



## Article

# Family Reunification Is a Distant Possibility for Some Children in Alternative Care: Practice Perspectives from South African Social Workers

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## Abstract

Placement of children in alternative care is to ensure that they are protected while social workers address the circumstances that led to their removal. However, in the rendering of family reunification services, social workers have realised that some instances make it challenging for some families to be reunified with their children in alternative care. As such, permanency planning should be prioritised for those children to ensure their stability. This article explores factors that seem to make family reunification a distant possibility for some children in alternative care. Social workers employed by five child protection organisations in South Africa participated in the study. Employing a mixed-methods research design, data were gathered by means of interviews and questionnaires, and analysed using Creswell's model of thematic analysis and a statistical package for the social sciences. The findings indicate that factors that contribute to challenges in reunifying some children in alternative care range from the circumstances of parents to the preferences of children. Although the reunification of a child with the family of origin is every child's human right, such a right must be balanced with the child's right to be protected from all forms of harm and neglect. We conclude that it is not all children in alternative care that family reunification services should be rendered to. It is recommended that further studies be conducted to explore how a rights-based approach can be used in identifying children and families that are not eligible for family reunification. Moreover, proper permanency plans and strategies should be put in place for such children.

**Keywords:** alternative care; child protection; family reunification; rights-based approach; social workers; South Africa



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## 1. Introduction

A family is an institution that should protect, secure, and safeguard the physical, psychological, educational, social, and emotional well-being of children (Sibanda 2025c). Families play a pivotal role in insulating family members, especially children, against societal violence (Masinga and Sibanda 2026). Aligning with the international conventions on child protection, the South African legislation confirms the child's right to stay within a family of origin (Republic of South Africa (RSA) 2005). However, a sad reality is that

some children face unthinkable forms of violence, maltreatment, abuse, and neglect at the hands of people who should be protecting, supporting, and nurturing them (Jamieson et al. 2018). Recent data indicate the scale of the problem. According to the Children's Institute (2025), approximately 26% of children report having been physically harmed by an adult or exposed to sexual abuse, while a further 13% experience neglect and emotional maltreatment. As such, children are at times removed from the care of the family to protect and safeguard their rights and welfare (Sibanda and Lombard 2015). If children are removed from the family, Articles 10 and 12 of the United Nations Convention on the Rights of the Child state that family reunification services should be rendered so that children are reunified with their families (United Nations 1989). Reunification of a child with the family is every child's basic human right, which must be prioritised and adhered to at all times (Sibanda 2025b). Despite children's right to family life, as embodied in the United Nations Convention on the Rights of the Child, family reunification is a distant possibility in certain circumstances and situations. When faced with such situations where family reunification seems impossible, social workers should not waste time and resources rendering reunification services but should put their attention, effort and resources in rendering services that seek to ensure permanency and stability in the child's life. Such services may entail placing a child in long-term foster care or in adoption.

It is against this background that the circumstances where family reunification is not a possibility were explored. In the best interests of the child, social workers working in family reunification services should be aware of these situations so that they prioritise permanency and stability in the life of a child by placing the child in long-term care, instead of rendering reunification services that will not yield any results (Sibanda 2022). This article reports on the findings of a study on cases where family reunification is impossible. It begins with the unpacking of the different forms of child maltreatment, abuse, and neglect, and identifying the grounds for removal of a child from family care. This is then followed by a contextual discussion of the South African child protection system, which also includes the unpacking of the legislative frameworks and approaches for the provision of family reunification services. Thereafter, the research methods used in the study are discussed, followed by a presentation and subsequent discussion of the research findings. Finally, conclusions are provided, which also entail a brief reflection on the significance and implications of the study, its limitations and recommendations that emerged from it.

### *1.1. Circumstances That Lead to the Removal of Children from Families*

Children in South Africa continue to face high levels of abuse and neglect, rooted in longstanding structural and historical inequalities (Children's Institute 2025). The destabilisation of family life remains a significant legacy of colonialism and apartheid. Policies such as pass laws, forced removals, segregated urban housing, and the establishment of homelands systematically weakened family cohesion (Hall and Posel 2019). These practices not only disrupted traditional family structures but also eroded families' capacity to protect and nurture children in the face of ongoing socio-economic challenges. Although poverty and economic hardship alone are not a sufficient justification for removing a child from parental care, it significantly compromises caregivers' ability to meet children's basic needs, which leads to unintentional child neglect. High unemployment remains a defining feature of the South African context, with 32% of children in 2022 living in households without any employed members and relying primarily on social grants or remittances (Children's Institute 2025; Tladi and Sibanda 2025). Material deprivation further illustrates the depth of structural poverty: 1.6 million children reside in informal housing, 3.7 million in overcrowded conditions, and approximately 6 million lack access to piped drinking water (Children's Institute 2025). In addition, 21% of children do not have adequate sani-

tation at home (Children's Institute 2025). These conditions undermine families' capacity to provide safe and stable environments for children and, at times, indirectly lead to the removal of children and subsequently pose significant barriers to the success of family reunification efforts.

Although children are removed from the care of their biological families due to a plethora of reasons, some of the most prominent reasons include child maltreatment, abuse, and neglect. Child maltreatment is the umbrella term for physical abuse, sexual abuse, psychological abuse, neglect, and psychological maltreatment (DuBois and Miley 2019). The failure of a parent to act, which results in death, serious physical or emotional harm, sexual abuse or exploitation, or an act or failure to act which presents an imminent risk of serious harm to a child also constitutes child maltreatment. There are different forms of child maltreatment. However, it is imperative to note that child maltreatment can be complex, with each case being unique. Variability in perceptions of parental and cultural practices affects what is perceived to be maltreatment across countries. Therefore, sometimes terms used to describe the different forms of maltreatment often overlap, depending on the individual situation.

Child abuse is one form of child maltreatment. According to Section 1 of the Children's Act 38 of 2005, child abuse means any form of harm or ill-treatment deliberately inflicted on a child, and includes the following; assaulting a child or inflicting any other form of deliberate injury to a child; sexually abusing a child or allowing a child to be sexually abused; bullying by another child; a labour practice that exploits a child; or exposing or subjecting a child to behaviour that may harm the child psychologically or emotionally (Republic of South Africa (RSA) 2005). A study by Artz et al. (2018) indicates that the lifetime prevalence of abuse may involve abuse by the same person for years or by several different people in different contexts. The findings further noted that child sexual abuse is persistent throughout children's lifetimes, and regrettably present and influential in their everyday adolescent lives (Artz et al. 2018). As children become more independent and start venturing beyond the family home to attend school or pre-school, corporal punishment in schools, sexual violence, and bullying become common experiences (Masinga and Sibanda 2024). The different forms of child abuse are discussed below.

One form of child abuse is physical abuse, which involves a wilful or non-accidental injury resulting from the harmful action of a parent or caretaker, such as punching, beating, shaking, kicking, burning intentionally, biting, whipping, choking, or smothering (Ross et al. 2017). In addition, other forms of physical abuse include hitting, shaking, strangling, poisoning, and suffocating (Ross et al. 2017). Another form of child abuse is emotional abuse. Emotional abuse is parental or caregiver behaviour that consciously intends to harm children emotionally. Among such behaviours are rejecting, terrorising, ignoring, scapegoating, isolating, or corrupting children (DuBois and Miley 2019). These are the behaviours or statements passed by caregivers that have an impact on the child's emotional functioning.

Child sexual abuse is another form of child abuse; it refers to any sexual activity with a child where consent is not or cannot be given. Child sexual abuse includes sexual contact that is accomplished by force or threat of force by family members, acquaintances, and strangers (Ross et al. 2017). Through various international human rights laws, the global community now recognises that all children have a fundamental right to protection from all forms of sexual abuse (DuBois and Miley 2019).

Child neglect has been identified in the Children's Act 38 of 2005 as one of the reasons why children, at times, get removed from families of origin due to child neglect (Republic of South Africa (RSA) 2005). Child neglect is the failure of a parent, guardian, or other caregiver to provide for a child's basic needs (Kirst-Ashman 2013). A similar view is shared

by Section 1 of the Children's Act 38 of 2005, which states that neglect means a failure in the exercise of parental responsibilities to provide for the child's basic physical, intellectual, emotional, or social needs (Republic of South Africa (RSA) 2005). A lack of supervision to an extent that compromises children's health or safety may also be viewed as child neglect. In essence, child neglect entails failure of the parent or caregiver to meet the child's physical, medical, emotional, educational, and financial needs (DuBois and Miley 2019). Child neglect may lead to stunted growth, learning disabilities, developmental lags, failure to thrive, and a variety of medical problems (DuBois and Miley 2019). Social workers should assess the capacity, willingness, and effort caregivers make in providing for their children.

Psychological maltreatment is another reason why children get removed from the care of the family (Republic of South Africa (RSA) 2005). Psychological maltreatment involves a repeated pattern of behaviour that conveys to a child that he or she is unwanted, worthless, or a caregiver telling the child that they wish he or she were never born or threatening the child with physical or psychological attack (Ross et al. 2017). Such maltreatment can involve withdrawal of support, attention, and encouragement. It may also entail active criticism, disapproval, and censure of children and their feelings and behaviour (Kirst-Ashman 2013).

### *1.2. Children's Rights to Care, Protection, and Family Reunification*

Child protection involves systems, policies, and interventions designed to prevent and respond to abuse, neglect, exploitation, and violence against children, to safeguard their well-being (Kirst-Ashman 2013; UNICEF 2021). Children have both needs and rights, and when these are unmet or violated, concerns arise regarding their safety and welfare (Sibanda 2025d). Following a professional assessment, a child deemed in need of care and protection may enter statutory processes, which can include removal from the family and placement in alternative care (Sibanda 2025e). The Children's Act 38 of 2005 identifies factors for determining a child's need for care and protection, including parental capacity, the child's needs and behaviour, actual or potential exposure to harm, child labour or trafficking, and living in child-headed households. All children's human rights apply, including protection, access to services, and participation in decisions affecting them (Androff 2016; Sibanda 2025d; DuBois and Miley 2019).

Family reunification services aim to address the reasons for a child's removal and support reunification with the family. These services should begin immediately after removal and may include family assessments, therapeutic and rehabilitation services, parenting and life skills, counselling, family preservation, and referrals for mental health or addiction treatment (Department of Social Development 2013; DuBois and Miley 2019). Social workers are responsible for facilitating reunification only when it is in the best interest of the child. The lack of effective family reunification services does not serve the best interests of the child. It impinges on the children's attachment, linguistic, social, intellectual and cultural development (Epworth Children's Village 2015). Sibanda (2025d) further notes that when children are not reunified promptly, they "age out of care" and experience an emotional fallout that stimulates renewed behavioural difficulties associated with drug abuse, violence, crime, conflict with foster parents, indiscriminate friendships, abusive relationships, hopelessness and poor education. Epworth Children's Village (2015) notes that children who have been deprived of biological families experience difficulty in accounting for themselves and find general questions regarding their background, history and family to be loaded and embarrassing.

Legislation and policy frameworks, including the South African Children's Act 38 of 2005 and the South African National Child Care and Protection Policy, guide the provision and implementation of child protection services in the entire nation of South Africa

(Republic of South Africa (RSA) 2005; Sibanda and Ndamba 2023). It stipulates the type of services to be rendered, the persons to render them, and the procedures and principles to be followed when rendering them. Internationally, the United Nations Convention on the Rights of the Child (UNCRC) establishes standards for child protection, emphasising children's right to care by their parents (Article 7), state support for parental responsibilities (Article 18), and separation from parents only when necessary for the child's best interest (Article 9). The UNCRC further stresses that the best interests of the child are paramount, rights should be promoted according to age and maturity, and governments must take all necessary measures to uphold children's rights (Articles 3, 4, 5, 18). Social workers, as duty-bearers, must apply a rights-based approach in providing family reunification services, ensuring that all interventions prioritise the child's safety, well-being, and development.

### 1.3. The Best Interests Approach to Family Reunification

Among the various frameworks guiding child protection practice in South Africa, the best interests approach remains the most influential. It requires that children's welfare be prioritised in all interventions and decisions. The Constitution of the Republic of South Africa specifies that every child has the right to family care, parental care or appropriate alternative care; the right to be protected from abuse, neglect, maltreatment and degradation; the right to social services; and the right to have their best interests given paramount importance in all matters concerning them (Republic of South Africa (RSA) 1996). This line of thought is reflected in Section 7 of the Children's Act 38 of 2005, which stipulates the best interest of the child as the standard. It lists mandatory factors for courts, authorities, or functionaries to consider in all matters concerning a child's care, protection, and upbringing. It dictates that a child's safety, needs, and voice must be prioritised over adult convenience.

As an overarching approach to child protection, the best interests approach directs that all decision-making in family reunification must be firmly grounded in the principle of the child's best interests. This includes careful consideration of developmental needs, parental capacity, and both current and future risks of harm. Ineffective or delayed reunification processes may negatively affect children's attachment, as well as their linguistic, social, cognitive, and cultural development. In line with the best interest approach, the rendering of child protection services in South Africa gives weight to child participation. Section 10 of the Children's Act 38 of 2005 stipulates, "Every child that is of such age, maturity and stage of development as to be able to participate in any matter . . . has the right to participate in an appropriate way and views expressed by the child must be given due consideration." The child's views are paramount when deciding whether the child should be reunified with the family of origin.

The best interests principle underscores the importance of continuity and stability in care, as well as timely decision-making. Delays in permanency planning can be detrimental, given the time-sensitive nature of child development. These considerations reflect a broader commitment to preserving the family as a fundamental social unit, while recognising that children require stable and secure caregiving environments to thrive (Sibanda 2025c). The Children's Act 38 of 2005 highlights key components of the best interests principles that must be considered for family reunification, including the following:

- Strengthening, preserving and promoting positive relationships between the child and parents, family members and significant others.
- Protecting and promoting a child's cultural and spiritual identity and development by maintaining and building connections to their family and community.
- Only removing a child from their parents' care if there is an unacceptable risk of harm.
- Planning the child's reunification with their parents when a child is removed from their parents' care.

- Considering parental capability to provide for the child's needs and any action taken by the parents to give effect to the planning goals set out in the best interests plan.
- Arranging access between the child and parents, siblings, family members and significant others.

Ultimately, effective child protection systems should adopt a developmental, rights-based, and strengths-oriented approach. The best interests of the child should guide not only reunification decisions but all stages of intervention, beginning from the point of removal into alternative care. Applying the best interest approach to family reunification ensures that the rights of children are adequately safeguarded.

#### *1.4. A Rights-Based Approach to Family Reunification*

A rights-based approach is a conceptual framework that integrates the norms, principles, values, standards, and objectives of the international human rights system into strategies and processes aimed at promoting and protecting human rights (United Nations Population Fund 2012). Human rights-based perspectives have the potential to shape and transform social work practices, including family reunification services (Sibanda 2025b). Within this framework, families are entitled to services, benefits, and resources not solely based on need or merit, but because they possess inherent rights by virtue of their humanity.

A key objective of the rights-based approach is to challenge systems or structures that violate or undermine human rights (Boesen and Martin 2007). The approach focuses not only on achieving outcomes but also on the processes through which those outcomes are realised (Androff 2016). It emphasises accountability, holding state institutions and other duty bearers responsible for fulfilling their obligations (Wronka 2024; Patel 2015). Additionally, it seeks to strengthen the capacity of duty bearers to meet their responsibilities effectively (Androff 2016). Fundamentally, the rights-based approach is grounded in the principle that every individual is a rights holder, and that each human right corresponds to a duty bearer (United Nations Population Fund 2012). In the context of family reunification, rights holders include children in alternative care, their biological families, and foster families, all of whom share the responsibility to recognise and respect one another as rights holders.

#### *1.5. Challenges Affecting the Delivery of Family Reunification Services*

Although social workers play a pivotal role in restoring children to their families, their effectiveness is constrained by several structural and operational limitations. Sibanda and Lombard (2015) highlight that these constraints largely stem from persistent workforce shortages, inadequate organisational resources, and high caseloads, all of which directly affect the quality and sustainability of family reunification interventions. A chronic shortage of social workers remains one of the most significant barriers to service delivery (Sibanda 2025a). The availability of practitioners is insufficient to meet the demand across the country, making it challenging to provide timely and comprehensive support to families. The National Development Plan projects a need for approximately 55,000 social workers by 2030 (National Planning Commission 2011, p. 361), yet by 2019, only about 32,000 were registered with the South African Council for Social Service Professionals (SACSSP 2019), leaving a shortfall of roughly 23,000 practitioners. At current trends, achieving the projected staffing target appears unlikely (Sibanda 2025b).

This shortage directly contributes to excessive caseloads for existing practitioners. High caseloads reduce the frequency of sustained engagement and home visits with both biological and foster families (Sibanda 2025b). Increasing staffing and balancing caseloads could accelerate reunification timelines and relieve systemic pressures (Sibanda and Lombard 2022). Compounding these staffing challenges are pervasive resource limitations

within many social service organisations. Social workers often operate without adequate resources, restricting the scope of their practice. These deficits frequently force practitioners into reactive, crisis-driven interventions, limiting opportunities for preventive, holistic, and developmentally grounded practice (Sibanda and Lombard 2015). This reactive orientation conflicts with the rights-based approaches that should underpin all family reunification efforts. Herselman et al. (2023) argue that effective child protection systems require well-resourced infrastructures, including functional offices, communication equipment, and dedicated vehicles to support fieldwork.

## 2. Materials and Methods

The research question for this study was: What are the barriers to reunifying children with their families of origin? The study adopted a mixed-methods research approach, specifically an exploratory sequential mixed-methods design (Creswell 2014). This design enabled the researcher to initially explore the perspectives and experiences of social workers through qualitative methods to identify emerging themes. The insights gained from the qualitative phase subsequently informed the quantitative phase, which was used to collect additional data from social workers. The study focused on cases in which family reunification was a remote possibility and addressed “what,” “how,” and “why” questions related to these cases.

The research was conducted across five child protection organisations (CPOs) located in Gauteng Province, South Africa. These organisations were selected through purposive sampling, as each has over 50 years of experience in child protection service delivery. In addition, the organisations provide services in urban, rural, and peri-urban areas, including farming and mining communities. The selected organisations provided generic child protection services ranging from prevention and early intervention services, investigating cases of child abuse and neglect, removing children and placing them in alternative care, compiling children’s court reports, supervision and monitoring of foster care placements, providing family reunification services and rendering of post reunification services. As part of family reunification services, the selected organisations provided the following services: (1) Tracing of biological parents, (2) Skills training and poverty alleviation, (3) Therapy, counselling and psycho-social support, (4) Training on parenting skills, (5) Referral to specialised organisations, (6) Facilitation of visits between children and biological families, and (7) Family conferencing. Targeting these selected organisations enabled a true reflection of the nature of family reunification services provided by child protection organisations in South Africa.

The researcher formally requested permission from the management of each organisation to conduct the study. Once approval was granted, management provided a list of employed social workers along with their contact details. The researcher then contacted potential participants to invite them to take part in the study. Those who consented were issued informed consent forms, which they were required to complete prior to participation in the interviews.

At the time of the study, the participating organisations collectively employed 183 social workers. As it was not practical to include the entire population in the qualitative phase, a non-probability purposive sampling technique was used to select participants. Selection criteria included willingness and availability to participate; a minimum of two years’ experience in providing family reunification services; experience working with diverse population groups in terms of race, culture, religion, beliefs, and socio-economic status; and at least one year of employment within a participating organisation. Data saturation was reached after conducting interviews with 15 social workers, as no new information or themes emerged from the data (Creswell 2014).

For the quantitative phase, total population sampling was employed, targeting all 183 social workers across the five organisations to complete a questionnaire. Of these, 127 respondents (69.4%) completed and returned the questionnaire, while 56 social workers (30.6%) did not respond. Nevertheless, the response rate was considered satisfactory, as studies indicate that questionnaires consisting of 9 to 14 items typically yield an average response rate of 56.28% (Liu and Wronski 2017).

Qualitative data were collected through individual, semi-structured interviews. The researcher utilised open-ended questions and engaged in probing, paraphrasing, clarifying, and following up on emerging issues during the interviews. With participants' consent, interviews were audio-recorded to ensure accurate and verbatim data capture, while allowing the researcher to focus on active listening and meaningful engagement.

Quantitative data were collected using a self-administered questionnaire developed by the researcher. The questionnaire was hand-delivered to the participating organisations. Participants were given two months to complete the questionnaire, after which the researcher revisited the organisations to collect the completed instruments.

Qualitative data were analysed using Creswell's (2014) thematic analysis framework, which involved data familiarisation, initial coding, theme development, and report writing. Trustworthiness was enhanced through strategies addressing credibility, reflexivity, transferability, and confirmability. Credibility was strengthened through prolonged engagement and repeated interviews until data saturation was achieved, as well as through multiple readings of interview transcripts to ensure accurate representation of participants' experiences. Transferability was supported by providing a detailed description of the research context and setting.

Confirmability was ensured by offering a transparent account of the methodological procedures and maintaining accurate and thorough data records. To minimise researcher bias, the researcher sought input from the study supervisor regarding the analysis and interpretation of findings. Reflexivity was addressed by acknowledging the researcher's extensive experience as a family reunification social worker. To mitigate potential bias, the researcher maintained a reflective journal to critically examine how prior knowledge, values, and assumptions may have influenced data interpretation.

Quantitative data were analysed using the Statistical Package for the Social Sciences (SPSS), version 23. The researcher took measures to ensure the reliability and validity of the data. The questionnaire was structured to generate sufficient information to support meaningful conclusions. Reliability was enhanced through the use of multiple items measuring key variables, clear definitions of concepts, and explicit instructions for respondents. A pilot study was also conducted to test the questionnaire's relevance and effectiveness in addressing the research questions and objectives.

Ethical clearance for the study was obtained from the institutional review board of a South African university. Ethical principles, including informed consent, avoidance of harm, and the prevention of deception, were upheld throughout the research process. Participant confidentiality, anonymity, and privacy were safeguarded through the use of coding, ensuring that no data could be linked to individual participants.

### 3. Results

#### 3.1. Biographic Details of Participants

The characteristics of participants in the qualitative study are presented in Table 1, followed by the characteristics of participants in the quantitative study.

**Table 1.** Characteristics of participants in the qualitative study.

Participant	Gender	Age Group (Years)	Racial Group	Years of Employment at a CPO	Years of Experience in FRS
P1	Male	30 to 39	Black	7	3
P2	Female	20 to 29	Black	2	2
P3	Female	20 to 29	Black	2	2
P4	Female	50 to 59	White	18	18
P5	Male	40 to 49	White	8	13
P6	Female	20 to 29	Black	2	5
P7	Female	20 to 29	Mixed heritage	5	5
P8	Female	30 to 39	Black	5	4
P9	Female	40 to 49	Black	8	6
P10	Female	20 to 29	White	3	3
P11	Female	50 to 59	White	20	10
P12	Female	30 to 39	Black	6	7
P13	Female	30 to 39	Black	5	7
P14	Female	20 to 29	Black	3	3
P15	Female	20 to 29	Black	5	5

Of the 127 respondents who took part in the quantitative phase of the study, 20% (26) were male, and 80% (101) were female. Regarding age distribution, 43% (54) of participants were aged between 20 and 29 years, 36% (46) fell within the 30–39 age group, 17% (21) were between 40 and 49 years, and 4% (6) were aged between 50 and 59 years. In terms of racial composition, the majority of participants were Black (81.9%,  $n = 104$ ), followed by White participants (13.4%,  $n = 17$ ), while 4.7% ( $n = 6$ ) identified as being of mixed heritage.

With respect to experience in providing family reunification services, 66.4% (83 of 125) of the social workers reported having between 0.3 and seven years of experience in this field. A further 22.4% (28 of 125) indicated between eight and 14 years of experience, while 11.2% (14 of 125) had more than 15 years of experience delivering family reunification services.

### 3.2. Cases Where Family Reunification Is a Distant Possibility

The factors that make family reunification impossible were identified by participants as: unknown whereabouts of biological parents, parents' substance abuse, unsuitable living circumstances, cases of sexual and physical abuse, biological parents with psychiatric conditions, biological parents not cooperating with social workers, and children not wanting to be reunified with biological parents. These factors are confirmed by D'Andre (2013, p. 45), who states, "Other participants emphasised mental health, substance abuse, or poverty problems specifically as being the primary hindrance to reunification". The factors are presented below as themes.

#### 3.2.1. Whereabouts of Biological Parents Are Unknown

Participants identified not knowing the whereabouts of biological parents as one of the biggest challenges for reunification services. Of 127 participants, 118 (93%) acknowledged the magnitude of this challenge. Reasons for unknown locations included that some biological parents did not have a fixed place of abode as they were forever moving, while some biological parents abandoned their children. These reasons made it impossible for

social workers to render meaningful family reunification services to the parents. The voices of participants regarding these cases are as follows:

The biological mother seems not to be ready for family reunification services. We traced her in [withheld for confidentiality] after allegations that she was renting a flat there, and then she was not able to pay because her business was not going well. She was a sex worker. Then she had another child, and she had to go to [withheld for confidentiality]. When we visited, we were told that she had moved out and was now staying in [withhold for confidentiality]. From [there] we were told that she is now staying in [withheld for confidentiality]. So, she moves from one place to the other in a very short period, and she does not inform us when she moves; we must investigate and trace her. She is not committed to family reunification. (Participant 1)

We also have a challenge of abandoned children where nobody knows who the biological parents are; their identity and whereabouts are unknown. These children will be in alternative care forever. (Participant 7)

### 3.2.2. Biological Parents Continue to Abuse Substances

Quantitative findings show that 119 of 127 (94%) participants regarded substance abuse among biological parents as a major difficulty in rendering family reunification services, as opposed to 6% (8 of 127) who did not see it as a difficulty. While several biological parents did get rehabilitated, some relapsed. The influence of substance abuse on the reunification of families is reflected in the following quotes:

In an area like-(name withheld), I feel that it is not safe to reunify children from that area because parents tend to abuse substances. There is too much of drugs, incest, and poverty. You find that in a family, there is an aunt, there is a grandmother, and neither of them is working, and when you investigate the house, you will see that there is no food, it is very dirty, and all of them are high on drugs. So, we cannot reunify a child in such circumstances. (Participant 2)

I have a lot of cases where biological parents are abusing drugs and alcohol. You can see that taking the child back to them is too risky; it is not in the best interests of the child. (Participant 7)

### 3.2.3. Unsuitable Living Circumstances

Findings indicate unsuitable living circumstances of biological parents as another reason for family reunification not being a possibility. This finding was revealed by 111 of 127 (87.4%) participants in the quantitative study. The underlying causes for unsuitable living conditions were overcrowding, filthiness, and a lack of financial means to support the child. Participants expressed the realities of these conditions in the following words:

Family reunification is not possible when the family wants the child, but their circumstances are not ideal. I have a case where the child was placed in foster care when she was a few weeks old. Now, the biological parents want the child back, but it is almost impossible to place the child back because their house is very terrible. So, in such a case, it is very challenging to render family reunification services. (Participant 4)

At times, it is not possible to reunify a child when the circumstances of the biological parents do not improve. They live in filthy and overcrowded situations. They don't go out to look for work. They just sit, get used to the situation, and have no interest in improving their living circumstances. (Participant 10)

### 3.2.4. Cases of Sexual and Physical Abuse

Some participants stated that it is not possible to reunify a child in cases where the child had been removed due to issues of sexual and physical abuse. Participants stated that normally, the other biological parent was in denial and did not want to accept that the partner had abused the child. In other cases, it was because the abuser was a breadwinner, and the other partner did not want to separate from him or her. In cases where the perpetrator still lived in the house, the child could not visit the house, and this made family reunification impossible. Participants stated that in a few cases, it was the child who was not willing to be placed back with an abusive family. Participants expressed their views as follows:

We have a case where family reunification services are not a possibility. In this case, the mother had a boyfriend who molested the child, and the mother is in denial. She does not want to acknowledge that it happened. She chose her boyfriend over the child because the boyfriend had an income. (Participant 14)

I have three children for whom family reunification is not a possibility. It is a case of severe abuse, and the mother does not believe the children, so she lets them get abused by the father. It is usually the case that the mother is financially dependent on the father, such that she would never leave him. When the children were removed, the family did not have visitation arrangements because the children did not want to see the father, and the mother said the children were lying. (Participant 8)

Family reunification is not a possibility when a child has been molested or brutally raped by a biological father or a family member, and the child wants absolutely nothing to do with the family. Regardless of our trying to work with the family, sending the child for therapy, and sending the father for therapy, the child still wants nothing to do with the family. In that case, we cannot force the child to go back to the family if she does not want to go back. (Participant 12)

While 117 of 127 (92.1%) participants in the quantitative study indicated that it was challenging to render family reunification in cases of sexual abuse, 6 (4.7%) had no view on this, while 4 (3.1%) disagreed. Most participants (114 of 127, 89.7%) indicated that it was challenging to render family reunification in cases of physical abuse, while 9 (7.1%) had no view on this, and 4 (3.1%) disagreed.

### 3.2.5. Biological Parents Have Psychiatric Conditions

Some participants indicated that clients whom they regarded as “impossible family reunification cases” involved cases where biological parents had psychiatric conditions or mental illnesses. This finding was revealed by 87% (110 of 127) of participants in the quantitative study. The participants stated that such parents were not able to function normally on their own and often had to be under somebody’s care. Therefore, it made reunification with a child difficult. The participants described these cases as follows:

We had a case where the biological parents were of low intellectual function, and the biological mother molested the children, but I also suspect that there was a psychiatric condition that made her very aggressive. I don’t think that the child will ever be reunified with those parents. (Participant 6)

I have a lot of cases where family reunification is not a possibility. In one case, the mother was born with a brain deficiency. Her intellectual capacity is lower than her age. She is now 30-something, but her brain functions like that of a 13- or 14-year-old child. Her child outgrew her in terms of intellectual capacity.

Reunification is not possible because the mother is not able to intellectually take full responsibility as a parent. (Participant 9)

The father has permanent brain damage, and he functions on a lower level. So, there is no way the child can return to either of the parents, no way, the child will forever remain in foster care. (Participant 11)

### 3.2.6. Biological Parents Not Cooperating with Social Workers

Most participants indicated that a major factor that made it extremely challenging to render family reunification services was some biological parents being uncooperative with social workers. These participants stated that a lack of cooperation was evident in the failure of biological parents to attend substance abuse and parenting skills programmes that the social worker would have arranged for them. At times, the biological parents did not show up for scheduled meetings. The following quotes capture the challenges that participants face in working with non-cooperative biological parents:

Some biological parents are uncooperative. They don't put any effort into the family reunification process; they don't attend sessions when requested. (Participant 1)

I can say that the challenge that I have with biological parents is around issues of non-compliance, especially for those who are having substance abuse problems. We refer them for rehabilitation, but they do not comply with the requirements of the programme [...] so that becomes a serious problem for us, and we cannot reunify the child because a parent is not improving. (Participant 5)

Even when you call wanting to help them with parenting skills or to refer them somewhere, they will never attend those groups. (Participant 7)

### 3.2.7. Children Not Wanting to Be Reunified with Biological Parents

The participants stated that, at times, they encountered the challenge of children who did not want to be reunified with their biological parents. Findings reveal that the circumstances of a biological parent would have improved, but the child is not willing to be reunified with them. This is usually because the child has spent most of his or her life in foster care and does not have a relationship with biological parents. At times, children compare the financial and material circumstances of biological parents and foster parents, and choose to stay with foster parents due to the luxurious lifestyle that they offer, as reflected in the following quotes:

Remember, the child is coming from a foster care placement where the foster mother had a big house and the child had her bedroom and she is used to getting everything that she needs but now when you look at the mother's circumstances and living conditions, the child will not have her bedroom, she will not have whatever it is that she is currently having. (Participant 3)

The most difficult thing to work with is when a parent comes, and they want the child, but the child does not want to go to the parent. That now makes us caught in the middle. Now the parent is putting so much pressure, saying, "I want the child," and when you speak to the child, they are like, "I don't want to go back. [...] I don't know you; I don't want a relationship with you, I don't know what kind of person you are, I am not coming to you, the only people that I know are the parents that I am with now (foster parents), and I am going to be with them forever". (Participant 11)

Considering the views of the child in the family reunification process was found by 96.8% (121 of 126) respondents as a principle of family reunification that social workers should adhere to when rendering family reunification services.

#### 4. Discussion

The findings indicate that it is challenging to render family reunification services when the whereabouts of biological parents are unknown. This is confirmed in the literature by [Smith and Lidström \(2020\)](#), who found that family reunification becomes impossible in situations where biological parents cannot be located, either because their whereabouts are unknown, they are deceased, or they do not want the social workers to find them. The findings indicate that it is challenging to render family reunification services in cases where biological parents abuse substances. [Nhedzi and Makofane \(2015\)](#) made similar findings on the negative impacts of biological parents' substance abuse. They quote a social worker as saying:

Sometimes things are out of our control, the issues of drugs—if a mother is taking [abusing] drugs, there is no way that she can look at her child properly, it does not matter how much advocacy and counselling you might offer, they are high on drugs, no ways, no ways ([Nhedzi and Makofane, 2015](#), p. 365)

Some of the social workers' responses appear to lack empathy and understanding of the possible trauma experienced by families and the structural causes of challenges that lead to the removal of children from their parents. Social workers also seem to be judgmental and to blame parents for the challenges they are facing. This attitude of being judgmental may be one of the reasons that contribute to the failure of family reunification efforts. According to [Sibanda \(2025c\)](#), the quality of relationships between social workers and biological parents is a critical determinant of reunification outcomes. Effective partnerships between social workers and biological parents should be characterised by trust, transparency, mutual respect, and a shared commitment to the child's best interests ([Sibanda 2025c](#)). Conversely, weak or poorly developed relationships can undermine the effectiveness of family reunification services.

Contemporary social work literature emphasises the importance of relational, culturally responsive, and contextually grounded practice ([Gray et al. 2017](#)). Respectful engagement is central to preserving clients' dignity and fostering resilience within families. Importantly, deficit-based narratives that portray families as incapable or unwilling to improve should be challenged ([Lombard 2019](#)). Research suggests that positive, non-judgemental engagement by social workers that is grounded in principles such as acceptance and individualisation contributes significantly to successful reunification ([Sibanda 2025c](#)). Studies by [Morris et al. \(2018\)](#) further highlight that families value practitioners who are empathetic, supportive, and able to build rapport without imposing solutions prematurely. The ability to recognise distress and respond appropriately is particularly important in preventing crises and sustaining family engagement.

Unsuitable living circumstances of biological parents were indicated as another reason that makes family reunification challenging. Although the reunification of a child with the family is every child's basic human right, such a right must be balanced with the child's right to be protected from all forms of harm. Children have a right to a safe and clean environment ([UNICEF 2021](#)). From a rights-based approach, if reunification is not a possibility due to unsuitable family circumstances, the parents and the family must be accountable to the child and the social worker ([Androff 2016](#)).

Findings further indicate that it is very difficult to reunify a child in cases where the child had been removed due to issues of sexual and physical abuse. [Jones and Morris \(2012\)](#) confirm these findings when noting that where there are issues of child abuse, it is

difficult to reunify a child with the family. De Villiers (2008, p. 33) echoes similar views, stating, "In some cases, children can, however, not be returned to their parents due to the severity of abuse or the parent's inability to change their treatment of their children." While it is noted that some participants respectively either took a neutral stance or disagreed on family reunification in cases of physical abuse, social workers, in principle, should always protect children from physical abuse. Furthermore, participants indicated that biological parents who have a history of severe mental illness have limited chances of being reunified with their children. As such, permanency planning should be arranged to safeguard the rights, best interests, and well-being of children who come from such families.

Moreover, findings reveal that it is difficult to render family reunification services in cases where biological parents do not cooperate with social workers. The findings correlate with the observation of Sibanda (2025c) and D'Andre (2013) that the primary hindrance to reunification is the behaviour of reunifying parents themselves. They lack the will and courage to do what it takes to get their children back. At times, they remain in denial about the nature of their problems and refuse to engage in services, and in these cases, family reunification becomes an impossibility (D'Andre 2013). The resistance and lack of cooperation from family members impede service delivery. Citing the challenges associated with a lack of cooperation, a participant in a study by Nhedzi and Makofane (2015, p. 318) states, "The parents have this push-away thing (rejection) like I do not want a social worker in my life".

Furthermore, findings indicate that it is challenging to render family reunification services in cases where children in alternative care do not want to be reunified with their biological parents. In line with the principle of child participation, Section 10 of the Children's Act 38 of 2005, Article 9 of the UNCRC stipulates that children have a voice in determining where they should stay. The child's views are paramount when finalising a children's court enquiry. In addition, section 144(3) of the Children's Act 38 of 2005 emphasises the principle of child participation. Reasons for children not wanting to be reunified with biological parents range from material needs to fear of changing an environment and building new relationships. De Villiers (2008) states that a reason for not wanting to be reunified is that children have their fears regarding their parents' ability to maintain a good relationship with them. The reunification process is complex, and in many cases, the initial conflict, problems, and fears return. As stipulated in section 10 of the Children's Act (38 of 2005), depending on their age and maturity, children have the right to indicate who they want to live with. Androff (2016) asserts that children are not parental property or helpless objects of charity but are individual members of the family who have rights and responsibilities. Children are thus not merely passive recipients, entitled to adult protective care. Rather, they are subjects of rights who are entitled to be involved, by their evolving capacities, in decisions that affect them, and are entitled to exercise growing responsibility for decisions they are competent to make for themselves (Androff 2016).

The foundation for delivering family reunification services in South Africa is already in place, even though it has not been formally structured or documented (Sibanda and Lombard 2022). Family reunification services currently being offered by child protection organisations include: poverty-reduction initiatives, counselling, therapeutic support, psychosocial assistance, parenting skills development, referrals to specialised agencies, and the coordination of access visits (Sibanda and Lombard 2022). All these services play a crucial role in the reunification process; they not only help prepare the child for returning home but also strengthen and empower the family across multiple areas of functioning. Due to structural challenges such as unemployment, child neglect and child poverty remain rampant in South Africa. About 14.5 million children live below the upper poverty line (Children's Institute 2025). Other socio-environmental and systemic issues that put children

in a vulnerable situation in South Africa are the high levels of violence being normalised in communities (Sibanda and Masinga 2025). Given these realities, child welfare interventions should extend beyond therapeutic individual and group work to include community development initiatives that address structural barriers such as unemployment and limited income-generation opportunities (Patel 2015). Addressing family needs, therefore, requires a dual approach that combines micro-level support with broader socio-economic reform (Sibanda and Lombard 2022).

Policy frameworks should emphasise the importance of strengthening family livelihoods, including the promotion of small-scale income-generating activities as part of reunification services (Department of Social Development 2013). Similarly, socio-economic development interventions such as micro-enterprise initiatives have been identified as critical components of child protection strategies (Dhludhlu and Lombard 2017). Life skills training for biological parents can further enhance reunification outcomes by strengthening human capital and improving both social and economic functioning (Sibanda 2025b). However, participation in such programmes is often constrained by the immediate survival priorities of families living in poverty. Parents may be unable to engage in developmental interventions while simultaneously struggling to secure food, housing, and employment, thereby reducing the likelihood of reunification (Sibanda and Lombard 2022). Herselman et al. (2023) suggest that increased government resource allocation is necessary to support family reunification efforts by social workers. Although necessary, resources alone are not the sole factor that determines the success of family reunification. According to Sibanda (2025e), successful family reunification also depends on relational and contextual factors, including constructive collaboration between social workers and biological parents (Sibanda 2025e).

A strengths-based perspective and best interests approach should underpin all reunification efforts. These perspectives prioritise enhancing the capabilities of family members through interventions such as life skills development, conflict resolution, anger management, and decision-making training (Saleebey 2013). Such strategies aim to address the underlying factors that contributed to child removal and to build sustainable family functioning. Furthermore, social work practice should actively challenge structural inequalities and oppressive conditions that increase the vulnerability of families (Lombard 2019).

From a rights-based approach, the participation of service users is a fundamental principle in service delivery. The principle of participation seeks to incorporate the voices of service users into services, programmes, and policies. This entails a collaborative process where service users raise and lift their voices, and service providers ask and incorporate the views of service users, ensuring informed consent. This involves making sure that people can meaningfully participate in matters that concern them (Androff 2016).

## 5. Conclusions

The child has the right to be cared for by the family and community of origin. Children also have a right to be protected from all forms of harm, abuse, neglect, violence, maltreatment, and exploitation. Section 10 of the Children's Act 38 of 2005 emphasises the right of children to participate in matters that concern them. A rights-based approach emphasises and reinforces the mandate of social workers as duty bearers to respect, protect, and guarantee the rights of children and families.

It can be concluded that although the reunification of a child with the family of origin is every child's basic right, such a right must be balanced with the child's right to be protected from all forms of harm. As such, it should be acknowledged that not every child in alternative care is eligible for family reunification services. Family reunification,

therefore, does not apply to some children, and these children should be placed in either adoption or permanent foster care to ensure stability and permanency.

### *5.1. Significance and Implications of the Study*

The findings underscore the central role of social workers in achieving sustainable permanency outcomes for children in alternative care, where family reunification is impossible due to several reasons alluded to in the paper. Ensuring children's right to stability and permanency emerges as a foundational principle for effective practice. Strengthening collaboration and communication among all stakeholders, including social workers, biological families, foster families, children, and partner organisations, remains essential for identifying children who are not eligible for family reunification services.

The study underscores the importance of structured and contextually appropriate professional development for social workers. Collaboration between child protection organisations and social work education institutions should prioritise the development of training programmes that incorporate permanency planning approaches. Including analyses of cases where family reunification is not feasible within training curricula, and workshops can strengthen practitioners' ability to engage families meaningfully and to advance permanency planning for children in alternative care.

Social workers are also encouraged to employ innovative methods to motivate parents, children, and other stakeholders to actively participate in permanency planning processes. Creating regular platforms, such as focus groups or scheduled professional development workshops, where practitioners can share strategies and experiences, may enhance collective learning and contribute to organisational best practices in permanency planning.

At a broader systemic level, the Department of Social Development should play a coordinating role. Establishing an annual national forum for practitioners to exchange experiences, highlight effective permanency practices, and discuss challenges in child protection work would promote reflective dialogue, surface recurring barriers, and support a more integrated national approach to permanency planning. Such forums could further facilitate the development of professional networks that enhance information sharing, resource mobilisation, and more efficient referral pathways for families.

The implications for higher education and research are similarly substantial. Social work scholars should partner with the Department of Social Development to secure funding for in-depth research on effective permanency planning practices for children for whom family reunification is not an option. Incorporating research findings into social work curricula, particularly through case-based learning approaches, would better equip future practitioners for practice realities. Additionally, universities should promote research that explores the challenges social workers face when implementing permanency planning interventions. Developing practitioner-informed guidelines, frameworks, and models, co-produced by academic institutions, families, children, the Department of Social Development, and the South African Council for Social Service Professions, would result in more coherent, context-sensitive tools to support frontline social workers in fostering permanency and stability for children in alternative care who are not eligible for family reunification.

Taken together, these implications highlight the necessity of a multi-tiered, collaborative strategy that integrates frontline practice, organisational capacity, national policy coordination, and academic research. Reinforcing these interconnected areas is vital for strengthening an effective, evidence-based child protection system in South Africa.

### 5.2. Limitations

The limitations of this study should be acknowledged. First, the research was conducted during a period of active efforts to strengthen permanency planning for children in alternative care in South Africa. Consequently, participants may have been influenced by ongoing public debates, which could have affected the study's findings, conclusions, and recommendations. Nonetheless, the results continue to reflect the participants' personal experiences in providing family reunification services.

Second, the sample size was relatively small, limiting the extent to which the findings can be generalised. Smaller samples may not capture the full diversity of perspectives that could be obtained from a larger participant pool. This highlights the need for future studies to replicate this research with a larger, nationally representative sample, involving more child protection organisations and a greater number of social workers. Despite these limitations, the study offers valuable insights for the development of a comprehensive family reunification services model for children in alternative care.

### 5.3. Recommendations

The correct adherence to the rights of children to permanency and stability requires well-thought-through institutional, infrastructural, policy, and human resource arrangements. As such, the following recommendations are made.

- Purposefully designed and context-appropriate training programmes should be developed for reunification social workers. These programmes should emphasise the early identification of cases where family reunification is not feasible, as well as strategies to minimise situations in which reunification becomes impossible. Moreover, social workers should implement family reunification programmes from approaches that meaningfully engage families and create circumstances that can facilitate successful reunification.
- Family reunification interventions should move beyond a predominantly therapeutic focus to incorporate structured socio-economic support. This includes linking families to income-generating opportunities, employment pathways, and social protection mechanisms. Without addressing material deprivation, psychosocial interventions alone are unlikely to produce sustainable reunification outcomes.
- The Department of Social Development, as a custodian of child protection services in South Africa, should recognise poverty reduction as central to child protection. Increased investment in family-centred economic support, such as cash transfers, food security programmes, and housing assistance, should be embedded within reunification frameworks. This approach acknowledges that economic instability is a key driver of family separation.
- Social workers should be supported through training and supervision to adopt relational, non-judgemental, and culturally responsive approaches. Building trust with biological parents is essential for successful reunification. Practice frameworks should explicitly challenge deficit-based assumptions about families living in poverty.
- Academic institutions responsible for social work education should integrate a rights-based family reunification services model into the curriculum and adequately prepare social workers to undertake permanency planning for children who are not eligible for family reunification services.
- Additional research is required to reconceptualise the best interests of the child in relation to family reunification services. This should include further theoretical development of a rights-based family reunification model, exploring alternative forms of reunification that may better serve the child's best interests. For instance, family

reunification could be conceptualised in ways that do not necessarily require the child's geographical reunification with biological parents.

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