



How well are families doing? A description of family well-being in South Africa

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Abstract

Objective: The purpose of this study was to describe the well-being of a sample of families from low socioeconomic communities in the Western Cape South Africa in terms of family resilience, family satisfaction, parenting styles, family structure and family functioning.

Methods: The study used a descriptive survey design and sampled 358 adult family members.

Results: The results indicate that although family functioning is challenged, parents are perceived to be using an authoritative parenting style and having a father present enhances family satisfaction. The results also describe families as displaying low-to-average levels of family resilience.

Conclusion: This study provides a descriptive study of a sample of families in the Western Cape, South Africa. Overall the families in this study are not doing very well. The implications and significance of these findings are further explained.

Keywords: Family functioning; family resilience; family satisfaction; family well-being; parenting styles; South Africa

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Received 19 February 2016;

Accepted 5 May 2016

Introduction

Families in South Africa have been shaped by a combination of political, social, epidemiological, and economic factors [1]. As a result of South Africa's unique sociopolitical history and diverse cultures, the South African family is neither simple to describe nor easy to understand. Historically, South African families, during apartheid, were seen only as 'the white nuclear family' [2–4]. For black families, the term 'family' meant being separated from fathers and often mothers too because parents were compelled to leave their families to work in towns [3]. Parents faced the daily pain and hardship of not having their own children live with them as their children remained in the reserves with family members. Between 1948 and the

early 1990s, the hallmark of black family life was centered on arrests, violence, brutality, detentions, murder, and executions by the apartheid government as South Africans strove for liberation of the country, the rights of people, and an end to separatism and segregation [3, 4]. Almost 2 decades after apartheid ended, new policies and legislation are stipulated to ensure the well-being of South Africans, but has this filtered to the *family*?

The family is instrumental in its members' development and giving meaning to societal constructs. These include constructs such as the way marriage is perceived, bearing and raising children, education methods, and the rights and 'obligations' of family members and hence society in general.



Thus, within the family, generations are replaced with the next generation, and socialization and care of children and youth dominate. The family is the supportive environment in which the vulnerable, sick, disabled, and aged are cared for [5]. The family is the protective factor which has been shown to moderate the effects of societal and physical ills for its members [6, 7]. Specifically, factors such as positive parenting and maternal sensitivity [8], family resilience [9], and healthy family functioning have been shown to provide the environment for the optimal development of continuing generations.

Families are defined in the White Paper on Families in South Africa [10] as “societal groups that are related by blood (kinship), adoption, foster care or the ties of marriage, including civil marriages, customary marriages, religious marriages, and domestic partnerships, and go beyond a particular physical residence.” Following this definition, families are viewed in terms of structure, practices, relationships, and resources. In terms of structure, the concept of the nuclear family does not accurately capture the typical South African family [11]. Recent statistics suggest that there is an increasing prevalence of South African children being raised by a mother in a single-parent (or lone-parent) household, child-headed households, and children living in households with unemployed adults [12–14]. Thus when we speak of South African families, we refer not only to the nuclear family but also to extended families, lone-parent families, and caregivers and/or guardians.

South African families experience a number of unique circumstances that not only affect their family structure but also extend to the socioeconomic and relational dimensions of families. Underresourced environments may be less equipped to respond to the needs of families. Some of these circumstances and/or factors may include (and are not limited to) poverty, substance abuse, unemployment, crime and violence, breakdown of communication, and other social issues [15]. The HIV/AIDS pandemic has also profoundly affected the structure and well-being of South African families [1, 12]. All these circumstances have negative individual and familial consequences, and the consequences are compounded by governmental as well as nongovernmental institutions that are not always able to respond effectively.

Regardless of language, culture, or doctrine, the family is at the core of society. Our psychosocial, physical, and spiritual existences originate from the family [6]. According to Openshaw [16], understanding family dynamics is essential in understanding the quality of life or well-being of its individuals. Depending on the family and the context, families could be identified either as (1) well functioning and stable or (2) unstable or at risk.

Well-functioning families are strong and stable, providing conducive environments for children, environments which encourage child growth and development, offering support throughout the life cycle. Within these families, good communication and good parenting can be found, as well as respect, love, trust, resilience, safety, nurturance, and care. Eventually, the satisfaction of these needs encourages adjusted adults, which by implication results in stronger communities, societies, and a country. Openshaw [16] further contributes to this definition of well-functioning families and found that there exists a significant relationship between family functioning, family resilience, and family well-being. Not all families have a high sense of well-being, and may find it challenging to provide for their members. These families could be considered to be ‘at risk.’

The South African government has developed the White Paper on Families in South Africa with the focus on strengthening families. Three key principles are identified in the White Paper on Families in South Africa [10]. These are the promotion of healthy family life, family strengthening, and family preservation. The focus on family research is presented as separate components such as parenting [17, 18], family structure [13, 14], the status of South African families [12], and the family environment [17].

The purpose of this research study was therefore to describe a more holistic perspective on the well-being of a sample of families from low socioeconomic communities in the Western Cape in terms of family structure, parenting styles, family functioning, family satisfaction, and family resilience.

Methods

Participants

This study used a descriptive survey design. Data were collected by means of a battery of assessment measures to



obtain a comprehensive view of the status of the families in 12 low socioeconomic communities in the Western Cape. The low socioeconomic community is characterized by low educational attainment and income, high rates of substance abuse, unemployment, and crime and violence [19]. A class research project at the University of the Western Cape was used to sample participants in the study. A group of 12 post-graduate students conveniently sampled one adult family member of 30 families. These family members needed to be accessible but were not to be members of the students' families. The final sample consisted of 358 participants. The questionnaire did not ask participants to specify the position of the family member. They only had to be older than 18 years.

Instruments

A battery of assessments was compiled in one questionnaire to address dimensions of well-being, which include parenting styles, family functioning, satisfaction with family life, and family resilience. The questionnaire also consisted of demographic information such as age, race, language, socioeconomic status, household information, and family organization (here represented as family structure).

Parenting style and dimensions questionnaire:

Robinson et al. [20] used the primary parenting styles typologies: authoritarian (high control, low warmth), permissive (low control, high warmth), and authoritative (high control, high warmth) of Baumrind [21] to develop the parenting style and dimensions questionnaire (PDSQ). The PDSQ is a 32-item questionnaire which was used to assess the perception of parents' style of parenting of both the mother and the father. Each parenting style as mentioned on the questionnaire has subfactors which are known as 'dimensions,' reflecting the parental practices. The authoritarian parenting style is characterized by physical coercion, verbal hostility, and nonreasoning/punitive dimensions. Authoritative parenting style has connection, regulation, and autonomy-granting dimensions. The dimension of indulgence is found in the permissive parenting style. Participants responded on a five-point Likert scale, with one corresponding to 'never' and five corresponding to 'always.' Alpha coefficients range between 0.64 and 0.98. In the current

research study, Cronbach's α for the sample was 0.84 for the PSDQ.

Family functioning (the family assessment device): This four-point Likert scale was developed to assess the family on the basis of factors such as communication, problem solving, behavior control, affective involvement, affective responses, and roles. Cronbach's α s range between 0.70 and 0.81 [22]. In the current research study, Cronbach's α was 0.78 for the family functioning scale.

Satisfaction with family life scale: This four-point Likert scale was adapted from the Satisfaction with Life Scale, which measures global life satisfaction. Shin and Johnson [23] define satisfaction with life as "a global assessment of a person's quality of life according to his chosen criteria." It is a perception of subjective well-being, based on the individual's own perceptions and, in this research study, an individual's perceptions of his or her family life. Diener et al. [24] reported that the Satisfaction with Life Scale has shown acceptable psychometric properties, high internal consistency, and high temporal reliability. In the current research study, Cronbach's α was 0.79.

Family resilience assessment scale: Sixbey's [25] family resilience assessment scale is a 66-item scale developed for the purpose of measuring family resilience using six dimensions. The overall scale has a high reliability, with a Cronbach's α of 0.96. Family members rate how well each statement describes their family by selecting from among four responses, ranging from strongly agree to strongly disagree. In the current research study, Cronbach's α for all items was 0.98.

Procedures

Within the communities where the research was conducted, Afrikaans is the dominant language. To ensure proper adaptation, the research instruments were translated into Afrikaans, as well as back translated. Each student received training on how to understand and administer the questionnaire. Students were also instructed to assist participants who had literacy challenges. The questionnaires were



self-administered, and completion of the questionnaire took approximately 30–45 min.

Ethical considerations

Ethics approval was obtained from the University Review Board. Participants received an information and consent form, and only after they understood their roles as participants were they asked to provide consent. Issues such as confidentiality, anonymity, and the right to withdraw participation were also clarified, and if participants felt they required psychological assistance, referrals were made. No participant required this assistance during this process.

Data analysis

Data were captured, cleaned, and analyzed with SPSS version 22. Descriptive frequencies, means analysis, and *t* tests were conducted as this study was mostly descriptive in nature.

Results

This study was aimed at describing the perceived well-being of families in a sample from low socioeconomic communities in the Western Cape. For the purpose of this study, family well-being consists of the following aspects: family structure, parenting styles, family functioning, family satisfaction, and family resilience. Most analyses were based on the mean of the scales, and as challenging as it may be to assess the level of family well-being on the basis of mean scores alone, this does provide an indication of the families' current status. First, demographic information on the participants will be presented.

As described in Table 1, the sample consisted of both male ($n=126$, 35.2%) and female ($n=232$, 64.8%) participants, with a mean age of 38.25 years. The highest level of education was secondary education level ($n=255$, 90.7%). Colored participants ($n=271$, 75.9%) were the commonest in terms of racial categories who participated in the study, and Afrikaans ($n=233$, 65.4%) was the language most commonly spoken.

In terms of family structure, more participants indicated they were living in a two-parent family ($n=197$, 56.8%) than a one-parent family ($n=150$, 43.3%). Fathers were present in most households ($n=239$, 69.3%). Children tend to be present in households ($n=305$, 88.2%); however, the exact number is

Table 1. Demographic information

Variables	Total sample
Sex	
Male	126 (35.2%)
Female	232 (64.8%)
Level of education	
Primary education (grade 1–7)	22 (8.0%)
Secondary education (grade 8–12)	255 (90.7%)
Tertiary education	4 (1.5%)
Race	
Colored	271 (75.9%)
Black African	57 (16.0%)
White	27 (7.6%)
Indian/Asian	2 (0.6%)
Home language	
Afrikaans	233 (65.4%)
English	60 (16.9%)
isiXhosa	57 (16.0%)
Other	6 (1.7%)
Family structure	
Married	197 (56.8%)
Single	150 (43.3%)
Father present in household	
Yes	239 (69.3%)
No	106 (30.7%)
Children present in household	
Yes	305 (88.2%)
No	41 (11.8%)
Employment status	
Employed	188 (70.4%)
Unemployed	79 (29.6%)
Age, years*	
Minimum	17
Maximum	76

*Mean age 38.25 years.

unclear. Participants in the study were mostly identified as the heads of their homes ($n=221$, 72.9%).

Perceived parenting styles

Three types of parenting styles were assessed in this study: namely, authoritative, authoritarian, and permissive parenting styles. Respondents indicated their perceptions about the mothers' and fathers' parenting styles in their households.



Table 2. Paired samples statistics of authoritative, authoritarian, and permissive parenting styles of mothers and fathers

		Mean	<i>n</i>	Standard deviation	Standard error of the mean
Pair 1	Mother authoritative	3.11	305	0.52	0.03
	Father authoritative	2.77	305	0.68	0.04
Pair 2	Mother authoritarian	2.25	318	0.58	0.03
	Father authoritarian	2.29	318	0.66	0.04
Pair 3	Mother permissive	2.35	337	0.64	0.04
	Father permissive	2.32	337	0.62	0.03

Table 2 shows that of all the perceived parenting styles, the authoritative parenting style has the highest mean, followed by the permissive parenting style. Authoritarian style has the lowest mean among the three parenting styles. This implies that authoritative parenting style was perceived to be implemented in most households, and authoritarian parenting style appeared to be used the least. Judging from the means, we found that respondents perceived that mothers are likelier than fathers to adopt authoritative and permissive parenting styles, whereas fathers are likelier than mothers to use an authoritarian parenting style.

Table 3 highlights a positive yet small mean difference (0.338) in respondents' perceptions of mothers' and fathers' authoritative parenting style. On average, significantly more people perceived mothers to be using authoritative parenting styles (mean 3.11, standard error 0.03) than fathers (mean 2.77, standard error 0.04): $t(304)=8.65$, $P<0.05$. Therefore we conclude that respondents perceived significantly more mothers

than fathers were using an authoritative parenting style in their households.

Authoritarian parenting style showed a slight difference in the means of perceived parenting style for mothers and fathers (0.03878). Similarly, a small difference was also found in the perceptions of permissive parenting style between mothers and fathers (0.02908). However, the differences between mothers and fathers in these two parenting styles were not significant ($P>0.05$).

Family functioning

In Table 4, most of the respondents indicated a score above 2. This suggests that respondents agreed with the statements on each scale that described their family. However, the means of all the scales are also closer to 3. This may indicate that participants also disagree with the statements on the family functioning scale. Affective involvement and roles have the lowest score, whereas problem solving and behavior control have the highest score.

Table 3. Paired samples test of authoritative, authoritarian, and permissive parenting styles of mothers and fathers

		Paired differences				<i>t</i>	df	Significance (2-tailed)	
		Mean	Standard deviation	Standard error of the mean	95% confidence interval of the difference				
					Lower				Upper
Pair 1	Mother authoritative/father authoritative	0.33770	0.68149	0.03902	0.26092	0.41449	8.654	304	<0.001
Pair 2	Mother authoritarian/father authoritarian	-0.03878	0.75958	0.04260	-0.12259	0.04502	-0.911	317	0.363
Pair 3	Mother permissive/father permissive	0.02908	0.81517	0.04441	-0.05827	0.11643	0.655	336	0.513

df, Degrees of freedom.



Table 4. Descriptive statistics of the dimensions on the family functioning scale

	<i>n</i>	Mean	Standard deviation
Communication	336	2.61	0.38
Problem solving	341	2.70	0.54
Roles	342	2.52	0.29
Affective responsiveness	345	2.61	0.52
Affective involvement	345	2.52	0.64
Behavior control	339	2.70	0.55
General family functioning	340	2.67	0.46

Table 5. Descriptive statistics of the family satisfaction scale total score

	<i>n</i>	Mean	Standard deviation
Family satisfaction	341	25.3842	6.39776

According to Epstein et al. [22], any score above 2 portrays problematic family functioning. The sample's mean score is 2.67, indicating perceived problematic family functioning.

Family satisfaction

Table 5 shows that the mean for the family satisfaction scale is 25. This score means that respondents were generally satisfied with their family lives and felt that their family lives were enjoyable.

According to Table 6, the item named "I am satisfied with my family" shows the highest mean (5.49). On the other hand,

Table 6. Descriptive statistics of the items on the family satisfaction scale

	<i>n</i>	Minimum	Maximum	Mean	Standard deviation
In most ways my family is close to my ideal	341	1	7	5.14	1.715
The conditions of my family are excellent	341	1	7	4.75	1.691
I am satisfied with my family	341	1	7	5.49	1.619
So far I have gotten the important things I want in my family	341	1	7	5.16	1.755
I would change almost nothing in my family	341	1	7	4.85	1.897

the item "the conditions of my family are excellent" has the lowest mean (4.75). This could mean that respondents are satisfied with their family as an individual member. Yet they believe their family condition is not so good. For example, they think that the socioeconomic resources or funding in their family is lacking. An independent samples *t* test was used to see whether there is a significant difference in whether the father's presence makes a difference in respondents' family satisfaction.

According to Table 7, respondents who have a father present in their homes indicated a greater mean family satisfaction than those who do not have a father present in their homes.

Table 8 shows that respondents who have a father present in their homes expressed a greater sense of family satisfaction (mean 26.10, standard error 0.40) than respondents who do not have a father present in their homes (mean 24.31, standard error 0.63). This difference is significant: $t(331)=2.44, P<0.05$. Therefore a father's presence at home makes a significant difference in people's perceptions of family satisfaction.

Family resilience

According to Table 9, all of the participants fall within the 'do not agree' category, with the lowest mean found for family connectedness, and the highest mean found for the ability to make meaning of adversity. However, if we were to 'round off' the scores, this would place these families at a resilience level of 'agree.' This is not overtly high at all.

Discussion

The results indicate that the overall perceptions of the participants about their family life could be perceived as challenging. The family functioning assessment identified these families' ability to function as problematic. However, the



Table 7. Group statistics to show the mean family satisfaction between the presence and nonpresence of a father

	Is there a father present in your home?	<i>n</i>	Mean	Standard deviation	Standard error of the mean
Family satisfaction	Yes	230	26.1043	6.11016	0.40289
	No	103	24.3107	6.37093	0.62775

Table 8. Independent samples test to show the difference in family satisfaction between the presence and nonpresence of a father

		Levene's test for equality of variances		<i>t</i> test for equality of means						
		<i>F</i>	Significance	<i>t</i>	df	Significance (2-tailed)	Mean difference	Standard error difference	95% confidence interval of the difference	
									Lower	Upper
Family satisfaction	Equal variances assumed	0.132	0.716	2.443	331	0.015	1.79367	0.73409	0.34960	3.23774
	Equal variances not assumed			2.405	189	0.017	1.79367	0.74591	0.32228	3.26505

df, Degrees of freedom.

Table 9. Family resilience assessment scale scores

	<i>n</i>	Mean	Standard deviation
Family communication and problem solving	331	2.82	0.65
Utilizing social and economic resources	343	2.69	0.55
Maintaining a positive outlook	350	2.85	0.68
Family connectedness	345	2.64	0.40
Family spirituality	349	2.85	0.84
Ability to make meaning of adversity	355	2.93	0.78

responses were not consistent across the different domains (e.g., family resilience scores). Moreover, according to Epstein et al. [22], achieving average scores is not necessarily a negative attribute. Herewith we present a further exploration of the findings.

Family structure

Most of the participants indicated living in a two-parent household. However, almost half of the participants (43.3%) reported living a single-parent household, and although the most of these families have a father present, 30.7% experience

father absence. Furthermore, only 1.5% of the participants reported completing a tertiary education and 30% of the participants indicated being currently unemployed. This is in accordance with the current literature on family structure that many households are headed by a single parent and also characterized by father absence [12, 14]. According to Benzies and Mychasiuk [26], there is a strong relationship between family characteristics such as dual incomes and protective advantages. Parents who find it challenging to provide for their families feel stressors which manifest themselves in their parenting styles [8].



Perceived parenting styles

The perceived dominant parenting style in this study is the authoritative style. Authoritative parenting styles of both mothers and fathers have been associated with positive influences on children's development, such as their behavior and achievement at school [27]. Mothers were found to significantly display more of an authoritative style in their parenting than fathers. The question then is whether or not fathers are perceived as being harsher or more punishing than mothers. Given the sample demographic (i.e., either a mother or a father), these results might look different if we were to ask their children.

Of the three parenting styles (authoritative, permissive, and authoritarian), authoritarian is the more desirable style. Children have been shown to thrive within such an environment. According to Aunola and Nurmi [28], research on family discipline focuses on the role of the family in children's behavioral problems, especially in terms of parenting styles. They found that a mother's parenting style is a strong factor in predicting children's internal and external behavior. It is clear that the manner in which the parental role is fulfilled is instrumental in the status of well-being in the family.

Family functioning

The affective involvement of family members was reportedly low. The implication is that families are better equipped to manage 'crises' than for family members to display affection toward one another. However, the overall family functioning score is still high. Perhaps the ambivalent mean scores are indicative of respondents not having strong opinions regarding their family functioning. Family functioning plays an important role in moderating the effects of physical and social ills to which children and youths may be exposed [7, 29]. Previous research has shown that youths from poorer functioning families are likelier to be exposed to violence, and well-functioning families have been found to moderate the effects of both exposure to and perpetration of community violence [29].

Family satisfaction

The results place overall family satisfaction within a high-scoring range (24–29) [30]. They also indicate that the respondents are 'satisfied with their family.' According to Diener [30], although this indicates satisfaction, this does not necessarily

indicate complacency with the current state of family life. The lowest scoring item was 'the conditions of my life are excellent.' This might indicate satisfaction with their family members but not with the conditions or environment in which they find themselves. This is also consistent with research by Newland et al. [31], who found that mothers particularly experience depressive symptoms as a result of economic hardship. Economic problems cause parents, especially mothers, to be less sensitive to their children and to display less positive parenting behavior.

Family satisfaction is also influenced by whether or not there is a father present in the home. The independent *t* test revealed that there was also a significant difference between those participants who had a father present in the home and those who did not. This is in accordance with the current literature on the effects of the absence of the father from the home as research has indicated that children without their fathers are at a significant disadvantage psychologically, socially, and financially [32–34], which could potentially lead to dissatisfaction with family life.

Family resilience

Higher scores on the family resilience assessment scale indicate higher family resilience, and the mean scores ranged between 2.64 and 2.93. This does not indicate very high family resilience. The family connectedness had the lowest score, and the ability to make meaning of adversity had the highest score. Making meaning of adversity is the ability of a family to share challenges together [6]. These participants indicated that of all the dimensions of family resilience, they have the ability to make meaning of adversity most. It is important to note that although this dimension had the highest score, the score was not high. The results indicate that the overall level of family resilience seems to be low.

According to Sixbey [25], family connectedness is a family's ability to bond together. Walsh [6] refers to a family's sense of cohesion, support for one another, and being committed to face challenges together. It does not seem as though these families feel too supported by their fellow family members.

Limitations

There are limitations of this study which need to be emphasized. First, although we may want to anecdotally profile



low-income communities in terms of the picture demonstrated here, the sampling is not representative of all low-income communities in the Western Cape. Second, we provide only one family member's perspective on his/her entire family, and this member's position in the family (mother, father, child, etc.) was not clarified. This is open to subjectivity and may have skewed the data. For example, it is difficult to say beyond doubt if the participant was referring to his/her parenting style or his/her parents' parenting style.

Conclusion

Overall, families report that their current state of well-being is challenging. The implication is that families, although not all at risk, have a need to improve their daily functioning. Newland et al. [31] state that it is not correct to assume that all these individuals need is a hardy personality (or better resilience), but what is more important is that there is a facilitative or supportive environment. This support may be in the form of other family members or community members, or from governmental and nongovernmental agencies, such as an adequate implementation of the White Paper on Families for South Africa [10]. Social interventions recognize the uniqueness of families [35] but the interventions for families are not well documented or published. Families should be seen as the entry point for service delivery. Children are likelier to reach their potential when resources are made available and stressors alleviated [31]. Consequently, children are then in a better position to contribute to their society as well.

The implication that parental practices could have a domino effect on the future quality of life and relationships of their children could help parents to realize a better approach in providing for their families. Practitioners will find this study useful since they will be able to use evidence-based information for their interventions. In this way, practitioners could use a more holistic approach in their counseling contexts. Happy families could make happy communities since community NGO's can retain the intervention programs to create initiatives and activities for building communities and encouraging a sense of participatory citizenship.

Conflict of interest

The authors declare no conflict of interest.

Funding

This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

References

1. Goldberg RE. Family instability and pathways to adulthood in Cape Town, South Africa. *Popul Dev Rev* 2013;39(2):231–56.
2. Ames FR. *Mothering in an apartheid society*. Cape Town: Fine-line Printers; 2002.
3. Bernstein H. *For their triumphs & for their tears. Women in apartheid South Africa*. London: International Defence and Aid Fund for Southern Africa; 1985.
4. Posel D. *The making of apartheid 1948–1961. Conflict and compromise*. New York: Oxford University Press; 1991.
5. Waite LJ. The family as a social organization: key ideas for the twenty-first century. *Contemp Sociol* 2000;29(3):463–9.
6. Walsh F. *Normal family processes: Growing diversity and complexity*. 4th ed. New York: The Guilford Press; 2012.
7. Ferro MA, Boyle MH. The impact of chronic physical illness, maternal depressive symptoms, family functioning, and self-esteem on symptoms of anxiety and depression in children. *J Abnorm Child Psych* 2015;43(1):177–87.
8. Whittaker JE, Harden BJ, See HM, Meish AD, Westbrook TR. Family risks and protective factors: pathways to early head start toddlers' social-emotional functioning. *Early Child Res Q* 2011;26(1):74–86.
9. Buchanan T. Family resilience as a predictor of better adjustment among international adoptees. Doctoral thesis. Arlington: University of Texas; 2008.
10. Department of Social Development. *White Paper on Families*. Pretoria: Department of Social Development; 2013. [accessed 2015 Oct 1]. Available from: www.dsd.gov.za/index.php?option=com_docman&task=cat_view&gid=33&Itemid=39.
11. Louw D, Louw A. *Child and adolescent development*. Free State: ABC Printers; 2007.
12. Holborn L, Eddy G. *The first steps to healing the South African family*. Johannesburg: South African Institute of Race Relations; 2011.
13. Roman NV. From a child's perspective: children's perceptions of maternal parenting in single and married families. *Soc Behav Pers* 2011;39(5):577–86.
14. Davids EL, Roman NV. Does family structure matter? Comparing the life goals and aspirations of learners in secondary schools. *S Afr J Educ* 2013;33(3):142–54.



15. Savahl S, Isaacs S, Adams S, Carels CZ, September R. An exploration into the impact of exposure to community violence and hope on children's perceptions of well-being: a South African perspective. *Child Indic Res* 2013;6(3):579–92.
16. Openshaw KP. The relationship between family functioning, family resilience, and the quality of life among vocational rehabilitation clients. Doctoral thesis. Logan: Utah State University; 2011.
17. Roman N. Single and married mother-preadolescent relationships: understanding and comparing the interaction between self-esteem and family functioning. Doctoral thesis. University of the Western Cape; 2008.
18. Roman NV, Human A, Hiss D. Young South African adults' perceptions of parental psychological control and antisocial behavior. *Soc Behav Pers* 2012;40(7):1163–74.
19. Savahl S, Adams S, Isaacs S, September R, Hendricks G, Noordien Z. Subjective well-being amongst a sample of South African children: a descriptive study. *Child Indic Res* 2015;8(1):211–26.
20. Robinson CC, Mandelco B, Olsen SF, Hart CH. The parenting styles and dimensions questionnaire. In: Perlmutter BF, Touliatos J, Holden GW, editors. *Handbook of family measurement techniques: Vol. 3. Instruments & index*. Thousand Oaks, CA: Sage; 2001. pp. 319–21.
21. Baumrind D. Child care practices interceding three patterns of preschool behavior. *Genet Psychol Monogr* 1967;75(1):43–88.
22. Epstein N, Baldwin L, Bishop D. The McMaster family assessment device. *J Marital Fam Ther* 1983;9(2):171–80.
23. Shin DC, Johnson DM. Avowed happiness as the overall assessment of quality of life. *SOCI* 1978;5(5):475–92.
24. Diener E, Emmons R, Larson R, Griffin S. Satisfaction with life scale. *J Pers Assess* 1985;49(1):70–5.
25. Sixbey M. Development of the family resilience assessment scale to identify family resilience constructs. Doctoral thesis. Gainesville: University of Florida; 2005.
26. Benzies K, Mychasiuk R. Fostering family resiliency: a review of the key protective factors. *Child Fam Soc Work* 2009;14(1):103–14.
27. Talib J, Mohamad Z, Mamat M. Effects of parenting styles on children development. *World J Soc Sci* 2011;1(2):14–35.
28. Aunola K, Nurmi JE. The role of parenting styles in children's problem behaviour. *Child Dev* 2005;76(6):1144–59.
29. Gorman-Smith D, Henry DB, Tolan PH. Exposure to community violence and violence perpetration: The protective effects of family functioning. *J Clin Child Adolesc Psychol* 2004;33(3):439–49.
30. Diener E. Guidelines for national indicators of subjective well-being and ill-being. *Appl Res Qual Life* 2016;1:151–57.
31. Newland RP, Crnic KA, Cox MJ, Mills-Koonce WR. The family stress model and maternal psychological symptoms: mediated pathways from economic hardship to parenting across the infancy to preschool period. *J Fam Psychol* 2013;27(1):96–105.
32. Barber BL, Eccles JS. Long term influence of divorce and single parenting on adolescent family and work related values, Behaviours and Aspirations. *Psychol Bull* 1992;111(1):108–26.
33. Lang K, Zagorsky JL. Does growing up with a parent absent really hurt? *J Hum Resour* 2001;36(2):253–73.
34. Choi J, Jackson AP. Fathers' involvement and child behavior problems in poor African American single-mother families. *Child Youth Serv Rev* 2011;33(5):698–704.
35. Walsh F. The concept of family resilience: crises and challenge. *Fam Process* 1996;35(3):261–81.

Related Information

Family plays an important role in its members' development and social construction. Children are the core element of families, and their physical and mental development greatly need family support. The following articles published in *Family Medicine and Community Health* may provide you with information in this area.

- A case-control study on family environment characteristics of accident-prone children
<http://www.ingentaconnect.com/content/cscript/fmch/2014/00000002/00000004/art00004>
- Health-related behaviors in children of ethnic minorities and Han nationality in China
<http://www.ingentaconnect.com/content/cscript/fmch/2013/00000001/00000004/art00003>

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