Social Fathers and Adolescent Adjustment in South Africa

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Abstract

Many children experience a diverse range of fathering relationships outside that of the biological father, especially in South Africa. Fatherhood is as much a socially and culturally based construct as a biological one. In many cultures, extended kin networks are the norm, often containing caring grandfathers, and older brothers who serve as important father figures for the family's children. However, the role of such non-biological father figures has been neglected in the South African literature. This study examined the quality and quantity of involvement among social fathers who are children's relatives and other types of social fathers (e.g., stepfathers). It also assessed whether the quality of social father involvement was positively associated with adolescent adjustment, and whether this association was stronger for adolescents with relative social fathers than with other types of social fathers. Cross-sectional survey data was obtained from 280 South African grade 10 and 11 learners (ages 15 -18 years) from a school in Cape Town. Independent t-tests revealed that relative social fathers displayed a greater quantity and quality of involvement than non-relative social fathers. A Pearson Correlations revealed that greater social father involvement was associated with fewer emotional problems and fewer total difficulties among adolescents. Although limited results were obtained from the hierarchical regression, they did indicate that greater quality of social father involvement showed significant effects on emotional symptoms. Findings highlight the need for further research aimed at identifying the types of nonbiological father-child relations that exist in South Africa, and their associations with adolescent adjustment.

Keywords: social father, adolescents, adjustment, father figure, father involvement, father influence

Adolescence is a critical phase in human development characterised by rapid physical, cognitive, emotional and social change (George & Van den Berg, 2011). The manner of adjustment to these life changes shapes the capacity for successful development into adulthood and can have important implications for health and wellbeing, not only in adolescence but also in later life (Patton et al., 2016). Thus, effective management of adolescent adjustment is of paramount importance to societal health and wellbeing (Das-Munshi et al., 2016). This is particularly the case in the context of South Africa, where adolescents face an elevated risk of maladjustment through their high levels of exposure to violence, poverty, illicit drugs and reduced economic resources and protection (Blakemore & Mills, 2014). However, for adolescent adjustment to be effectively managed, the contextual factors that hinder and those that promote successful adjustment must be identified.

While there are a variety of factors which impact on adolescent adjustment, almost all research in this field accords parents a central role (Profe & Wild, 2017). Knowledge of parenting, however, has largely been constructed from the basis of biological parents and their offspring (Lamb, 2012). Where research has been done on less traditional forms of parenting, it has usually been advanced within a deficit paradigm of single-mother parenting, and the negative implications of father absence (Richter, 2006).

This perspective on parenting perpetuates a hyper-idealistic notion of the nuclear family as the normative and natural family form, often implicitly or even explicitly promoting it as necessary for the healthy development and adjustment of children (Malherbe, 2015). In the context of South Africa, where only 33 percent of children reside in a nuclear family and only 38 percent reside with their biological father, this perspective is not a realistic indicator of an adolescent's experience of parental support (Hall, Richter, Mokomane, & Lake, 2018). This is particularly the case when considering research on the topic of fathering in South Africa, where father absence is highlighted as one major barrier hindering the capabilities of the family to perform its crucial roles in child development (Van den Berg & Makusha, 2018). While the concerns about father absence appear to be justified, the merits of casting men as uninvolved and children as fatherless is, however, debatable. This perspective not only overlooks the diverse forms of fathering relationships that occur outside that of the biological father, but limits appreciation for the positive role that many South African men play in the socialisation, nurturing, care and protection of children (Van den Berg & Makusha, 2018).

Social Fatherhood and Adolescent Adjustment in South Africa

There are many cultural and social variants in the way fatherhood is understood and practiced, and it is not a purely biologically-based concept (Richter, 2006). For instance, fatherhood by black South Africans is traditionally a collective enterprise, with close friends and extended family members all participating in the care of a child (Richter, 2006). Moreover, due to high rates of migrant labour, union instability, and paternal orphaning (Hosegood & Madhavan, 2010), the practice of social fatherhood has also become a common feature of life in cities and towns (Hall et al., 2018). This phenomenon of social fathering, a term used to encompass the wide variety of fathering relationships that occur outside that of the biological father (Richter, 2006), means that children in South Africa are frequently exposed to multiple men who are often considered and expected to be a father to the child as well (Hall et al., 2018).

These relationships of care for children by social fathers may vary according to residency patterns. In South Africa, although only 38 percent of children live with their biological father, more than 75 percent reside with at least one adult male (Hall et al., 2018). Given that co-resident men are likely to be in regular contact with the child, this highlights the potential for social fathering of children in South Africa by co-resident men (Van den Berg & Makusha, 2018). These relationships may also vary according to socially and culturally defined roles, duties, activities and responsibilities of childrening ascribed to older men (Hall et al., 2018). Male relatives have always played a substantial role in the care of children in South Africa (Hall et al., 2018). However, while social fathering roles are typically ascribed to relatives of the child, other social fathering roles are often taken up by teachers, friends, neighbours and mother's romantic partners as well as religious and community leaders (Hall et al., 2018).

Thus, although there is extensive evidence showing that biological father-child involvement is likely to have a positive impact on adolescent adjustment in South Africa (Profe & Wild, 2017); this may not be the only way in which adolescents may benefit from the involvement of men in their lives. For instance, Louw (2018,) found that South African adolescents identified non-biological father-figures as significant providers of "support for educational, emotional, and cultural or moral development" (p.71). Similarly, a quantitative study by Wild (2016) found that maternal grandfather involvement was associated with fewer emotional problems in adolescents. While these research findings suggest that social fathering may be a potential protective factor against poor adolescent adjustment in South

Africa, the topic of social fathering and adolescent adjustment in the local context has only been briefly explored.

Social Fatherhood and Adolescent Adjustment in the United States (US)

As in South Africa, there have been many cases elsewhere whereby men have taken on the role of a social father. This is particularly the case for African Americans where a similar context marked by "legacies of racism, increased rates of incarceration and HIV/AIDS, and a web of interlocking inequalities that effectively precludes them from accessing employment with good wages" undermine fathers' abilities to meet their parenting responsibilities (Madhavan & Roy, 2012, p.801). As such, the role of men outside that of the biological father has become crucial in supporting fathering within these contexts (Madhavan & Roy, 2012). For instance, using a sample of African American women, Jayakody and Kalil (2002) found that 51 percent of their children had a social father, of which 31.6 percent were the mothers' partner and 19.6 percent were male relatives. These children typically experienced frequent contact with their social father. While in this study the frequency of contact with male relative social fathers was associated with greater school readiness of children, a negative association between the presence of social fathers who were the mother's partner and the emotional maturity of children was found.

Frequency of contact, however, often does not predict better adjustment in childhood and adolescence, even when considering biological fathers (Jayakody & Kalil, 2002). For instance, Yoon and colleagues (2018a), using a sample of low-income preadolescents at risk of maltreatment, found that quantity of resident father involvement, both by biological and social fathers, was associated with greater internalising and externalizing behaviour problems, whereas quality of their involvement was associated with lower levels of these problems. This suggests that it is important for researchers to take into account the nature of social father involvement, and not simply to assess the presence of a social father or the amount of contact that he has with a child or adolescent.

Rationale for the Present Study

With a dearth of research on the topic of social fathering and adolescent adjustment in South Africa, these international findings provide a useful source of evidence which suggests that social fathering may be a potential protective factor against poor adolescent adjustment in the local context. However, there are both similarities and differences between South Africans and Americans when comparing identity development. One particular cultural difference that would affect this study, if generalized, is the describing of men. In indigenous African cultures one would use words such as willing to help, cooperative and obedient;

while in the more Westernized cultures one would describe men as more independent and individualistic (Low, Akande & Hill, 2005). This cultural variation alone provides reasonable doubt when generalizing findings on fatherhood from different cultural backgrounds. Further, most of these studies are limited in the sense that their focus was either restricted to frequency of contact or residency.

Given this phenomenon of social fathering, a reappraisal of the notions of developmental deficits and fatherlessness is needed. Although research suggests that social fathering may be a potential protective factor against poor adolescent adjustment in South Africa, there exists a dearth of research on social fathering and adolescent adjustment within this context. Building on the existing literature in South Africa, there is a need for further research aimed at identifying the types of non-biological father-child relations that exist and how these relationships are associated with adolescent adjustment. There is also a need for quantitative research that, in addition to investigating the transferability of international findings to the South African context, also contributes to the gaps in the international literature. Such research should focus on identifying the impact that resident, as well as non-resident, social fathers have on adolescent adjustment, through not only the quantity of their involvement, but also the quality of such involvement.

Research Aim and Hypotheses

Given the phenomenon of social fathering and the importance of father-child involvement for adolescent adjustment, this study aimed to investigate the implications of social father involvement for adolescent adjustment in a sample of high school students in Cape Town, South Africa. The first objective of this study was to investigate whether the quality and quantity of social father involvement differed by social father type. A second objective was to investigate whether the quality and quantity of social father involvement was associated with adolescent behavioural and socio-emotional adjustment, even after controlling for parental involvement and demographic characteristics. A third objective was to determine whether the associations between social father quality and quantity of involvement and adolescent adjustment outcomes were moderated by social father type. Because the study focused on a topic that has not yet received research attention in South Africa, there was also a need to lay down conceptual and methodological foundations so that continued research can be supported. As such, this study had a secondary objective to confirm the internal consistency of the scales used to assess the quality and quantity of social father and parent involvement, which has only been assessed in the United States. Informed by theory, international research,

and consideration of family structures within the South African context, the following three research hypotheses were tested:

- H1: Social father quality and quantity of involvement will be higher among relative social fathers than other types of social fathers.
- H2: The quality of social father involvement will be positively associated with adolescent adjustment outcomes.
- H3: the association between social father quality of involvement and adolescent adjustment outcomes will be stronger for adolescents with relative social fathers than with other types of social fathers.

Methods

Design and Setting

This study employed a correlational research design. Participant data were collected anonymously in a classroom setting with the use of a structured questionnaire. Such a design is suitable given the short time period allocated to this study. Moreover, the correlational design is useful for investigating how variables that are naturally occurring (such as social father involvement and adolescent adjustment) are related in terms of direction and strength when it is either impossible or unethical for them to be manipulated (Wilson & MacLean, 2011). In addition, survey research can obtain relevant information on a large sample from the population of interest relatively quickly and at a low cost (Ponto, 2015). In addition, questionnaires that are well-structured can yield standardized data that can then be reproduced in and compared with additional samples (Cozby, 2009).

Participants

Sample characteristics. The sample consisted of 280 grade 10 and 11 learners from one public co-educational high school in a suburb of Cape Town, Western Cape, South Africa. Participants consisted of 141 female learners (50.36%) and 139 male learners (49.64%), aged between 15 and 18 years (M = 16.24, SD = .69). The sample consisted of 167 white students (59.64%), 58 coloured students (20.71%), and 36 black students (12.86%). Of those students, 121 had social fathers (43.21%). In addition, 52% of those social fathers were a relative of the participant, which included uncles, grandfathers and occasionally an older brother. Non-relative social fathers included coaches, teachers and religious leaders.

Sampling procedure. Due to limited time and for practical reasons, convenience sampling techniques were employed. Four easily accessible public schools were contacted, one of which consented to participate in the study.

Sample size calculation. Sample size was calculated a priori for multiple regression analyses using G*Power (Version 3.1.9.4). Assuming $\alpha = .05$, directional hypotheses, 10 predictors, a target power of .80 and a medium effect size (Cohen's f 2 = .15), a minimum of 118 participants were required for the overall regression. Post-hoc power analyses revealed that with a final sample size of 121, a target power of .80 was achieved with an effect size of f 2 = .15.

Inclusion and exclusion criteria. Inclusion in this study was restricted to adolescent learners between the ages of 12 and 17. Learners were also required to reside with their biological mother in order to promote homogeneity in the sample. Given that 75% of children in South Africa co-reside with their biological mother (Hall & Richter, 2018); this was an appropriate and unrestrictive inclusion criterion for the study. The original eligible sample consisted of 312 grade 10 and 11 learners, of whom 191 (61.22%) were excluded from the study. Excluded were those who had no social father (n = 159); who were not living with their biological mother (n = 5); and who failed to complete the questionnaire (n = 27).

Measures

Demographic and background characteristics. The demographic and background characteristics of adolescents that were assessed included their age, gender, race and the presence or absence of non-parental adults other than the social father in the adolescent's home. The study also assessed the adolescent's household socioeconomic status (SES). This was done by utilising a 24-item asset index approach (Booysen, Van der Berg, Burger, Von Maltitz, & Du Rand, 2008). Adolescents were asked to report on whether they had facilities such as running water and electricity inside their home, and consumer durables such as refrigerators, motorcars and televisions (Botha, Booysen, & Wouters, 2018). These responses were summed to formulate a composite score. Participants were then allocated into one of three groups, indicating low, medium and high SES, by using a tertile split. Evidence has shown that asset indices are a useful proxy measure of SES for child reports in South Africa that are statistically robust and parsimonious (Barnes, Wright, Noble, & Dawes, 2007). In addition, maternal cash income, education level, marital status, and better partner support are associated with asset indicator scores (McVeigh, Norris, & De Wet, 2004). Asset indicator scores can therefore also be utilised as a proxy to control for these additional variables (Profe & Wild, 2017). Asset indices have also been shown to explain the variance in child outcomes by a similar proportion to that of more advanced indices based on data reduction techniques such as principal component and factor analyses (Sheppard, Norris, Pettifor, Cameron, & Griffiths, 2009).

Social father presence and type. To determine whether or not an adolescent had a social father, the adolescent was asked to answer the following questions: Other than your biological father, is there a man in your life who you spend a lot of time with or who you are very close to – someone who you might consider a father figure? Adolescents who answered yes to this question were asked to define their relationship and whether they resided in the same household with this man. Respondents were also asked to state the number of years that this man had been important in their lives. However, due to time constraints, it was regrettably not possible to extend the scope of the project to include all the different types of social fathers and was summarized to relative social fathers, romantic social fathers (mother's romantic partner) and other.

Quantity of social father involvement. The quantity of social father and parents' involvement was measured using a youth-report scale that assesses the degree of a social father's/father's/mother's recent involvement in the adolescent's life. This measure consists of nine items assessing the level of engagement by these parental figures in day-to-day shared activities and discussions with the child in the past four weeks. All items were answered on a binary response scale ranging from 1=(no) to 2=(yes), with an additional response option of $0=(do\ not\ have\ this\ parent)$. These items were also adapted from the youth self-report measure developed by the Add Health Study (Resnick et al., 1997). The number of shared activities was totalled to provide a score ranging from 0 to 9, with a greater quantity of involvement indicated by higher scores. While this scale has not been used within the context of South Africa, preliminary evidence for the internal reliability of the scale has been found within low-income samples of American adolescents, with sound internal consistency found for the quality of mother involvement ($\alpha=.68$ to $\alpha=.70$) as well as for co-resident and non-co-resident father/father-figure involvement ($\alpha=.71$ to $\alpha=.74$; Yoon et al., 2018a, 2018b).

Quality of involvement. The quality of social father and parents' involvement was measured using a youth-report scale that assesses adolescents' perceived quality of their relationship with their social father and parents. This measure consists of six items assessing the degree of closeness, care, understanding, trust, getting along and shared-decision making experienced by the adolescent in these relationships. All items were answered on a 5-point Likert-type scale ranging from 1= (not at all/ never) to 5= (very much/ always), with an additional response option of 0= (do not have this parent). These items were adapted from the youth self-report measure of parent-child closeness developed by the Add Health Study, which was designed for use with learners in grades 7 to 12, who range in age from 12 to 17 years (Resnick et al., 1997). Scores were summed to obtain a composite score of the quality

of father-child, social father-child and mother-child interactions, with better interaction quality indicated by higher scores. While this scale has not been used within the context of South Africa, preliminary evidence for the internal reliability of the scale has been found within low-income samples of American adolescents, with high internal consistency found for mother/ mother-figure involvement quality (α = .81 to α = .84) as well as for co-resident and non-co-resident father/father-figure involvement quality (α = .83 to α = .87; Yoon et al., 2018a; Yoon, Kobulsky, Yoon, & Kim, 2017;, Yoon et al., 2018b). In addition, preliminary findings suggest that this measure has convergent validity (Yoon et al., 2017).

Adolescent Adjustment. This study employed the youth self-report version of the Strengths and Difficulties Questionnaire (SDQ; Goodman, 1997) to assess the adjustment difficulties and positive attributes of adolescents. The SDQ is a brief screening instrument consisting of 25-items divided between five 5-item subscales of hyperactivity-inattention, emotional symptoms, peer relationship problems, conduct problems and prosocial behaviour (Goodman, 1997). All items are answered on a 3-point Likert-type scale ranging from 0 = (not true) to 2 = (certainly true) (Attar-Schwartz, Tan, Buchanan, Flouri, & Griggs, 2009). A Total Difficulties score can be generated by summing all item scores except those pertaining to prosocial behaviour, with more total difficulties indicated by higher scores (Goodman, 1999). In addition, findings showing a high correlation between SDQ scores and scores from the far more extensive Child Behaviour Checklist (CBCL) provide evidence for the SDQ instrument's concurrent validity (Goodman & Scott, 1999). The SDQ has also been found to discriminate well between low-risk and high-risk samples (Hawes & Dadds, 2004). Moreover, research has shown that the structure and content of the SDQ is understood by youth from a diversity of cultural groups and comparable mean scores have been found across a diverse range of populations (Achenbach et al., 2008). The SDQ youth self-report form has also been used previously within adolescent samples in Cape Town, South Africa (Levetan & Wild, 2015; Profe & Wild, 2017).

Procedure. Learners from the participating school who chose to participate in the study were given verbal instructions on the assent forms (see Appendix C and E) and the survey (see Appendix A). Learners were then given a week to return any Parent Assent forms. Participating grades then gathered in their respective allocated times and those that handed in assent forms from their parents were excused. The rest were asked to fill out the paper-and-pencil survey form independently and the researcher was available throughout the survey completion period to monitor the learners and to answer any questions. The participants completed the survey within a 15 minute time frame. Once data was collected

from both grades, all surveys were counted and those surveys that were incomplete or didn't meet the criteria were then disposed of. The remaining surveys were added onto the SPSS spreadsheet and various tests were then run once all the data was uploaded.

Ethical Considerations. Permission to conduct the study was granted by an Ethics Review Committee of the Faculty of Humanities (see Appendix F), University of Cape Town, the Western Cape Education Department, and the principal of the participating high school. Parents of all learners at the participating school then received a parental consent form informing them about the study. Parents were required to return the form only if they wished for their children to be withdrawn from the study. This is known as passive consent and was an appropriate procedure for this study, given that this study was unlikely to cause distress or harm to participants. The SDQ scale that is used in this survey is relatively short compared to other screening tests, like the Child Behaviour Check List which consists of 118 questions. The SDQ scale of only 25 questions has a positive reputation and is used with younger children as well, making it more user-friendly and less likely to cause any distress (Stone, Otten, Engels, Vermulst, & Janssens, 2010).

In addition, all participating students were required to complete an informed assent form. Both forms provided information about the purpose of the study as well as the procedures and expected duration of the research (see Appendix B and D). The forms informed both parents and students that participation was voluntary and that students were free to refuse to answer any of the survey questions and could withdraw at any time with no penalties. While this study was unlikely to be harmful to participants, with some of the questions pertaining to participant's relationships with their parents and social fathers being of a sensitive nature, there was chance that participants may experience some distress. In such cases, students were reminded that they could withdraw from the study at any point and would be referred to a school counsellor as well as provided with contact details for Child Line South Africa. At the end of the survey completion and collection period, researchers asked the participants whether they could address any additional questions or concerns. To ensure confidentiality of the students' responses, the completed surveys were locked away in a secure filling cabinet that only researchers may access. When the study was completed, the schools were offered a brief summary of the results. Participants were also informed that their responses would be anonymous and that their details would be kept confidential. There were no financial costs for participation in the study, and no compensation was provided for participation.

Data Analysis. The data were analysed using IBM SPSS Statistics. Significance was set at p < .05 for all analyses. Prior to testing the hypotheses, descriptive statistics were calculated.

Hypothesis 1: An independent samples t-test was conducted to determine whether social father quality and quantity of involvement was significantly greater for relative than for non-relative social fathers.

Hypothesis 2: Pearson correlation coefficients were used to assess the associations between social father quality of involvement and adolescent adjustment on all SDQ scales.

Hypothesis 3: A series of hierarchical multiple regression model were used to determine whether the association between social father quality of involvement and adolescent adjustment outcomes was stronger for adolescents with relative social fathers than with other types of social fathers. . Variables that were controlled in these analyses included adolescents' age, sex, race, and socioeconomic status, as well as parental involvement, the presence of non-parental adults in the home and the duration of the child-social father relationship. These control variables were selected because of their associations with adjustment in childhood and adolescence (Bzostek, 2008; Levetan & Wild, 2015). The regression models were then used to assess whether associations between social father quality of involvement and adolescents' adjustment outcomes were moderated by the social father type. The quality of social father involvement scales were centred on their sample means in order to lessen the risk of multicollinearity. This was done prior to the interaction terms being computed (social father type x quality of involvement). The hierarchical regression models were constructed by first entering all control variables in one block, including quality of involvement of the mother and the father. The second step was to enter quality of social father involvement. Social father type was then added, followed by the interaction term. Regression analyses were run for all SDQ adjustment subscales, with non-significant independent variables excluded sequentially from the models and the analyses, then rerun.

Results

Descriptive Statistics

Descriptive statistics, including means (M) and standard deviations (SD) for the key study variables, are presented in Table 1.

Table 1 Descriptive Statistics (N = 121)

Variables	Minimum	Maximum	Mean	Std. Deviation
SES	1	3	1.83	.81
Quantity Mother	0	9	5.53	1.73
Quantity Father	0	9	4.22	2.46
Quantity Social Father	0	8	2.65	2.21
Quality Mother	6	25	20.91	3.65
Quality Father	0	25	17.92	6.49
Quality Social Father	6	25	18.13	3.18
SDQ subscales				
Prosocial	3	10	7.98	1.52
Hyperactivity	2	9	5.45	1.69
Emotional	0	10	4.25	2.53
Conduct	1	6	2.60	1.24
Peer	2	8	5.23	1.12
Total Difficulties	8	27	17.53	4.03

Mothers received the highest scores for both quantity and quality of involvement. Social fathers received the lowest score for quantity of involvement, but received slightly higher scores for quality of involvement than biological fathers.

Independent Samples *t***-tests**

The result of the first independent samples t-test was statistically significant, t (119) = 2.35, p = .02, with the quantity of involvement of social fathers being significantly greater for relative (M = 15.79, SD = 2.25) than for non-relative social fathers (M = 14.86, SD = 2.09). $\sqrt{}$ The result of the second independent samples t-test was also statistically significant, t (119) = 3.32, p = .001, with the quality of involvement of social fathers being significantly greater for relative (M = 19.02, SD = 2.75) than for non-relative social fathers (M = 17.17, SD = 3.35) $\sqrt{}$

Correlations

Table 2 summarises the results of the correlational analyses. Pearson's correlations were calculated to assess the relationship between the quality of social father involvement, and the prosocial behaviour, hyperactivity-inattention, emotional symptoms, conduct

problems, peer relationship problems, and total difficulties subscales of the Strength and Difficulties Questionnaire. Inspection of the correlation matrix (see Table 2) revealed that there were no significant correlations between the quality of social father involvement and prosocial behaviour, hyperactivity-inattention, conduct problems, or peer relationship problems. Quality of social father involvement was, however, significantly negatively correlated with emotional symptoms, r = -.24, p < .01, indicating that greater quality social father involvement was associated with fewer emotional problems among adolescents. In addition, quality of social father involvement was also significantly negatively correlated with total difficulties, r = -.19, p = .029, suggesting that greater social father involvement was associated with fewer total difficulties among adolescents.

There were also some significant associations between the control variables and the outcome measures. Gender was significantly correlated with hyperactivity-inattention and emotional symptoms. Age did not show any significant correlations with the SDQ subscales.

Hierarchical Multiple Regression Analyses

Separate regressions were run for each SDQ subscale and for the total difficulties scale. However, none of the subscales or total difficulties showed any significance towards quality of involvement, except for emotional problems. This was expected as emotional problems had a significant negative correlation with social father quality of involvement, shown in Table 2. Control variables were also limited to those that showed significant correlations with the outcome variable.

Covariates. Step 1, which included the covariates, seemed to account for 4.6% of the variance in emotional problems. However, these results were not significant, F(1.41) = 1,41; p = .236. This suggests that neither race nor quality involvement of the mother and father associated with emotional symptoms.

Social father involvement and emotional symptoms. After accounting for the variables in the previous step, the addition of social father quality of involvement at step 2 explained a further 9% of variance in emotional symptoms. In addition, the overall model is statistically significant (F(5.48) = 2.27; p = .021) and the standard error of estimate (2.46) is less than the standard deviation of emotional problems (2.52). No significant associations were found between social father quality of involvement and the other SDQ measures.

Social father type. The inclusion of social father type at step 3 failed to explain additional variance in the adolescent adjustment outcome variables. Therefore, no significant interactions were found between social father type and emotional problems in predicting adolescents' reported adjustment on any of the SDQ subscales or the total difficulties scale.

Social father type × **quality.** The inclusion of the interaction term at step 4 also failed to explain additional variance in the adolescent adjustment outcome variables. This would suggest that all social father types and their quality of involvement significantly reduce emotional problems, and therefore does not specify.

Table 2

Correlations analysis (n = 121)

Variables	1	2	3	4	5	6	7

1. Quality Social Father

2.	Prosocial	001	-					
_								
3.	Hyperactivity	089	.043	-				
4	Emotional	244**	.118	165	_			
••	Zinotionai		.110	.100				
5.	Conduct	065	124	.087	.265**	-		
6.	Peer	.043	001	.028	.136	023	-	
7	Total Difficulties	100*	054	.556**	Q15**	504**	266**	
/.	Total Difficulties	198	.034	.550	.013	.504	.500	-

^{**.} Correlation is significant at the 0.01 level (2-tailed).

Table 3

Hierarchical regression analysis

	A	Adjusted	SE of		Change	e Statis	stics		Durbin-
Model	\mathbb{R}^2	\mathbb{R}^2	Estimate	\mathbb{R}^2	F	df1	df2	P	Watson
1	.046	.013	2.51	.046	1.41	4	116	.236	
2	.090	.050	2.46	.043	5.48	1	115	.021	
3	.091	.043	2.47	.001	.15	1	114	.703	
4	.095	.039	2.48	.004	.49	1	113	.488	2.098

- a. Predictors: (Constant), black, coloured, quality father, quality mother
- b. Predictors: (Constant), black, coloured, quality father, quality mother, quality social father
- c. Predictors: (Constant), black, coloured, quality father, quality mother, quality social father, social father type
- d. Predictors: (Constant), black, coloured, quality father, quality mother, quality social father, social father type, social father type x quality (interaction)
- e. Dependent Variable: Emotional

^{*.} Correlation is significant at the 0.05 level (2-tailed).

Discussion

This study investigated the nature of social father involvement and its implications for adolescent adjustment in South Africa. It was hypothesised that social father quality and quantity of involvement would be higher among relative social fathers than other types of social fathers. In addition, it was expected that the quality of social father involvement would be positively associated with adolescent adjustment outcomes. Furthermore, it was hypothesised that the association between social father quality and quantity of involvement and adolescent adjustment outcomes would be stronger for adolescents with relative social fathers than for those with other types of social fathers. The first two hypotheses were supported by the data. However, limited support emerged for the final study hypothesis.

First, the results showed that the quality and quantity of social father involvement was greater for relative than for non-relative social fathers. As indicated earlier, fatherhood is as much a socially and culturally based construct as a biological one, and many children encounter more than one type of a diverse range of fathering relationships. In South Africa especially, extended kin networks are the norm, often containing caring uncles, grandfathers, and older brothers who serve as important father figures in the lives of adolescents (Van den Berg & Makusha, 2018). Male relatives often serve as father figures to children, whether their biological father is present or not. This may be the reason for adolescents having reported a higher quantity and quality of involvement by relative father figures; as such relationships may have been developed and maintained over a long period of time. This is seen specifically in the African culture, where children are sent to visit close relatives on numerous occasions for various lengths of time to strengthen relationships and consolidate family ties (Richter, Chikovore, & Makusha, 2013).

Second, the quality of social father involvement was negatively correlated with emotional symptoms and total difficulties on the SDQ, which indicates that a higher quality of social father involvement was associated with fewer emotional problems and fewer total difficulties in adolescents. Similar results were obtained by Wild (2016), who found that more positive involvement of the maternal grandfather was associated with fewer emotional problems in adolescents.

Third, greater social father involvement was expected to be significantly associated with adolescent reports of less emotional symptoms and total difficulties. However, results showed that the greater quality of social father involvement only showed significant effects on emotional symptoms. No significant associations were found between social father quality

of involvement and the other SDQ measures. While the sample is not nationally representative, considering the lack of studies investigating social fathers in SA, this small-scale study is a necessary starting point for research in this area.

It is interesting to note that self reports are in fact affected by gender and age, as seen in previous studies, which may suggest that small sample sizes are subject to response biases. It has also been found that males have a lower score than females when it came to Internalizing problems; which included anxiety/depression and withdrawn/depression. However, females would generally score lower than males when it came to Externalizing behaviour; such as rule breaking. (Bartels, van de Aa, van Beijsterveldt, Middeldorp, Boomsma, 2011)

Study Limitations and Directions for Future Research

This study has several limitations that should be considered and addressed by future research. One limitation of this study is that the data were based solely on adolescent self–reports, without consideration of the perceptions of parents and social fathers. Although adolescents' own perceptions of their social relationships are of primary importance for their adjustment, there is cause for concern when it comes to the accuracy and validity of self-report surveys. It has been shown that some adolescents give invalid responses on self-administered surveys, such as to report extreme levels on the psychosocial and behavioural outcome variables. A distinction can be made between inaccurate responders and 'jokesters', who show considerably more pronounced distorting effects on some psychosocial and behavioural outcome variables than inaccurate responders (Fan et al., 2006). Fan et al. (2006) suggest that although this jokester effect may not seriously bias the results in studies that focus on large groups, for research focusing on some special subgroups (like this study) that effect could pose a serious challenge to the validity of research findings. Thus, the reliability of future studies would be enhanced by supplementing adolescent reports with accounts from mothers, fathers, and social fathers.

A second limitation of the study is that structured, quantitative questionnaires provide limited response options, based on the selection made by the researcher. In order to get a more in-depth, insightful understanding of the relationships between adolescents and social fathers in context, it would be helpful to conduct qualitative interviews alongside the questionnaires. In addition, the present study only assessed certain aspects of adolescent emotional and behavioural adjustment, based on the SDQ subscales. As a result, other aspects of adjustment, such as adolescent academic achievement, were neglected.

It was found that South African adolescents identified non-biological father-figures as significant providers of "support for educational, emotional, and cultural or moral development" (Louw, 2018). Perhaps a more comprehensive measure of adjustment would be important to probe these findings and to gain a more holistic understanding of the implications of social fathers and involvement for the well-being of adolescents.

The third limitation of the study is that the convenience sample was unrepresentative of the racial and cultural diversity of South African adolescents. Black African and coloured people constitute the majority of the population in the Western Cape, and it has been found that there are many types of fatherhood. Social fatherhood, however, is the most prevalent in these cultures (Mncanca, Okeke, & Fletcher, 2016). Unfortunately, black African and coloured learners were underrepresented in the study sample. In addition, the participants were similar to one another in age and SES. Future studies could therefore enhance the generalisability of these findings by recruiting more diverse and representative samples.

A final limitation of the study is that causal relationships between social father involvement and adolescent adjustment cannot be assumed due to the cross sectional design. Longitudinal studies would be better able to determine whether high-quality social father involvement precedes better adolescent adjustment.

Study Contributions and Implications

In spite of its shortcomings, this study has provided some support for the potential benefits of social father involvement for adolescent adjustment in South Africa. Fatherhood is often discussed as an abstract concept, while it is embedded within dynamic family structures and cultural expectations (Van den Berg & Makusha, 2018). This study has supported the importance of social fathers by showing that higher quality social father involvement was associated with fewer emotional problems and total difficulties in adolescents.

This is one of the few studies to attempt to address the association between social father quality and quantity of involvement and adolescent adjustment outcomes. The findings of this study suggest that social fathers may have an important - albeit small - role to play, in fostering key emotional attitudes and behaviours in the younger generation during the often turbulent period of adolescence. Although it is not clear whether or not this is a causal relationship, evidence from this study can serve as a platform for exploring the social father-adolescent relationship further, and provide some groundwork for more in-depth analysis that is yet to come.

Conclusion

Adolescence is a critical phase in human development characterised by rapid physical, cognitive, emotional and social change (George & Van den Berg, 2011). This study assessed the implications of social father involvement for adolescent adjustment in a sample of grade 10 and 11 learners in Cape Town, South Africa. Findings indicated that social father quality and quantity was higher among relative social fathers than other types of social fathers. In addition, the quality of social father involvement was found to be significantly negatively correlated with emotional problems and total difficulties, indicating that higher quality social father involvement was associated with fewer emotional problems and total difficulties among adolescents. Furthermore, results indicated that the greater quality of social father involvement showed significant effects on emotional symptoms. However, there was no evidence that the relationship between social father involvement and adolescents' adjustment was stronger for relative social fathers than for non-relative social fathers. Despite providing only partial support for the hypotheses, this study has added to the limited research literature investigating the social father - adolescent relationship, and has provided some insight into the complexities of family support structures in the South African context. Further research is needed to provide a clearer understanding of how the association between social father involvement and adolescent adjustment might come about, and to examine this in more representative samples. Nevertheless, the findings highlight the need to move beyond the hyper-idealistic notion of the nuclear family and promote, instead, the necessity of including social fathers as part of the healthy development and adjustment of children.

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Appendix A



University of Cape Town Department of Psychology

Survey on Adolescent adjustment and social fathers in South Africa

	Background characteristics: (please tick box)
Age:	
	12
	13
	14
	15
	16
	17
	18
Sex:	
	Female
	Male
Race:	
	Black
	Coloured
	Indian
	White
	Other
*Pleas	e tick the box if you have:
	Geyser with hot running water
	Indoor flushing toilet
	Electricity inside your home
	Refrigerator / freezer
	Microwave oven
	Vacuum cleaner / floor polisher

□ Wash	ing machine
□ Deskt	top / laptop
\Box DVD	player / blue ray player / PlayStation / Xbox
□ Electr	ric stove
□ Telev	ision
□ Tumb	ole dryer
□ Land	line telephone
□ Radio)
☐ Kitch	en sink
□ Home	e security service
□ Deep	freezer
□ Pay-7	TV subscription
□ Dishv	vasher
☐ At lea	ast one car
□ Home	e theatre system
□ Swim	nming pool
☐ Air co	onditioner
☐ At lea	ast one cell phone
1.1) Other th	nan your biological father, is there a man in your life who you spend a lot of
time with or	who you are very close to – someone you might consider a father figure?
(please circle	e your answer)
(a) No, I do r	not have a father figure
(b) I have a s	ocial father who is currently in a romantic relationship with my mother
(c) I have a s	ocial father who is a relative,
(d) I have a s	ocial father who is someone other than a relative or my mother's romantic
partner.	
1.2) Please d	lescribe your relationship with this man (i.e. your social father): (is he your
fathers' broth	her, mothers' brother, fathers' father, mothers' father, teacher, religious leader,
coach, stepfa	ther, mother's boyfriend, fathers' friend, mothers' friend, etc.?)

1.3) Please indicate the number of years that your social father has been important in your life

- **2.) Does your social father live with you?** (please circle your answer)
- (a) I do not have a social father
- (b) my social father lives with me,
- (c) my social father does not live with me.
- **3.)** Other than your parents or your social father, are there other adults that live with you? (please tick the box)

□ Yes

□ No

(Please circle your answer.)

	(
4.) How close do you feel to	How close do you feel to your	How close do you feel to your				
your mother? (please circle	biological father? (please circle	social father? (please circle your				
your answer)	your answer)	answer)				
0 = do not have this parent	0 = do not have this parent	0 = do not have a social father				
1 = not close	1 = not close	1 = not close				
2 = not very close	2 = not very close	2 = not very close				
3 = moderately close	3 = moderately close	3 = moderately close				
4 = quite close	4 = quite close	4 = quite close				
5 = very close	5 = very close	5 = very close				
5.) How much do you think	How much do you think your	How much do you think your				
your mother cares about you?	biological father cares about	social father cares about you?				
(please circle your answer)	you? (please circle your	(please circle your answer)				
0 = do not have this parent	answer)	0 = do not have a social father				
1 = not at all	0 = do not have this parent	1 = not at all				
2 = not very much	1 = not at all	2 = not very much				
3 = moderate amount	2 = not very much	3 = moderate amount				
4 = quite a lot	3 = moderate amount	4 = quite a lot				
5 = a lot	4 = quite a lot	5 = a lot				
	5 = a lot					
7.) How often do you get	How often do you get along	How often do you get along with				
along with your mother?	with your biological father?	your social father? (please circle				
(please circle your answer)	(please circle your answer)	your answer)				

0 1 11 11	0 1 11 11	
0 = do not have this parent	0 = do not have this parent	0 = do not have a social father
1 = never	1 = never	1 = never
2 = not very often	2 = not very often	2 = not very often
3 = sometimes	3 = sometimes	3 = sometimes
4 = often	4 = often	4 = often
5 = always	5 = always	5 = always
8.) How often do you trust	How often do you trust your	How often do you trust your
your mother? (please circle	biological father? (please circle	social father? (please circle your
your answer)	your answer)	answer)
0 = do not have this parent	0 = do not have this parent	0 = do not have a social father
1 = never	1 = never	1 = never
2 = not very often	2 = not very often	2 = not very often
3 = sometimes	3 = sometimes	3 = sometimes
4 = often	4 = often	4 = often
5 = always	5 = always	5 = always
J – aiways	J – aiways	3 – aiways
0) How often do you and	How often do you and your	How often do you and your
9.) How often do you and	How often do you and your	How often do you and your
your mother make life	biological father make life	social father make life decisions
decisions together? (please	decisions together? (please	together? (please circle your
circle your answer)	circle your answer)	answer)
0 = do not have this parent	0 = do not have this parent	0 = do not have a social father
1 = never	1 = never	1 = never
2 = not very often	2 = not very often	2 = not very often
3 = sometimes	3 = sometimes	3 = sometimes
4 = often	4 = often	4 = often
5 = always	5 = always	5 = always
10.) In the past four weeks,	In the past four weeks, have	In the past four weeks, have you
have you gone shopping with	you gone shopping with your	gone shopping with your social
your mother? (please circle	biological father? (please circle	father? (please circle your
your answer)	your answer)	answer)
0= do not have this parent	0= do not have this parent	0= do not have a social father
1= yes	1= yes	1= yes
2= no	2= no	2= no
11.) In the past four weeks,	In the past four weeks, have	In the past four weeks, have you
have you played a sport with	you played a sport with your	played a sport with your social
your mother? (please circle	biological father? (please circle	father? (please circle your
your answer)	your answer)	answer)
0= do not have this parent	0 = do not have this parent	0= do not have a social father
1= yes	1= yes	1= yes
2= no	2= no	2= no
2-110	2-110	2-110
		1
12.) In the past four weeks.	In the past four weeks, have	In the past four weeks, have you
12.) In the past four weeks, have you gone to any	In the past four weeks, have you gone to any religious	In the past four weeks, have you gone to any religious services or
12.) In the past four weeks, have you gone to any religious services or events	In the past four weeks, have you gone to any religious services or events with your	In the past four weeks, have you gone to any religious services or events with your social father?

with your mother? (please circle your answer) 0= do not have this parent 1= yes 2= no	biological father? (please circle your answer) 0= do not have this parent 1= yes 2= no	(please circle your answer) 0= do not have a social father 1= yes 2= no
13.) In the past four weeks, have you gone to any concerts, plays, museums, or movies with your mother? (please circle your answer) 0= do not have this parent 1= yes 2= no	In the past four weeks, have you gone to any concerts, plays, museums, or movies with your biological father? (please circle your answer) 0= do not have this parent 1= yes 2= no	In the past four weeks, have you gone to any concerts, plays, museums, or movies with your social father? (please circle your answer) 0= do not have a social father 1= yes 2= no
14.) In the past four weeks, have you talked to your mother about your friends? (please circle your answer) 0= do not have this parent 1= yes 2= no	In the past four weeks, have you talked to your biological father about your friends? (please circle your answer) 0= do not have this parent 1= yes 2= no	In the past four weeks, have you talked to your social father about your friends? (please circle your answer) 0= do not have a social father 1= yes 2= no
15.) In the past four weeks, have you talked to your mother about any personal problems? (please circle your answer) 0= do not have this parent 1= yes 2= no	In the past four weeks, have you talked to your biological father about any personal problems? (please circle your answer) 0= do not have this parent 1= yes 2= no	In the past four weeks, have you talked to your social father about any personal problems? (please circle your answer) 0= do not have a social father 1= yes 2= no
16.) In the past four weeks, have you talked to your mother about schoolwork? (please circle your answer) 0= do not have this parent 1= yes 2= no	In the past four weeks, have you talked to your biological father about schoolwork? (please circle your answer) 0= do not have this parent 1= yes 2= no	In the past four weeks, have you talked to your social father about schoolwork? (please circle your answer) 0= do not have a social father 1= yes 2= no
17.) In the past four weeks, have you talked to your mother about other things you are doing in school? (please circle your answer)	In the past four weeks, have you talked to your biological father about other things you are doing in school? (please circle your answer)	In the past four weeks, have you talked to your social father about other things you are doing in school? (please circle your answer)

0= do not have this parent	0= do not have this parent	0= do not have a social father
1= yes	1= yes	1= yes
2= no	2= no	2= no
18.) In the past four weeks,	In the past four weeks, have	In the past four weeks, have you
have you and your mother	you and your biological father	and your social father worked
worked on a school project	worked on a school project	on a school project together?
together? (please circle your	together? (please circle your	(please circle your answer)
answer)	answer)	0= do not have a social father
0= do not have this parent	0= do not have this parent	1= yes
1= yes	1= yes	2= no
2= no	2 = no	
Z- 110	2-110	

(On a scale from 0-2, how true are these statements about you? Please circle your answer.)

(On a search	(On a scale from 0-2, now true are these statements about you? I lease circle your unswer.)				
19.) Are you considerate of other people's feelings? 0 = not true 1 = somewhat true 2 = certainly true	24.) Are you rather solitary, do you tend to play alone? 0 = not true 1 = somewhat true 2 = certainly true	29.) Do you have at least one good friend? 0 = not true 1 = somewhat true 2 = certainly true	34.) Are you nervous or clingy in new situations, do you easily lose confidence? 0 = not true 1 = somewhat true 2 = certainly true	39.) Do you think things out before acting? 0 = not true 1 = somewhat true 2 = certainly true	
20.) Are you restless, overactive, cannot stay still for long? 0 = not true 1 = somewhat true 2 = certainly true	25.) Are you generally obedient, do you usually do what adults request? 0 = not true 1 = somewhat true 2 = certainly true	30.) Do you often fight with other children or bully them? 0 = not true 1 = somewhat true 2 = certainly true	35.) Are you kind to younger children? 0 = not true 1 = somewhat true 2 = certainly true	40.) Do you steal from home, school or elsewhere? 0 = not true 1 = somewhat true 2 = certainly true	
21.) Do you often complain of headaches, stomach aches or sickness? 0 = not true 1 = somewhat true 2 = certainly true	26.) Do you have many worries, do you often seem worried? 0 = not true 1 = somewhat true 2 = certainly true	31.) Are you often unhappy, downhearted or tearful? 0 = not true 1 = somewhat true 2 = certainly true	36.) Do you often lie or cheat? 0 = not true 1 = somewhat true 2 = certainly true	41.) Do you get on better with adults than with other children? 0 = not true 1 = somewhat true 2 = certainly true	

22.) Do you share readily with other children (treats, toys, pencils etc.)? 0 = not true 1 = somewhat true 2 = certainly true	27.) Are you helpful if someone is hurt, upset or feeling ill? 0 = not true 1 = somewhat true 2 = certainly true	32.) Are you generally liked by other children? 0 = not true 1 = somewhat true 2 = certainly true	37.) Are you picked on or bullied by other children? 0 = not true 1 = somewhat true 2 = certainly true	42.) Do you have many fears, are you easily scared? 0 = not true 1 = somewhat true 2 = certainly true
23.) Do you often have temper tantrums or hot tempers? 0 = not true 1 = somewhat true 2 = certainly true	28.) Are you constantly fidgeting or squirming? 0 = not true 1 = somewhat true 2 = certainly true	33.) Are you easily distracted, does your concentration wander? 0 = not true 1 = somewhat true 2 = certainly true	38.) Do you often volunteer to help others (parents, teachers, other children)? 0 = not true 1 = somewhat true 2 = certainly true	43.) Do you see tasks through to the end; do you have a good attention span? 0 = not true 1 = somewhat true 2 = certainly true

Appendix B

Parent/guardian information sheet

Dear Sir or Madam,

We are inviting your child to participate in a research study, if you give your permission. Before you decide whether your child may be a part of the study, it is important for you to understand why the research is being done and what it will involve.

The following information will be read and explained to your child carefully.

Our study focuses on adolescent adjustment and social fathers (i.e. father figures) in South Africa. South African families take many forms. Father figures are often important in our families, together with biological fathers, and sometimes instead of biological fathers. Yet we know very little about father figures and what they contribute to young people's lives. Our aim is to find out more about father figures and whether they have an influence on adolescent adjustment. This topic has not been studied much in South Africa or anywhere else in the world.

Who can participate?

In order to participate, your child will need to between the ages of 12 and 17 and live with his/her biological mother.

Does my child have to participate?

NO. It is up to you and your child to decide whether or not to take part in the study. If you do not want your child to take part, you will need to sign the form included with this letter, and return it to your child's teacher.

Your child can stop being part of the study at any time without giving a reason. You and your child's relationship with the school will not be affected in any way, if your child does not take part.

What would happen if my child takes part?

- First, your child will be given a chance to ask questions about the study.
- Your child will then be asked to sign a form agreeing to take part in the study.
- -After we have collected the signed form, your child will receive a questionnaire and will be asked to complete it during an ordinary school period.

- Your child will not write his/her name on the questionnaire. Instead, your child will be given a unique study number so that his/her name will not be known by anyone.
- -The answers to the questionnaires will be recorded by the researchers and stored on a password protected computer that only our research team will have access to. This means that no one else will ever be able to see your child's answers to the questions.

What will happen to the results of the research?

Any research publication will not identify you or your child individually. After the study is finished, we would be delighted to share the results with you as soon as they are available.

Who has reviewed the study?

This study has received approval from the Research Ethics Committee of the University of Cape Town Psychology Department (ref: will insert number once received), as well as the Western Cape Education Department.

Who is responsible for this study?

Alika Meyerkort, Claire Tatham and Professor Lauren Wild, from the University of Cape Town, are the Principal Investigators for the study.

- Ms Meyerkort can be reached on 072 760 3013 or alika.meyerkort@gmail.com
- Ms Tatham can be reached on 082 301 9132 or TTHCLA001@myuct.ac.za
- Professor Wild can be reached on 021 650 4607 or Lauren. Wild@uct.ac.za
- You can reach Ms Rosalind Adams at the University of Cape Town on 021 650 3417 or Rosalind.Adams@uct.ac.za, if you have any complaints about the study or members of the team.

Appendix C

Parent/Guardian Consent Form

I understand that:

- My child can ask questions about the research before, during and after the study is being completed.
- My child will be able to choose whether or not to participate in the study.
- My child can decide to stop being part of the study at any time.

If you have any questions regarding the study, please feel free to contact anyone on the research team.

If you DO NOT WANT your child to participate in the research study, please sign below and return the form.

Name of child (please print)	
Cionatywa of moment/ayandian.	
Signature of parent/guardian:	
Date:	

VERY IMPORTANT: PLEASE RETURN THIS FORM TO YOUR CHILD'S TEACHER. IF YOU DO NOT SEND IT BACK WE SHALL ASSUME THAT YOU HAVE NO OBJECTIONS TO YOUR CHILD'S PARTICIPATION.

Appendix D

Participant information sheet

Dear Learner,

We are inviting you to join in our research study.

Before you decide whether you want to be part of the study, it is important for you to understand why the research is being done and what it will involve.

Our study focuses on adolescent adjustment and social fathers (i.e. father figures) in South Africa. South African families take many forms. Father figures are often important in our families, together with biological fathers, and sometimes instead of biological fathers. Yet we know very little about father figures and what they contribute to young people's lives. Our aim is to find out more about father figures and whether they have an influence on adolescent adjustment. This topic has not been studied much in South Africa or anywhere else in the world.

Who can participate?

In order to participate, you will need to between the ages of 12 and 17 and live with your biological mother.

Do I have to participate?

NO. It is up to you and your parent/guardian to decide whether or not to take part in the study. If your parent/guardian does not want you to take part, they will need to sign a form, and return it to your teacher.

You can stop being part of the study at any time without giving a reason. Your relationship with your school will not be affected in any way, if you choose not to take part.

What would happen I take part?

- First, you will be given a chance to ask questions about the study.
- You will then be asked to sign a form agreeing to take part in the study.
- -After we have collected the signed form, you will receive a questionnaire and will be asked to complete it during an ordinary school period.

- You will not write your name on the questionnaire. Instead, you will be given a unique study number so that your name will not be known by anyone.
- -The answers to the questionnaires will be recorded by the researchers and stored on a password protected computer that only our research team will have access to. This means that no one else will ever be able to see your answers to the questions.

What will happen to the results of the research?

Any research publication will not identify you individually. After the study is finished, we would be delighted to share the results with you as soon as they are available.

Who has reviewed the study?

This study has received approval from the Research Ethics Committee of the University of Cape Town Psychology Department (ref: will insert number once received), as well as the Western Cape Education Department.

Who is responsible for this study?

Alika Meyerkort, Claire Tatham and Professor Lauren Wild, from the University of Cape Town, are the Principal Investigators for the study.

- Ms Meyerkort can be reached on 072 760 3013 or alika.meyerkort@gmail.com
- Ms Tatham can be reached on 082 301 9132 or TTHCLA001@myuct.ac.za
- Professor Wild can be reached on 021 650 4607 or Lauren. Wild@uct.ac.za
- You can reach Ms Rosalind Adams at the University of Cape Town on 021 650 3417 or Rosalind.Adams@uct.ac.za, if you have any complaints about the study or members of the team.

If any of the questions upset you, or if you would like to talk to someone about the feelings you experienced, please let your school counsellor know, or call Childline on 080 005 5555.

Appendix E

Participant Assent Form

I have read and understood the Information Sheet provided to me.

I understand that:

- I can ask questions about the research project before, during and after the study is being completed.
- I can choose whether or not to participate in the study. Nothing will happen to me if I do not want to take part
- I can decide to stop being part of the study at any time.
- I will not write my name on the questionnaire, and my answers will be kept private.

If you have any questions regarding the study, please feel free to ask anyone on the research team.

Please sign your name if you understand what is involved and agree to participate				
Signature of person giving consent	Printed name			
Date:				

UNIVERSITY OF CAPE TOWN



Department of Psychology

University of Cape Town Rondebosch 7701 South Africa Telephone (021) 650 3417 Fax No. (021) 650 4104

11 June 2019

Alika Meyerkort and Claire Tatham Department of Psychology University of Cape Town Rondebosch 7701

Dear Alika and Claire

I am pleased to inform you that ethical clearance has been given by an Ethics Review Committee of the Faculty of Humanities for your study, Social Fathers and Adolescent Adjustment in South Africa. The reference number is PSY2019-030.

I wish you all the best for your study.

Yours sincerely

Mind

Lauren Wild (PhD) Associate Professor

Chair: Ethics Review Committee

University of Cape Town \$\fomale PSYCHOLOGY DEPARTMENT Upper Campus Rondebosch