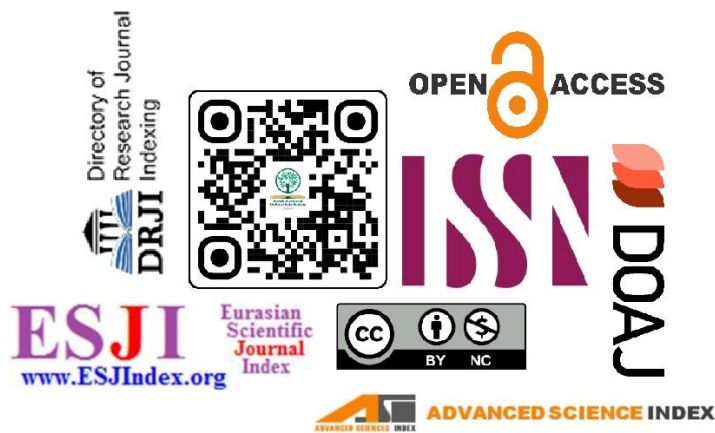
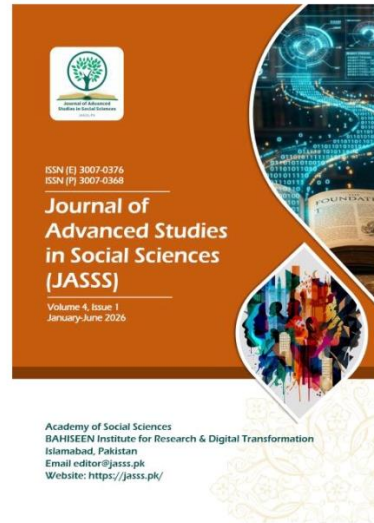


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# The Role of Parents in Supporting the Rehabilitation of Children in a Juvenile School in Eswatini

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## Abstract

This study examines the role of parents in supporting the rehabilitation of children enrolled in Eswatini's sole juvenile school, where parental engagement remains underexplored despite its well-documented importance in juvenile reform. Guided by Bronfenbrenner's Ecological Systems Theory and a constructivist paradigm, the study employed a qualitative case study design involving semi-structured interviews with 15 participants, including parents, teachers, and the school principal. Thematic analysis revealed four key themes: (1) emotional and practical challenges faced by caregivers, who experienced guilt, anxiety, stigma, and logistical difficulties in maintaining contact; (2) family structure and dynamics as significant contributors to juvenile delinquency, with instability, conflicted relationships, and inadequate supervision increasing vulnerability to antisocial peer influence; (3) parental involvement as a catalyst for rehabilitation, where consistent emotional support, presence, and guidance from biological parents enhanced behavioural transformation; and (4) specific parental roles, such as regular visitation, communication, academic monitoring, provision of basic needs, and constructive discipline, which collectively strengthened children's psychosocial stability and rehabilitation outcomes. Findings underscore that rehabilitation is not solely an institutional responsibility but is deeply shaped by family functioning and caregivers' capacity to provide sustained, nurturing involvement. However, systemic, economic, and relational barriers often limit meaningful participation. The study recommends strengthening family-centred practices within juvenile institutions, providing psychoeducation and support to caregivers, and implementing policy initiatives that promote family cohesion and reduce structural barriers to engagement. Enhancing parental involvement is essential for improving rehabilitation outcomes, reducing recidivism, and supporting the holistic development of children in conflict with the law in Eswatini.

**Keywords:** Parental involvement, Juvenile rehabilitation, Family dynamics, Delinquency, Eswatini, Psychosocial support

## Introduction

Juvenile delinquency remains a pressing concern in the Kingdom of Eswatini, carrying significant implications for the well-being, social integration, and future trajectories of affected youth. Rehabilitation, particularly within institutional settings such as the country's sole juvenile rehabilitation school, is a central strategy for addressing these concerns. However, effective rehabilitation is rarely achieved through institutional interventions alone. Parental involvement encompassing emotional support, communication, and consistent engagement is widely recognised as a cornerstone of successful rehabilitation outcomes (Sakaue et al., 2023). Accordingly, this study explores the role of parents in supporting the rehabilitation of children enrolled in Eswatini's juvenile school, situating the discussion within the country's socio-cultural, institutional, and policy contexts.

In refining the definition of caregiving within this study, it is essential to acknowledge the demographic reality of orphanhood and the extensive reliance on extended family systems in Eswatini. In the Swazi context, the term "parents" frequently encompasses grandparents, aunts, uncles, and other kin who assume primary caregiving responsibilities. As noted by Motsa and Morojele (2022), grand-caregivers navigate unique challenges, including financial strain, age-related health limitations, and intergenerational communication gaps, yet they also provide continuity, cultural grounding, and relational stability that are critical to rehabilitation processes. Recognising these caregiving configurations strengthens the conceptual clarity and contextual relevance of parental involvement within this study.

Parental and family engagement in the rehabilitation of justice-involved youth has been associated with improved educational, psychosocial, and behavioural outcomes. Family-centered interventions and engagement strategies can increase program effectiveness in both community and residential juvenile justice settings (Office of Juvenile Justice and Delinquency Prevention, 2018; Council of State Governments Justice Center, n.d.). Treatment models that actively involve caregivers notably Multisystemic Therapy (MST) have shown reductions in delinquent behaviour, out-of-home placements, and recidivism in many studies and meta-analyses, although effect sizes vary by context and implementation quality (van der Stouwe et al., 2014; Henggeler et al., 2016).

Meta-analytic evidence indicates a reliable inverse relationship between parent-child attachment/positive parenting (e.g., monitoring, low hostility) and youth delinquency. Stronger parental attachment and adaptive parenting practices are generally associated with lower delinquent outcomes (Hoeve et al., 2009). Parental involvement is also positively associated with academic outcomes (particularly when involvement focuses on academic socialization rather than direct homework help), as shown in meta-analyses of school-aged children and adolescents (Hill & Tyson, 2009; Jeynes, 2005). Despite this body of evidence, the juvenile justice field still lacks widely adopted, structured frameworks for consistently meaningful parental participation in restorative and rehabilitative processes, and jurisdictions routinely report barriers such as limited access to information, socioeconomic constraints, logistical challenges (transportation, scheduling), stigma, and system culture that marginalizes families (Office of Juvenile Justice and Delinquency Prevention, 2018; Council of State Governments Justice Center, n.d.). Finally, evidence about other family-based models (e.g., Functional Family Therapy)

is mixed: recent comprehensive reviews note variability in effects and emphasize that outcomes depend heavily on study quality and implementation fidelity.

Internationally, family-driven and community-based care models are promoted as best practice in behaviour modification and rehabilitation programmes (United Nations, 2015). Evidence-based interventions such as Functional Family Therapy (FFT) and Multisystemic Therapy (MST) have demonstrated effectiveness in reducing recidivism, enhancing family functioning, and promoting lasting behavioural change (Sexton, 2011; Henggeler et al., 2009; van der Stouwe et al., 2014). Beyond Western-derived models, however, it is imperative to move beyond a generic invocation of “culture” and explicitly engage indigenous Swazi frameworks of caregiving and healing. Motsa and Morojele (2022) identify child-rearing principles rooted in communal responsibility, collective accountability, restorative dialogue, and the moral guidance of elders.

These frameworks emphasise that child development and correction are not solely individual or nuclear family responsibilities but shared communal obligations. Practically, such principles could be woven into modern institutional settings through structured family circles, inclusion of elders in mediation processes, culturally grounded rites of accountability, and community-based reintegration planning. Integrating these approaches would create a more culturally resonant rehabilitation model that aligns institutional practice with local epistemologies of healing and social restoration.

Successful rehabilitation systems often incorporate measures to address barriers to parental participation such as flexible visitation schedules, transport support, and culturally competent communication (Society for Adolescent Health and Medicine, 2017). These models reaffirm that the inclusion of parents and families as co-agents in the rehabilitation process is critical to sustainable reintegration and behavioural transformation. In the Eswatini context, such measures are not optional enhancements but structural necessities. Shabangu and Koen (2022) found that youth in Eswatini correctional centres are exposed to multiple risk factors and that rehabilitation is hampered by resource constraints, overcrowding, and systemic issues. Structural constraints such as limited financial resources, staff shortages, overcrowding, and inadequate access to qualified psychologists further undermine rehabilitation efforts (UNICEF, 2020). In such environments, parental participation can serve as a protective buffer against institutional deficiencies. However, logistical barriers including transport costs, rigid visitation schedules, and communication breakdowns disproportionately affect vulnerable families, particularly grand caregivers in rural areas.

Concrete recommendations are therefore required. The juvenile school could implement flexible visitation schedules, including weekend and community-based visitation days; establish transport stipends or partnerships with local social services for the most economically vulnerable families; and create hybrid communication platforms (scheduled phone calls, structured family conferencing sessions, and periodic community outreach visits). Such measures would not only mitigate structural barriers but also align with the communal responsibility ethos embedded in Swazi child-rearing traditions.

Additionally, culturally competent psychoeducation for caregivers is essential. Training modules should focus on (1) consistent and supportive communication strategies across generational divides; (2) emotional validation and non-stigmatizing engagement to

reduce guilt and anxiety; (3) constructive, non-violent discipline aligned with restorative principles; and (4) collaborative goal-setting with institutional staff. These modules should be adapted to accommodate older caregivers, incorporate indigenous languages, and integrate culturally meaningful narratives and proverbs to enhance resonance and uptake. By equipping caregivers with contextually grounded skills, such programmes can mitigate the guilt, anxiety, and social stigma identified in the study's first theme while strengthening caregiver efficacy.

The rehabilitation and reintegration of children in conflict with the law in Eswatini are guided by several legislative and policy frameworks. Chief among these is the Children's Protection and Welfare Act (2012), which emphasises the rights, welfare, and rehabilitation of juveniles, advocating restorative rather than punitive measures. Complementary initiatives such as the National Plan of Action for Children (NPA, 2018) and the Social Protection of Orphans and Vulnerable Children Project (SPVCO) promote multisectoral collaboration to address the underlying social determinants of delinquency (Government of Eswatini, 2018). Parental involvement can be explicitly positioned as a practical mechanism through which these policy objectives are operationalised. For example, strengthening caregiver engagement directly supports the SPVCO's mandate to address vulnerability arising from poverty, family instability, and social exclusion. Similarly, the NPA's emphasis on child protection and holistic development is reinforced when families are integrated into rehabilitation planning and monitoring. By demonstrating how structured parental participation advances national policy goals, this study enhances its practical utility for government stakeholders and programme implementers.

Research conducted in other contexts shows that parental involvement in educational and psychosocial programmes yields substantial benefits for child development. Studies in both educational and rehabilitative environments (UNICEF, 2023) highlight that parental encouragement, supervision, and reinforcement foster self-esteem, social competence, and behavioural regulation. Within juvenile rehabilitation settings, parental engagement strengthens communication with institutional staff, creating a collaborative environment conducive to reintegration (Kethineni et al., 2021). Chen (2014) emphasised that parents play an irreplaceable role in children's emotional and moral development, making their involvement indispensable to rehabilitation success. Furthermore, evidence indicates that parental involvement enhances children's academic, emotional, and communication skills factors essential for behavioural transformation (El Nokali et al., 2010). Saracostti et al. (2020) found that family-school collaboration models improved coherence and networking across school psychosocial programmes. Yet, despite these documented benefits, parental participation in the rehabilitation of justice-involved children across African contexts remains low (D Burke et al., 2014). Barriers such as poverty, stigma, and institutional isolation contribute to disengagement and undermine programme outcomes.

In the specific context of Eswatini, this gap is both critical and under-researched. The country's unique socio-cultural framework, its high rates of orphanhood and reliance on extended kinship caregiving, and its centralised juvenile rehabilitation system offer an important setting to investigate how parental roles are understood, enacted, and institutionally supported. Therefore, this study seeks to explore and critically analyse the role of parents and extended caregivers in supporting the rehabilitation of children in

Eswatini's juvenile school, while proposing culturally grounded, policy-aligned, and structurally feasible strategies to strengthen family engagement in practice.

## Objectives of the Study

The purpose of this paper was to investigate the role of parental involvement in rehabilitation programmes of students in a juvenile school in Eswatini, with a view to determine strategies of surmounting the barriers and challenges encountered by the parents in their attempt to participate in their children's rehabilitation. The specific objectives were:

1. To investigate the role of parent involvement on the rehabilitation of children in juvenile school in Eswatini
2. To identify the specific functions and roles that parents can perform to support rehabilitation
3. To examine the influence of parental /family factors on the development of juvenile delinquency

## Problem Statement

Despite strong evidence linking parental involvement to positive rehabilitation outcomes, there is limited understanding of how parents in Eswatini engage with, contribute to, or are supported by the country's juvenile rehabilitation system. The absence of structured mechanisms for parental participation, combined with systemic constraints and cultural factors, has created a gap between policy intentions and practical implementation. Existing studies focus largely on institutional or programmatic dimensions of rehabilitation, neglecting the family's role as a critical determinant of successful reintegration. Consequently, there is an urgent need for empirical research that examines how parental involvement or the lack thereof shapes rehabilitation processes and outcomes within Eswatini's unique social and institutional context. Addressing this gap is vital to informing policies and practices that foster effective, family-centred rehabilitation approaches aligned with both international best practices and Swazi cultural values.

## Theoretical Foundation

This study is informed by Bronfenbrenner's Ecological Systems Theory (1979), which conceptualises human development as occurring within nested systems of influence: the microsystem (family and peers), mesosystem (interactions among immediate environments such as home and school), exosystem (indirect environments such as community and policy), and macrosystem (broader cultural and societal values). In the context of juvenile rehabilitation, this theory highlights that a child's behavioural transformation is shaped not only by institutional programmes but also by the quality of family involvement and the broader socio-cultural context in which rehabilitation occurs. Parents, as part of the child's immediate microsystem, play a central role in facilitating consistent support, moral guidance, and emotional stability factors essential for sustainable behavioural change.

Complementing this ecological perspective, *Functional Family Therapy in Clinical Practice* (Sexton, 2011) provides a structured, evidence-based approach to understanding and improving family interactions within the rehabilitation process. FFT emphasises equipping caregivers with skills in consistent discipline, constructive communication, emotional regulation, and positive reinforcement. Strategies such as non-judgmental correction, relational reframing, and avoiding inter-parental conflict directly support behavioural change in juveniles while strengthening the family microsystem. By combining Ecological Systems Theory and FFT, this study gains both a contextual lens for understanding broader systemic influences and a practical framework for guiding effective parental engagement in juvenile rehabilitation in Eswatini.

## **Methodology**

### **Research Paradigm**

This study was guided by the constructivist paradigm, which posits that reality is socially constructed through individuals' lived experiences and interactions within their social contexts. The constructivist worldview emphasizes understanding phenomena from participants' perspectives, thereby allowing for multiple interpretations of reality (Creswell & Poth, 2016). In this study, the paradigm was appropriate because it sought to explore and interpret the subjective meanings parents, teachers, and administrators attach to their roles in supporting the rehabilitation of children at a juvenile school in Eswatini.

### **Research Approach and Design**

A qualitative research approach was adopted to gain in-depth insights into participants' experiences and perceptions. The qualitative approach enabled the researcher to capture the complexity and contextual nature of parental involvement in juvenile rehabilitation. Within this approach, a case study design was employed. The case study method allows for an intensive and holistic exploration of a bounded system (Yin, 2018) in this instance, the juvenile rehabilitation school in Eswatini. This design was suitable because it provided a detailed understanding of the institutional environment and the roles played by parents and educators in supporting rehabilitation efforts.

### **Study Setting**

The study was conducted at the sole juvenile rehabilitation school in Eswatini, which accommodates children in conflict with the law and provides education, counselling, and skills development as part of their rehabilitation. The setting was ideal for examining how parents and institutional stakeholders collaborate in the rehabilitation process.

### **Participants and Sampling Procedure**

A purposive sampling strategy was employed to select participants who were directly involved in the rehabilitation of children at the correctional facility and thus possessed the most relevant knowledge and experience. The sample comprised 15 participants: 10 parents of children enrolled at the facility (5 males and 5 females), 4 teachers engaged in the rehabilitation and education of the children, and 1 school principal

overseeing the program. Purposive sampling was chosen because it enables the identification of individuals who can provide rich, detailed, and diverse perspectives on the phenomenon under study (Patton, 2015).

Recruitment involved initial contact with the school administration to obtain permission to approach potential participants. Parents and staff were then provided with an information sheet explaining the purpose of the study, voluntary participation, confidentiality measures, and their right to withdraw at any stage without consequences. Those who expressed interest were invited to participate, ensuring representation across gender, role, and experience within the rehabilitation program. This approach ensured that the selected participants could provide comprehensive insights while maintaining ethical rigor.

### **Data Generation Methods**

Data were generated through one-on-one semi-structured interviews, chosen for their capacity to balance structure with flexibility, allowing participants to express their experiences freely while enabling the researcher to probe for depth and clarification. The interview guide consisted of open-ended questions exploring participants' perceptions of parental involvement, institutional support, challenges, and strategies for rehabilitation.

Interviews were conducted in either English or siSwati, depending on participant preference, to ensure comfort and authenticity of responses. Each interview lasted approximately 45–60 minutes, was audio-recorded with participants' consent, and supplemented by field notes documenting non-verbal cues, emotional expressions, and contextual factors. Interviews were conducted in a private setting within the school premises to maintain confidentiality and minimize disruptions. The semi-structured format allowed the interviewer to follow participants' narratives while exploring emergent topics relevant to the research objectives.

### **Data Analysis**

Data were analyzed using thematic analysis following the six-step process proposed by Braun and Clarke (2006). The process included: (1) familiarization with the data through repeated reading of transcripts and listening to audio recordings, (2) generation of initial codes from significant statements, (3) searching for patterns to identify themes, (4) reviewing and refining themes to ensure coherence and distinction, (5) defining and naming the final themes, and (6) producing a detailed narrative report supported by verbatim quotations.

Manual coding was employed to maintain close engagement with the participants' narratives, allowing the researchers to interpret nuanced meanings and contextual subtleties. Emerging themes reflected participants' experiences regarding parental roles, institutional collaboration, challenges in rehabilitation, and strategies to improve outcomes. This method ensured that findings were grounded in participants' lived experiences while providing a clear audit trail for transparency and reproducibility.

### **Trustworthiness of the Study**

To ensure the credibility and trustworthiness of the findings, the study adhered to the criteria proposed by Lincoln and Guba (1985). Credibility was enhanced through prolonged

engagement with participants, triangulation of perspectives from parents, teachers, and the principal, and the use of member checking to validate interpretations and ensure accurate representation of participants' views. Transferability was supported by providing thick, rich descriptions of the research context, participants, and setting, enabling readers to determine the applicability of the findings to other contexts. Dependability was achieved through meticulous documentation of the entire research process, including data collection, coding, and analysis procedures, ensuring that the study could be replicated or audited by other researchers. Confirmability was ensured by maintaining a comprehensive audit trail that recorded all decisions made during data collection and analysis, thus minimizing researcher bias and ensuring that the findings reflected the participants' perspectives rather than the researcher's assumptions.

## Ethical Considerations

Ethical clearance for the study was obtained from the University of Eswatini Research Ethics Committee, and additional permission to conduct the research at the juvenile school was granted by the Commissioner General of His Majesty's Correctional Services. Participants were fully informed about the purpose of the study, the voluntary nature of their participation, and their right to withdraw at any stage without any consequences, and informed consent was obtained prior to data collection. To protect confidentiality, pseudonyms were used for all participants, and any identifying information was omitted from transcripts and reports. Audio recordings and transcripts were securely stored and were accessible only to the researcher, ensuring that data remained private and protected. Throughout the study, respect for participants' dignity, privacy, and autonomy was rigorously maintained, with all procedures designed to uphold ethical standards in research involving human subjects.

## Findings and Discussions

To provide a clear overview of these findings, Table 1 summarizes the main themes, key insights, illustrative participant quotes, and the practical implications for rehabilitation. This table highlights the emotional and practical challenges faced by caregivers, the influence of family structure on delinquency, and the specific roles parents play in supporting positive behavioural change. By organizing the findings in this way, the table underscores the centrality of active, consistent, and multidimensional parental involvement in promoting successful rehabilitation outcomes.

**Table 1: Themes, Key Findings, and Implications of Parental Involvement in Juvenile Rehabilitation**

Theme	Key Findings	Excerpts / Illustrative Quotes	Implications
1. Emotional and Practical Challenges of Parenting a Child in a Juvenile School	Parents experience dual emotions: relief for the child's safety and guilt/anxiety over institutionalization. Practical challenges include coordinating	R1: <i>"Bringing the boy to the Juvenile school was a huge relief... I just hope he gets reformed in the institution."</i> R2: <i>"It was a very</i>	Highlights the need for emotional support for caregivers and systems to ease logistical burdens. Acknowledges

	visits, managing routines, and maintaining communication.	<i>difficult decision... I had to exercise tough love."</i>	moral dilemmas and stress in parental roles.
2. Influence of Family Structure and Dynamics on Juvenile Delinquency	Family instability (e.g., separation, single parenthood, conflicted stepparent relationships) contributes to delinquency. Children emulate behaviours of adults; lack of supportive relationships increases vulnerability to antisocial peers.	R1: <i>"Broken family structure is the main reason we suffer crime in the young people."</i> R2: <i>"... stepmother is so resentful... he ended up hanging out with bad company."</i> R3: <i>"Young children copy from elders... model good behavior at all times."</i>	Supports family-strengthening interventions. Reinforces social learning and ecological perspectives. Suggests targeting family cohesion to prevent delinquency.
3. Parental Involvement as a Catalyst for Rehabilitation	Biological parental involvement significantly enhances rehabilitation outcomes. Extended family support is helpful but often insufficient to meet emotional needs.	R1: <i>"If the child is supported by biological parents, the rehabilitation is enhanced."</i> R3: <i>"It is hard as an aunt to fill the void of a biological parent."</i>	Encourages structured parental engagement in rehabilitation programs. Training and support for alternative caregivers are important.
4. Specific Parental Roles in Supporting Rehabilitation	Parents can support rehabilitation through: <ul style="list-style-type: none"> <li>- Regular visits and communication</li> <li>- Provision of basic needs</li> <li>- Academic monitoring</li> <li>- Constructive guidance</li> <li>- Promoting positive relationships</li> </ul>	<i>"Visiting at least twice a month."</i> <i>"Ensuring toiletries and stationery are available."</i> <i>"Checking on academic progress."</i> <i>"Avoid judging behavior, rebuke constructively."</i>	Multidimensional parental involvement improves emotional security, prosocial behaviour, and reduces recidivism. Family-centred approaches and institutional support are critical.

## Theme 1: Emotional and Practical Challenges of Parenting a Child in a Juvenile School

Parents and family members described the experience of having a child in a juvenile school as both emotionally taxing and practically challenging. Feelings of relief at the child's safety were often accompanied by guilt, anxiety, or internal conflict over the decision to commit the child to an institution. This duality reflects the complex emotional landscape of caregivers navigating the balance between protection and correction. The necessity of "tough love," as highlighted in participants' accounts, aligns with research indicating that parents of children in juvenile justice settings often experience heightened stress, stigma, and moral dilemmas regarding institutionalization (Barnes et al., 2019). Moreover, practical challenges, such as coordinating visits, managing family routines, and maintaining communication, further compound caregivers' burden (Blaustein & Kinniburgh, 2018).

From an ecological systems perspective, caregivers' emotional and practical strains can be understood as the result of interactions across multiple environmental systems, particularly the microsystem (family), the mesosystem (family–institution interaction), and the exosystem (broader community and safety pressures). The narratives illustrate how parental decisions are not made in isolation but are shaped by immediate family dynamics and wider contextual threats. For example, one caregiver explained, "*Bringing the boy to the Juvenile school was a huge relief as I was afraid the boy would be beaten or murdered by the community. I just hope he gets reformed in the institution*" (R1). This account reflects the powerful influence of community-level violence and fearan exosystemic pressure—on family decision-making within the microsystem. Similarly, another caregiver stated, "*It was a very difficult decision to bring the child here; however, because of her unruly behaviour, I had to exercise tough love*" (R2), highlighting the emotional conflict and moral tension embedded within parental roles and responsibilities.

Complementing the ecological perspective, Functional Family Therapy (FFT) in Clinical Practice (Sexton, 2011) provides a relational lens for understanding these experiences. FFT conceptualises delinquent behaviour and parental responses as embedded within family interaction patterns rather than as isolated individual failings. Through engagement and relational reframing, FFT seeks to reduce blame, guilt, and defensiveness by helping families reinterpret institutional placement not merely as a punitive measure, but as part of a broader process of systemic relational repair. In this way, both ecological systems theory and FFT illuminate how caregivers' decisions reflect layered systemic pressures and relational complexities rather than simple disciplinary intent.

## Theme 2: Influence of Family Structure and Dynamics on Juvenile Delinquency

Participants highlighted the profound influence of family structure, parenting arrangements, and household dynamics on the emergence of delinquent behaviour among young people. Consistent with ecological systems theory, instability within the microsystem such as parental separation, single parenthood, and strained stepparent–child relationships was seen as a major precursor to behavioural problems. One participant stated, "*In my own opinion, broken family structure is the main reason we suffer crime in the young people... Labantfwana laba bakhula nelusizi lwekushiywa batali babancane...*" (R1),

underscoring how early parental absence and emotional pain were perceived as foundational to later delinquency. Caregivers frequently described how emotional distress arising from family conflict or the absence of supportive caregiving relationships contributed to children seeking affirmation, belonging, or protection from peers involved in antisocial activities. For example, a participant explained, *“I am raising the boy as a single parent... this woman (stepmother) is so resentful to my child. All my efforts to make them live in harmony failed, and he ended up hanging out with bad company, smoking and selling dagga”* (R2). This aligns with evidence showing that disruptions in family cohesion undermine effective supervision, reduce emotional security, and increase vulnerability to delinquent peer influence (Hoeve et al., 2012).

Participants also emphasised the modelling role of adults within the home, noting that children often emulate behaviours they observe in caregivers and extended family members. As one respondent observed, *“Young children copy from elders, that is why all elders around children need to model good behavior at all times”* (R3). This mirrors social learning theory, which posits that children internalise behavioural patterns demonstrated by significant adults, particularly in contexts where consistent discipline and prosocial modelling are lacking (Bandura, 1977). In ecological terms, these modelling processes operate within the immediate microsystem yet are influenced by broader contextual stressors.

Functional Family Therapy in Clinical Practice (Sexton, 2011) extends this analysis by concentrating on interactional processes within the family system. FFT suggests that delinquent behaviour may serve relational functions in families characterised by negative communication patterns, inconsistent discipline, or emotional disengagement. Rather than attributing delinquency solely to structural factors such as single parenthood, FFT examines how communication styles, relational hierarchies, and boundary management shape behavioural outcomes. The strained stepparent relationship and unresolved parental conflict described by participants—particularly the account that *“all my efforts to make them live in harmony failed”* (R2)—illustrate maladaptive interactional dynamics that FFT addresses through relational reframing and structured skill-building interventions.

### **Theme 3: Parental Involvement as a Catalyst for Rehabilitation**

The involvement of parents, particularly biological parents, emerged as a critical factor in the success of a child’s rehabilitation. Participants emphasized that parental presence significantly strengthens rehabilitation outcomes. As R1 stated, *“If the child is supported by biological parents, the rehabilitation is enhanced, unlike when the parents are not there.”* This view reflects the belief that biological parents play a distinctive emotional and motivational role in the child’s progress. At the same time, participants acknowledged the valuable but sometimes limited role of extended family members. R3 explained, *“No matter how much one tries to support the child, I think what is hard to do as an aunt is to fill the void of a biological parent.”* These findings align with research highlighting that consistent parental engagement, emotional support, and active participation in rehabilitation programmes significantly improve outcomes for children in care or rehabilitation settings (Merhi et al., 2024; Folk et al., 2020).

From an ecological perspective, parental involvement strengthens the mesosystem by enhancing collaboration between the family and the juvenile institution, thereby promoting consistency across settings. Functional Family Therapy (FFT) in Clinical Practice

(Sexton, 2011) similarly identifies family engagement as the primary mechanism of change in the rehabilitation of justice-involved youth. FFT posits that behavioural improvement is sustained when caregivers actively participate in restructuring communication patterns, strengthening supervision, and reinforcing prosocial behaviour. Thus, ecological systems theory highlights the importance of interconnected systems, while FFT provides structured strategies for transforming relational dynamics within the family microsystem.

These insights underscore the importance of facilitating parental involvement wherever possible, while also recognizing the need for targeted support for alternative caregivers to help bridge relational and emotional gaps when parents are unavailable. Interventions that encourage parental engagement and equip extended family members with strategies to provide meaningful support can therefore act as protective factors in the rehabilitation process (Blaustein & Kinniburgh, 2023). Consistent with both ecological systems theory and FFT, strengthening relational continuity across systems enhances developmental stability and rehabilitation outcomes.

#### **Theme 4: Specific Parental Roles in Supporting Rehabilitation**

Participants outlined actionable roles parents could perform to support rehabilitation, highlighting consistent engagement, provision of basic needs, communication, academic monitoring, and constructive guidance as key components. Participants emphasized the importance of regular physical presence, noting the value of *“Visiting at least twice a month”* and maintaining consistent contact through *“Telephonic communication with the child.”* They further stressed the need for material and educational support, such as *“Ensuring that all basic necessities like toiletries and stationery are always available”* and *“Checking on academic progress timeously to show support.”* In addition, participants highlighted the importance of constructive parenting approaches, advising caregivers to *“Avoid judging trajectory behaviour, instead rebuke constructively”* and to *“Avoid telling the child ill things about their parents or relatives; build good relationships with everyone significant to your child, including step-parents and siblings.”*

The findings underscore the critical role of active and consistent parental involvement in rehabilitation. Regular communication whether via phone calls, letters, or in-person visits helps maintain emotional bonds and signals parental commitment, which is strongly associated with more positive rehabilitation outcomes (Blaustein & Kinniburgh, 2023). From an ecological standpoint, these practices strengthen the mesosystem connection between home and institution. However, families frequently encounter financial, emotional, and logistical barriers that constrain meaningful contact, highlighting the influence of exosystem and macrosystem conditions.

These practical roles also align closely with the behavioural change and generalisation phases described in *Functional Family Therapy in Clinical Practice* (Sexton, 2011). FFT emphasises equipping caregivers with skills in consistent discipline, constructive communication, emotional regulation, and positive reinforcement. Non-judgmental correction and the avoidance of inter-parental conflict, as recommended by participants, reflect relational reframing techniques central to FFT. Thus, while ecological systems theory situates rehabilitation within broader contextual systems, FFT offers structured, evidence-based methods for transforming interaction patterns within the family microsystem.

## Conclusion

Overall, the study demonstrates that the rehabilitation of children in juvenile school is strongly influenced by interconnected ecological systems and relational family processes. Caregivers carry significant emotional and practical burdens shaped by community pressures, institutional dynamics, and family instability. At the same time, sustained parental involvement through regular communication, visits, provision of basic needs, academic monitoring, and constructive guidance plays a critical role in promoting positive behavioural change. Ecological systems theory highlights the interplay between family, institution, and broader social contexts, while *Functional Family Therapy in Clinical Practice* (Sexton, 2011) provides a structured relational framework for transforming maladaptive family interaction patterns. Together, these perspectives underscore that rehabilitation is not solely an institutional process, but a systemic and relational endeavour strengthened through actively engaged and supported family systems.

## Recommendations

Based on these findings, juvenile institutions should strengthen family-centred practices by creating supportive systems that facilitate regular and affordable contact between children and their caregivers. This includes offering parental guidance and psychoeducation programmes that equip parents and extended caregivers with skills for consistent communication, emotional support, and constructive discipline. Social workers and institutional staff should collaborate closely with families to address barriers such as financial constraints, strained relationships, and logistical challenges that hinder involvement. At a policy level, early family-strengthening initiatives, community-based parenting support, and integrated interventions targeting family cohesion and positive caregiving practices should be prioritised to reduce risk factors associated with delinquency. Strengthening these structures will enhance rehabilitation outcomes, reduce recidivism, and promote healthier developmental trajectories for vulnerable young people.

## References

- Alexander, J. F., Waldron, H. B., Robbins, M. S., & Neeb, A. A. (2013). *Functional family therapy for adolescent behavior problems* (2nd ed.). American Psychological Association. <https://doi.org/10.1037/13950-000>
- Bandura, A. (1977). *Social learning theory*. Prentice-Hall.
- Barnes, A. R., Constantine Brown, J. L., & McCarty-Caplan, D. (2019). The unintended consequence of the Indian Child Welfare Act: American Indian trust in public child welfare. *Children and Youth Services Review*, 98, 221–227. <https://doi.org/10.1016/j.childyouth.2019.01.012>
- Blaustein, M. E., & Kinniburgh, K. M. (2018). *Treating traumatic stress in children and adolescents: How to foster resilience through attachment, self-regulation, and competency*. Guilford Publications.
- Blaustein, M. E., & Kinniburgh, K. M. (2023). “Devastating... Having my child on the opposite side of a window”: Family visiting experiences and considerations for supporting youths with incarcerated parents. *Journal of Child and Family Studies*. <https://doi.org/10.1007/s10826-023-02769-9>

- Blanckstein, M. R., et al. (2023). Family-centeredness in secure residential treatment and its relationship with parental involvement and adolescent behavioral outcomes. *Journal of Child and Family Studies*, 32, 3697–3713. <https://doi.org/10.1007/s10826-023-02603-2>
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101. <https://doi.org/10.1191/1478088706qp0630a>
- Burke, D. J., Mulvey, D. E., Schubert, M. C., & Garbin, M. S. R. (2014). The challenge and opportunity of parental involvement in juvenile justice services. *Children and Youth Services Review*, 39, 39–48. <https://doi.org/10.1016/j.childyouth.2014.01.007>
- Chen, W. (2014). The relations between perceived parenting styles and academic achievement in Hong Kong: The mediating role of students' goal orientations. *Learning and Individual Differences*, 37, 48–54. <https://doi.org/10.1016/j.lindif.2014.11.021>
- Children's Protection and Welfare Act, 2012 (Eswatini). Perspectives of rehabilitation professionals on Western-based juvenile rehabilitation models in Eswatini's juvenile correctional center. *Journal of African Child Studies*, 14(2), 45–62.
- Creswell, J. W., & Poth, C. N. (2018). *Qualitative inquiry and research design: Choosing among five approaches* (4th ed.). SAGE Publications.
- El Nokali, N. E., Bachman, H. J., & Votruba-Drzal, E. (2010). Parent involvement and children's academic and social development in elementary school. *Child Development*, 81(3), 988–1005. <https://doi.org/10.1111/j.1467-8624.2010.01447.x>
- Folk, J. B., Brown, L. K., Marshall, B. D. L., Ramos, L. M. C., Gopalakrishnan, L., Koinis Mitchell, D., & Tolou Shams, M. (2020). The prospective impact of family functioning and parenting practices on court-involved youth's substance use and delinquent behavior. *Journal of Youth and Adolescence*, 49(1), 238–251. <https://doi.org/10.1007/s10964-019-01099-8>
- Fosco, G. M., Stormshak, E. A., Dishion, T. J., & Winter, C. E. (2012). Family relationships and parental monitoring during middle school as predictors of early adolescent problem behavior. *Journal of Clinical Child & Adolescent Psychology*, 41(2), 202–213. <https://doi.org/10.1080/15374416.2012.651989>
- Government of Eswatini. (2018). *National Plan of Action for Children (NPA)*. <https://www.gov.sz/npa>
- Henggeler, S. W., & Schaeffer, C. M. (2016). Multisystemic Therapy®: Clinical overview, outcomes, and implementation research. *Family Process*, 55(3), 514–528. <https://doi.org/10.1111/famp.12232>
- Henggeler, S. W., Schoenwald, S. K., Borduin, C. M., Rowland, M. D., & Cunningham, P. B. (2009). *Multisystemic therapy for antisocial behavior in children and adolescents* (2nd ed.). Guilford Press.
- Hill, N. E., & Tyson, D. F. (2009). Parental involvement in middle school: A meta-analytic assessment of the strategies that promote achievement. *Developmental Psychology*, 45(3), 740–763. <https://doi.org/10.1037/a0015362>
- Hoeve, M., Dubas, J. S., Eichelsheim, V. I., et al. (2009). The relationship between parenting and delinquency: A meta-analysis. *Journal of Abnormal Child Psychology*, 37, 749–775. <https://doi.org/10.1007/s10802-009-9310-8>
- Hoeve, M., Stams, G. J. J. M., van der Put, C. E., Dubas, J. S., van der Laan, P. H., & Gerris, J. R. M. (2012). A meta-analysis of attachment to parents and delinquency. *Journal of Abnormal Child Psychology*, 40(5), 771–785. <https://doi.org/10.1007/s10802-011-9608-1>
- Jeynes, W. H. (2005). A meta-analysis of the relation of parental involvement to urban elementary school student academic achievement. *Urban Education*, 40(3), 237–269. <https://doi.org/10.1177/0042085905274540>

- Jeynes, W. H. (2024). A meta-analysis: The association between relational parental involvement and student and parent outcome variables. *Education and Urban Society*. <https://doi.org/10.1177/00131245231179674>
- Kethineni, S., Frazier-Kouassi, S., Shigemoto, Y., Jennings, W., Cardwell, S. M., Piquero, A. R., Gay, K., & Sundaravadivelu, D. (2021). PROTOCOL: Effectiveness of parent- engagement programs to reduce truancy and juvenile delinquency: A systematic review. *Campbell Systematic Reviews*, 17(3), e1189. <https://doi.org/10.1002/cl2.1189>
- Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic inquiry*. SAGE Publications.
- Merhi, D., Demou, E., & Niedzwiedz, C. (2024). Mental health and behavioral interventions for children and adolescents with incarcerated parents: A systematic review. *Journal of Child and Family Studies*, 33(1), 582–593. <https://doi.org/10.1007/s10826-023-02757-z>
- Moore, K., Ahern, E., O’Meara Daly, E., Houghton, S., McAuliffe, H., & Rogers, E. (2025). Youth justice services: Relationships, rehabilitation and the reality of the young people involved — A meta-synthesis of the qualitative literature. *Clinical Child & Family Psychology Review*. Advance online publication. <https://doi.org/10.1007/s10567-025-00534-6>
- Mpofo, P., & Matsebula, N. N. (2025). The effect of family contact on well being and development of fostered children in Eswatini. *International Review of Social Sciences Research*, 5(1), 269–288. <https://doi.org/10.53378/irssr.353164>
- Motsa, N. D., & Morojele, P. J. (2022). Grandparents raising their grandchildren: Implications for the vulnerable children of Eswatini. *South African Journal of Childhood Education*, 12(1), a1024. <https://doi.org/10.4102/sajce.v12i1.1024>
- Murray, J., & Farrington, D. P. (2010). Risk factors for conduct disorder and delinquency: Key findings from longitudinal studies. *The Canadian Journal of Psychiatry*. <https://doi.org/10.1177/070674371005501003>
- Navidmanesh, S., Kadkhodae, M., Ghadirinokabadi, L., et al. (2025). Resolving conceptual and practical gaps in current child well-being models through the holistic well-being model for children. *Discover Psychology*, 5, 52. <https://doi.org/10.1007/s44202-025-00382-z>
- Office of Juvenile Justice and Delinquency Prevention. (2018). *Family engagement in juvenile justice (Model Programs Guide literature review)*. Development Services Group, Inc. <https://ojjdp.ojp.gov/mpg/litreviews/Family-Engagement-in-Juvenile-Justice.pdf>
- Olsen, E. M., Whiteley, L. B., Giorlando, K. K., Beausoleil, N., Tolou-Shams, M., Esposito-Smythers, C., & Brown, L. K. (2023). The role of family factors in the outcomes of court-involved youth. *Youth Violence and Juvenile Justice*. [https://doi.org/10.1177\\_15412040231179110](https://doi.org/10.1177_15412040231179110)
- Patton, M. Q. (2015). *Qualitative research and evaluation methods* (4th ed.). SAGE Publications.
- Sakaue, K., Wokadala, J., & Ogawa, K. (2023). Effect of parental engagement on children’s home-based continued learning during COVID-19-induced school closures: Evidence from Uganda. *International Journal of Educational Development*, 100, Article 102812. <https://doi.org/10.1016/j.ijedudev.2023.102812>
- Saracostti, M., Lozano-Lozano, J. A., Miranda, H., Lara, L., Martella, D., & Reiningger, T. (2020). An ecological, participatory, integral and contextualized model (EPIC model) of family-school connection: A preliminary analysis. *Frontiers in Psychology*, 11, Article 563506. <https://doi.org/10.3389/fpsyg.2020.563506>
- Shabangu, S. B., & Koen, V. (2022). An exploration of at-risk youths’ resilience within the context of a correctional centre in Eswatini. *Journal of Health Psychology*, 28(1), 77–93. <https://doi.org/10.1177/13591053221079951>

- Sexton, T. L. (2011). *Functional family therapy in clinical practice: An evidence-based treatment model for working with troubled adolescents*. Routledge. <https://doi.org/10.4324/9780203882665>
- Society for Adolescent Health and Medicine. (2017). Position paper: Family engagement in juvenile justice. *Journal of Adolescent Health, 60*(6), 678–682.
- U.S. Department of State. (2023). *2023 country reports on human rights practices: Eswatini*. <https://www.state.gov/reports/2023-country-reports-on-human-rights-practices/eswatini/>
- UNICEF. (2020). *Situation analysis of children in Eswatini*. <https://www.unicef.org/eswatini/reports/situation-analysis-children-eswatini>
- UNICEF. (2023). Family support is the key to successful rehabilitation of children. <https://www.unicef.org/uzbekistan/en/stories/family-support-key-successful-rehabilitation-children>
- United Nations. (1989). *Convention on the rights of the child*. <https://www.ohchr.org/en/instruments-mechanisms/instruments/convention-rights-child>
- United Nations. (2015). *United Nations standard minimum rules for the administration of juvenile justice* (“The Beijing Rules”). [https://www.un.org/ruleoflaw/files/Beijing\\_Rules.pdf](https://www.un.org/ruleoflaw/files/Beijing_Rules.pdf)
- Van der Stouwe, T., Asscher, J. J., Stams, G. J. J., Deković, M., & Van der Laan, P. H. (2014). The effectiveness of Multisystemic Therapy (MST): A multilevel meta-analysis. *Clinical Psychology Review, 34*(6), 468–481. <https://doi.org/10.1016/j.cpr.2014.06.002>
- Walker, S. C., Bishop, A. S., Pullmann, M. D., & Bauer, G. (2015). A research framework for understanding the practical impact of family involvement in the juvenile justice system: The Juvenile Justice Family Involvement Model. *American Journal of Community Psychology, 56*(3–4), 408–421. <https://doi.org/10.1007/s10464-015-9755-6>
- Yin, R. K. (2018). *Case study research and applications: Design and methods* (6th ed.). SAGE Publications.