; Oswald, 2002; Patterson, 2002).

Walsh (2006) further conceptualised the family resilience framework as a process that utilises adversity in order to strengthen transformative personal and relational growth. With the aforementioned in mind, the family resilience framework recognises "parental strengths, family dynamics, interrelationships and the social milieu" as protective factors (Black & Lobo, 2008, p. 36). Respectively, the family resilience framework provides a positive and pragmatic framework that acts as a map to identify and target 'key family processes' (Walsh, 2006). The key family processes reduce stress and vulnerability through times of crises as well as foster healing and growth and empower families to overcome adversities (Walsh, 2012a).

Strengthening key family processes for families facing adversities allows them to emerge stronger and resourceful. This can enable families to develop new insights and abilities that could serve as a protective factor for future challenges they may encounter (Ungar, 2012). How families view challenging situations and possible solutions towards it, may change families from being dysfunctional and in despair to coping and being adaptable to unfavourable circumstances (Walsh, 2006).

The family resilience framework is a strength-based approach as it considers "family stresses and challenges not as damaging but rather as opportunities for fostering healing and growth"

(Black & Lobo, 2008, p. 36). The key processes for resilience is highlighted in three domains of family functioning, this includes three overarching constructs which are: *Family Belief System*, *Organisation Patterns Processes* and, *Communication/Problem Solving*. These constructs are comprised of their own dimensions. Family beliefs systems is comprised of- *making meaning of adversity, maintaining a positive outlook and transcendence and spirituality*; Organisation Processes is comprised of- *flexibility, connectedness* as well as *social and economic resources* and lastly; Communication/Problem solving comprises of –*clear, consistent messages, open emotional expression and collaborative problem solving* (Walsh, 2012a).

#### **2.3.4.1. The Family Resilience Constructs**

As noted above, these three overarching constructs involve dynamic processes including various strengths and resources that aid families to foster resilience in diverse ways through their different values, resources, challenges and aims (Walsh, 2012a).

The first overarching construct is the *family belief systems* that revolve around the families “shared construction of reality” (Walsh, 2012a, p. 407) which increases family functioning. The family’s beliefs are the very heart of who they are and how they make sense of their world. Beliefs provides families with a clear vision, of what they stand for. Belief systems in families “encompass values, convictions, attitudes, biases and assumptions” (Walsh, 2006, p. 50) in which all form a basic set of premises of reality. Affirming these beliefs may inform decisions and guide actions such as aiding individuals to resolve problems and offering them a sense of healing and growth. However, constraining these beliefs may restrict individuals on ways of coping with challenging circumstances. Beliefs systems further relates to shared ideas and knowledge that contributes to what the family experiences and how these beliefs are communicated, maintained and shared through the family and their sense of identity (Power et al., 2016). Walsh (2012a) thus provides three sub-constructs for family beliefs systems, which are: *make meaning of adversity, maintaining a positive outlook and transcendence and spirituality*. These are explained below.

*Making meaning of adversity*: this belief system is established through means of normalising and contextualising family distress (Walsh, 2003). Families’ function best when they gain a shared sense of coherence that helps them achieve clarity on the nature and source of the problem (Walsh, 2003; 2012a). Understanding adversities experienced by family members can provide other family members confidence and courage to support the family member. Making sense of challenging circumstances such as illnesses, death of a family member, divorce, substance abuse

or unemployment may aid the family in ways to better approach and mutually cope with the circumstances together (Coyle et al., 2009; Walsh, 2006).

*Maintaining a positive outlook:* this belief system encompasses perseverance in families who acquire a shared sense of confidence as well as having an optimistic view towards life, despite facing challenging situations (Walsh, 2012a). It involves having hope and is future-orientated which stresses that challenging situations can potentially be overcome with the belief of having a better future in mind (Patterson, 2002). In the midst of devastating situations such as loss of a loved one, loss of employment or experiencing divorce, a family who relentlessly searches for solutions assists them in successfully building more confidence to overcome troubled circumstances. This may bring families closer and encourage each other to work through it holistically (Walsh, 2006).

*Transcendence and spirituality:* this includes the discovery of strength and guidance in adversity through practices that provides meaning (Walsh, 2012a). Having a sense of purpose and discovering a connection towards the meaning of one's life offers individuals a place for comfort and growth (Benzies & Mychasiuk, 2008). A sense of transcendence can therefore aid families to gain clear consciousness and solace when they are in distress (Walsh, 2006). Spirituality however, involves active investments that connects one to others (Benzies & Mychasiuk, 2008). This includes a belief in a supreme power and firmly following a set of values in which one believes. Holy and mystical experiences provide a space for families to cope, heal, build and positively overcome challenging circumstances (Walsh, 2006). Religious and spiritual beliefs can offer a general sense of well-being and wholeness. This belief system is not only limited to religion and spirituality, as it involves a family's set of beliefs as a functional whole (Power et al., 2016).

The second overarching construct is the *family organisational patterns*, where families need to provide a sense of structure in order to achieve adaption of the family as a whole (Walsh, 2006). To successfully deal with adversity, families need to mobilise and organise resources to fit various situations (Patterson, 2002). The family who maintains external and internal norms through their cultural or belief systems does this. Families gain a specific pattern through mutual expectations and habit of family members such as rituals and routines (Walsh, 2012a). Families who organise and, perhaps even more importantly, reorganise their resources (internal or external) can aid them to create existing strategies to face adversities (Simon et al., 2005; Walsh, 2006). The three sub-constructs for family organisational patterns that can provide effective

family functioning during crises are adaptability: flexibility and stability, connectedness and social and economic resources.

*Adaptability: flexibility and stability:* this pattern involves families' willingness to be adaptive to change and counterbalance disruptive situations to bring back stability or gain new levels of adaptability. Being flexible introduces families to unique strategies and solutions to better cope with pressured situations (Patterson, 2002). The ability to adjust to difficult situations—both normative and non-normative situations in life—allows families to balance out stability and change that reinforce family structures to function in a progressive manner (Patterson, 2002; Walsh, 2012a). This denotes the key element to evolve together as a family. Structural arrangements in families are often sought through those who are regarded as the head of the household and lead the house (Walsh, 2006). Families with authoritative leadership improve family functioning as a whole through facilitating rules and routines which sets standards that benefit and facilitate growth towards family members (Bhana & Bachoo, 2011; Walsh, 2012a).

*Connectedness:* prolonged exposure to stressors can negatively affect family cohesion, resulting in family members feeling as if they cannot be relied upon and unable to rely on others, therefore distancing family members from each other (Ungar, 2012). This brings forth the importance of family connectedness, as it involves family cohesion including emotional and structural bonding amongst family as a whole (Walsh, 2006). Family functioning increases when there is a balance between closeness, mutual support and commitment (Walsh, 2006; Ungar, 2012). However, it is essential to respect boundaries and reach mutual respect and understanding amongst family members as within all families there are individual differences amongst each family member that are firm yet flexible at the same time (Walsh, 2006).

*Social and economic resources:* this elaborates on economic and social supports which are essential factors to enhance family functioning (Walsh, 2006). Families need social and economic resources including supportive social networks as well as institutional structures and programs (Walsh, 2012a). Social linkages such as work colleagues, friends, neighbours, church, teachers or mentors can provide support and companionship in times of crisis and enforce a sense of security and solidarity (Bhana & Bachoo, 2011; Simon et al., 2005; Power et al., 2016). These groups offer a space for individuals to reach out and ask for assistance during stressful circumstances such as financial assistance and support. The availability and use of support systems can increase positive outcomes namely perseverance, hope, education and companionship (Black & Lobo, 2008). Similarly, support groups such as programs that aims to

empower and encourage individuals undergoing crisis can offer a place for family members to successfully overcome adverse situations through means of providing mutual comfort and advice (Walsh, 2006).

The third and last overarching construct is *communication processes* wherein communication is essential amongst families. This involves the transmission of beliefs, problem solving and expressions of emotions (Walsh, 2006). Verbal or non-verbal communication conveys particular messages such as opinions or feelings. It is essential to understand how family members respond to these messages, through expressing their concerns, listening attentively to others and showing empathy (Black & Lobo, 2008). This helps families reach mutual understanding and become a unit in overcoming stressful situations (Walsh, 2006). Good family communication can positively promote family functioning as it allows families to openly discuss their needs and concerns as well as compromise on particular challenges within the family structure (Black & Lobo, 2008; Simon et al., 2005; Power et al., 2016). The three sub-constructs for communication processes that can promote family functioning are clear information, emotional expression and pleasurable interaction as well as collaborative problem solving and preparedness.

*Clear information:* clear and congruent messages increases family functioning as they share their understanding of the truth and openness aids families to become closer (Walsh, 2006). It is important to consider the key element of being straightforward, in that family members convey exactly what they think and feel (Black & Lobo, 2008). During adverse circumstances, it is vital that all members in the family clarify the situation to facilitate mutual understanding and possibly reach mutual expectations and solutions towards the situation (Walsh, 2006). However, vague or ambiguous messages can result in confusion, denial or secrecy amongst families, decreasing chance of family functioning (Black & Lobo, 2008). This can result in family members reaching different understandings and conclusions in challenging situations. Consequently, unspoken tensions can become damaging to family structures as members could misinterpret the situation (Walsh, 2006).

*Emotional expression and pleasurable interaction:* this accentuates open emotional expression that enhances family coping and positive adaption in life (Walsh, 2006). Emotional expression can provide families a safe haven to communicate feelings including creating space to share pleasurable experiences amongst families as a whole (Power et al., 2016; Walsh, 2012a). This is developed through forming significant relationships with others (Power et al., 2016). Although well-functioning families may under- or over- emotionally express themselves without

causing family dysfunction, family members can be sensitive to emotional expression. Considering this, it is significant to consider cultural differences of how family members express themselves emotionally. In certain cultures, men and women have unique and diverse ways of expressing love, comfort and support (Walsh, 2006).

*Collaborative problem solving and preparedness:* this constitutes the families' ability to collaboratively resolve problems and manage conflicts or persistent challenges to improve family functioning (Walsh, 2006). Sources of stress may exist generally by expectations the family has. A family's ability as a unit to generate solutions and discover new resources to manage challenging situations may be the cornerstone of building protective mechanisms (Patterson, 2002). Collaborative brainstorming amongst family members allows the family to identify the problem and consider possible solutions and constraints that may occur. Families may share creative ideas and make use of available resources in which encourages families to create new solutions to stressors (Patterson, 2002). This signifies the importance of having a set plan on how to manage a problem such as to "identify, act, monitor and then evaluate" the family's success (Walsh, 2006, p. 116). This therefore reinforces that effective problem solving facilitates a proactive stance and help families to consider possible future challenges (Walsh, 2012a).

Considering each key family process, it is evident that Walsh (2006) emphasises family process over family structure. This denotes that it focuses on how families process or even practice resilience versus how they appear in comparison to others. Family resilience in this regard, allows it to be applicable to all families, not only those representing a particular structure or definition. Conversely, South Africa has a number of unique circumstances that affect the structure and socio-economic situations of families (Rabe & Naidoo, 2015). Acknowledging the multicultural nature of South African society, there are, diverse family structures and no single definition of 'family' can be seen as all-inclusive to cover the diverse types of families in South Africa (White Paper on Families in South Africa, 2012). Moreover, different types of families in South Africa can include three-generation household, absent-spouse, single-parent and child headed household (Holborn & Eddy, 2011). Historic factors such as apartheid has contributed to the socio-economic conditions in the country including poverty and inequality (Visser & Moleko, 2012). Consequently, the prevalence of unemployment and financial constraints has influenced the family structure such as absentee fathers and female headed households (Rabe & Naidoo, 2015). Similarly, a key issue of HIV/AIDs epidemic is the death of parents and the increase in orphans, which in turn affects the family structure (White Paper on Families in South Africa,

2012). Furthermore, families may seek help during crisis periods, the distress and differences against norms these families face are promptly assumed as a sign of family pathology. However, the growth and complexity of diverse families in South Africa cautions the notion of pathologising these families (Rabe & Naidoo, 2015; Walsh, 2006).

Walsh (2016a) further stressed the importance that the key processes in family resilience should not be seen as a typology or fixed set of traits of what is considered to be a 'resilient family'. These key processes are thus seen as the family's strength and their access to resources that can increase family resilience. As the family resilience perspective extends the ecological and developmental perspectives, the theory entails a multilevel perspective (Walsh, 2016a). This allows the family resilience framework to consider the cultural, spiritual, political and economic influences in which families may or may not thrive in. In addition, broader social networks such as immediate and extended family groups, peer groups, work and community networks are taken into account. Although conversely, this does not emphasise upon a given ideal set of family structure as these key processes are invariably diverse amongst each family. In South Africa the majority of stressful situations families experience are not simply a short term, single stimulus (Asay, DeFrain, Metzger & Moyer, 2014; DeFrain & Asay, 2007). More specifically, within rural areas, families are faced with socioeconomic challenges such as poverty, unemployment, vulnerability, poor health and isolation (Asay et al., 2014; DeFrain & Asay, 2007). Evidently, these stressful situations are therefore a complex set of changing conditions including a past history and future course (White Paper on Families in South Africa, 2012). Given this understanding, no single coping or adaptive response may successfully serve well at addressing both present and future challenges. This, in addition emphasises that factors such as age, gender, level of education and employment can notably affect family processes as it contributes to levels of resilience, family functioning, developmental and situational crises (Becvar, 2015; Sixbey, 2005; Walsh, 2016a). Moreover, this essentially enforces the significance of having a variety of coping strategies, including the ability to identify solutions that may address emerging challenges.

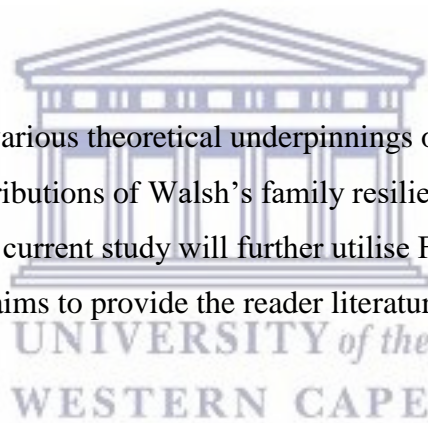
Fundamentally, as the family resilience theory incorporates a systemic, developmental and ecological perspective, its flexibility can be seen as both a strength and weakness (Walsh, 2012a). The strength is that it can accommodate families from a variety of contexts; this implies that the functioning of families are assessed in context. This may include families in rural communities as family functioning is assessed to each family's life challenges, values and

structural and relational resources (Walsh, 2016a). This takes into account that the family resilience framework can be applied in a wide range of adverse situations, disruptive transitions and multi-stressed conditions (Walsh, 2016a).

Resilient families consequently respond to adverse conditions in unique ways. The current study further relies on the perceptions and experiences of families within a rural community who is isolated from bigger cities. This may further influence the interactive combination of the family's shared outlook of risk and protective resources as well as what constitutes healthy family functioning. Although the family resilience framework is grounded in all families having the potential to be resilient and achieve positive growth through adverse situations, families evolve over the years and across generations (Walsh, 2016a). Thus, there may not be an ideal model that could measure up to most families, therefore a weakness to the family resilience perspective is that this makes it challenging to research, as families can be diverse and complex (Walsh, 2012a).

## **2.5. Chapter Conclusion**

The chapter explored the various theoretical underpinnings of family resilience, this chapter further provided detailed contributions of Walsh's family resilience towards family functioning, ultimately supporting why the current study will further utilise Froma Walsh's family resilience framework. The next chapter aims to provide the reader literature concerning family resilience.





## CHAPTER 3

### Literature Review

#### 3.1. Introduction

The purpose of this literature review is to discuss various factors that affects family resilience in the South African context. The review will further reflect on the study's objectives, which concerns people's age, gender, employment status and level of education and how this may contribute to family resilience. Through the review, studies will be identified that contributed to family resilience and will be critically engaged as a means to contribute to the later discussion, identify gaps in the research as well as to aid future research.

#### 3.2. Empirical Research of Family Resilience

Stressful life events, specifically those that have chronic hardships can negatively affect the family and often lead to reorganisation in the family's level of functioning. A key aspect in this reorganisation is set on the meaning a family provides to the stressful event (Patterson & Garwick, 1994). A major factor in family resilience research is the meanings attached to the crisis experienced by families, the meanings further influences view of the world within the family system. However, the model specifically accounts for the protective role of resilience in families than specifying the attributes of resilience.

Conversely, Conger and Conger (2002) theorised family resilience as processes that advances over time in response to a specified context and stage of development within the family. Indicators of a family being resilient, was correspondingly viewed as having close and supportive family relationship as well as having a strong marital relationship. In addition, Seccombe (2002) identified resilient families has having clear expectations for their children and routines as well as having a shared sense of values. Research on family resilience contributes to understanding resilience by fundamentally distinguishing families who utilises their strengths in order to gain successful outcomes from those with less successful outcomes. This further unpacks why some families are more resilient than others, more specifically those that have the ability to overcome personal and relational challenges. Common factors that promotes positive outcomes includes positive communication, problem solving and conflict management, companionship, cohesion around values and social support (Benzies & Mychasiuk, 2008; Black & Lobo, 2008). The overall conceptualisations of family resilience and the associated factors that aids in successful outcomes further allows researchers to identify essential characteristics and processes of family

relations. In effect, the majority of family resilience studies primarily focuses on identifying and applying key components of family resilience that can strengthen resilience in families facing adverse situations (Becvar, 2015; Bhana & Bachoo, 2011; Black & Lobo, 2008; Ungar, 2012; Walsh, 2006; Walsh, 2012a).

In support to Walsh's family resilience perspective that emphasizes the effect of family than individual resilience, Simon and colleagues (2005) stressed that family resilience is a result of the interaction between the characteristics of the family and of the individuals within the family opposed to it being a sum of the resilient characteristics of individual members. Simon and colleagues (2005) underlined three dimensions that are generally identified as the key components of family resilience.

The first dimension takes into account the length of adversity encountered by the family, which can be distinguished between challenge (short-term), and crisis (long-term) adversities that requires adaption or adjustments from the family. The second dimension highlights the life stage during which the family is faced with a challenge or crisis, this emphasises that a family's life stage may influence the way a family may respond to adverse circumstances. Lastly, the third dimension considers the internal or external sources of support a family utilises during times of a challenge or a crisis wherein some families rely mainly on their inherent strength among close family members and other families may seek support from extended family, friends or communities. In addition, the literature takes the systems theory of family resilience into account, as such; the individual is understood in context of the family and the social world they are a part of. Therefore, resilience is viewed as a system thus, families have the capacity for resilience when strengths and resources are identified and enforced (Simon et al., 2005). These nuances in the family resilience literature also corresponds to Walsh's (2006) key processes that takes the family's beliefs systems, organisational patterns and communication processes into account as resources that can strengthen the family and forge through adversity.

Similarly, studies conducted on family resilience can be understood on a variety of key concepts, specifically risk and protective factors (Benzies & Mychasiuk, 2008; Becvar, 2015). Benzies and Mychasiuk (2008) argued that family resilience is built upon complex interactions between risk factors (circumstances that increase the likelihood of poor outcomes) and protective factors (factors that adjust families' responses to adverse events to avoid negative outcomes) that can function at a family level. These factors will interdependently impact on each other to render

family resilience ranging on a scale of which the family may be coping well or not coping at all. Although Walsh (2006) identified nine family resilient processes which are further classified under *family beliefs systems, organisation patterns and communications processes, communication/problem* (Walsh, 2012a), there are many factors which can influence these processes. However, despite the aforementioned key concepts in relation to family resilience, it is imperative that these concepts simultaneously reflect on how the ‘family’ itself has been defined. Despite international studies that have conducted a range of studies on family resilience, South African families evolved from the typical nuclear family (White papers on Families in South Africa, 2012).

### **3.3. Families in South Africa**

As noted in chapter one, the state of family functioning in South Africa is affected by various circumstances that not only influence on their family structure, but further extends to families socioeconomic and relational dimensions (Roman, Isaacs, Davids, Sui, 2016). In addition, Distelberg and Taylor (2015) stipulates that poverty is further associated with risk factors such as prevalence in neighbourhood crimes, increase in population density, poor community living conditions and resources. The socio-economic circumstances extends to under-resourced environments that are limited to providing the needs of families (Roman, Isaacs, Davids, Sui, 2016). The adversities experienced by families living in poverty are exacerbated by stressors associated with a weakened economic context (Distelberg & Taylor, 2015). Othner, Jones-Senpei and Williamson (2004, p. 160) argued that economic vulnerability impacts on family functioning, as the head of the household experience an increase in stress concerning their employment status and the inability to provide children the benefits associated with earning an income.

Budlender and Lund (2011, p. 926) stressed that the socio-economic state of the country has “resulted in a situation in which many women have to fulfil the role of both breadwinner and care giver in challenging circumstances of high unemployment and limited economic opportunities”. Evidently, South Africa has many single-parent households. The HIV/AIDs pandemic has largely affected South African families, not only has HIV/AIDs affected the family’s well-being but the family has progressed into unique family structures (White papers on Families in South Africa, 2012). Amongst single parent households, the White Papers on Families in South (2012) now extends South African households to female-headed

households, skip generation households, child-headed households, same sex parent household, polygynous families as well as migrant families. Notably, the HIV/AIDs prevalence and migration in the country has influenced in an increase trend to the proportion of absent, living fathers in South Africa. Intricately, the increase in absent fathers has broadly been associated with historical, social, economic and cultural setting (Holbron & Eddy, 2011). Specifically, the spread on father absenteeism has been affected by ideological factors encompassing masculinity, poverty and unemployment, cultural factors, relationship failures and various types of dynamics between couples, especially related to communication.

International studies conducted by the Human Sciences Research Council (HSRC) on the effect of fathers have on their children's development puts forward that a father's presence significantly contributes to cognitive development, intellectual functioning and school achievement. Holborn and Eddy (2011) stipulated that the influence father's have on their children are directed towards "children's educational level or length of time spent in school, educational achievement, self-confidence, especially amongst girls, as well as adjustment and behaviour control among boys" (p. 4). Conversely, a father's absenteeism increases the likelihood of children experiencing emotional disturbance and depression which may in turn influence risky behaviours amongst adolescence (Holborn & Eddy, 2011). Essentially, this highlights that the family environment children may live in is considered a key predictor of their development. Strengthening family households within South Africa requires the family to utilise their protective factors such as family communication and family support.

### **3.3. Factors Affecting Family Resilience**

Although families experience adverse situations, some are however able to utilise their resources to overcome the challenges they may face. These resources are broadly identified as key protective factors which overall increase family functioning. For example, in a systematic review, Benzies and Mychasiuk (2008) identified nine key family protective factors namely: family structure, intimate partner relationship stability, family cohesion, supportive parent-child interaction, stimulating environment, social support, family of origin influences, stable and adequate income, and adequate housing. Although these protective factors may buffer adversity, the study however highlights the difficulty in predicting its relative importance of protective factors as both risk factors and protective factors can produce diverse outcomes for a family across different stages of their lives. Therefore, several family resilience researchers

acknowledged that resilience is a multi-dimensional construct (Simon et al., 2005; Ungar, 2015; Walsh, 2006) involving families and other systems in complex and challenging environments that aids a family's capacity to cope with hardship over time (Ungar, 2015). Within the context of adversity, a family's well-being is dependent on two key factors: first, how well the family as a system utilises resources to help sustain functioning and growth, second, how well other systems change to address the needs of families (Ungar, 2015).

Publications relating to family resilience and protective factors are diverse in nature and various concepts and topics have been explored, however there are still a limit of family resilience studies that have been explored within South African context. Family resilience studies range from families who have a child diagnosed with a disorder or family member with a mental illness (Greef & Van der Walt, 2010; Plumb, 2011; Power et al., 2016), families confronted with chronic illness (Walsh, 2016b; West, Usher & Foster, 2011) as well as parents who suffer from depression (Riley et al., 2008) or addiction (alcoholism or drug use) (Coyle et al., 2009). The findings of the studies suggests that families who have good family cohesion, communication and optimism, problem solving techniques as well as beliefs and values can significantly increase resilience levels within the family. Enforcing these protective factors can further assist family members to make use of the necessary resources that adopts new coping strategies under stressful conditions (Benzies & Mychasiuk 2008; Bhana & Bachoo, 2011; Patterson, 2002; Walsh, 2006). However, considering social factors, these protective factors alone may not be the only factors that can contribute to family resilience (Distelberg & Taylor, 2013). Other factors can contribute to what a family regard as their strength and resourcefulness.

Some studies found that other factors might interact with the aforementioned protective factors. For example, Distelberg and Taylor (2013) examined the roles of social support and family resilience in accessing healthcare and employment resources among families living in traditional public housing communities. Distelberg and Taylor (2013) suggest that social support on its own is not seen as the only protective factor that may increase family resilience. As their findings associated social support with health and employment resources. The study found that the residents who extended their social support systems from outside of their communities as a means to increase their access to resources, were regarded as more resilient than others. Moreover, researchers have further explored socio-economic status, demographic and environmental factors as a means to identify protective factors (Stiel, Estrella, Wang & Distelberg, 2014).

A study conducted by Stiel and colleagues (2014) utilised the family resilience perspective in order to examine the factors that contribute to increased socioeconomic mobility. The sample included 411 families situated in the San Bernardino County, Housing and Urban Development (HUD) district. A discriminant function analysis (DFA) was used to explore whether employment status within the family is influenced by various demographic and family resilience concepts. The results showed that the households who were more likely to be fully employed came from families who had a) a head of household who is married or living with a partner, b) those families who have greater levels of social support and c) families who have a better sense of problem-solving communication skills. These findings contribute to the current literature on factors promoting family resilience. It also further shows that a strong predictor of families' resilience is employment status.

Similarly, Boylu, Çopur and Öztop (2013) explored the factors that affect family functioning in 551 married employees with children from Turkey. Boylu et al. (2013) found that higher levels of education, working less hours per week and having a working spouse all positively contributed to increased levels of family functioning. More specifically, income further positively correlated to family functioning, as a result this suggests that income levels are seen as a significant protective resource for families.

In relation to income status and family functioning, Rawatlal and colleagues (2015) further investigated the associations between household income and parental education as indicators of socioeconomic status (SES) and family structure. The study further investigated the adolescent's relationship with their caregiver as well as their adolescent-perceived support from caregivers. The study's sample included 206 families who were identified as coming from low socioeconomic status (SES) communities in Durban, South Africa. Fifty-six percent (56%) of the study's sample reported to receive a stable income, conversely, two-thirds earned less than R5000 per month and over a third of the sample reported being unemployed. The study used a series of regression analysis including predictor variables such as: household income, parental education and family structures to assess the associations with adolescent-and-parent-reported family functioning. The results showed that higher income households were associated with less anxious attachment relationships between adolescents and their parents. Rawatlal et al. (2015) further argued that "persistent financial hardship causes parents to become highly pressured, limiting their ability to provide consistent, responsive, and sensitive parenting, ultimately influencing the family functioning"

(p. 559). As participants in this study were identified as families who are financially disadvantaged, the results showed that less financially stable families were associated with higher levels of stress compared to those who were more financially stable. Furthermore, higher maternal education was associated with higher levels of perceived support. Evidently, increased levels of maternal support in families were found to be associated with higher levels of maternal education.

Rawatlal et al. (2015) stipulates that higher levels of maternal education can positively affect the relationship between parents and children including contributing factors such as increased levels of closeness, feelings of support despite having a low income status. These results are consistent with Zhang (2012) and Hoff, Lauren and Tardif (2002) studies and further supports that level of maternal education significantly predict positive parenting and closeness between mother-child and father-child relationships. Accordingly, maternal education is seen as a significant protective factor that buffer against adversity more specifically, families who are at a financial disadvantage (Rawatlal et al., 2015). This suggests that income and education further affects family functioning, family relationships and adolescent adjustment in diverse ways (Conger & Donnellan, 2007).

However, it is essential to note that other factors can contribute to resilience. Bonanno, Galea, Bucciarelli and Vlahov (2007) further found that socio-contextual variables could inform resilient outcomes after experiencing a traumatic event. There is a variety of evidence that suggests most people exposed to traumatic events are resilient. Evidently, Bonanno and colleagues (2007) further explored the associations between resilience and a variety of socio-contextual factors, which included demographics, the availability of social and material resources or the loss of resources and past and current life stressors in an aftermath of a disaster. The participants of the study made up 2,752 of New York City residents six month after the September 11, 2001 terrorist attack. In light of this, Banonno et al. (2007) defined resilience in their study as people having “one or zero posttraumatic symptoms and as being associated with low levels of depression and substance use” (p. 671). The results of the multivariate analysis indicated that resilience levels were significantly predicated by participants gender, age, race, ethnicity and education levels, less income loss, social support, absence of depression and substance use and fewer chronic diseases and less recent life stressors as well as less direct impact of September 11 terrorist attack. Findings of the study’s demographic variables reported that females showed a reduced likelihood of

resilience levels. Moreover, participants over 65 years of age were found to be more resilient as they did not experience any posttraumatic stress disorder compared to participants' age 18 to 24 years of age. Another finding in the study found that higher levels of education such as participants who had a college degree was associated with an increase in resilience. In addition, the results revealed that people whose income decreased in the aftermath of the September 11, 2001 attack were less likely to be resilient compared to participants who's income did not significantly decrease. A limitation of the study identified the definition of resilience as restricting the findings, thus limiting generalisability.

Studies reviewed above further supports that financial stability (such as stable employment and educational background) is an important predictor of a healthy family adaptation and functioning as it establishes the family's resourcefulness and capacity to control and support family members through adversity (Bhana & Bachoo, 2011). However, the studies on family functioning and financial stability are context specific and vary in relation to the crisis as well as with age and gender (Ungar, 2015). This further suggests that at the time research has been conducted on families, the participant's perception of financial stability and nature of assessment (quantitative or qualitative) of the specific topic should be taken into account. Conversely, all previous studies discussed above supports the notion that the key to resilience is mutually interactive and synergistic (Walsh, 2012a). This implies that family belief patterns such as making meaning of adversity and maintaining a positive outlook supports the family and is reinforced through organisational patterns such as family connectedness as well as social economic resources and communication process such as family communication and problem solving (Sixbey, 2005; Walsh, 2012a). The review of literature on family resilience shows that processes that operate at the family level are a central means by which families manage to cope in the face of adversity. Broader networks of family involvement can assist families to cope with stress, in particular families with diverse family culture and structures.

An examination of the studies suggests that demographic variables of families would therefore be a significant factor in strengthening family functioning (Sixbey, 2005). Reviewing literature, revealed that family resilience studies are diverse in context (Simon et al., 2005). This suggests that different context of family resilience studies provides different outcomes of families. Therefore, protective and risk factors may vary across families in association of how they overcome adversity (Simon et al., 2005). Age, gender, level of



education and employment status are variables that influence a variety of protective and risk factors among families, ultimately producing results unique to specific context of the study (Sixbey, 2005). Stiel and colleagues (2014) however argued that there are little research that explored the combined effects of socio-economic factors. Stiel et al. (2014) further stipulates that “when studies do explore these factors, they are limited in scope by ecological level (individual versus family versus community)” (p. 762). Demographic factors of the family are further influenced by the family environment. In addition, studies further focused on one specific concept, such as social support and focus less or excludes other closely related concepts such as family cohesion and adaptability (Stiel et al., 2014). This has made most findings challenging to generalise, representing only specific groups of families, thus limiting it down to only families facing specific adverse circumstances.

### **3.4. Implications of a Family Resilience Perspective**

Based on the review of the family resilience frameworks and empirical literature, there are a number of implications for the theory. Firstly, variations of the definitions and terminology of ‘resilience’ in family resilience literature have been highlighted (Duncan-Lane, 2011). There have been indicators of little consensus regarding the definitions and increased variations in operationalisation and measurement of key construct (Duncan-Lane, 2011). Patterson (2002) argued that the variances of research on resilience and applications in practice has put forward diverse ways of defining resilience and establishing who is resilient, more specifically when a family is the unit of analysis. A key issue that may contribute to this issue is the different conceptualisation of resilience of practitioners and researchers. Secondly, practitioners makes use of this concept as an approach that emphasise on family strengths versus deficits, however researchers focused on the outcomes in order to make sense of families resilient behaviour (and individuals) when exposed to difficult circumstances. Patterson (2002) stipulated that there is “a lack of differentiation between a) resilience as an outcome, b) the characteristics or protective factors that contribute to families being resilient, c) the nature and extent of risk exposure and d) the process of resilience” (p. 349). Thirdly, family resilience is further built upon multifaceted interactions between risk and protective factors functioning at individual, family and community levels. Research on families stressed that families are present in dynamic environments and resilience evolves and changes accordingly to the exposure of risks and protective factors (Benzies & Mychasiuk, 2008). This puts forward that fostering family resilience does not merely involve determining whether a family is resilient, but comprises of how resilient these families are (Simon et al., 2005). Predictions regarding the significance of each protective factors have

often been challenging, as exposure to a variety of risk factors may result in diverse outcomes for a family at different stages of their lives. As such, protective factors can be beneficial to one family at one point in time and detrimental to another. This argues that protective factors should be assessed in context, given that this may influence upon their functioning (Benzies & Mychasiuk, 2008).

Lastly, these terms need to be taken into account within family resilience research. Such as terms used in models of resilience, in which researchers utilise concepts such as ‘protective’ or ‘vulnerability’ factors in various and inconsistent ways. However, taking Walsh’s framework into account, Walsh acknowledged that resilient or non-resilient dichotomy may impact society and its dominant discourses. By this, Walsh (2003) argues that “no single model fits all families or their situations” (p. 405). Significantly, research on family resilience should be sensitive regarding the given context of specific families. This illustrates that differences exist in risk factors of families from different geographical groups and race as well as how they experience and express family resilience (Becvar, 2015). Emphasis on family narratives and culture is thus essential to consider in family resilience studies (Walsh, 2006). Furthermore, reviewing of literature suggests that there is limited studies of family resilience conducted in South Africa. The gap thus emphasises the need to address each identified variable in context to rural communities in South Africa across each family’s shared outlook.

### **3.5. Chapter Conclusion**

The chapter discussed the empirical literature in line with family resilience and various factors contributing to higher levels of family functioning and resilience. A variety of studies supports that financial stability significantly contributes to increased levels of resilience. However, limitations of studies is expressed on account of how these studies defined key factors, restricting generalisations and noting how each articles is unique to its topic explored. The next chapter will present the method section of the study, focusing on the participants of the study and data collection.

## CHAPTER 4

### Method

#### 4.1. Introduction

This chapter focuses on the methodological considerations of the current study. The current study utilised secondary data, from a larger study that used a participatory action research approach to develop a contextually-based family resilience programme for families in a rural area on the West Coast in South Africa. In the initial phase of the study, the investigator assessed and explored family resilience in a rural community on the West Coast wherein it identified the various family resilience needs which was used as the outcomes for the family resilience programme. The focus of the current study however, is to explore the predictors of family resilience in an impoverished rural community in the Western Cape across age, gender, level of education and employment status. The study's instrumentation, sampling of participants, procedures and ethics from the larger study as applicable to the current study are discussed below. In addition, the current study's data analysis will use multiple regression as a data analysis technique and will be further discussed in this chapter.

#### 4.2. Research Design

Correlational research design is broadly used in studies that intends to determine relationships, including assessing consistency and predictions between variables (Lunenburg & Irby, 2008). This study focuses on correlational designs, which significantly tests the degree to which variables are related as well as the direction of the relationship between the variables (Hicks, 2009). When a significant relationship is found they variables are therefore correlated. The direction of the correlation between two variables can indicate either a positive (0 to +1) or negative (0 to -1) direction. This denotes that a positive direction implies that as the one variable increases then as do the correlated variable and a negative would then imply that as the one variable increase the correlated would then decrease (Lunenburg & Irby, 2008). By utilising this design, neither of the variables in the study's objectives is manipulated as found in experimental design, this further implies that with correlational design the relation. The current study's research design extends to regression and prediction, which aims to test how strong the correlation coefficients are to -1 or +1 in order to make better predictions (Field, 2009). Overall, the study used a quantitative approach in which the correlational analysis aimed to determine how family resilience (the predictor variable) predicts age, gender, levels of education and employment status (the independent variables).

### 4.3. Instrumentation

The instrument that was used to measure family resilience for the larger study was the Family Resilience Assessment Scale (FRAS) (Sixbey, 2005). The FRAS is a 54-item English-language questionnaire. The scale was used to assess the resilience needs of families using the following six dimensions: family communication and problem solving (FCPS), utilising social and economic resource (USER), maintaining a positive outlook (MPO), family connectedness (FC), family spirituality (FS) and the ability to make meaning of adversity (AMMA). The FRAS (Sixbey, 2005) has an internal consistency of  $\alpha = 0.96$ . Each of the following six resilience dimensions have a good internal consistency: FCPS,  $\alpha = 0.96$ , USER,  $\alpha = 0.85$ , MPO,  $\alpha = 0.86$ , FC,  $\alpha = 0.70$ , FS  $\alpha = 0.88$  and AMMA,  $\alpha = 0.74$  (Kaya & Arici, 2012). The responses for the FRAS scale was assessed using a Likert-scale, which is a 4-point scale ranging from 1='Strongly agree' to 4='Strongly disagree'. Widely used instruments that are well known, were tested and found to have good concurrent criterion validity and reliability with the FRAS are the Family Assessment Device 1 ( $\alpha = 0.91$ ), Family Assessment Device 2 ( $\alpha = 0.85$ ) and the Personal Meaning Index ( $\alpha = 0.85$ ) (Plumb, 2011). Higher scores illustrates high level of family resilience and lower scores puts forward that they have low level of resilience.

### 4.4. Sampling of Participants

The participants for the study were selected from a low socio-economic rural community situated in the Cederberg Municipal area along the West Coast of South Africa. According to Statistics South Africa (2012) there are approximately 6,120 people living in Lambert's Bay (with Afrikaans as the predominant language spoken by 85.3% of the population within the municipal region). The community displayed various levels of adversity such as high unemployment and substance abuse as well as having limited access to social resources. As previously mentioned the larger study worked within a participatory action research and therefore in collaboration with the local non-government organisation (NGO) which manages diverse social support services for the community. Data were collected via the door-to-door method using convenient sampling through the assistance of local fieldworkers with the data collection (n=656). The fieldworkers approached at least every second house within the community. The participants mostly identified themselves as married parents 41.8% followed by some identifying themselves as single mothers 28.5% and others as living with their family 9.6% and unmarried 8.7%. In the data collection of the study, 39.8% were male participants, 60.2% were female participants. The highest reported race identified by participants were coloured (n= 528) followed by white (n=104) and the lowest reported race were black (n=6) as well as mixed race

(n=3). Furthermore, 95% of the sample spoke Afrikaans as a first language followed by IsiXhosa speaking 0.6% and English speaking 0.3%. The highest reported family position in the study were mothers (n=223) followed by fathers (n=116) other high reported family position were sister (n=91) and brother (n=75). Taking the family position of participants into account, married parents (n=274) were the highest recorded statistics followed by single mothers (n=1867) and unmarried parents (n=57) other family position included participants who lived with their family (n=63) and single fathers (n=34). In addition, the age of the participants ranged from 18 to 80  $M=37.90$ ;  $SD=13.92$ .

#### **4.5. Procedure and Ethics**

After the adaptation process, ten individuals (six females and four males) were recruited by the NGO as fieldworkers. The fieldworkers comprised of the NGO staff and a group of volunteers, all of whom received training on the data collection protocol. The training included informing fieldworkers of the purpose of the study and discussing the concept of family resilience, the FRAS and ethics in research. Each fieldworker was provided with questionnaires and commenced data collection with a one-month deadline. Thereafter, the investigator of the larger study collected the questionnaires and arranged a debriefing with the fieldworkers. Questionnaires were coded, cleaned and captured by two data-captures. They also double-check the questionnaire with the database to ensure accuracy (Isaacs, Roman, Savahl & Sui, 2017).

The Senate Research Committee of the University of the Western Cape granted ethics approval for the larger study. Permission was also obtained with the developer of the FRAS to use the 54-item instrument. The training of fieldworkers included informing them of the ethical procedures that is fundamental in research. This incorporated training the fieldworkers to know informed consent, confidentiality and the participants' right to autonomy. Fieldworkers ensured that they explained the purpose of the project to each participant and that each participant signed the consent forms. Additionally the fieldworkers ensured that participants understood that they had the right to withdraw from the research process at any time without consequence. In light of any participants who experienced any form of discomfort during the research procedure, the fieldworkers referred and encouraged participants to consult the local NGO (who are equipped to manage individuals experiencing certain types of trauma).

As the study used secondary data, the principle investigator of the current study sought the right to privacy and permission to use this data. All ethics considerations have been taken into

account in order to protect the data. This ensured that the data would not be disseminated amongst other individuals thus safeguarding all data that has been collected from participants.

#### **4.6. The Data Source**

The larger study's data was captured by two data capturers and was then validated by the principle investigator. A missing data analysis has further been conducted in order to assess missing data across the larger study's variables. The little's MCAR test revealed that data is not missing completely at random (chi-square= 9347.85, DF= 6883, Sig= .000). However missing values were excluded after analysis.

In addition, one of the objectives of the larger study was to adapt the 54-item family resilience assessment scale into Afrikaans (FRAS-AV) and to further examine its psychometric properties (Isaacs et al., 2017). The larger study utilised an exploratory factor analysis and implemented a principal component analysis as well as a promax rotation on the FRAS-AV. The results showed that the six resilient dimensions of the Afrikaans FRAS version accounted for 62.09% of the variance. Following this, FCPS with thirty-one items on the scale on its own accounted for 43.28%. USER, accounted for 5.23% of the variance, with factor loadings of (0.43-0.86). FS, with four items however accounted for 3.5% with factor loadings of (0.74-0.86). FC, which was made up of four items on the FRAS-AV, accounted for 3.07% of the variance. AMMA, contained only two items on the scale and accounted for 2.56% of the variance, with high factor loadings (0.68-0.69). The results of the larger study identified a new resilient factor that replaced the MPO and was named as Family and Community Outlook. FCO further accounted for 4.45% of the variance having 4-items with high factor loadings of (0.74-0.86). After adapting the FRAS into the Afrikaans language, the 54-items of the FRAS was used in section B of the questionnaire, whilst section A made use of the biographical information concerning participants' age, gender, levels of education and employment status.

#### **4.7. Data Analysis**

Owing to the use of secondary data in the current study, the researcher utilised data collected from the larger study to conduct and analyse statistical tests using the Statistical Package for the Social Sciences (SPSS) version 24. Taking into account that multiple regression tests the relationship between a single outcome measure and several predictor variables; a multiple regression model was used for the current study. The multiple regression was used to test linear associations among variables as well as examine the relations among pairs of variables while

controlling for possible confounds and to test multiplex associations among multiple variables (Hair, Black, Babin & Anderson, 2014; Keith 2015). As the current study aimed to investigate the relationship between the correlates, namely age, gender, level of education and employment status and family resilience the aforementioned statistical technique can thus be considered appropriate to use on the basis that the current study aims to make predictions among multiple variables.

Keith (2015) stipulates an advantage of utilising regression methods opposed to methods such as ANOVA is that regression methods allows the researcher to use either categorical independent variables or continuous variables or both, whereas ANOVA requires categorical independent variables. Similarly, distinguishing between logistic regression models from a multiple regression model, the main difference is that the dependent variable is meant to be nonmetric. In logistic regression, unlike multiple regression, the nonmetric scale of the dependent variable includes variances in the estimation method and assumptions regarding the type of underlying distribution (Field, 2009). More specifically a logistic regression is more suitable to a situation when the assumption of linear regression is violated, as the outcome variable is categorical. Although a linear regression can further establish a single independent variable to predict a dependent measure, multiple regression, however allows one to predict the score on one variable based on the scores on several other variables (Field, 2009; Hair, Black, Babin & Anderson, 2010). An advantage of multiple regression, over simple regression is that it allows the researcher to control for other relevant variables by controlling for additional variables increases the variance explained for in the dependent variable. The overall purpose of a multiple regression is to establish an equation that best predicts the Y variables (dependent) as a linear function of the X variables (independent) (Field, 2009; Hair et al., 2010).

Hair and colleagues (2014) further highlight the application of multiple regression into two broad classes of research problems: prediction and explanation. Prediction “involves the extent to which the regression variate (one or more variables) can predict the dependent variable” and explanation “examines the regression coefficients (their magnitude, sign and statistical significance) for each independent variable and to develop a theoretical reason for the effects of the independent variables” (Hair et al., 2014, p. 165). Additionally, multiple regression allows provision for adaptability and flexibility as it represents a broad range of dependence relationships, three key features are thus taken into account namely: sample size, unique elements of the dependence relationship and the nature of the independent variables.

#### **4.8. Chapter Conclusion**

The chapter discussed the larger study's sampling of participants, procedures and ethics as applicable to the current study. The chapter further identified multiple regression as the statistical data analysis technique aimed to answer the research question. The following chapter aims to present the results of the study.





## CHAPTER 5

### Results

#### 5.1. Introduction

This chapter presents the results of the current study. The multiple regression key assumptions will be explored to assess whether the model is appropriate for the generalisation. Demographic information of the study will further be discussed followed by exploring the study's objectives in order to answer the research question through evaluating the results of multiple regression analysis.

#### 5.2. Multiple Regression Assumptions

Moreover, as the majority of the multivariate analysis techniques involve basic assumptions of normality and continuous data between independent and/or dependent variables; it is essential to take into account the following assumptions of multiple regression.

**Table 1: Assumptions summary of the multiple regression**

Assumptions	Analysis results
<b>1. Linearity</b>	This assumption was violated. Categorical variables as stipulated by (Field, 2009) may contribute to this violation.
<b>2. Homoscedasticity</b>	Assumption has been met
<b>3. Independence of errors</b>	Assumption has been met
<b>4. Normality</b>	This assumption was violated. A bootstrap analysis suggested by Field (2016) was further employed to address the normality assumption violation.
<b>5. No perfect multicollinearity</b>	Assumption has been met.

##### 5.2.1. Linearity

The linearity assumption defines the dependent (outcome) variable as a linear function of the independent (predictor) variables. This assumption recognises linear relationships and thus relates to the bias of the results regarding the entire analysis (Keith, 2006). The residual plots showing standardised residual versus the predicted values are useful in identifying violation in linearity. To test for linearity a scatterplot was produced. *Figure 2* therefore

shows a scatterplot between the regressions standardised residuals and the regression standardised predicted value. In *Figure 2* the points are presented in a clustering pattern which indicates a violation of the linearity assumption. This means that all the estimates of the regression such as regression coefficients, standard errors and tests on statistical significance may result in biased results, thus not reproducing the true population values (Keith, 2006). Not having a linear relationship between the dependent (FRAS total) and independent variables (age, gender, employment status and education) affect the results of the regression analysis to be under- or over- estimate the true relationship as well as increasing the risk of type I and type II errors. However, an indication as to the violation of this assumption is relative to the type of data utilised to conduct the multiple regression analysis. The dependent variables of the study (i.e. gender, employment status and education levels) was further identified as categorical variables. Field (2009) further states that when the variables (i.e. outcome or predictor) are categorical, as is in the current study, the linearity assumption is violated (p. 267). This may give an indication as to the violation of the linearity assumption in the current study.

### 5.2.2. Homoscedasticity

The homoscedasticity assumption requires each level of the predictor variables and the variance of the residual terms to be constant (Keith, 2006). This denotes that at each level of the predictor variables should have the same variance (homoscedasticity). When variances are unequal, there is heteroscedasticity. The assumption is violated when there is heteroscedasticity, which can lead to distortion of the findings, thus decreasing the statistical power of the analysis. Heteroscedasticity may increase the possibility of Type I error and can impact the F-test results of the study (Osborne & Waters, 2002). To test for homoscedasticity, a scatterplot of the standardised residuals by the regression standardised predicted value can thus be analysed (Field, 2009). *Figure 2* displays the scatterplot between the regressions standardised residuals and the regression standardised predicted value. *Figure 2* shows that the residuals plot has the points randomly distributed (with no pattern) and the distribution line is approximately straight. This indicates that the assumption of homoscedasticity has been met as *Figure 2* suggests that the points are randomly distributed with a mean of zero and no apparent curvature.

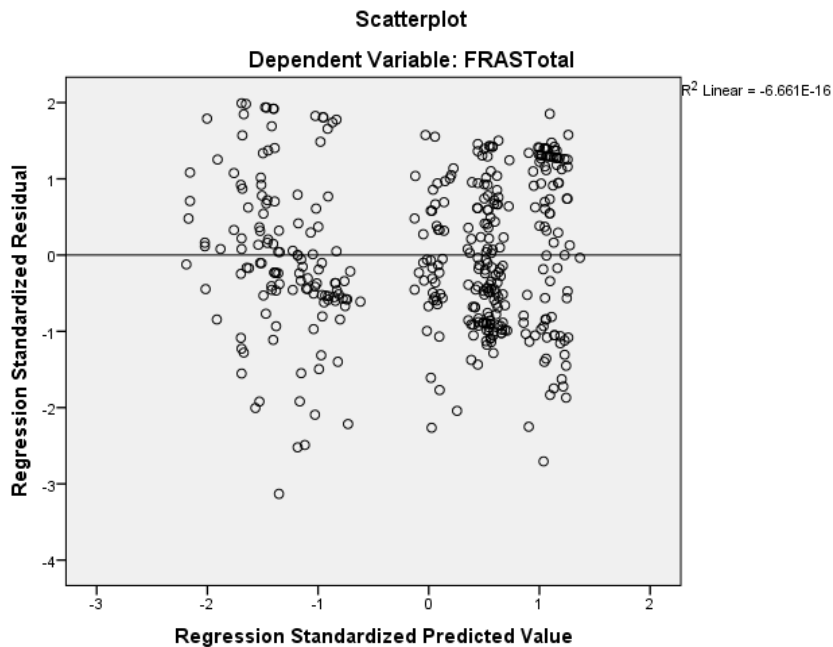


Figure 2: Scatterplot displaying the FRAS total

### 5.2.3. Independence of Error

The independence error assumption considers that the residuals should be uncorrelated (independent) for any two observations (Stevens, 2009). This implies that errors are independent of one another and suggests that participants are responding independently. Furthermore, this can essentially be describe as a lack of auto-correlation. The Durbin-Watson test can be used to test for independent errors assumption (Field, 2009). The Durbin-Watson statistic ranges in value from 0 to 4. Values closer to 2 indicates residuals are uncorrelated. The Durbin-Watson test, examines whether adjacent residuals are correlated. Table 2 represents an SPSS output of the Durbin-Watson statistic. The Durbin-Watson statistic display a value of 1.15 which is less than 2 indicating a positive correlation. This shows that the independence of error assumption has been met.

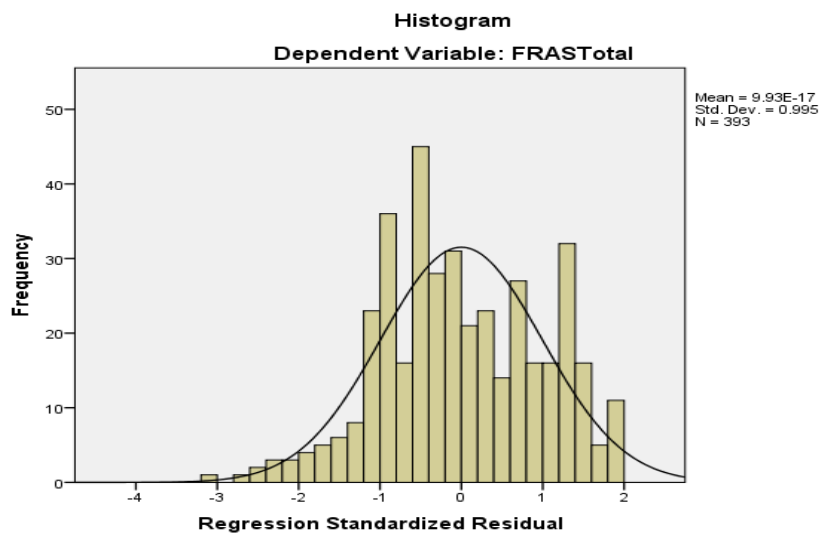
**Table 2: Multiple regression model summary representing the Durbin Watson Statistic**

Change statistics	
Durbin Watson	1.15

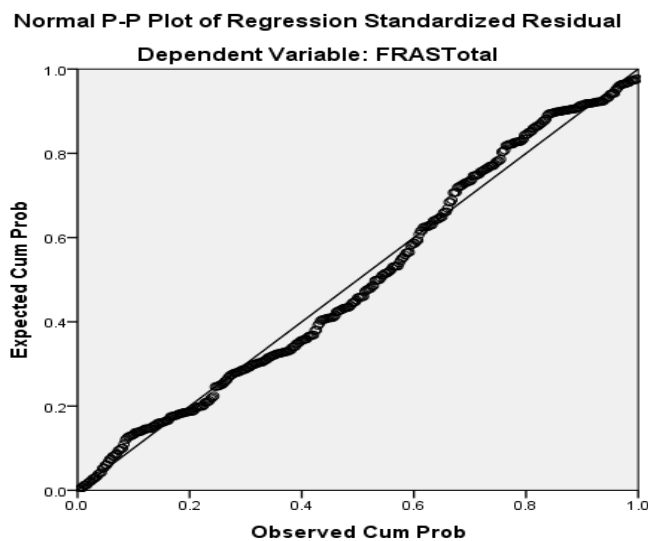
### 5.2.4. Normality

The normality assumption assumes that variables are normally distributed (Keith, 2006). This means that errors are normally distributed and that a plot of the values of the residuals will approximate a normal curve. As a result, the residuals in the model are random and normally distributed variables having a mean of 0. This puts forward that the differences between the model and observed data should relatively be close to zero. The test for

normality assumption usually involves an analysis of a histogram and a normal P-P plot (Field, 2009). *Figure 3* displays a histogram that represents the residuals of the FRAS, which reveals that it is negatively skewed and thus; does not represent a normal distribution. Furthermore, *Figure 4* displays a Normal P-P plot of regression standardised residuals of the FRAS total. This figure does not display a normal distribution as the scores are not running along the line. Thus, the normality assumption has not been met. Non-normally distributed variables can distort relationships and significance testing. In order to address this violation, Field (2016) suggests performing a bootstrap analysis, which would be an alternative to parametric estimates in order to address this violation. Bootstrapping was implemented on the data of the study by default the bootstrap was set on 1000 samples to ensure that the data generated accurate parameter estimates.



*Figure 3: Histogram displaying the residuals of the FRAS total*



*Figure 4: Normal P-P plot displaying the standardized residuals of the FRAS total*

### 5.2.5. No Perfect Multicollinearity

The relationship between two or more of the predictors should indicate no perfect linear relationship (Keith, 2006). In other words, no high correlation should be found between the predictor variables. In multiple regression, independent variables can be correlated to some degree as the regression model is designed for this (Field, 2009). Thus, the independent variables are more likely to correlate with the dependent variable (FRAS total) than with the other independent variables (gender, employment status, early, middle and late adulthood as well as primary, secondary and tertiary education). A way to test this assumption is through the analysis of the correlation matrix of the predictor variables including the correlations and collinearity statistics (Field, 2009). SPSS produces various collinearity statistics, two specific statistics to consider for this assumption is the variance inflation factor (VIF) and the tolerance statistics.

**Table 3: Coefficients summary of multiple regression tolerance and VIF statistic**

<b>Collinearity statistics</b>			
<b>Model</b>		<b>Tolerance</b>	<b>VIF</b>
<b>1</b>	<b>(Constant)</b>		
	<b>Gender</b>	.99	1.01
	<b>Age</b>	.969	1.03
	<b>Employment</b>	.982	1.02
	<b>Education</b>	.973	1.03

*Table 3* displays a SPSS output of the coefficients summary of multiple regression. It shows the tolerance levels and the variance inflation factor (VIF). The VIF represents the amount of each regression coefficient variance is increased over that with uncorrelated independent variables. Myers (1990) suggests that a VIF with a value of greater than 10 is problematic. When the average of the VIF values are more than 1, this denotes that the regression model may be biased by multicollinearity (Bowerman & O'Connell, 1990). The tolerance levels, further measures the influence of one independent variable on all other independent variables and ranges from zero (no independence) to one (completely independent) (Field, 2009). If the tolerance value is less than 0.1, it indicates a significant problem. A tolerance value of less than 0.2 indicates a possible problem. *Table 3* shows that the VIF values in the table are all below 10 and the tolerance statistics are all above 0.2. This indicates that the data does not display collinearity and that the assumption of no multicollinearity has been met.

### 5.3. Descriptive statistics

As descriptive statistics provides a summary of the study's variables, the following statistics displays the SPSS output regarding the frequency distribution of each of the variables, the percentage and missing values of the participants' demographic statistics. The multiple regression with bootstrap analysis descriptive table was not provided in reference to further defining each demographic variables as the following variables in the study were mostly categorical. The following statistics takes into account the categories of each variable that has been defined.

*Table 4* below shows the demographic statistics of the participants namely: their race, their spoken language, the family structure at home and their position within the family. Displayed in *Table 4*, the highest recoded race were identified as coloured, 80.5% similarly 95.1% of participants spoke Afrikaans. Across the family position and family structure statistics, mother (n=223), single mothers (n=187) as well as married parents (n=274) were the highest reported statics

In addition, *Table 5* (below) reported on the participants monthly income (n=267). The mean of the participants income was  $M=3910.35$ ;  $SD=5506.70$ . This denotes that the average earning income from participants were R3010.35. The maximum reported income was R40000. Consequently, the highest reported missing values across the demographic variables were found in monthly income (n=389). One disadvantage of face-to-face surveys is that participants may not be as open to answering sensitive questions (i.e. age and income) (Dilman, Smyth, & Christian, 2009; Weisberg, 2005; Wholey, Hatry & Newcomer, 2010). This may suggests that majority of the participants in the study may have been uncomfortable sharing their monthly income and age as these questions were regarded as personal questions for the participants.

**Table 4: Demographic statistics of participants**

<b>Race</b>	<b>F</b>	<b>%</b>	<b>Language</b>	<b>F</b>	<b>%</b>	<b>Family position</b>	<b>F</b>	<b>%</b>	<b>Family structure</b>	<b>F</b>	<b>%</b>
Coloured	528	80.50	Afrikaans	624	95.1	Father	116	17.4	Married Parents	274	41.8
Black	6	0.90	English	2	0.3	Mother	223	34	Unmarried	57	8.7
White	104	15.90	IsiXhosa	4	0.6	Uncle	6	1	Single Mothers	187	28.5
Mixed	3	0.50	English and Afrikaans	6	0.9	Aunt	12	1.8	Single Fathers	34	5.2
			Afrikaans and IsiXhosa	3	0.5	Grandfather	4	0.6	Live with their family	63	9.6
			Afrikaans, English and IsiXhosa	2	0.3	Grandmother	8	1.2	Parents and extended family	6	0.9
			English and IsiXhosa	2	0.3	Brother	75	11.4	Unmarried and Extended family	6	0.9
						Sister	91	13.9	Single Mother living with parents	6	0.9
						Son	3	0.5	Single father living with parents	3	0.5
						Daughter	2	0.3			
						Child	10	1.6			
						Grandchild	1	0.2			
						Father/Mother	1	0.2			
						Mother and father	1	0.2			
						Women	2	0.3			
						Gay single man	1	0.2			
						Principal	1	0.2			
<b>Missing</b>	15	2.30		13	2		0	0		20	3
<b>Total</b>	641	97.70		643	98		557	85		636	100

\*F= frequency, %= percentage

**Table 5: Monthly income statistics of participants**

<b>Statistics</b>	
<b>Monthly income</b>	
<b>N</b>	267
<b>Missing</b>	389
<b>Mean</b>	3910.35
<b>SD</b>	5506.70
<b>Maximum</b>	40000

The following section will focus on the multiple regression analysis (bootstrap)

### **5.3.1. Assessment of the study's hypotheses: Multiple Regression Analysis (Bootstrap)**

A multiple regression was conducted to test the following objectives of the current study:

To determine the relationship between gender and family resilience

To determine the relationship between age and family resilience

To determine the relationship between employment and family resilience

To determine the relationship between level of education and family resilience

The SPSS output in *Table 6* below displays a multiple regression analysis of the FRAS total (dependent variable) which represents the composite score of the Family Resilience Assessment Scale (FRAS). *Table 7* and *Table 8* presents the following four predictor variables (independent) age, gender, employment status and level of education of the study. In regards to the FRAS total, the larger scores indicate a higher level of resilience and the smaller the score refers to the lower level of resilience.

*Table 6* below displays the FRAS total statistics, showing that the reported statistics of the population were (N=484) while (n=172) were reported as missing values. The mean and standard deviation of the FRAS total showed  $M=169.58$ ;  $SD=21.91$ .

*Table 7* further displayed the statistics of age, which is one of the four predictor variables within the multiple regression analysis. *Table 7* reported on the number of participants, missing values, mean, mode, standard deviation, the minimum value and the maximum value. The number of participants who reported on their age were (n=561), showing that (n=95) had missing



values. The mode represents the most reported age of the participants (mode=22) furthermore the minimum and maximum values suggests that the participants reported age ranged from 18 years to 80 years of age. The mean score revealed that the average age was  $M=38$ ;  $SD=13.92$ .

Additionally, *Table 8* displays three of the four predictor variables within the multiple regression analysis namely: gender, employment status and education levels. *Table 8* shows the frequency distribution as well as the valid and missing values statistics. Each of the predictor variables are seen as categorical variables, gender was categorised between male (n=256) and female (n=388). Between males and females, more females were represented in the study than males. Similarly, employment was grouped between those who were employed, yes (n=417) and those who were not, no (n=216). Participants who answered yes were the highest reported statistic. This suggests that the majority of the participants were able to financially provide for their family.

Lastly, level of education were categories into three groups' specifically those who achieved primary education (n=202), secondary education (n=319) and tertiary education (n=95). The findings suggests that the highest reported results was those who achieved secondary education while tertiary education was reported as the lowest education received. Moreover, a contributing factor to the aforementioned finding may suggests that the place of residence may be further away from private and state managed institutions as the community is located near West Coast and the seaside more specifically. Conversely, secondary education institutions are similarly situated outside the community may contribute to some participant's high level of primary education in comparison to the secondary and tertiary level of education given the distant locations of high schools as well as private and state institutions.

**Table 6: Statistics representing the Family Resilience Assessment Scale (FRAS) Total Score**

<b>FRAS Total</b>	
<b>Mean</b>	169.58
<b>SD</b>	21.91
<b>N</b>	484
<b>Missing</b>	172

**Table 7: Statistics representing the age predictor variable**

<b>Age</b>	
<b>N</b>	561
<b>Missing</b>	95
<b>Mean</b>	37.90
<b>Mode</b>	22
<b>SD</b>	13.92
<b>Minimum</b>	18
<b>Maximum</b>	80

**Table 8: Statistics representing the gender, employment and education predictor variables**

		<b>F</b>
<b>Gender</b>	Male	256
	Female	388
<b>N</b>		644
<b>Missing</b>		12
<b>Employment Status</b>	Yes	417
	No	216
<b>N</b>		633
<b>Missing</b>		23
<b>Level of Education</b>	Primary Education	202
	Secondary Education	319
	Tertiary Education	95
<b>N</b>		616
<b>Missing</b>		40

\*F=frequency

In addition to the descriptive statistics, it is essential to infer whether the results from analysis are statistically significant. Inferential statistics will allow the researcher to know whether the study's objectives is likely to be true, as such it helps to confirm or reject given predictions (Field, 2009). A bootstrap analysis has been conducted in response to the violation of the normality assumption as discussed previously in this chapter. The bootstrap analysis was therefore used as an alternative method of estimating parameters as it does not assume that the population distribution is normal (Brace, Kemp & Snelgar, 2012).

Furthermore, the following statistics will display the relationship between the FRAS total and the four predictor variables (age, gender, employment status and education level) as a means to assess the study's objectives

**Table 9: Model Summary of Multiple regression analysis**

<b>Model Summary</b>				
<b>Model</b>	<b>R</b>	<b>R Square</b>	<b>Adjusted R Square</b>	<b>Std. Error of the Estimate</b>
1	.245 <sup>a</sup>	.060	.050	21.44

a. Predictors: (Constant), Age, Gender, Employment, Education

Table 9 above displays the regression model summary. The model summary presents all the predictor variables (gender, age, employment status and education) for the FRAS total scores scale. The R column represents the results of the multiple correlation coefficients between the predictor variables and the outcome variable.  $R^2$  shows the amount of how much of the variability in the outcome variable (FRAS total) is accounted for by the predictors (gender, age, employment status and education). In the model, the R value is .245 which signifies a low correlation between gender, age, employment status as well as education for the outcome variable of the FRAS total score. Moreover, the  $R^2$  value of .060 displays that these predictor variables contributes 6% of the variation in the FRAS total score. This denotes that this Model explains 6% of variation in the FRAS total score and 94% of the variation in the FRAS total is unexplained by the aforementioned predictor variables alone. Furthermore, the Adjusted  $R^2$  statistic displays how well the model can generalise and should ideally be close to the value of  $R^2$ .

More specifically in the social sciences there are diverse opinions concerning what constitutes a good  $R^2$  variance. Moore, Notz and Fliger (2013) stipulated that if an  $R^2$  value falls between 0.5 and 0.7, then it is considered a moderate effective size. However the strength of the  $R^2$  variance of .060 in this study is considered as a strong proportion of variance, on the basis of the variables that has been included in this model.

The following ANOVA statistics displayed below analyse whether the Model is a significant fit of the overall data.

**Table 10: ANOVA statistical output of the dependent and independent variables**

ANOVA statistics						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	11348.45	4	2837.11	6.17	.000 <sup>b</sup>
	Residual	178290.41	388	459.51		
	Total	189638.86	392			

a. Dependent Variable: FRASTotal

b. Predictors: (Constant), Age, Gender, Employment, Education

In *Table 10* above, The F-ratio represents the ratio of how much the Model has improvement in the prediction of the outcome, comparing it to the level of inaccuracy of the Model. The analysis in *Table 7* shows that the F-ratio is significant, which indicates that the model is a good fit ( $F(388) = 6.17, p < 0.005$ ). This denotes that the model with the four predictor variables significantly improves the ability to predict the outcome variable (FRAS total).

*Table 11*, below, displays the SPSS output concerning the parameters of the model:

**Table 11: The coefficients statistics of the multiple regression analysis (Bootstrap)**

Coefficients								
Model		Unstandardised coefficients		Standardised Coefficients		95.0% Confidence Interval for B		
		B	Std. Error	Beta	t	Sig.	Lower Bound	Upper Bound
1	(Constant)	187.27	6.70		27.99	.00	174.11	200.42
	Age	.035	.08	.02	.43	.67	-.13	.20
	Gender	.86	2.19	.02	.39	.69	-3.45	5.17
	Employment	-10.99	2.31	-.24	-4.75	.00	-15.54	-6.44
	Education	-2.76	1.60	-.09	-1.73	.09	-5.89	.38

a. Dependent Variable: FRASTotal

*Table 11* shows that employment status is a significant predictor of the FRAS total score, ( $\beta_1 = -.24, t = -4.75, p < 0.05$ ). A value of .05 or less thus indicates that there is a significant relationship between employment status and the FRAS (family resilience).

In addition, the results in *Table 11* shows that age is not a significant predictor of the FRAS total score ( $\beta_1 = .02, t = .43, p > 0.05$ ). A value greater than .05 indicates that is no significant relationship between age and the FRAS (family resilience).

Similarly, gender is not a significant predictor of the FRAS total score ( $\beta_1 = .02, t = .394, p > 0.05$ ) as well as education levels ( $\beta_1 = -.09, t = -1.73, p > 0.05$ ). This shows that there is no significant relationship between gender and the FRAS. Similarly, the results also shows that there is no significant relationship between level of education and the FRAS (family resilience).

*Table 11* further represents the coefficients summary of the multiple regression analysis of the FRAS total (outcome variable) amongst families and their age, gender, employment status, and education levels (predictor variables). The B column reveals the estimates of b-values and these values indicate the individual contribution of each predictor to the model. The b-value shows the relationship between the FRAS total and each of the four predictor variables. As presented in *Table 11* above, the two variables namely age and gender shows that there is a positive relationship between the FRAS total. However, employment status and education b-value statistics represents a negative relationship.

*Table 11* further displays the standardised beta values ( $\beta_1$ ) which shows the number of standard deviations in which the outcome will change regarding one standard deviation change in the predictor variables.  $\beta_1$  value (Constant) is 187.27 which is the y-intercept, moreover this value represents the change in the outcome associated with a unit change in the predictors. The  $\beta_1$  values shows that the gradient slope of the regression line for employment status has a value of -10.99. This suggests that as employment status increases by 1 unit, the levels of FRAS total decreases by 10.99 units. Similarly, when education increases by 1 unit, the levels of FRAS total decreases by 2.76 units.

*Table 12* below represents the bootstrap confidence intervals statistics. Essentially, this table is significant to report and interpret as it does not rely on the assumption of normality (Field, 2016).

**Table 12: Multiple regression analysis (bootstrap)**

Bootstrap Statistics							
Model		B	Bias	Std. Error	Sig. (2-tailed)	BCa 95% Confidence Interval	
						Lower	Upper
1	(Constant)	187.27	.30	7.04	.00	172.14	201.72
	Age	.04	-.00	.08	.66	-.11	.19
	Gender	.86	-.08	2.20	.69	-3.21	4.86
	Employment	-10.99	.04	2.40	.00	-15.83	-6.04
	Education	-2.76	-.04	1.72	.11	-5.99	.29

a Unless otherwise noted, bootstrap results are based on 1000 bootstrap samples

Table 12 above shows that the confidence interval are based on 1000 bootstrap samples. Employment status statistic showed that there is a relationship between the FRAS total and employment status  $B = -10.99$ , 95% CI (-15.83, -6.04),  $p < .05$ . However, all other variables confidence interval includes zero, representing that there is a negative relationship between these variables and the FRAS total. Age displayed a negative relationship  $B = .04$ , 95% CI (-.11, .19),  $p > .05$ . Similarly, gender showed a negative relationship  $B = .86$ , 95% CI (-3.21, 4.86),  $p > .05$  and Education  $B = -2.76$ , 95% CI (-5.99, .29),  $p > .05$ .

#### 5.4. Summary of Results

This chapter reported the findings of a multiple regression analysis which had been conducted to examine the relationship between the dependent variable FRAS total, and the following predictor variables: age, gender, employment status and education levels in order to assess whether these variables significantly predicts family resilience.

Through the analysis of the multiple regression assumptions, three of the five assumptions had been met therefore, homoscedasticity (see figure 2); independence of error (see Table 2); and no perfect multicollinearity (see Table 3). Conversely, Figure 2, 3 and 4 also revealed that two assumptions had not been met (i.e. linearity and normality assumptions). In other words, the study's data was non-linear and was not normality distributed. This typically affects the data, since assumption violations determine the accuracy and inferences from the analysis. However, as the current study made use of categorical data, this increased the likelihood of the violation of the linearity assumption. Consequently, the current study made use of convenience sampling; this suggests that the

disparities between selected participants may contribute to the variance in participants' responses of their lives. As a result this would affect what would be considered a normal bell curve to be not normally distributed. Additionally, in order to address the violation of the normality assumption a bootstrap analysis, as suggested by Field (2016) was implemented.

*Table 4* and *5* summarised the descriptive statistics of the study. The statistics revealed that coloured females were the highest reported race and gender in the study. Monthly income as presented in *Table 5* showed that on average participants earned R3910.35.

*Table 6, 7 and 8* displayed the dependent and independent variables essential to the study. *Table 7* and *8* further reported on the predictor variable statistics. The findings of *Table 8* showed that the highest recorded statistics of participants who took part in the questionnaire were females (i.e. mothers and single mothers). Age in *Table 7* showed that the mean age of participants were 38 years of age  $M= 38$ , this suggests that most participants were categorised as middle aged. Findings reported on *Table 8* indicates more participants reported as being employed than unemployed and more participants received a secondary education than primary and tertiary education. Considering that the data was collected from a town situated near the seaside and isolated from high schools as well as private and state institutions may contribute to the high levels of secondary education and low levels of tertiary education.

The bootstrap analysis (see *Table 12*) determined whether there is a significant relationship between the total score of the FRAS and the four variables namely: age, gender, employment status and level of education. The fit of the regression model was further assessed through the analysis of *Table 9*, the model summary and the ANOVA statistics in *Table 10*. *Table 9* summarised that the  $R^2$  value in the regression model explained 6% of variation of the FRAS total score, denoting that 94% of the variation in the total score of the FRAS is unexplained. Conversely, other variables may contribute to the total score of the FRAS.

Furthermore, in *Table 11*, the standardised beta values showed that participant's employment status significantly contributed to the total score of the FRAS. However, education level age and gender did not contribute as much to the total score of FRAS compared to employment status (-.236). This denotes that there is no significant relationship between family resilience and age, gender as well as level of education. However, there is a significant relationship between family resilience and employment status.

In addition, in *Table 12*, the confidence interval reveals that the population values of  $b$  for employment status compared to all other variables did not fall between zero indicating that there is a relationship between employment status and the FRAS total.

### **5.5. Chapter Conclusion**

The chapter reported on the multiple regression analysis results. It further provided the descriptive statistics of the sample and inferential statistics to make sense of the study's objectives. Chapter six, which will be presented next, further aims to discuss the study's results.





## CHAPTER 6

### Discussion

#### 6.1. Introduction

The purpose of this quantitative study was to determine the relationship between the independent variables (i.e. age, gender, employment status and education) and the dependent variable (i.e. FRAS total). The present chapter will therefore discuss the findings of the study that were presented in Chapter 4 and 5. This chapter further aims to examine the hypotheses discussed in Chapter 1 as well as integrate the literature review discussion presented in Chapter 3. In addition, the present chapter will interpret and elaborate on family resilience, employment status, education, age and gender as variables relative to South African context.

#### 6.2. Correlates of Family Resilience

Multiple risk factors can negatively impact the family functioning and studies have indicated that protective factors may conversely have a positive impact on the family (Black & Lobo, 2008; Patterson, 2002; Walsh, 2012a). This next section will further discuss the correlates of family resilience namely: employment status, education levels, age and gender.

##### 6.2.1. Employment Status

A key finding in this study revealed that there is a significant relationship between employment status and family resilience. The finding is further supported by Walsh's (2012a) concept, Organisational Process in family resilience, specifically the family's ability to utilise 'social and economic resources'. This denotes that families who are employed may experience higher levels of resilience than families who are unemployed indicating that employment status can be seen as a protective factor within the family. Moreover, having financial security, specifically in rural communities can increase access to various resources which can aid in better family functioning (Nthane, 2015; Walsh, 2012a). As such, it has been noted that access to broader social network during times of need has been problematic for those who are not employed. Full-time employed single- as well as two-parent household heads were more likely to have a broader set of social relations and offers these individuals greater potential for receiving social or economic help in times of need (Nthane, 2015; Walsh, 2016b). To strengthen family functioning, financial resources is a fundamental factor to consider as well as balance between family structure and work (Walsh, 2016b).

Considering this, the literature suggests that family structures is a fundamental factor in relation to income (Makiwane & Berry, 2013). Family structure has evolved from the typical nuclear family. Grandparents and other extended family members are living with their children and take care of their grandchildren while the parents are at work (Walsh, 2016b). Relying on other family members (i.e. social resources) to take care of children or elderly family members such as grandparents who are disabled, has aided parents to seek employment without the burden of worrying who would take care of them. Given the change in family structure within South African communities, studies reported that more children live in poorer households than adults, influencing on their psychological, emotional, cognitive and psychological development (White Paper on families in South Africa, 2012).

Moreover, studies further suggests that unemployment or inability to provide the family economically could possibly be a risk factor. These factors can further contribute to the adversities families experience as it not only affects the family income, but also negatively impact family stability (Barling, 1990; Lleras, 2008). Families living in low-income communities in South Africa often have limited access to resources (White Paper on Families in South Africa, 2012; Nthane, 2015). Petersen and Govender (2012) thus argued that on a community level, the deficiency of social support structures, changes in family structure as well as lack of resources and high levels of unemployment impacts on young people's development and can lead to substance use and abuse. In rural communities, family members are susceptible to experience these challenges. Taking this into account, Nthane (2015) studied the livelihoods of various fisher groups of a low-income community (Lamberts Bay) as well as the implications for the implementation of the Small-scale fisheries policy. The findings of the study revealed that the community is not homogenous and may have problems with a low sense of community cohesion; a contributing factor to this was found that in the external income differences imposed by the department of agriculture, forestry and fisheries rights and permit allocations. Furthermore, Nthane (2015) argued that social ills such as poverty and marginalisation experienced by members of the fishing community largely influenced alcoholism. Alcoholism, in addition, inexplicably affected the men in the community, this further increases stress experienced by family members and impact on family functioning.

Given what has been previously discussed, research therefore put forward that family members who are employed are able to not only provide their family with the basic needs at home (i.e. access to food, water and electricity), but also have the ability to let their family

members avoid involvement in risky behaviours such as violence and crime within the community (Bacikova-Sleskova, Benka & Orosova, 2015; Lleras, 2008). This is in accordance with Lleras (2008) who stated that employment status among mothers increase the home environment and thus the family functioning as a whole. Moreover, mothers who are satisfied with their job are more likely to provide a more nurturing and cognitively stimulating home environment for their family than those who are not as satisfied with their employment status (Lleras, 2008). This finding further supports Stiel and colleagues (2014) that employment increases social support. Lleras (2008) further reported that when a family may be in difficulty or facing certain economic circumstance, the adversity may be experienced as less detrimental for mothers who have access to economic or personal resources such as well employed jobs (Lleras, 2008). Similarly, Bacikova-Sleskova and colleagues (2015), who conducted a study on parental employment and its relationship to adolescent's health, found that adolescence who had an employed father reported to have a better perception their self, their future and better family cohesion than those with an unemployed father.

In summary, employment status allows the family access to various services which further strengthens the family as a unit in times of adverse events. Having the means to provide for the family (i.e. strong organisational process such as socio-economic resources) allows both parents and children to engage in enriching activities and can ultimately maintain family cohesion (Black & Lobo, 2008). As such, when families have the capacity to “build financial security and navigate stressful work-family challenges” (Walsh, 2016b, p. 66) it further enforce the family to function optimally, thereby increasing family resilience (Walsh, 2012a).

### **6.2.2. Education Levels**

Furthermore, the findings of the current study indicated that there is no significant relationship between education and the FRAS total score. This is in contradiction to many other studies. For example, other studies suggest that education levels can play a role in family resilience (Bonanno et al., 2007). Bonanno and colleagues (2007) found that a higher level of education is therefore seen as a protective factor for families as it increases family stability and access to resources such as employment, which increases family resilience. However, an essential component to consider is the context relation of the participants and the topic explored. Bonanno and colleagues (2007) specifically explored the aspect of resilience in relation to being exposed to a traumatic event, while Nthane (2015) explored the livelihood of participants in a low-economic community.

A contributing factor to this study's finding may be in relation to South Africa's apartheid legacy. For example Nthane (2015) conducted a study on the community which revealed that majority of fishers were burdened with the problem of education, as most fishers had only attained a primary level of education while others dropped out of high school consequently affecting fishers' literacy and numeracy. Lower levels of literacy and numeracy further burdens the individual in relation to job opportunities. This suggests that lower levels of education increases financial strain within the family as well as limit job opportunities.

Benzies and Mychasiuk (2008) further states that "on an education continuum, lower education is a risk factor and higher education is a protective factor" (p. 104). This indicates that higher levels of education such as secondary and tertiary education is seen as a protective factor as it provides individuals a means to increase their level of skills and training which allows them to effectively deal with problems and think of possible solutions. Moreover, it provides families a chance of obtaining and maintaining stable employment and income, as stable employment decreases family stress and overall improve family functioning which increase family resilience.

In support to the above findings, level of education can contribute to employment status. Majority of participants in the current study achieved secondary level of education. This further suggests that levels of education within the family influences potential opportunities (i.e. obtaining a degree from a university or other tertiary institutions) available for their children or other members of the family. However, in this particular community, high schools are situated outside of the town and parents are therefore forced to send their children to boarding schools in nearby towns for schooling beyond grade nine (Nthane, 2015). As families are burdened to send their children away for secondary education, this in affect may support the findings of the currents study's high levels of secondary education and the lower levels of tertiary education as seeking higher education requires the family members separate from their families influencing upon family structure.

### **6.2.3. Age**

Another key finding revealed that there is no significant relationship between age and family resilience. The mean statistic for age displayed ( $M = 38$ ,  $SD = 13.92$ ) denoting that the average age of participants were 38 years of age. This further stipulates that most of the participants were categorised as middle-aged adults, which may also support the high levels of secondary education and employment status of the participants that aid in providing available resources for the family. As age is a significant indicator of how well the individual and family may respond

to and address stressful situations and provide possible solution, resilience and family resilience studies have reported that resilience has a positive relationship to aging successfully (Martin, Distelberg & Elahad, 2015; Walsh, 2012b). Longitudinal research revealed strong relationships to be a significant factor in men's successful aging (Vaillant, 2002; Walsh, 2012b). Lives of individuals are further enriched through forging intimate relationships, having a significant other and forming social bonds within as well as beyond the family household (Walsh, 2012b). Martin and colleagues (2015) further states that "the role of flexibility has a meaningful place in the aging literature and have been frequently noted as the biggest predictor of the life satisfaction in late life" (p. 167). This suggests that through families' life stages they face various difficult situations such as losses and bereavement, changes in roles and age-related declines. However, in this process these experiences can be reinforced as a protective factor as it supports the family's ability to make meaning out of adverse situations (Walsh, 2012b). Through this, new adaptive strengths and wisdom can be gained. Meaning-making efforts opens room for putting challenging situations into perspectives.

A common thread in successful aging relates to the dynamic process involved of families to not be defined by their limitations, but rather by their resilience which increases their capacity to bounce back from adversity (Walsh, 2012b). However, research regarding the correlation between age and family resilience is contradictory to the study's findings. A contributing factor as to why the current study findings contrasts to Bonanno and colleagues (2007) is related to the age group categories. The current study's participants were middle-aged adults  $M=38$ ; whereas Bonanno et al. (2007) findings that found participants over the age of 65 years displaying higher levels of resilience compared to younger adults. Furthermore, middle- and late-aged adults often possess accumulated life experiences, which can serve as a protective factor than a risk factor to increasing family functioning.

A study conducted by Ouellette-Kuntz, Blinkhorn, Lunsky and Weiss (2014) reported that parents younger than 54 years of age and had a child older than 21 years were less likely to be in crisis. Sixbey (2005) further found that older age categories indicated higher levels of resilience, specifically on Utilising Social Economic Resources, and Family Connectedness. Moreover, Diehl and Hay (2010) stipulated that the conceptualisation of chronological age is consistent to findings that revealed age as a resilience factor as opposed to age being a risk factor. Diehl and Hay (2010) reports that older adults experience fewer stressors than younger adults as age moderated the effect of perceived control at the within-person level. This indicates that middle

and late aged adults can positively affect resilience within the family as the developmental tasks of midlife adulthood relatively includes mature forms of work attainment, committed relationships, family formations and rearing of children (Reich, Zautra & Hall, 2010). Based on what has been discussed above, the discrepant results from literature and the study suggests that the correlation between age and resilience are in need of further exploration.

#### **6.2.4. Gender**

Lastly, the results found in this study showed that there is no significant relationship between gender and the FRAS total score. However, literature illustrates that gender plays a key role towards the family structure and family functioning. The participants in the study reported on diverse family structure within the household such as: *married parent, unmarried, single mothers, single fathers, living with their family, living with their parents and extended family, are unmarried and living with extended family, single mother living with parents and single father living with parents*. As living with extended family, may increase family resilience (Walsh, 2012b), the study's finding suggests that family structure may influence on gender roles within the household. For example single-mother household in which the female would take on traditional mother and father roles (Walsh, 2012b; White Paper on Families in South Africa, 2012). More specifically, the findings in relation to family structure puts forward that nuclear families are no longer regarded as the norm group of families within South Africa, such as in low income communities (White Paper on Families in South Africa, 2012). Historically, a significant finding of South African family structures were greatly impacted by forced migration, resulting in atypical family structure formations such as absent-father households and maternal-headed households (White Paper on Families in South Africa, 2012). As noted in chapter 3, absent-father households are more common in South African households as a result of a divorce or migration, the care for the child is therefore primarily assumed by the mother.

Essentially, men, women, boys, and girls differ in their perceptions and experiences of adverse situations (Becvar, 2015; Walsh, 2016b). With men in traditional cultures, stereotypical notions of masculinity has lead men to not look vulnerable, as such men did not want to come across as weak or inadequate (Walsh, 2016b). Considering this, men were less likely to seek help from others when faced with a crisis. Conversely, females were more likely to utilise socio-economic resources than men were. Walsh (2016b) stipulated "when a problem arises in a family, women are more likely to seek help, acknowledge distress and feel at fault" (p. 141). This suggests that in times of crisis, major transitions and disruptions

in family structure can negatively affect the family's daily routines, specifically breadwinners within the family (Walsh, 2016b). Whitmarsh and Wentwork (2012) further found that "women's career choices continue to reflect lower levels of aspiration, educational attainment and achievement with the central priority given to fitting career around family responsibilities" (p. 48).

However, societal transformations over recent decades found intergenerational difference between traditional and contemporary roles and relationships within the family (Walsh, 2012b). In rural areas, the integration of family and work life have asserted an egalitarian life style between spouses such as equal sharing of labour and financial responsibilities (Walsh, 2016b). This suggests that both spouses equally balance work and family roles, resulting in both parents equally sharing the obligations of family life and seeking personal fulfilment (Walsh, 2016b). Relational resilience is further strengthened when both men and women distribute family responsibility equally; however, Walsh (2016b) further noted that this is still a work in progress.

Furthermore, one of the important scientific implications of the study is the need for more supportive services and economic policies directed towards poor families. Employed families living within low-income communities has shown higher levels of family resilience. This further highlights the need to address and seek solutions for unemployed families. More importantly, poverty has largely contributed to high unemployment rates and has further limited achievement of the family's practical and developmental outcomes (Walsh, 2016b). Essentially, changes in both support services and economic policy could possibly offer individuals and families a means to navigate financially constraint conditions. As such, future research should strongly focus on how families manage adversity within the context of poverty (such as support services that can strengthen relational and social assets of families), as well as on the structural conditions and economic policies developed to address the burden of poverty and unemployment.

There is a great necessity that low-income families in South Africa needs help in acquiring economic assets, and the findings of the study support the potential value of employment in strengthening families. Further investigations of promoting social and economic resources (organisational patterns) through use of supportive services and policies may fundamentally increase family functioning within low-income communities (Walsh,

2016b). A well-defined population exposed to a specific crisis is needed for family resilience studies. However, given that every family household is unique within their family-level variables: individual members, structure, composition, developmental stages, values, cultural practices, traditions as well as contact and interaction with other systems in the community. This makes it challenging to develop strategic solutions for all families. At the same time, it is essential to note the type of family crisis perceived and experienced. This determines whether low-income community should invest in long term or short term family strength-based interventions to enhance the family's resources (Bhana & Bachoo, 2011). Although this study adds to our understanding of the strengths of low-income families. Better understandings of families in diverse cultures and adverse situations across South Africa can further aid in improving developments of family based interventions (Walsh, 2012a). This also allows families to derive value from the implementation of family resilience based processes into their daily lives.

### **6.3. Chapter Conclusion**

The findings of the current study found that employment status largely contributes to family resilience, specifically within South Africa's low-income communities. Essentially, although age, gender and education levels may not contribute to family resilience in this sample, several protective factors interchangeably exist and vary across families and their family structure. Discrepancy of findings between other literature and the study illustrates that further exploration is needed concerning demographic variables and family resilience. This suggests that other variables such as income, geographical location, social economic status may contribute to how well a family may function when exposed to adverse situations (Rawathlal et al., 2015). Moreover, the findings of the current study provides support to the framework of Walsh (2012b), more specifically economic resources (organisational patterns). This suggests that low-income communities' family functioning reflects these families ability to utilise employment status as a means to serve as a protective mechanism despite living in an isolated environment that included lifestyle restrictions and stress associated with restricted capability to deliver adequate resources for their family. The family resilience theory further implies that the study's findings could lead to a synergistic effect, in that as employment opportunities increase, other dimensions of resilience may increase as well (Denny, Gavidia-Payne, Davis, Francis & Jackson, 2014). The final chapter of this study will present a summary of the overall findings as well as limitations and recommendations.



## CHAPTER 7

### Conclusions

#### 7.1. Introduction

Family resilience is not a result of set factors, however it is dependent upon multiple risk and protective factors that can contribute to or subtract from resilient outcomes (Walsh, 2012a). The aim of the study was to investigate the correlates of family resilience across demographic variables namely, age, gender, employment status and level of education.

The study found that families who performs better financially is shown to be more resilient in various domains of life. These domains include access to resources such as services and health benefits, which increases the families well-being as well as their levels of resilience when faced with adverse circumstances (Rawatlal et al., 2015). However, literature further reveals that all factors influencing family resilience may be interrelated and one can thus influence the other relative to family resilience. Although employment status was found to serve as a protective factor for families, level of education was found to contribute to employment status, similarly gender roles may offer a key element within the working domains and maturity attained through years of age additionally provides families with a sense of security within the family.

Furthermore, strengthening families within rural communities may serve as a challenging factor, as members within the community lives in isolated conditions (Nthane, 2015), limited access to necessary resources such as secondary schools can increase crime, violence as well as substance use. This consequently affects family dysfunction. Similarly, lack of secondary schools burdens children to separate from their parents at a young age and may serve as a potential risk factor; as adolescent may partake in risky behaviours when not in the care of their parents (Visser & Moleko, 2012). Additionally, the general family structure may evolve within this community, nuclear families may no longer be found as a common factor within rural communities of South Africa (White Paper on Families in South Africa, 2012). Children seeking secondary or higher education, mothers or fathers working away from home and grandparents living with their children may replace the nuclear definition of families. This is all in line with how society on a continuum evolves through the years.

Historically, apartheid has affected socio-economic conditions within South Africa, in turn this has burdened diverse groups of families as well as their family structure and

functioning (Rawatlal et al., 2015). Family resilience in turn can only be obtained once families experience risky situations and utilise various protective factors available to them in order to overcome adversities (Walsh, 2012a). Findings of this study indicate that when families are in the midst of adverse circumstances having financial security increases family resilience as well as the development of children. The researcher therefore trusts that the results of this study would benefit future studies in regards to further investigate other potential factors that may aid in implementing family resilience within rural communities.

## **7.2. Limitations**

This study is not without its limitations. Although the assumption violations of linearity and normality was corrected, analysis further shows that bias may possibly exist. Moreover, the sample of the study were from a rural community in Lamberts Bay and data was collected using convenience sampling. As such, the data used for the study represents only a small segment of South African population, which only focused on low-income community. This suggests that the findings cannot be generalised, as the sample is restricted to people within low-income community specifically. Furthermore, the contradicting findings regarding age and other studies that found correlations between education, gender and income towards resilience within the family emphasises that studies on family resilience should focus on more diverse population groups. This will allow more specific conclusions to be drawn.

In addition, the study utilised the FRAS to assess individual family members' reports regarding the family as a unit. However, measuring family processes has found to be challenging as the family functioning has been inferred from an individual family member. Examination of all family members' demographic variables were not accounted for. More specifically, mostly parents were used to describe and represent the well-being of the family as a unit, affecting representation of the study's results.

## **7.3. Recommendations**

Evidently, challenging circumstances arise in diverse groups of families across various communities. As families are complex and have evolved through time, various understandings of family life are drawn from literature. This further suggests that diverse cultural contexts, race and religious activity should be investigated. More specifically, the study focused on families in rural communities and highlighted the importance of family structure and access to resources (Benzies & Mychasiuk, 2008; Walsh, 2012a). As the community was isolated from urban areas, this may negatively influence the family structure

and functioning as a whole as breadwinners often work away from home to earn an income (Walsh, 2016b). Although the study found that employment status significantly predicts family resilience, future research should explore both rural and urban areas to further draw on differences based on families' geographical location and family resilience.

While there is no set plan for helping families overcome adversities, a better understanding of strengthening their processes and practices as a family can increase levels of family resilience. Moreover, there is no single variable that could represent family resilience, determining key factors within the socio-economic and familial dimensions may enhance families' strengths and aid to overcome adversities. Further investigating other protective factors such as employment status which was found in the current study could potentially aid in broadening key resilient dimensions within the diverse family context.

As the study focused on the various variables such as age, gender, employment status and level of education in order to determine whether there is a significant relationship between these and the FRAS total score. The results of this study found that employment status greatly benefits the family and increase their levels of resilience, therefore, increasing access to sustainable employment. However, based on the findings level of education, age and gender were not found to significantly affect family resilience within the family.

Non-significant results may be influenced by a variety of factors. More research should therefore be conducted to further explore these findings. Due to missing data the study did not include income and family structure as significant variables that could increase family resilience. Future research should further investigate on family income levels, family structure and other intangible factors as possible variables to understand family resilience. Moreover, future research should conduct research on larger and more diverse samples. This can produce significant results and research including other townships within Cederberg could possibly yield different results thus increasing the generalisation of the FRAS scale. Additionally, it is recommended to include a more complete examination of participants chronological age divided equally across young, middle and old adults in order to present a more represented example of the family and the community. Examining the association between chronological age according to categories may provide researchers a better understanding of the age-related nature of resilience in families. Similarly, gender differences should be further investigated as gender roles and routines may improve family functioning, however caution is advised as marginalisation may be a potential risk factor in

families. With this in mind, future studies should assess an equal amount of males and females using the Family Resilience Assessment Scale (FRAS) in order to further explore gender associations towards family resilience.

As the study highlighted on diverse family structures in South Africa, another significant recommendation extends to future studies assessing each family members individually and not only focusing on the parents. Findings on individual family members may provide more diverse results, which may contribute to understanding and assessing individual family members' strengths, beliefs and values about the family. These individualistic protective factors together may ultimately increase the family's functioning a whole.



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