A Case for a Relational Approach in Development Interventions: Measuring the Relationships of an NGO in South Africa

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Abstract

This article argues in favour of relationships as a measure of development. The study gathered primary data from the James 1:27 Trust, a non-governmental organisation providing socio-economic and psychological support to vulnerable households in Pretoria, South Africa. The data were gathered through a qualitative method by which three officials from the James 1:27 Trust and seven participants from three households targeted by the James 1:27 Trust were interviewed. The in-depth interviews were complemented by a focus group discussion, which combined the Trust officials and the households. A thematic content analysis was used to interpret and analyse the data. The study concluded that the nature and extent of relationships in the examined non-governmental organisation present an opportunity to understand and measure development differently from the way it is understood and measured in orthodox development. The participants used burdened words such as family, belonging, appreciation, value, bonding, paying attention, and honesty as proxies for measuring development. These findings provide insight into the meaning of relationships in development processes and outcomes. The article recommends that care relationships be moved from the shadows to the mainstream of development practice.

Keywords: development, relational approach/thinking, Relational Proximity Framework, Human Development Index, holistic care, South Africa

Introduction and Background

The broad objective of this study is to contribute towards the re-legitimisation of development. The article casts its net wide in one sense, in the efforts to situate itself in a historical development canvas. More specifically, the article explores ways in which

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development can be more effective and sustainable through mainstreaming relationships.

Much scholarly work has been done on the role of different actors in development, featuring community caregivers, social workers, social enterprises, non-governmental organisations (NGOs), educators, and women (Kajiita and Kang'ethe 2020; Mlaba, Ginindza, and Hlongwana 2020). Scholarly work on these development actors underscores the importance of relationships in support of development. For the most part, however, these studies focus on the way in which relationships help achieve real development. They focus more on the way in which relationships should be understood as a means to development, rather than development in themselves. Using a case study of the James 1:27 Trust, a Pretoria-based NGO that provides coaching and counselling services along with socio-economic support to vulnerable households, this article explores the way in which relationships are considered by development "beneficiaries", and the role this consideration should play in designing development measurements.

The study emerges from a historical record of development. Approximately three decades ago, scholars such as Booth (1985) and Ferguson (1996) drew attention to the failure of orthodox development in achieving the intended outcomes, while Sen (1999) took the development enterprise to task over what he saw as a flawed process (which he argued does not answer the question of capability).

These assessments of development performance have produced renewed efforts to rehabilitate development. Some of these efforts involve the development of the following range of indicators. First, there is the United Nations Development Programme's (UNDP) Human Development Index (HDI) and the Multidimensional Poverty Index (MPI). The HDI relies on three dimensions, namely, life expectancy, education, and purchasing power parity, all measured quantitatively. The MPI on its part employs qualitative indicators which involve quality of life, good and quality education, and decent standard of living (UNDP 2004, 128). Second, also adjudicated by the United Nations are the Sustainable Development Goals (United Nations 2015) which succeeded the highly popularised Millennium Development Goals. The Sustainable Development Goals link human, economic, social and environmental aspects as building blocks for sustainable development. Third, a range of non-governmental bodies such as CARE International, Oxfam, the British Department for International Development and the African Human Capital advance sustainable livelihoods as a more reliable measure of development (Crous and Attlee 2014).

Finally, there is an emerging interest in refining the MPI, with specific attention to the role of relationships in shaping poverty (Wilkinson and Pickett 2009). This study builds from within this recent narrative. The study forms part of similar studies conducted in the United Kingdom and Australia (see Relationships Foundation 2019). Focusing on South Africa, this study treats human relationships as an approach to understanding development. In so doing, it points out (and makes efforts to cover) theoretical gaps that

undermine development. A relational approach is offered as an opportunity to think of new and innovative research methods that can contribute to development theory and practice more effectively.

The rest of the article is organised as follows: First, a brief treatment of the relational approach is provided. This is followed by the methodology section after which discussion of findings is provided. Finally, the article provides recommendations and a conclusion.

The Meaning and Measurement of Relational Approach

A relational approach to development is a conceptual framework that moves beyond understanding people's well-being to treating well-being as embedded in and constituted of social relationships. A society functions well when relationships are robust. The ethos used to measure relationships is known as the Relational Proximity Framework (RPF) (Ashcroft and Schluter 2005).

Schluter and Lee (1993, 58) acknowledge the difficulty of defining what a "good" relationship means, but explain that it includes the health of emotional attachments to people, the functionality of relationships and the way in which people are treated in relationships on local and global levels. More specifically, a relationship has to do with a lasting association between two or more parties (Reis 2001). This association possesses a measure of stability and interdependence, such that if one party changes, there is a level of effect on the other (Kelly et al. 1983).

Values such as fair play, trustworthiness, honesty, respect for dignity, honour, courtesy, commitment, reliability, altruism and reciprocity resonate with what is viewed as a positive relationship (Schroeder et al. 2019). In relational thinking, healthy relationships are described as the sense of connection between individuals and groups, a shared story, roots and reliability, mutual appreciation, understanding and predictability, mutual respect and fairness, a shared identity, and unity and purpose (Relational Analytics 2017). The foregoing aspects were used as lenses when examining relationships in the selected NGO.

Methodology

This study used a case study to deepen the understanding of the way in which development "beneficiaries" view care relationships. The objective of the case study was to provide answers (and to raise new questions) on the way in which the relationships between different actors in the development sector might reshape the

meaning of development. The selected case study was the James 1:27 Trust, an NGO based in Pretoria, South Africa.[1]

The James 1:27 Trust (the Trust) is one of many organisations working with children and youths affected by the HIV pandemic in South Africa. Geographically, the organisation is located in South Africa's administrative capital, Pretoria. The organisation claims to have innovative practices, ideas and conceptualisations to deal with issues such as poverty, inequality, and unemployment in South Africa, aspiring to achieve a caring society through creating a platform that promotes a large-scale shift towards a care economy centred on reciprocal exchange. The organisation insists on moving away from current economic development models, which consider growth as primary, and social and ecological well-being as subordinate.

The Trust started its own care programme in the early 2000s with the objective of learning what it means and what is required to practice holistic care. The Trust claims commitment to holistic family-based care which involves keeping children in their homes instead of being institutionalised. According to the Trust, the definition of family is more contextual than ideological. It consists of a group of people in a larger community who are interdependent and with high levels of relational proximity.

The research used qualitative methods. In this regard, an interpretivist approach that seeks to understand experiences, meanings, and interpretations of a subjective social phenomenon (Saunders, Lewis, and Thornhill 2016) was employed. The objective was to uncover and understand the subjective experiences and interpretations of relationships by social actors involved in the Trust.

The research does not seek to confirm a predetermined theory. Rather, it provides a tool for assessing the value of relationships in development, as understood by the intended "beneficiaries" of a particular organisation in a specific place. There are limits to a case study approach, such as the current research. For example, Flyvbjerg (2006) argues that generalisation cannot be made from a single case, although he admits that a case study is useful when generating hypotheses. Questions remain on the way in which a relational approach could be employed in the development sector beyond one case study. Notwithstanding, focusing on an NGO as a case study within a qualitative study provides a microscopic focus on a unit that enables greater understanding of what happens in broader development (Jacobsen 2002).

Selection of the Case Study

The Trust was selected as a case study owing to its focus on relationships as development. One of the researchers was involved with the Trust for five years (2015–

1 The organisation has given permission to use its real name, but pseudonyms for the respondents are used throughout the research analysis.

2020) and is therefore well acquainted with its approach from a practice point of view. Although this is a potential risk for bias, it also presents an opportunity to examine relationship issues from embeddedness. Embedded research refers to the researcher's affiliation with an institution while providing a critical assessment of the research subject or "in-betweenness" as suggested by Vindrola-Padros et al. (2017). In this embeddedness, the researchers adhered to critical subjectivity (Reason 1995, 12). The researchers collaborated with the organisation to carefully decide the selection of participants to ensure that the data provide a comprehensive view on the relationships between the Trust and the households under their care for further in-depth analysis and insights.

Sampling

The participants of the study were selected through purposive sampling, which relies on the judgement of the researcher when choosing who to participate (Saunders, Lewis, and Thornhill 2016). Purposive or judgement sampling provides the researcher with information-rich cases worth in-depth study but can lead to judgement errors by the researcher (Ishak and Bakar 2014).

Two categories of participant were interviewed through a semi-structured questionnaire. The first category consisted of seven young adults who were purposively selected from three households under the care of the Trust. At the time of the interview, these participants (Lesedi, Sechaba, Lebo, Lerato, Tsebo, Dineo and Khabane) had been part of the care of the Trust for a period ranging from 10 to 16 years. The household members were selected if they passed the basic criterion, namely, that they headed the targeted household. In this research, the term household refers to a group of people who live together at least four nights a week and who share resources (StatsSA 2013). This smaller group lives together in a larger community but manifests high levels of interdependence and relational proximity.

The second category consisted of three senior officials from the Trust. These participants were chosen given their constant interaction with the households under support. The interviewed officials were the CEO (Mark), the founder (Richard) and the social worker (Samantha). The founder (Richard) was included given that he has the longest relationship with the households.

After the semi-structured interviews were administered, a focus group discussion consisting of all the participants who had successfully completed the questionnaire was conducted. The aim of the focus group was to explore the weak and strong relational proximity and to gain a deeper understanding of the participants' responses, reflections and perceptions of the results (ISUU 2013).

An RPF questionnaire was administered to the participants. The questionnaire posed a positive and a negative statement for each question with a rating from one (very poor/negative) to six (very good/positive). The respondents gave a rating on the scale,

depending on whether they associated more closely with the negative or the positive statement. The overall scores for each relational indicator (directness, continuity, multiplexity, parity and commonality) were converted on a scale from 0 (very poor) to 100 (very positive) based on the overall perceptions of the relationship as scored by all respondents.

The results of the relational questionnaire and resultant heat map formed the basis for the interpretative analysis.

There was a feedback session on the RPF results of the five relational drivers during the focus group discussion. The drivers were workshopped further to get an overall sense of the way in which the participants interpreted the relational indicators in a group setting.

The advantage of semi-structured interviews and a focus group discussion is that both combine open or prompt questions with themes which explored a phenomenon in an in-depth manner (Saunders, Lewis, and Thornhill 2016). The researchers followed the key themes and objectives of the study but allowed deviations to occur as long as the topical trajectories remained broadly within the framework.

Analysis

A thematic content analysis was used to interpret the qualitative data as the findings were interpreted in themes that emerged from the research (Yin 2016). Questions on the research notes included "what is this?" and "what does it represent?" (Gibbs 2007). As the researchers worked through the notes, analytical categories and themes were drawn from the data to explore the way in which these themes fit together and inform a relational economy model in development. The researchers were careful not to draw unwarranted inferences owing to the small size of the sample. Instead, approaches, tools, models and principles were suggested based on the results for further support, testing and comparisons in subsequent research.

Five themes were used as a guide to the analysis. These themes are: directness (measuring the quality of communication), continuity (measuring "time" and "story" of a relationship), multiplexity (measuring understanding of the other person's challenges and capabilities), power and fairness (measuring the way in which power relations play out in relationships), and commonality (measuring purpose, values and goals) (Ashcroft et al. 2017).

Researcher Involvement

In terms of involvement in the Trust by one of the researchers, the study admits that the researcher may share the same problems that many NGOs face, namely that they are urban, educated, and middle class. NGOs have been described as reflecting the power relations in the societies in which they operate (Fowler 2013). The high levels of socio-

economic, racial and gender inequalities in South Africa add to the complexity of the power dynamics that influence this researcher's interactions with the Trust's staff, key stakeholders and household members.

Notwithstanding, however, steps have been taken, to the extent possible, to minimise the researcher's bias through rigorous research containing numerous data collection and analysis techniques. The researcher did not benefit materially or otherwise from the organisation through conducting this research. The RPF is also useful to minimise researcher bias. It produces a report that highlights the views of the respondents on the relationships measured. The respondents had the liberty to be honest when rating the relationships.

Ethical Considerations

The research was conducted as part of a PhD study at the University of Pretoria, South Africa. The researchers adhered to the university's ethical requirements. The data collection methods were approved by the university's Ethics Committee.

The researchers introduced and explained the study objectives to all participants. The participants were also asked for consent, of which they were given the liberty to decline their involvement in the study with no consequences for non-participation. The interviews started only after the respondents signed the consent form. Recording was done only when the participants agreed to it.

The discussions and interviews were confined to the issues under research and no covert or deceptive methods were used during the interactions. The findings were made available to the participants and they were able to comment and give feedback.

Discussion of Findings

This section focuses on an analysis of the primary data.

The James 1:27 Trust Relational Philosophy on Care

The Trust's transformational component focuses on the relationships between the Trust and household members. The Trust views the relationship as the critical bridge between transactions and the often-difficult choices made by both household members and the caregivers or care organisations. These choices are made under the rubric of limited resources and capacity as well as conflicting interests and disputes that should be carefully managed. The transformational component is a long-term commitment which is embedded in the values of the Trust and includes "being present, listening, questioning, having compassion and then standing in solidarity" (Founder, interview 29 March 2019).

The Trust's willingness to acknowledge and deal with stress and conflict in the relationships between "giver" and "receiver" is what makes the Trust different from most care-based NGOs. The Trust also recognises the need to negotiate care as a process of learning and understanding different interests instead of claiming to have the answers as caregivers and professionals.

A brief overview of the participants from the households will be provided below, which will be explored further in the findings and themes that emerged from the research.

Interviewed Participants (Households)

The participants below are from three households that have been under the care of the Trust over the last two decades.

Household 1: Lesedi and her brother Jabu were taken under the care of the Trust in 2004 after their mother passed away and the extended family took most of what was in the house and abandoned Lesedi and Jabu. An Anglican priest and his wife met Lesedi when they shared meals with children at a community centre in Bela-Bela (an hour from Pretoria). The priest was also a board member of the Trust and the Trust decided to formally take Lesedi and her brother under its care. Jabu was addicted to glue and the Trust eventually lost contact with him, but they still have a positive relationship with Lesedi. Lesedi is still in contact with and takes care of Jabu, while she lives with her partner and two children. Lesedi has been the care worker of the Trust since 2019.

Household 2: In 2009, the Trust collaborated with a community-based organisation that has care workers in a community north of Pretoria. This community is characterised by limited access to running water, sanitation facilities and poor infrastructure. The Trust and the organisation conducted a sample study in the community and identified Sechaba's household as "most vulnerable", following which they started a care plan with the household.

The household currently consists of five young adult siblings (Khosi, Sechaba, Lebo, Lerato and Tsebo) who take care of six children. Their late older sister had three children who are now in primary and high school, Lebo has a child and Lerato has two children. The Trust has limited contact with Khosi (the oldest brother), since there was a breach of trust with finances and he did not want to participate in a restorative justice process.

Sechaba (the second oldest brother) became the primary caregiver and ensured that a house was built for the whole family in 2012. Throughout, Sechaba has taken most of the responsibility for the household. He has worked intermittently since 2010. When his mother was sick, he took care of her and ensured that the grants and payments were remitted to Lebo, who manages the finances for the household.

The relationship between Lerato and the Trust has been challenging. She fell pregnant in 2013 and never finished matric. Lerato did not adjust well in a hospital school for

pregnant teenagers. The Trust supported her while she was reintegrated into the school at home. In 2016, Lerato was forced to leave the house after conflict with Khosi. The Trust initially supported Lerato by paying for her rent and groceries, but the Trust withdrew payments when Lerato broke their contract and agreements. In 2019, Lerato was involved in a relationship with potential for marriage. Unfortunately, the relationship did not work out, but she fell pregnant again and needed support. The Trust facilitated a meeting on 18 January 2019 between Lerato and the household. They agreed that she could move back. They then built an additional room for her and her two children.

Tsebo is the second youngest brother in the household. He is the only person in the household with matriculation exemption (a legal requirement for first-degree study at a South African university). In 2016, Tsebo received an offer from the Trust to relocate to a commune at a church in Pretoria as part of a discipleship course and skills training programme. Tsebo did not adjust well to the new environment. He struggled relationally, was distracted and went into a psychogenic coma (a state of unresponsiveness without organic cause). He was sent home by the Trust. In 2018, he started studying through the University of South Africa. The Trust paid for the first year of Tsebo's studies and gave him office space and internet access, and support from a psychologist, social worker and academic mentors. Up to date, Tsebo has not passed his first year of university, but earns a small income from tutoring and the family business that he and the household recently developed with support from the Trust.

Household 3: The Trust also became involved with another household in 2009, consisting of Kabelo (oldest brother), his wife, two siblings (Dineo and Khabane) and seven children. Three of the seven children are from their deceased sister.

In this household, there are members with positive relationships with the Trust and vice versa. Dineo moved out of the house in 2015 after conflict with Kabelo and her sister-in-law. Since then, the Trust has mostly had contact with Dineo and Khabane. When Dineo continued to get support (such as financial support for groceries and education for her children) from the Trust, the impression in the household was that the Trust was taking sides between Kabelo and Dineo. The conflict occurred in 2015 but the relationship was only restored five years later after interventions by the care worker and coaches from the Trust.

Dineo lives with her partner and father of their children. Dineo is a teacher at a crèche in her community while she is studying teaching and Information Technology. In 2018, Dineo asked the Trust for a loan to buy land, which started a process of participation, frequent contact, building trust and sharing the financial risk.

In 2016, the Trust gave Khabane an opportunity to join a mentorship programme at a church in Pretoria and to develop his musical skills. Khabane relocated to Pretoria from his household and community during his mid-twenties. Before the "intervention",

Khabane was involved with friends who had a negative influence on him. He failed his final year of high school but was very passionate about music. Through the Trust's social networks, he is currently pursuing a career in music. Khabane gives music lessons in poorer communities and recently became a father.

The foregoing provides context to the RPF results as reflected in the next section.

RPF Results Shared during the Focus Group Discussion

The results from the RPF questionnaire shared during the focus group discussions show the differences in the way in which the Trust and household members scored their relationship with each other. Each participant completed a questionnaire on another. For example, the social worker as part of the care team of the Trust scored her relationship with Khabane as a member of a household, and vice versa. The results are illustrated in Figure 1.

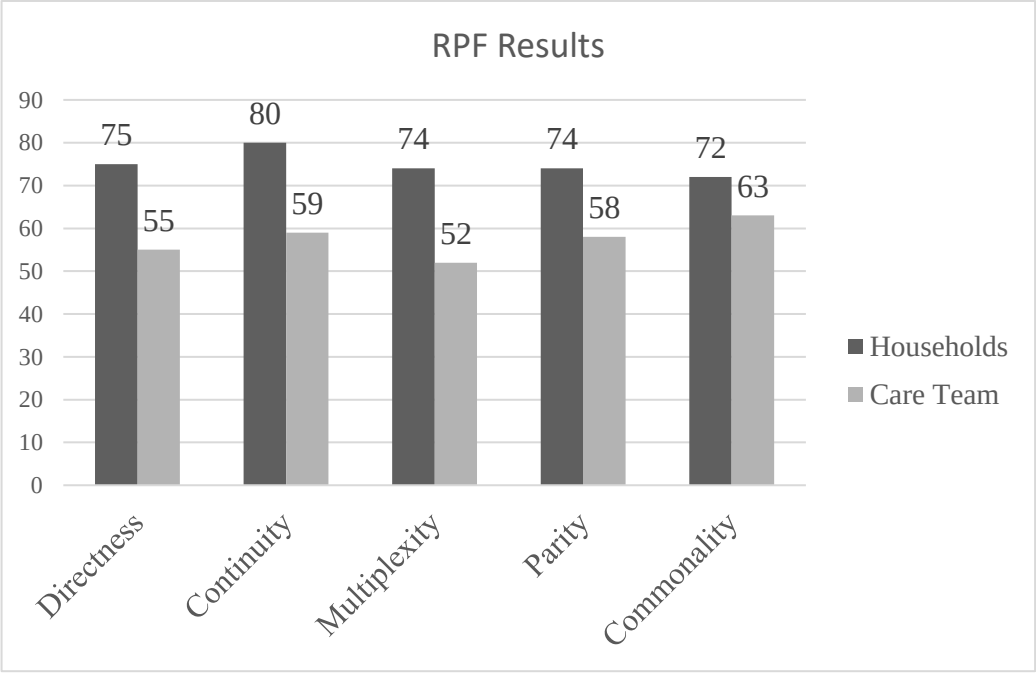

Figure 1: RPF households and care team

The meanings behind the drivers were explained to the participants in the following way. The first driver (directness) is about the quality of communication and the way in which it builds a sense of connectedness. The second driver (continuity) focuses on the "time" and "story" of a relationship. The third driver (multiplexity) aims to understand the other person's challenges, skills, talents, resources, capabilities, needs and

motivations. Both parties should feel accepted and appreciated to participate in the relationship without anxiety. The fourth driver seeks to understand power and fairness (parity). The final driver (commonality) within the RPF focuses on purpose, values and goals, and the degree to which these are shared in ways that bring synergy to a relationship.

The results were explained, and the researchers highlighted the differences in the ways in which the Trust care team and households scored the relationships. The notable differences are in the directness (20%), continuity (20%) and multiplexity (21%) themes. The difference for parity drops to 15 per cent and is lowest for commonality at 8 per cent. The results are explored further below as themes are identified through the stories and analysis of the data.

Feedback during the Focus Group Discussion on the Results

When the results were shared during the focus group discussion, themes such as family, belonging, truth-telling, and honesty emerged as part of what the participants identified as human development indicators within holistic care and development. The value placed on family also extended to the way in which the participants experienced belonging in the relationship, which is reflected on the way in which the participants scored parity (15% difference) between the Trust and household members in the RPF results (Figure 1). This indicates that both parties experienced a fair level of participation, fairness, and respect in the relationship.

During the focus group discussion, the participants rated how they feel about the statement “I can be myself” in relation to Trust–household relationships, and all the participants scored more than 7/10. When asked why everyone in the room scored more than 7/10, a prominent answer was that the participants felt valued and respected by the other party. Khabane said, “we pay attention to each other.” The founder commented that “there is an effort from both sides to ‘show up’ in the relationship”. Tsebo mentioned “you feel this sense of belonging” four times and elaborated with words such as “I am in a secure space”, “here appreciation is a common thing”, “appreciated and valued”, and “there is a platform of a strong bond”.

The participants described the relationship as a “journey” (Tsebo, focus group) where “it is not just about money and goodies” (Lesedi, focus group). Instead, relational aspects emerged from the discussion, including words such as “commitment”, “never giving up” or “never rejecting”, “guiding”, “caring” and “being somebody” (Sechaba, focus group).

The foregoing responses involve a long and challenging history between the Trust and the household members. During the focus group discussion, words such as “messy” and “pain” were used throughout to describe what is included in this development relationship between the “givers” and the “receivers” of care.

Two main themes emerged during the focus group after the RPF results were discussed:

- Theme 1: The health of development relationships depends on whether they can be sustained in a crisis
- Theme 2: The health of relationships in development is sustained through continuity and honesty

These themes reveal what relational health could refer to in understanding development and the way in which this can inform the idea of a relational economy. Both themes are discussed below.

The health of development relationships depends on whether they can be sustained in a crisis

The foregoing theme statement becomes clear when Lesedi's relationship with the Trust is considered in more detail. The relationship between Lesedi and the Trust was not always positive. Despite the interventions and care from the Trust (for example in terms of physical needs, educational support and other emotional, psychological and spiritual support), Lesedi fell pregnant in 2007 as a teenager and the Trust was unsure of the way to respond since they questioned whether the interventions made a difference.

The Trust decided in favour of moving Lesedi to Pretoria to rewrite her matric. The increased contact strengthened the relationship between the Trust and Lesedi, but it was also this proximity that led to disappointment and distancing due to the stress of the relationship. Richard (interview 29 March 2019) reflected, "I didn't want to see her because I was tired, disappointed and I felt that she was making bad choices." The break in contact had interesting implications and was significant. Lesedi found an internship and obtained her driver's licence during this time and the conflict was resolved after six months.

The positive relational results between both the care team and Lesedi may also reflect Lesedi's own resilience. This resilience has manifested in the way in which Lesedi has handled her brother's glue addiction, along with raising her children, handling a six-month period of limited contact with the Trust and financial distress in 2011, and developing her skills. Financially, Lesedi has been independent from the Trust support since 2011. She is proud that she is able to look after her household. In a Trust video (made on 13 March 2016) in which household members share about their lives, Lesedi repeatedly explains her success in terms of the decisions she has made:

> I've done it, I believe that anyone can do it . . . I know how to buy clothes for myself, not to depend on somebody else . . . I believe that as a woman I can do that for myself . . . but every human being can do that for themselves. If you have a vision and a mission for yourself, then I believe that anything is possible. As a single parent I have been through a lot . . . but with the help of God I believe that I have raised my child very well.

> I know today that I'm a strong woman. I can stand up for myself. I can even say that I am a better person today than before.

However, in Lesedi's words, there seem to be an interplay between her independence and dependence on the Trust. Her relationship with the Trust has instilled a sense of "giving back" to others as something that she feels she "has" to and "wants" to do. This has led her to study Social Development and she is now working for the Trust as the care coordinator. She is, therefore, engaging in relational behaviour through being "an example to others" as an extension of her dependence on the Trust. The Trust also depends on her as care worker in the organisation.

The foregoing interdependence shows some of the dynamics in the relationships. If relations are intrinsic to the emergence of communities (Englund and Nyamnjoh 2004), the same can also be said about relationships as they emerge in development. The Trust's relationship with Lesedi has endured many crises. The health of the relationship lies in the connection, the shared story, roots, trust, mutual appreciation and respect, understanding and shared purpose in the relationship. There are identity formations in individuals, relationships, groups, relational partners, and group members (Golden, Niles, and Hecht 2002). What is significant from the foregoing illustration is that relationships develop and emerge in a crisis. In addition, the health of relationships is not necessarily dependent on the success of the intervention but whether the relationship can be sustained in a crisis.

The health of relationships in development is sustained through continuity and honesty

In the RPF results in Figure 1, there is only 8 per cent difference between the ways in which the Trust care team and the household members view commonality in the relationship. The RPF results also show that continuity is scored high by both household members and the Trust team. High continuity in the relationships relates to stability in the relationship, which suggests that there is a learning opportunity. During the focus group discussion, five household members claimed that in the relationship with the Trust, "there is room for mistakes."

However, high scores in commonality and continuity do not mean that the Trust and household members feel that they have the same liberty to be "bold" in the relationships. This is reflected on a higher score in the RPF by household participants compared to the Trust team. During the focus group discussion, all the participants from the Trust claimed that the Trust has more liberty to be honest with the household members. The CEO of the Trust, Mark, was open during the focus group discussion about the challenges of the "giver" and "receiver" relationship between the Trust and household members:

> Whether we speak about it or not, there are power and resource barriers which I think changes the nature. It's easier for us to be completely honest with you than for you to be very honest and bold with us. I think that is the word that stood out for me, the respect

> and fairness is there but the boldness can be hard because there are differences. We carry resources and there are differences in power in the relationship which we need to be honest about, that they are there, and it can affect how that relationship works.

During the focus group discussion, Dineo spoke about the way in which she struggled with the constant changes in Trust care workers. "We had different caregivers. We didn't know who to share our problems with and who to talk to." Khabane spoke about his distress caused by the conflict between Dineo and Kabelo, explaining why the Trust also played a part in the conflict. Sechaba was confident to share with the Trust about his involvement with illegal activities which he undertook to take care of the household. Lebo was honest about delaying marriage, and the pressure that came with this decision. Lesedi told Richard that he can be "harsh sometimes" and that "we must work on that harshness". Tsebo was able to share one of his major disappointments with the Trust. Tsebo explained that he felt "knocked out" when Mark and Richard had a long discussion with him during a household meeting (on 15 March 2019): "I felt like, I know I made a mistake and was already fixing my mistakes and I felt that the Trust saw its own perspective and did not see what I was trying to do."

The willingness to engage with such levels of openness is significant since relationships arise out of acting and speaking together (Phelps 2006). Ultimately, the meaning of personal action cannot be reduced to the intention of the individual agent, but to actions in social networks (Deneulin 2006). The foregoing noted experiences assign different values to the meaning of development and see it as embedded in relational values such as family and belonging. These values emerge within a development context in which people are "acting and speaking together" to achieve certain outcomes that may be unpredictable because the choice and actions in social networks are unpredictable. But in these networks, there are identity formations (Golden, Niles, and Hecht 2002) that have occurred in and between group members.

Development practice, therefore, extends beyond professionals who are expected to diagnose and intervene as the experts in development by avoiding pain and focusing on diagnosing and "fixing" the problem. The data challenge this practice by showing the significance of "going through the pain" and "not to fix" (Founder, focus group) but allow choices to be made by all parties in the relationship.

Conclusion and Recommendations

This study reveals that asking questions about the relational dynamics in an NGO with a holistic and family-based model shows the importance of developing care models that focus on creating family, belonging and continuity in relationships. The data show that honesty and truth-telling in these relationships are important. They develop over time. They are not always about the resources that often dominate development interventions.

The foregoing reveals the way in which identities can be formed in development that challenge current development models and practices. In the South African context, with more integrated and interdependent understanding of extended families and communities (Nabudere 2011; Njoh 2006), the participants viewed themselves as part of a wider social network in which familial relationships have developed and there is a desire to deepen these relationships. It also suggests that a relational economy is about relational experiences and practices. These experiences and practices develop in long-term commitments that deepen the sense of belonging and family with the potential to create deeper, more sustainable and interdependent relationships. This is different from so-called development experts who provide professional care that is clinical and does not produce the depth and interdependence that may be required for more holistic development to occur.

The data challenge the dominant and ethnocentric nature of development and social work within African contexts (Casimir and Samuel 2015; Ibrahima and Mattaini 2019; Smith 2014). The themes that emerged are tied to relational capabilities and the concept that the development is embedded in and constituted of social relationships (Cahill 2006). The language that the participants used such as belonging, appreciation, value, bonding and paying attention to each other reflect a much deeper understanding in African philosophies of social relationships on which societies and economies are structured (Munyaka and Mothlabi 2009; Ramose 2003). These are relational terms that inform the way in which people can speak about and understand development in a relational economy, even as these terms are not currently regarded as central to development theories and practice. Development practices require a much deeper understanding of the different relational experiences and care relationships to move beyond development models that are clinical and constrain the potential for deeper, more sustainable, and interdependent relationships.

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