ANALYSIS OF THE IMPACT OF EXISTING INTERVENTION PROGRAMMES ON PSYCHOSOCIAL NEEDS: TEENAGE ORPHANS’ PERCEPTIONS

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ABSTRACT
The study examined teenage orphans’ perceptions of the adequacy of provisions by various support systems in an effort to meet their psychological needs. The aim was to get feedback from a category of beneficiaries of psychosocial support in Zimbabwe. The target population was teenage orphans who have lost both parents. This group was chosen as their situation tends to be more complex, compounded by their stage of development (adolescence). A sample of sixty teenagers (twenty-five males and thirty-five females) was sampled from both rural and urban settings in Bindura district, in Mashonaland Central province. The participants were all high school learners at four schools in the district. Random sampling was used to select the participating schools and teenagers. The study was a descriptive survey which employed both quantitative and qualitative methodology. A questionnaire and follow-up interviews were the main data collection methods which complemented each other very well. The methodology was very suitable for the study as it enabled the researcher to collect data from a large number of respondents in a very short space of time. Issues of validity and reliability were well taken care of through a trial run. The questionnaire was tested through the inter rater method, scoring a very high reliability coefficient.

Results of this study revealed a gap between what programmes offer and preferences of the teenage orphans. It was very clear that most support systems concentrate on material provisions such as food handouts, clothing and shelter. Much as these contribute towards comfort, teenage orphans’ perceptions showed a different line of thinking. They cited psychological needs as more critical in addressing their plight. Needs such as emotional attachment, mothering, and not just a mother figure, where they can reliably get seemingly small affect responses such as a hug, smile, a listening ear and a true sense of belonging in a family. Opportunities for participation in decision making especially where issues that relate to orphans are discussed and desire for recognition in leadership roles were also highlighted as critical psychosocial needs. The major recommendation thus, focused on persuading organisations working with Orphans and Vulnerable Children (OVC), to create more opportunities that directly involve the clientele. The victims should be allowed to take active part in decision making processes at various levels of programming for OVCs. They should be involved in planning, implementation and monitoring of programmes targeting them.

Keywords: Teenage orphans, perceptions, vulnerable, psychological needs, provisions

INTRODUCTION
The plight of orphans in Zimbabwe cannot be overemphasized especially with the advent of HIV and AIDS pandemic. Although all vulnerable children have similar needs, the sheer
magnitude of the current number of orphans warrants attention. According to International Child Resource Institute (ICRI), 1.5 million of the world’s 14 million orphans reside in Zimbabwe (www.icrizim.org). It is, thus clear that orphans continue to constitute a significant number of enrolments in Zimbabwean schools; hence, the study is significant to educators. Schools should be safe zones for such victims of circumstances (Garbarino et al, 1991). There is, thus, need to go beyond the usual curriculum and address psychological and affect needs of vulnerable children so that they adjust to the learning environment with minimum difficulties. Hefferman (1997) contends that any intervention for orphans and other vulnerable children that lacks the component of psychosocial support is not holistic support. Hefferman’s statement, thus, suggests that in spite of countless challenges, effective intervention should be sought in order to help orphans acquire the drive to move on with life and become fully functioning members of their own society, hence this study.

The investigation sought teenage orphans’ perceptions of the impact of intervention programmes on their psychosocial needs. It was limited to children who had lost both parents and were in the age range of thirteen to eighteen years. Mukoyogo and Williams (1993) contend that orphans’ needs vary by the type of orphan. Needs of children missing one parent, for instance, differ from those missing both. A child missing both parents is generally the more vulnerable. Loss of one parent, at times, does not expose the child seriously especially when the surviving parent is in good health and gainfully employed.

This study also observes that the plight of older orphans seems to pose more challenges, as adolescence is a critical stage of psychosocial development. Osborn,(2008), contends that teenage orphans are more likely forced to drop out of school to fend for siblings or used for cheap labour by neighbours and / or relatives. Increased economic and emotional strain they experience can lead to risky behaviours such as sex (to get food or shelter) and drug abuse. To a large extent, this population lacks role models as they, in some cases, find themselves, heads of families. According to www.icrizim.org, as teenage orphans approach sexual and physical maturation, they become more vulnerable to sexual abuse, increased risk of HIV, exploitation and homelessness. Osborn, (2008), thus concludes that although there are many organisations focusing on protection and care of Orphans and Vulnerable Children (OVC), programmes have largely overlooked adolescents and neglected the special emphasis of tailored programmes needed for this population. Gender was beyond the scope of this study, therefore, the study considered the impact of intervention programmes on orphans’ psychosocial needs for both boys and girls.

BACKGROUND TO THE STUDY

Several underlying factors prompted this study. There has not been much research in Zimbabwe relating to the impact of intervention programmes on the psychosocial needs of teenage orphans. Nyamukapa et al (2010), contend that there is less evidence for the effectiveness of current support strategies on the plight of orphans. Nyamukapa, et al carried out a research in Eastern Zimbabwe which sought to measure effects of orphan hood on psychological wellbeing of children. Results showed that orphans suffered psychological distress and the effects included; trauma, school drop outs, inadequate care, child labour, physical abuse, stigma, discrimination and being looked after by non parent individuals. The current study had similar elements in its focus, however, sought personal views of teenage orphans only.

The problem of orphans has grown gradually over the years the world over of which, Zimbabwe has been no exception. In the past, orphans, as a group deserving special attention, were almost unknown. Their plight was handled by the extended family as a support system
to the child. Today, the issue of orphans has become a social problem in Zimbabwe. The traditional support system structures have been greatly weakened by the impact of HIV and AIDS and the harsh economic climate (Matshalaga, 1997). The extended family, thus, seems to be gradually giving up. A study by UNICEF (2001) revealed that most families caring for orphans in Sub Saharan Africa concerned themselves with feeding and sheltering the orphans. The need for emotional support was rather a bother to such secondary support systems, hence, the intent of this study was to analyse the adequacy of today’s intervention strategies in addressing psychosocial needs of orphans.

In Zimbabwe the early days of orphan crisis saw a rush by some NGOs to build orphanages, feed, clothe and send the orphan to school. However, a research by Matshalaga and Williams (1993) in Tanzania, Kenya and Zambia found out that orphanages tended to undermine the traditional models of care and alienated children from their families and culture. In concurrence, Ngweshemi et al, (1997) point out that African children’s spiritual connection to their families and clan is central to their social and emotional development and helps them define their place in society. In an effort to address the perennial problems of orphans, organizations like National AIDS Council, Zimbabwe AIDS Network, Zimbabwe Red Cross Society and government programmes such as Basic Education Assistance Module (BEAM) have been noted for initiating several support activities which include food handouts, clothing and school requirements like fees and uniforms in some cases. Sengendo and Nambi (1997), however, contend that even under good conditions where material and financial resources are plenty, it is not easy for a child who has lost both parents to recover and adjust.

From the researcher’s experience in working with children in schools and at church and also from casual talks with systems working with orphans, the conduct of most orphans especially the older ones leaves a lot to be desired. They seem to be either difficult to control or are extremely withdrawn. They become emotionally overwhelmed over trivial matters; hence, they largely fail to resolve conflicts amicably with peers and adults.

This study specifically targeted teenagers, as their challenges seem greater than their younger counterparts. Besides the loss, teenagers are going through a very critical stage of psychosocial development, which is Identity versus Role Confusion (Erikson, 1963, in Follari, 2011). The stage exerts a lot of pressure on teenagers’ psyche as they are trying to establish who they are in a social world that is facing them with numerous expectations. At the same time, very significant changes are taking place in their overall development, which at times trigger mixed emotions. Sensitive support systems like primary caregivers (parents), at this stage become critical. Newman and Newman (1979) assert that the impact of parent child relationship has significant and lasting effects. It fosters self-confidence, self-esteem, self-efficacy and a positive self-image. Without parents, therefore, a child may suffer low esteem, poor self-image and a sense of helplessness. According to Erikson, therefore, children become themselves through other people.

This view becomes even more meaningful for a child who has lost both parents, who is the focus of this study. The absence of an emotionally available caregiver in the teenager’s life creates a gap that can distort his/ her concept of life. The development of the sense of self at such a stage becomes critical. Knowing who one is and what one can do gives a forward thrust in life in spite of problems and as such it must be enhanced at all cost. Maslow (1956) Cited in Mwamwenda (1995) concurs noting that although most people progress through the hierarchy of needs as postulated exceptions do occur. Circumstances like orphan hood do compromise child’s normal development; hence, intervention becomes critical. This view supports the relevance of the present study in enhancing psychosocial development of vulnerable children. The researcher, therefore, certainly found psychosocial support very
critical and sought to establish the extent to which intervention programmes in Bindura were addressing this need in teenage orphans. The study was, thus, interested to find out where the gap lies between teenage orphans’ needs and the intervention at their disposal and coping mechanism, given their stage of psychosocial development and challenges of orphanhood. Over and above all, it is important to note that at the time of this research, provision of psychosocial support to vulnerable groups has become a topical issue, a catchword not only for Zimbabwe, but the world over. It is now a frequent topic of conversation among people on streets and in organizations targeting orphans. Incidentally, a report by UNICEF (2005) clearly states that many interventions and responses so far in Zimbabwe have not made sufficient provision for psychosocial support, neither have they provided for children’s involvement in decisions that affect their lives. Basing on the above arguments, psychosocial needs of orphans become a growing concern, hence this study.

Bourdillon (2000) argues that to know about the issues affecting children, there is need to hear the children themselves. It is often easy to say the right words about listening to children, yet not so easy for adults to take opinions of children seriously especially when these opinions conflict with those of adults. Bourdillon (2000), thus, concludes that for a long time, the children’s voice has either been ignored or heard through the perceptions of adults yet these children can speak for themselves, given the opportunity. It is against this background of psychosocial support to orphans that the Zimbabwean scenario presents a real problem for investigation. This study, thus, sought to approach teenage orphans as social actors and gain insight into psychosocial support as they understand and experience it.

STATEMENT OF THE PROBLEM

Orphans are usually taken as a group of people who cannot offer solutions to their own predicament. As much as assistance in different forms is offered to cushion and make life more manageable, orphans seem not to have been given the chance to express their own views about their preferences on intervention. As a result, it has been observed many times that other people especially adults have been thinking and acting on their behalf for a long time.

This study also notes that the loss of both parents is quite traumatic and can impact negatively on the socio emotional lives of children. Taking cognisance of the different intervention programmes targeting orphans in Zimbabwe, particularly Bindura district, it was, therefore, the aim of the study to seek orphans’ perceptions of the adequacy of such programmes in addressing their psychosocial needs. The following research questions guided the study.

RESEARCH QUESTIONS

1. What are the psychosocial challenges of teenage orphans in Zimbabwe?
2. How do teenage orphans view the current forms of support they get as ways of addressing their psychosocial needs?
3. What are the expectations of the teenage orphans in relation to their psychosocial needs?
4. How do teenage orphans cope with psychosocial challenges both at home and school?

RELATED LITERATURE REVIEW

Review of related literature included mainly studies carried out in countries like Zambia, Tanzania, Uganda, South Africa, Mozambique and Zimbabwe. The general trend was that intervention programmes targeting orphans in Sub Saharan Africa seem to be more concerned
with provision of material needs but without much emphasis on psychological needs the following are highlights of analysis of the reviewed literature

Psychosocial Challenges of Orphan Hood

Psychosocial development is one of the major aspects of human development concerned with one’s social relationships and management of one’s emotional life (Thompson, 2000). Several challenges that impede smooth development are noted.

The Sense of Loss /Bereavement

Warden (1996) views loss as a result of being deprived of something significant and valued in one’s life. The death of parents is quite traumatic to children as the absence of a father deprives them of male authority. On the other hand, the death of a mother robs them of crucial emotional and mental security (Case et al 2003). In a study in Maputo, Mozambique, Garbarino, et al 91991) found out that among traumatic experiences that children had during war were loss of homes, violent death of parents and family members. Orphans, thus, knew how fragile the world is even at a very tender age. The experience of loss can, thus, lead to great anxiety and children get to know that nothing in the future can be considered stable and secure.

HIV and AIDS and Child Abuse

HIV and AIDS orphans face stigma and discrimination. The situation is worsened when such orphans feel rejected by relatives and neighbours. Such response distorts and magnifies the effect of loss of parents, deepening the sense of isolation and alienation while creating a context for various forms of child abuse like physical, sexual and emotional abuse (UNICEF, 2003). Bronfenbrenner (1977) further argues that emotional and sexual abuse can result in social withdrawal and harbouring of insecurities that could lead to violence, mistrust and permanent fear.

Responsiveness of Intervention Programmes for Orphans in Zimbabwe

Schorr (1989) posits that effective intervention programmes provide a wide spectrum of services including socio emotional support as well as concrete services like food, shelter and employment. Examples are given below.

Institutionalization

Initially, the idea of orphanages gave a sigh of relief to many countries faced with orphan crisis. In Mozambique the idea was popular after the war in the 70s (Bowlby, 1990). A similar situation obtained in Nicaragua where more than 15000 orphans whose parents had been killed in armed conflicts were exposed and needed care in orphanages (Garbarino, et al, 1991). In Zimbabwe, institutionalisation has recently become unsustainable given the size of AIDS orphans problem. Thus, a more permanent and accommodating solution is necessary to enhance psychosocial needs of orphans. The argument presented is that child care institutions should expand beyond provision of food, clothes and shelter into such areas as skills development and empowerment.

The School and Psychosocial Support for Orphans

Bronfenbrenner (1997) and de Lorne (1986) cited in www.youngmindsofafrica.org./ concur that children grow up in a system of social networks with the family and school closely influencing the child’s socio emotional development. However, White (2003) posits that schools have limited skills in providing relevant socio-emotional cushioning for traumatized
children resulting in poor assessment of critical needs. Schools need to be proactive in empowering children with skills to manage stress.

**Policy Framework**

The Government of Zimbabwe has enacted a policy in favour of the orphaned child. The policy stresses that a child, whose parents are both dead or cannot be traced and who has no legal guardian is considered by the state as a child in need of care. (The Child Protection and Adoption Act Chapter 5, 06 1996 Section 2b). The government of Zimbabwe also implemented National Plan for OVCs in 2005 to 2010 after approval by cabinet in 2004. The second phase is 2011 to 2015 in line with the national strategic plan. It is from such policies that all support systems including the Department of Social Welfare and NGOs engage in various endeavours to address the plight of orphans. Services include provision of shelter, food and clothes handouts and in some cases resources for income generating projects. Child friendly courts are open for especially abused children, thus protecting the rights of all children.

**Psychosocial Needs of Orphans**

Psychosocial support recognizes that mere provision of material needs is not adequate unless emotional support is considered.

**Sensitive Support Systems**

Orphans need support systems that are sensitive to their loss of parents. The need for affection is greater than daily material needs (Flemming & Adolph, 1986). This means that support system working with orphans need big eyes to see, big ears to listen to children’s problems, the mouth to speak words of comfort and wisdom, a heart to feel for and understood the child’s plight and time to visit and share with such victims of circumstances (Tassoni, etal, 2002).

**Counselling Services**

The need for counselling in the life of traumatized individuals is critical. Nelson Jones (1997) stresses that bereaved children should be given appropriate information including straightforward facts about death. Counselling allows orphans to cope with their situation in a more positive way Support systems should find creative, loving and long lasting ways to send the right messages to the victims.

**Coping Mechanisms**

In many cases children in difficult circumstances have feelings, which they do not know what to do with them; hence, they stuff them into their pockets and pretend to ignore them (Peterson & Nisenholz, 1995). Children react to stress in different ways. Bowlby (1995) asserts that many find it difficult to talk about their worries. Emotional processing is, thus, key to resolving psychosocial problems. Children need to be assisted to actively cope with stress rather than just react to it (White, 2003).

**RESEARCH METHODOLOGY**

**Research Design**

This study was a descriptive survey which facilitated the study of attitudes, perceptions, feelings, values and beliefs. Silverman (2011) contends that surveys are most suitable when studying social phenomena which may not be assigned to experimental research. Descriptive survey method was considered the most appropriate research design for this study because of its ability to capture individuals’ views specifically teenage orphans’ perceptions of the
impact of intervention programmes on their psychosocial needs. The method helped the researcher to systematically collect information from teenage orphans by obtaining their responses through a questionnaire and follow-up interview.

In this study, the survey design was also used as an appropriate mode of inquiry for making inferences about a large group of people from data drawn on a relatively smaller number of individuals from that group (Leedy 1980). Thus, this method has the advantage of broadness of scope. The survey method made it possible to collect data to describe a population that was too large to observe. By using the survey design, the study became more realistic in that participants were studied in their natural settings. The researcher visited the teenage orphans in their schools and in some cases, in their homes to administer both the questionnaire and follow-up interviews.

The Sample

Table 1. The Study Sample

<table>
<thead>
<tr>
<th>Background</th>
<th>No of Subjects</th>
<th>Males</th>
<th>Females</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural</td>
<td></td>
<td>10</td>
<td>20</td>
<td>30</td>
</tr>
<tr>
<td>Urban</td>
<td></td>
<td>15</td>
<td>15</td>
<td>30</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>25</td>
<td>35</td>
<td>60</td>
</tr>
</tbody>
</table>

Table 1 shows the distribution of the sample from rural and urban settings. From the population of 495 teenage orphans, the researcher chose sixty (60) participants; thirty-five girls and twenty-five were boys. According to Leedy (1980) the sample which constituted 12% of the total population was considered representative enough for descriptive research to generalize the results of the study to teenage orphans in Bindura District.

Simple random sampling was used to come up first, with four schools then the sixty participants. Simple random sampling was used since the aim was to generalize findings from the selected group to a wider population. The method, thus, was appropriate as it gave all members of the population an equal chance of being selected for the study. As a result it decreased the chances of getting biased results.

Date Collection Methods

The Questionnaire

The questionnaire (Appendix 2) consisted mainly of 15 closed questions, which required the respondents to pick the appropriate response (Yes or No) from the options given. The use of closed type questions facilitated easy analysis of results. Thus in this study, open-ended questions were avoided as they have the problem of interpretation and analysis. The questionnaire was preferred since they take into account social variables like attitudes, beliefs, values and perceptions (Haralambos and Holborn, 1995). Questionnaire also made it possible to collect large quantities of data from respondents over a relatively short period of time. All answers were stored in permanent written form. Besides, questionnaires guaranteed confidentiality as respondents would not indicate their names and so the questionnaire could elicit more truthful responses than would be obtained from a face-to-face interview. Above all, the questionnaire observed uniformity in the way the questions were presented which made comparison of answers easy during analysis.
Follow-up Interviews

Follow up interviews probed deeper into the minds of thirty-five respondents. Leedy (1980) contends that data sometimes lay buried deep within attitudes, beliefs, feeling and reactions of men and women. The researcher sought clarity or further detail on some issues that tended to be more sensitive, for example, questions 1 and 3 under Section A. Face to face interviews also allowed the researcher to record non verbal cues such as frowning, sudden change in the voice, aversion and drops of tears. Hough (1996) contends that observing non verbal communication is critical when dealing with issues that relate to counselling. Fear, anxiety, rejection and stress which some participants could not explain in words were noticeable in the various non verbal behaviours exhibited during the interviews. As a result, the data gathered were rich, full and comprehensive.

Validity and Reliability

The questionnaire was tested during a trial run. Content validity was ensured through cross checking the content of the questionnaire and interview guide against the stated research questions. Pre testing, thus, ensured thoroughness and completeness of both instruments. Factors affecting reliability like clarity of items and length of the questionnaire were addressed. Items were made as simple as possible and precise. Again, the questionnaire was given to teenage orphans only. This was important because dealing with people who were directly affected ensured reliable responses (Giddens, 2001).

Over and above all, the inter rater method was used to establish the reliability of the research instrument. The questionnaire was given to four experts for rating. The ratings were correlated resulting in a reliability coefficient 0.8 (see appendix 1). This result showed that the questionnaire was very reliable, therefore, suitable for measuring teenage orphans’ views on the impact of intervention programmes on their psychosocial needs.

Data Analysis Procedures

Simple descriptive statistics that showed percentages of responses to questions on the survey questionnaire were used in the presentation of data. The procedure provided a valid description of the respondents’ ratings on the impact of intervention programmes on their psychosocial needs. The presented table of percentage responses was supported by thick descriptions or narrations of the results in order to answer the research questions raised in chapter one.

RESULTS

Psychosocial Challenges of Teenage Orphans

Results from questions that focused on challenges faced by teenage orphans show that a greater number (60%). had found it difficult to accept the death of their parents even though for some, the loss had occurred during their early childhood. Garbarino et al (1991) contend that eventual consequences of early traumatic loss may not be fully evident until many years have passed. Respondents gave varied reasons, indicating that they did not have the chance to talk to their parents before death. Some parents died whilst away from their families. Sixty percent indicated, in a follow up interview, that they never attended their parents’ funeral. These children have real psychosocial problems. Further analysis of comments by most respondents also revealed that orphaned children may have many unanswered questions which no one has ever attempted to address. Most children, for instance, asked the question, ‘Why my parents only and not other children’s? Regrets and wishes were also noticed in some of the comments as the teenagers always wished that their parents were around to give
them the love and attention they were missing. Pfurtscheller (2000) concludes that children who have gone through negative and bad experiences and feel rejected and lost need love, care and respect for them to recover from such damaging trauma.

Table 2. A summary of Responses on Teenage Orphans’ Perceptions of the Impact Of Intervention Programmes on their Psychosocial Needs, N= 60

<table>
<thead>
<tr>
<th>No</th>
<th>Item</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>1.</td>
<td>Have you “accepted” the death of your parents?</td>
<td>19 (32%)</td>
</tr>
<tr>
<td>2.</td>
<td>Do you find it easy to mix with peers?</td>
<td>37 (62%)</td>
</tr>
<tr>
<td></td>
<td>Have you ever been abused:</td>
<td>Physically?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>21 (35%)</td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td>Sexually?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5 (8%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Emotionally?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>45 (75%)</td>
</tr>
<tr>
<td>4.</td>
<td>Are you heading a family?</td>
<td>15 (25%)</td>
</tr>
<tr>
<td>5.</td>
<td>Do duties that you do at home affect your school work?</td>
<td>41 (68%)</td>
</tr>
<tr>
<td></td>
<td>Besides receiving material help from organisations you have the chance to talk about problems that worry you (counselling)?</td>
<td>6 (10%)</td>
</tr>
<tr>
<td>6.</td>
<td>Do organisations that deal with orphans involve you in decision making?</td>
<td>13 (22%)</td>
</tr>
<tr>
<td>7.</td>
<td>Given choice, would you prefer to stay in an orphanage?</td>
<td>16 (27%)</td>
</tr>
<tr>
<td></td>
<td>a) Friendship?</td>
<td>37 (62%)</td>
</tr>
<tr>
<td>8.</td>
<td>Do you get guidance from adults on:</td>
<td>b) Sex?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>7 (12%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>c) Career?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>14 (23%)</td>
</tr>
<tr>
<td>9.</td>
<td>Are you a leader of a group anywhere?</td>
<td>29 (48%)</td>
</tr>
<tr>
<td>10.</td>
<td></td>
<td>Child abuse?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3 (5%)</td>
</tr>
<tr>
<td>11.</td>
<td>Have you ever attended workshops on:</td>
<td>HIV/AIDS?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>11 (18%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Counselling?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5 (8%)</td>
</tr>
<tr>
<td>12.</td>
<td>Are you a leader of a group anywhere?</td>
<td>12 (20%)</td>
</tr>
<tr>
<td>13.</td>
<td>Are you someone who is easily frustrated?</td>
<td>37 (62%)</td>
</tr>
<tr>
<td>14.</td>
<td>Do you sometimes run away from lessons at school?</td>
<td>23 (38%)</td>
</tr>
<tr>
<td>15.</td>
<td>Do you see a bright future for yourself?</td>
<td>23 (38%)</td>
</tr>
</tbody>
</table>
Concerning grief and pain displayed by the orphaned teenagers in a follow up interview, Rutter and Silberg (2002) note that it is a natural and necessary process. Orphaned children should, thus, be accorded time to reflect on the death of their parents by looking at photographs of the deceased, discussing memories and visiting graves so as to demystify the myths about death and make the loss real for the child (Weisz and Hawley 2002). With counselling White (2003) says that the orphaned child stops blaming himself / herself and takes a positive approach to life.

The other challenge noted from the results was isolation and lack of recognition by some adults whom the teenagers stay with. As a result, most teenagers confessed low self esteem and inferiority complex harboured from failure to secure some of the school requirements like complete uniform. They felt inadequate and inferior to their school and age mates. The results are consistent with previous studies that orphans, especially those whose parents died of AIDS, face stigmatisation. Such children suffer discrimination as they may be shunned at health centres (UNICEF, 2001). Williamson (2004) also concurs that AIDS orphans suffer combined effects of psychological trauma from loss of parents as well as the stigma of HIV and AIDS. They may, as a result, become lonely, frustrated and possess a sense of hopelessness. It should, however be realised that the single and most important resource a child can have in dealing with difficult circumstances is a strong positive attachment with someone who really cares. As children grow into adolescence, they need adult support to process tense experiences as orphans. Tassoni et al (2002) conclude that children who live with emotionally available adults can easily cope even with major stress and those who live with demoralized adults can be overcome by much lower levels of stress. In addition, Flemming and Adolph (1986) contend that with emotional and material support, orphaned young people come out of their isolation, loss and grief; hence, they consequently find it easier to integrate socially.

The challenge of child abuse (item 3) had interesting results. Overall, results suggest that among other forms of child abuse, emotional abuse was the most prevalent. Seventy-five percent indicated that they had been emotionally abused. Worden (1991) describes emotional abuse as comprising consistent criticism, belittling, ignoring and withdrawing praise and affection. The researcher observed that 87% of the teenage orphans interviewed in this study had suffered one or more forms of emotional abuse. One of the respondents pointed out that anything good an orphan did was never recognised instead, all mistakes would be highlighted. Sixty-six percent pointed out that they could not study or do their homework and were often late or absent from school.

Those from the rural setting indicated that, mostly, it was the orphaned child who remained at home whenever there was a crisis, doing housework, herding cattle while caregivers’ children went to school. These results are consistent with literature reviewed where similar studies by UNICEF (1999) in Uganda showed that the performance of orphans in schools usually deteriorated partly because of interruptions and stress. The major reason for having emotional abuse ranking highest as pointed out by Garbariono et al (1991) could be that unlike other forms of abuse, emotional abuse does not have physical injuries or scars and is often not easily recognised. As a result abusers take advantage. These findings on emotional abuse are in line with literature reviewed. Mukoyogo and Williams (1991) argue that there is a tendency for some caregivers, especially distant relatives, to treat orphans as a source of cheap labour for domestic work.

A few girls cited sexual abuse as a challenge. In concurrence, Mahohoma (2003) reports that sexual abuse among orphaned girls is quite prevalent in Zimbabwe, especially due to depending poverty that forces orphaned children to turn to prostitution in order to survive.
Sexual abuse ranges from rape, incest, pornography, sodomy and child prostitution. However, the small percentage that cited sexual abuse does not seem to reflect reality in this regard. Among other reasons for the difference in findings between the present and previous studies, the researcher feels that maybe teenage orphans in this study would not open up easily since this was a very sensitive issue. Probably more time was necessary to carry out life history interviews which could have been more appropriate for such investigation. Cultural beliefs also or even threats could have led respondents to close in on this issue.

Results so far have shown the various psychosocial challenges of teenage orphans and most of these results also confirm the assumption of the study that there is a gap in the provision of psychosocial support for teenage orphans.

The Impact of Intervention Programmes on Psychosocial Needs of Teenage Orphans

Results from items 6–8 summarise the findings on the effectiveness of intervention programmes on teenage orphans’ psychosocial needs. Generally, questionnaire data suggest that intervention programmes so far do not effectively address teenage orphans’ psychosocial needs. Responses to the question on counselling (item 6) revealed that 90% of the respondents did not have the chance to talk about their problems. Only 10% had received counselling from organisations that target orphans in Bindura District. The low percentage responses (10) which suggest lack of counselling in the lives of teenage orphans reveal a gap in an area which is very vital for children in difficult circumstances.

Counselling as a form of psychosocial support helps the orphaned child to be able to share his/her worries and be helped to deal with stressful moments. It implies, therefore, that emotionally available caregivers are crucial in the lives of orphaned children. Verma (1996) views a counsellor as a sounding board for testing options or new ways of tackling a problem. A counsellor, thus, creates a safe and supportive environment so that those in need can share thoughts and feelings and vent emotions hence they gradually come to terms with the prevailing situation. Comments by 85% of the respondents showed that teenage orphans were, in most cases, never given the opportunity to express their worries. Responses from 90% of those interacted with during follow up interviews indicated that they needed an adult to talk to more than just being fed and seen around.

The question on whether teenage orphans’ opinion was sought in decision making processes (item 7) revealed that to a large extent, (78%), were never consulted at any stage on the kind of help they preferred. Seventy-five percent of those interviewed indicated that it was only adults thinking for them yet needs and perceptions of adults are quite different from what the orphaned teenagers would prefer as intervention. The argument presented by the respondents tallies well with a report by Hunter and Williamson (1994) which states that children and youths, the world over, have the right of participation as indicated in the ‘Convention on the Rights of the Child’ and the ‘African Charter of the Rights of the Child’. In concurrence Lintfer (2003) further argues that participation supports the fundamental right of the child to express his/her views in all matters related to his/her life in accordance to age and maturity. Bourdilon, (2000) concludes that participation can build self esteem in children, thus, children who feel valued and are consulted are more likely to benefit from policies and programmes designed to serve them. Again participation by beneficiaries of a programme, in this case teenage orphans, helps to uncover real needs and improve service delivery.

Item 8 which required respondents to show whether they preferred institutionalisation to other forms of intervention revealed that 73% would not like to stay in an orphanage. Comments suggested that life was rather artificial in an orphanage with too many restrictions which did not match teenagers’ psychosocial needs. Overall comments also revealed that
orphaned teenagers needed a home where they could grow up together with their siblings. White (2003) contends that traditional homes provide love and an encouraging environment for the socialisation of children.

Given the high proportion of orphans in Zimbabwe, the researcher feels that institutionalisation care may not be the best solution especially in the area of psychosocial support. For instance, during follow-up interviews, some teenagers indicated that the hired ‘mothers’ in a local orphanage were in charge of an average of twelve children in one household. Thus, providing love, attention and emotional support for each child in such a scenario becomes questionable. Instead of getting attention, the big girls were actually expected to assist in caring for the young ones. The big girls, therefore, never enjoyed their childhood yet the third level of Maslow’s hierarchy of needs, which entails the need for Love and Belonging, is critical as children approach adolescent stage. Rathus and Nevid (1981) assert that orphanages undermine traditional models of care and are also prone to alienating children from their families and culture. The family, thus, ascribes an identity to the child without which she/he cannot be fully integrated into mainstream society. It is the child’s entry point into society. Denying a child a family, which is right, is to strip the child of identity. UNICEF (2003) concludes that growing up in a family helps the orphaned child to be able to love and to be loved and enjoy emotional stability. It means the family centred community - based approach needs to be strengthened in order to provide comprehensive care and support for orphans (www.icrizim.org). Most intervention programmes focus on provision of material needs at the expense of psychosocial needs.

Preferred Psychosocial Needs of Teenage Orphans

Items 9, 10 and 11 showed some of the preferred psychosocial needs of orphaned teenagers and the extent to which they are being addressed by different intervention programmes in place. Comments generally revealed that there was a gap in the provision of their needs. It was clear that orphaned teenagers needed emotional attachment with a sensitive parent/ adult. Seemingly small affect responses such as a hug, smile, holding of the hand were critical. These signified acceptance and love. Issues of security, an understanding ear and guidance among other thing were also highlighted. During follow up interviews, 70% pointed out that they were mostly viewed as the cause of tension in families where they were being taken care of. The major reason could be the limited financial resources in the families. Today, most families in Zimbabwe are struggling to make ends meet. Getting somebody extra would only further strain these resources hence the orphaned child may not be welcome at all. As a result the orphaned child turned into a button stick in the relay of life and would be passed on from one relative to the other and yet another. Once more, results showed a real gap in the responsiveness of intervention programmes in addressing psychosocial needs of orphaned teenagers. Rutter and Selberg (2002) point out that the problem of orphaned children being exchanged hands among relatives is an endless cycle of planting and uprooting of the child between households. In follow up interviews, 78% admitted that due to the increasing breakdown of extended family networks, the future of the orphaned child remains very fluid. Compounded by the physical and psychological challenges of adolescence, orphaned teenagers become even more confused and vulnerable. The major reason could be that most adults, especially from the Shona culture, seem not to be comfortable to talk about subjects like sex to their children mainly because of their own upbringing also. Teenagers are just left to discover things on their own. This may, however, result in serious problems like unwanted babies, child prostitution and contracting HIV. Consequently, the emotional life of the teenager is destabilised.
On Career guidance, the researcher observed that schools seemed to be falling short in this regard. In fact, schools have an obligation to help in shaping the career path of young people. Tassoni et al (2002) assert that children should be allowed to be everything that they are capable of becoming. There is need to instill in the adolescent, self confidence, positive self regard and the ability to master tasks and challenges in life. Without the support and guidance of adults, Makune (2002) argues that a child harbours a sense of interiority, hopelessness and discouragement. They may, thus, never realise their life goals. Comments from respondents on item 9 showed that orphaned teenagers needed teaching about practical realities like career, courtship, and marriage, otherwise many would only find themselves in a mess. The researcher observed during follow-up interviews that orphaned teenagers go through stressful moments which could lead to depression, low self-esteem and anxiety, hence the need for guidance and emotional support. The researcher also noted with concern the very low percentage responses of teenage orphans who attended workshops on issues like child abuse (5%). HIV and AIDS (18%). and counselling (8%). These percentages suggest a serious lack of guidance in the lives of teenage orphans yet it is the time when they need skills to cope with challenges of various forms of child abuse and HIV and AIDS. Monk (2000) and Makune (2002) concur that orphaned children need someone who can empower them with strength to ride through life’s thorns and challenges. Above all other psychosocial needs, orphaned teenagers need self confidence, high self esteem and a positive self concept in order to realise their goals in life just like any other teenager.

On the issue of leadership, no one had been a school prefect or a leader in other circles outside the school. Results showing 80% having never been leaders anywhere suggest lack of confidence and low self esteem among orphaned children. The researcher attributes the lack of confidence and low self esteem to adults’ inability to give emotional support to children in difficult circumstances as discussed earlier on in the chapter. Orphans are usually labelled ‘incompetent’ and therefore, tend to live up to the label (Giddens, 2001). It is the responsibility of schools to encourage the disadvantaged to take up challenges of leadership and become more effective in society. Comments showed that orphaned children usually pity themselves. They indicated that they did not want to take leadership roles as they fear that other people would not respect them. Their situation of being orphans seemed to have affected their self image. Zindi, Peresuh and Mpofu (1997) contend that positive self concept is important because it has a formative effect on the child’s development as a social being. Self confidence helps or motivates the child to try out things without fear. Such a child can, therefore, exploit his/her talent and work towards self actualisation.

CONCLUSIONS

The results from this study established that there are gaps in the provision of psychosocial support for teenage orphans. The following were the major findings. First, orphaned teenagers lack opportunities to share their worries and views with emotionally available caregivers who can help them to successfully go through the process of grief. Second, orphaned teenagers do not seem to be easily accepted by adults and, therefore, do not benefit much in terms of guidance in areas of reality such as sex and career. The majority of teenage orphans suffer feelings of rejection and hopelessness. It is also very clear from the results that orphaned children prefer to be integrated into the larger society as an intervention strategy where they can be identified with a home and family. Institutionalisation therefore, should be considered as the last option as a form of intervention.

It can also be concluded that most intervention programmes targeting orphans, so far, concentrate more on providing material needs at the expense of more sensitive psychosocial needs such as love, attention, parental guidance and opportunities that enhance self
confidence, high self esteem, hope and self actualisation. Satisfaction of these higher level needs on Maslow’s hierarchy of needs is more desirable to older children than the lower level needs like food and shelter, though also important. Finally, it appears that teenage orphans, whether from a rural or urban background, have similar psychosocial challenges and needs. They also share similar views about the impact of intervention programmes on their psychosocial lives.

RECOMMENDATIONS

The following recommendations were made from the findings of the current study.

1. The most fundamental need of a child is consistent love and care. It is, therefore, important for organizations, including schools, which target orphans to make a difference in the lives of the disadvantaged by listening to them and offering verbal praise where ever necessary. It is also important to give parental guidance in practical realities of life like sex, marriage and career.

2. Teenage orphans need to be accorded opportunities to share worries, make free choices and take part in decision making, especially those that affect them. This can be done through, a properly organized counselling programme, workshops and conferences.

3. Engaging children, especially at school, in activities like Art, Drama, Debate and Poetry might help the orphaned child to vent emotions and thus, pain and grief are reduced. At home, children can keep memory boxes with the deceased’s photos, small belongings like educational certificates and passport (Mahohoma, 2003). Reflecting on the death of beloved and discussing memories helps the orphaned child to gradually come to terms with the loss.

4. Orphaned children need to be identified with a home and a family. It is the view of this researcher that this enables the orphaned to develop a sense of belonging and responsibility and, thus, contribute effectively to the good of their families and community. Institutionalization should be taken as the last option.

5. Finally the researcher recommends that a similar study be carried out with young orphaned children to find out how they respond to trauma and loss of parents so as to improve strategies for psychosocial support for the young ones also.
REFERENCES


APPENDIX-A

Statistical Analysis

Reliability Corrélation Coefficient – Survey Questionnaire

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<th>Basis of Rating</th>
<th>Possible Mark</th>
<th>Rate 1</th>
<th>Rate 2</th>
<th>Rate 3</th>
<th>Rate 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Suitability of Content</td>
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<td>3</td>
<td>3</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>2 Clarity of questions</td>
<td>3</td>
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<td>2</td>
<td>2</td>
<td>2</td>
</tr>
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<td>3 Sequence of questions</td>
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<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>4 Length of Questionnaire</td>
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<td>2</td>
<td>2</td>
</tr>
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<td>10</td>
<td>9</td>
<td>8</td>
<td>8</td>
<td>9</td>
</tr>
</tbody>
</table>

Formula for calculating correlation coefficient

Spearman’s Rank Correlation Coefficient is given by:

\[ r_s = 1 - \frac{6 \sum d^2}{n (n^2 - 1)}. \]

In this case \( d^2 \) will be summation of the 4 raters, using the 4 given areas

\[ r_s = 1 - \frac{6 \sum d^2}{n (n^2 - 1)}. \]

\[ = 1 - \frac{6 \left(\frac{1}{2}\right)}{12 (143)}. \]

\[ = 0.875 \]

Conclusion

Since the measure is positive, it means the rating by the 4 experts was near perfect agreement hence the questionnaire is very reliable.
APPENDIX-B

QUESTIONNAIRE FOR TEENAGE ORPHANS

COMPLETE THE QUESTIONNAIRE BY TICKING EITHER ‘YES’ OR ‘NO’ IN THE BOXES PROVIDED TO ANSWER ALL THE QUESTIONS.

Section A

Psychosocial Challenges of Teenage Orphans

1. Have you “accepted” the death of your parents?
   Yes [ ]   No [ ]
   Comment ________________________________________________________________
   _______________________________________________________________________

2. Do you find it easy to mix with peers?
   Yes [ ]   No [ ]
   Comment ________________________________________________________________
   _______________________________________________________________________

3. Have you ever been abused?
   (a). Physically?   Yes [ ]   No [ ]
   (b). Sexually?    Yes [ ]   No [ ]
   (c). Emotionally? Yes [ ]   No [ ]
   Comment ________________________________________________________________

4. Are you heading a family?       Yes [ ]      No [ ]

5. Do duties that you do at home affect your school work?
   Yes [ ]               No [ ]
   Comment   ________________________________________________________________
   _______________________________________________________________________

Section B

Evaluating the Impact of Intervention Programmes on Teenage Orphans’ Psychosocial Needs.

6. Besides receiving material help like food, clothing, school fees or shelter from various organisations, do you get the chance to talk about problems that worry you (counselling).?
   Yes [ ]       No [ ]
   Comment   ________________________________________________________________
   _______________________________________________________________________

7. Do organisations working with orphans seek your opinion on your preferences for help?
   Yes [ ]       No [ ]
   Comment   ________________________________________________________________
   _______________________________________________________________________

8. Given choices as a teenage orphan, would you prefer to stay in an orphanage?
   Yes [ ]       No [ ]
   Comment   ________________________________________________________________
Section C
Psychosocial Needs and Expectations of Teenage Orphans

9. Do you get guidance from adults on:
   (a). Friendship? Yes [ ] No [ ]
   (b). Sex? Yes [ ] No [ ]
   (c). Career? Yes [ ] No [ ]

Comment _________________________________________________________________

10. Do you think adults easily accept you?
    Yes [ ] No [ ]

Comment _________________________________________________________________

11. Have you ever been invited to attend workshops on:
    a). Child abuse Yes [ ] No [ ]
    b). HIV and AIDS Yes [ ] No [ ]
    c). Counselling? Yes [ ] No [ ]

Comment _________________________________________________________________

Section D
The Effects of Orphan-hood on the Psychosocial Lives of Teenagers

12. Are you group leader anywhere?
    Yes [ ] No [ ]

Comment _________________________________________________________________

13. Are you someone who is easily frustrated?
    Yes [ ] No [ ]

Comment _________________________________________________________________

14. Do you sometimes run away from school?
    Yes [ ] No [ ]

Comment _________________________________________________________________

15. Do you see a bright future for yourself?
    Yes [ ] No [ ]

Comment _________________________________________________________________