

Relationship between Family Function and Couple Well-being in South African

Jinja Divala Amanda

University of Johannesburg, Johannesburg, South Africa

*Corresponding author: Amanda J.D.

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Abstract Along with the economy, polity and education, the family is universally viewed as one of the essential sectors without which no society can function. As the setting for demographic reproduction, the seat of the first integration of individuals into social life, and the source of emotional, material and instrumental support for its members, the family influences the way society is structured, organized, and functions. It is essentially through the family that each generation is replaced by the next; that children are born, socialized and cared for until they attain their independence; and that each generation fulfills its care responsibilities to minors, older persons, and the sick. Aim of this study is investigation of relationship between family function and couple well-being in South African couples. Results showed a strong and positive relationship between family function and couple well-being in South African couples.

Keywords: Family-School Partnerships, Leadership Module, Family-School Connections

Introduction

There is a strong link and interplay between the family and other institutions in society. For example, the structure of a country's economy will not only influence the extent to which members of a family are able to enter and participate in the labour market but it will also determine, to a large extent, whether family members are able to derive livelihoods from decent work opportunities, earn a living wage and have benefits which enable them to have acceptable standards of living. The way an economy is structured will also have a bearing on the ability of family members to access quality health care and education. For example, a significant body of research evidence has shown that through family health promotion—defined as the a process undertaken by the family to sustain or enhance the emotional, social, and physical well-being of the family group and its members (Ford-Gilboe, 2000)—family support is effective in promoting adherence to medical regimes, uptake of positive lifestyle changes, and providing comfort and support for sick

family members (National Institute of Health, 1992; Ford-Gilboe, 2000)

Overall the family, through its instrumental and affective roles has the potential to enhance the socio-economic wellbeing of individuals and society at large. Instrumental roles are concerned with the provision of physical resources such as food, clothing and shelter while affective roles promote emotional support and encouragement of family members (Peterson, 2009). The table below shows how these roles fulfill important functions for their members and for society, such as family formation and membership; economic support; nurturance and socialization; and protection of vulnerable members.

Despite the foregoing basic functions of the family, it is noteworthy that family structures and functions as well as intra-family roles and relationships are in a constant state of flux (Belsey, 2005). This is due to two basic factors: (1) long-term historical shifts in technology, modalities of production, population migration, the population structure and urbanization; and

(2) the short- and medium-term consequences of natural and man-made disasters and conflicts, and of economic and social disruption and opportunities (Belsey, 2005: 16).

Nonetheless the core functions of the family can, at any given stage, be facilitated or enhanced through a family policy which, broadly construed, encompasses any direct and indirect policy that influences the well-being of families (Randolph & Hassan, 1996). Direct policies offering particular kinds of support to families or specific family members, whereas indirect policies are generally more important determinants of families' overall access to resources, including goods, services, and community supports (Randolph & Hassan, 1996).

Using the above definition as the basis, the development of family policy in South Africa can be traced back to the institutional segregation of population groups that prevailed during the apartheid era (Amoateng & Richter, 2007). The system essentially gave rise to a dualistic family policy whereby a strong differentiation was made between White families and those of Africans, Coloureds, and Indians (Harvey, 1994). Overall, with Whites seen as more superior to the other groups, and given the government of the day's view that "the interests of the black group lay in the reserves, that the Indian group was an exogenous group and that the Coloureds should fend for themselves", the Western core family was adopted as the model of family life in the country (Harvey, 1994:29).

Following the end of apartheid and the establishment of a new democratic dispensation in 1994, the post-apartheid Government instituted various policy and legislative reforms aimed at, among other things, the realignment of the country's institutions, in order to transform the South African society. However, the

family is not explicitly addressed in many of these policies. Rather it is usually inferred and, in consequence, most socio-economic benefits indirectly filter down to the family. For example, the five major social assistance policies in the country focus only on specific individuals, namely: older persons (The State Old Age Pension), people with disabilities (the Disability Grant), and children (the Child Support Grant, the Foster Care Grant, and the Care Dependency Grant). It is noteworthy, however that the needs of such individuals may not necessary be congruent with those of the family unit. Past and present poverty analyses and strategies of intervention have also primarily concentrated on households, as opposed to families, thereby causing policies to overlook intra-family dynamics in the country.

It is against the above background that the absence of an explicit policy framework on the family in South Africa has, over the years, been identified by policymakers, academics, civil society, and concerned citizens as a critical shortcoming that needed to be urgently addressed (Department of Social Development, 2012). In particular, the detrimental effects of the policies of colonial apartheid on the family (for example, land dispossession, and the migrant labour and homeland systems) are viewed to a connection with the multiplicity of social ills that continue to confront contemporary South Africa.

Well-being is a multifaceted concept. It is often thought of as one of the hallmarks of the liberal arts experience, resulting from educational encounters that both guide students in the search for meaning and direction in life and help them realize their true potential. The Ryff is a straightforward and relatively short survey that assesses the psychological component of well-being. This review discusses the administration and cost of the Ryff; the

theoretical background, development, and psychometric properties of the instrument; and possible uses of this instrument in higher education assessment settings. Aim of this study is investigation of relationship between family function and couple well-being in South African couples.

Methodology

The method used in this research is descriptive and correlational. The statistical population is all families in South Africa in 2015. Sample size is 384 subjects were selected via random stratified random sampling method. The instrument used in this study, are two standard questionnaires: Family Assessment Device (FAD), This assessment tool consists of subscales which assess 6 dimensions of the McMaster Model plus the general functioning scale which assesses the overall functioning of a family. The FAD has a total of 60 statements that describe various aspects of family functioning. The number of items in each subscale range from 6-12 statements. Each family member 12 years old and over will rate how well each statement describes their family. To rate the description they will select from 4 different responses: strongly agree, agree, disagree, and strongly disagree. The 6 subscales include: roles, communication, behavioral control, problem solving, affective involvement, and affective responsiveness. Once the assessment is filled out it is scored by summing the endorsed responses (1-4) for each subscale (negatively worded statements are reversed) and dividing by the number of items in each scale. The higher the score the worse the level of functioning is (Miller et al., 2000). The Ryff inventory consists of either 84 questions (long form) or 54 questions (medium form). There is also a short form, but it is statistically unreliable and

therefore should not be used for assessment. Both the long and medium forms consist of a series of statements reflecting the six areas of psychological well-being: autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance. Respondents rate statements on a scale of 1 to 6, with 1 indicating strong disagreement and 6 indicating strong agreement.

Results

To analyse the hypothesis was used from the simultaneous multiple regression test. As was seen in the tables, multiple correlation coefficients between subscales of family functioning (problem solving, communication, roles, emotional support, emotional involvement, behaviour control, overall performance), with the well-being scores.

Table 1. Summarizes the results of ANOVA for well-being prediction based on family functions scales

Model	Source	SS	D F	MS	F	Sig
family function scales	regression	135.09	7	19.29	3.42	0.05
	Residual	2118.89	376	5.63		
	Total	2260.95	383			

Table 2. The regression coefficients for the prediction of well-being based on family functions scales

Variable		Non-standardized coefficients		β	T	Sig.
		B	standard error			
family Assessment sub scale	Fixed	4.31	1.15		4.34	0.01
	Solve the problem	1.437	0.455	0.65	2.65	0.01

Relatio nship	1.4 3	0.44	0.3 1	2.7 7	0. 01
Role	1.5 4	0.35	0.7 6	3.5 4	0. 01
Emotio nal support	1.2 4	0.35	0.6 5	2.9 8	0. 01
Emotio nal involve ment	1.1 0	0.49	0.4 1	3.2 6	0. 01
Behavi or manag ement	1.2 1	0.32	0.2 5	2.9 1	0. 01
Overall perfor mance	1.2 1	0.44	0.0 18-	0.3 28-	0. 01

Discussion

Despite being widely viewed as one of the foundational social institutions in all societies, the concept of the family is difficult to define (Waite, 2000; Belsey, 2005). As the United Nations (1990) pointed out, “the concept may differ in some respects from State to State, and even from region to region within a State and ... it is therefore not possible to give the concept a standard definition”. This is indeed evident from the different disciplinary definitions of the family. Sociologically for example, the family is often defined as a group of interacting persons who recognise a relationship with each other, based on a common parentage, marriage and/or adoption. Demographers and economists, on the other hand, often use the “residential family” definition: “a group of two people or more (one of whom is the householder) related by birth, marriage, or adoption and residing together” (Belsey, 2005:11). Others such as Levine (1990:33) have asserted that “family members are individuals who by birth, adoption, marriage, or declared commitment share deep, personal connections and are mutually entitled to receive and obligated to provide support of various kinds to the extent possible,

especially in times of need”. All in all, however, behavioural and social sciences acknowledge that “families never fit nicely into any single model” (Bruce et al, 1995). However as Amoateng and Richter (2007) point out, “there appears to be broad consensus that families are societal groups that are related by blood (kinship), marriage, adoption, or affiliation with close emotional attachments to each other that endure over time and go beyond a particular physical residence”. It is noteworthy, however that family members do not necessarily have ‘close emotional attachments’ to each other.

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